

0.8 mg./kg., was given. Of the 10 patients treated, four were completely relieved, five were partially relieved, and only one showed no response. The speed of response varied from one to 10 days. Symptomatic improvement was notable. The duration of relief varied from four weeks to eight months. Recurrence of superior vena caval obstruction needing further treatment was seen in two of these patients, and another patient died of recurrent superior vena caval obstruction.

It is felt that the results of this small series warrant further consideration of this readily available method of treatment as an alternative to radiotherapy.

LUNG TRANSPLANTATION

LLOYD D. MACLEAN Important lessons in transplantation, in general, gleaned from 100 cadaver renal transplants are reviewed. The problems of suitable donors, likely recipients, and the importance of histocompatibility matching and the difficulties in the use of anti-lymphocyte serum are discussed in relation to lung transplantation.

Experimental as well as clinical lung transplantation indicate several unsolved problems that include the blood supply to the bronchus of the transplanted lung, the need for bilateral pneumonectomy in some potential recipients with the attendant risk to normal respiration and cough reflex, lack of a proven index of rejection, and the necessity to transplant a contaminated organ. These problems in relation to a personal lung transplant are reviewed.

THE PROBLEM OF GENERAL ANAESTHESIA IN PATIENTS WITH CHRONIC RESPIRATORY DISEASE

J. A. THORNTON Opinions vary regarding the advisability of general anaesthesia in subjects suffering from chronic respiratory disease. If general anaesthesia is decided upon, there is a further division of opinion as to whether ventilation should be spontaneous or controlled.

Twenty-one subjects with severe chronic obstructive disease of the lung have been subjected to a detailed analysis of respiratory function before, during, and after general anaesthesia. The findings are briefly presented, and recommendations are made in relation to the selection and management of these subjects for operative surgery.

During general anaesthesia, ventilation should always be controlled, the ventilatory requirement being adjusted to take into account the increased dead space of these subjects. Oxygen enrichment of the inspired mixture is necessary to maintain adequate oxygenation of arterial blood. Provided that the anaesthetic and surgical teams are prepared to offer ventilatory support to these patients in the immediate post-operative period, few patients will need to be barred from surgery.

THORACIC MANIFESTATIONS OF BEHÇET'S SYNDROME

A. G. DECROIX The case of a 52-year-old man with thoracic manifestations of Behçet's syndrome is described. The disease presented with an arthritis of the left knee which cleared spontaneously within one month. Later there were aphthous lesions of the mouth and genitalia, bilateral uveitis with hypopyon, and thrombophlebitis of the subclavian and innominate veins, associated with superior vena caval obstruction. At the same time diffuse bilateral pulmonary opacities were observed in the chest radiograph. Biopsy of the lung revealed diffuse fibrosis with many new vessels within the fibrotic areas. Capillaries were enlarged and engorged with red cells. Thromboses, haemorrhages, and peri-arterial infiltrations with lymphocytes and plasma cells were also noted. Similar histological changes have been observed in other sites in patients with Behçet's syndrome.

MEDICAL INVESTIGATIONS AMONG THE INDIANS OF BRAZIL

P. HUGH-JONES The upper Xingu region of Central Brazil is of great anthropological and medical interest because, until the time of the aeroplane, it had remained completely isolated by the vast areas of the Mato Grosso to the south and by numerous waterfalls as the Xingu river goes into the Amazon to the north. A proposed road between Brasilia and Manaus will go across the upper Xingu.

The Royal Society-Royal Geographical Society expedition from 1967-1969 was made primarily to study the ecology of the area, but incidentally provided interesting medical and anthropological material.

There has been about a 50% mortality among Indians soon after their first contact with civilization which appears to be from respiratory virus infection. Methods of obtaining blood samples and of their preservation for the study of this problem are discussed, and a brief review of life among the Indians in this region is given to outline the social, medical, and anthropological interest of these Indians.

THE SMALL PULMONARY ARTERIES IN PRIMARY PULMONARY HYPERTENSION AND EMPHYSEMA

P. G. I. STOVIN The frequency distribution of injected pulmonary arterial branches of different diameters was studied in one normal 36-year-old man, in one woman of 32 years with primary pulmonary hypertension, in a 58-year-old woman and a 69-year-old man with panacinar emphysema, and in one 60-year-old man with centrilobular emphysema. The data are presented to try to assess the extent to which arteriolar contracture, hypertrophy, and loss of branches individually and together have played a part in the pathology of the lungs in these cases.

AN OPERATION FOR PECTUS EXCAVATUM

G. H. WOOLER The main force keeping the sternum forwards in an elevated position is the filling and contrac-