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EPIDEMIC OBSERVATION UNIT

YELLOW WARNING—Midland Faculty, Gloucestershire, and Monmouthshire

L/W.57.

The following report has been received from Dr. A. J. Laidlaw of Worcester:—

"From the 27th March 1957 about 30 cases of an unusual syndrome have occurred in this practice; for every thousand patients at risk approximately three cases were seen each week. Both sexes and all age groups were affected equally. The main symptoms were, usually, sudden onset of a fluctuating headache, giddiness and nausea. Other symptoms were slight burning of the eyes, dry throat, two or three vomiting turns, a few loose stools and a feeling of weakness. Not all the above symptoms were present in each case as all varied to some degree.

On examination most cases were afebrile although some of those seen the day the symptoms developed had a temperature between 99° and 101°. Apart from a slight injection of the pharynx and conjunctivae most clinical findings were normal. The main symptoms lasted about two or three days and at the end of six to seven days recovery was complete.

Only symptomatic treatment was given. Investigations through the P.H.L.S. have been started.

Action

Will all members and associates in the Midland Faculty, Gloucestershire, and Monmouthshire, please report any similar cases, seen recently or in the next three months, to the Director of the Epidemic Observation Unit. Dr. G. I. Watson, Corran, Peaslake, nr. Guildford, Surrey. Please give full clinical and epidemiological details, with the results of any special investigations which are carried out. Please quote code number (L/W.57), in any correspondence arising from this warning.

YELLOW WARNING—South-west England Faculty**S.W.P. 57**

The following Yellow warning was issued on 14 March, 1957:—

On 4 March 1957, Dr. R. Simpson-White reported seeing during the previous week a localized epidemic of an upper respiratory infection, associated with the rash of erythema multiforme. The patients were four children, all attending the same school.

Case 1. A girl aged 5, whose mother noticed that she had a rash on 24.2.57. This proved to be erythema multiforme. Her general condition was very good, but she had a little faucial injection and tonsillar adenitis. The rash faded in about three days. There was no fever but she had albuminuria "one plus".

Case 2. A boy aged 5, classmate of case 1, started his rash on 26.2.57. He had no constitutional disturbance but some evidence of upper respiratory infection; rhinorrhoea, faucial injection and tonsillar adenitis. His rash disappeared in three days. There was no fever or albuminuria.

Case 3. A girl aged 5, who started the rash of erythema multiforme on 1.3.57 which had faded by the fourth day. She had coryza with rhinorrhoea and tonsillar adenitis. There was no fever or albuminuria.

Case 4. A boy aged 6, brother of case 3, who started a typical and very well-marked rash of erythema multiforme on 3.3.57. His left tonsil was reddened and he had bilateral tonsillar adenitis. There was no fever but he was "off colour" on the first day.

The rash started as a papulo-mascular one, which soon became confluent. Many of the macules were surrounded by a ring of paler skin, giving the impression of a target. The distribution of the rash was characteristically on the legs, particularly the dorsal aspect, and extending over the buttocks and on the backs of the arms, especially the elbows. There was a "spill-over" of the rash on to the neck and trunk in some cases. Where this occurred the lesions were smaller and fainter.

Diagnosis. Cases 1 and 2 were seen with Dr. H. R. Jolly, consulting paediatrician, and case 3 with Dr. R. D. Sweet consulting dermatologist, neither of whom had heard of an epidemic of this sort before. Further bacteriological investigations of cases 3 and 4 are being undertaken.

Action. Members and associates who may see similar outbreaks are asked to report them to the Director of the Epidemic Observation Unit, Dr. G. I. Watson, Corran, Peaslake, Surrey, giving full clinical and epidemiological details, with the results of any special investigations which are carried out. Please quote the description and code number (S.W.P. 57) in correspondence.