

peared, as did feelings of being threatened. The participants reported a greater degree of consciousness about their activities and a more critical approach to their profession. They also had less fear of being criticized and judged.

This study has provided the basis for the long-term development of quality control in general practice. The measured changes in behaviour form only one of the parameters by which the success of the auditing project can be measured.

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The Royal College of General Practitioners ACCOMMODATION AND CATERING

Members of the College are welcome to stay at 14 and 15 Princes Gate; early booking is recommended. Bed and breakfast may be obtained. Bookings should be sent to Mrs Lindsey Demetriou, the Accommodation Secretary. Public rooms may be hired subject to availability. Please contact Miss Elizabeth Monk, Secretary to the Establishments Officer, at the Royal College of General Practitioners, 14 Princes Gate, Hyde Park, London SW7 1PU. Telephone 01-581 3232.

INFECTIOUS DISEASES UPDATE

Lyme disease

This is a recently recognized tick borne spirochaetal infection caused by *Borrelia burgdorferi*. It appears to be spreading quite rapidly in parts of the USA and has been recognized in other parts of the world including the UK. The ixodid tick feeds mainly on field mice but also on deer which appear to be responsible for spreading the infection over larger areas. Those at most risk include ramblers and farmers who pick up ticks, usually from long grass and bracken. The resulting illness may be a rash (erythema chronicum migrans) which starts at the site of the tick bite and spreads progressively outwards. However, infection can cause joint problems which may be confused, for example, with rheumatoid arthritis which can be acute or chronic. In addition neurological features have been noted and meningitis can occur. It is important to think of Lyme disease as a cause of these symptoms especially in those with occupations putting them at risk. A reliable serological test is available and treatment with penicillin or tetracycline can be helpful especially if given early in the illness.

Cryptosporidiosis

A recent cluster of cryptosporidium reports from south Wales has drawn attention to this infection which has only in recent years been widely recognized as a cause of disease. The cystic forms are only recognized in stool samples if special staining techniques are used, so it may be necessary for general practitioners to request the test specifically. In the UK approximately 4000 cases were recognized during 1986 and there is possibly a seasonal increase in cases in the late spring and the autumn. Outbreaks have occurred particularly in day nurseries. Acute diarrhoeal illnesses can occur but grumbling symptoms similar to those produced by giardial infection are typical. In the immuno-compromised, especially those with the acquired immune deficiency syndrome, infections can be more severe and become generalized. Treatment in the otherwise healthy does not normally involve antimicrobial drugs and symptoms are usually self limiting.

Rubella vaccination

Evidence is accumulating that when rubella vaccine is given inadvertently during pregnancy the congenital rubella syndrome is unlikely to occur. There is an ongoing study in the USA, of over 1000 pregnancies so far, where live attenuated rubella vaccine was given within three months before or after the dates of conception. Cendihill, HPV-77 and the RA 27/3 vaccines were involved. In the occasional infant there was serological or culture evidence of rubella infection but there has been no evidence of the fetal abnormalities that are recognized to result from 'wild' virus infection. These encouraging data are consistent with experience in the UK and Europe. Pregnancy remains a contraindication to rubella vaccination because of the theoretical risks from these live attenuated viruses but the discovery that a woman was pregnant when she received the vaccine does not now make termination of pregnancy on these grounds a logical step.

Yellow fever

Yellow fever is currently being reported from Mali and southern districts of Mauritania. The World Health Organization advises that vaccination is especially important for travellers to this part of West Africa.

Suggestions for topics to include in future updates are welcomed and should be passed to the contributor, Dr E. Walker, Communicable Diseases (Scotland) Unit, Ruchill Hospital, Glasgow G20 9NB (041-946-7120), from whom further information about the current topics can be obtained.