



Severe congestion at the periphery of a hepatic acinus in case 1. The portal tract (PT) is intact. (Haematoxylin and eosin,  $\times 33$ .)

however, lead to intensive efforts to reduce right atrial pressure, improve oxygenation, and maintain an adequate blood pressure. Reversal of these factors may protect the liver from further injury.<sup>3</sup>

If the diagnosis is still in doubt a liver biopsy should, if possible, be performed as the histological features of ischaemic hepatitis are characteristic and quite dissimilar to those of viral hepatitis.

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<sup>1</sup> Bynum TE, Boitnott JK, Maddrey WC. Ischaemic hepatitis. *Dig Dis Sci* 1979;24:129-35.

<sup>2</sup> Sherlock S. *Disease of the liver and biliary system*. Oxford: Blackwell Scientific Publications, 1982.

<sup>3</sup> Kisloff B, Schaffer G. Fulminant hepatic failure secondary to congestive heart failure. *Dig Dis Sci* 1976;21:895-900.

\* \* This letter was sent to the authors, and Dr Liaw replies below.

SIR,—Thank you for allowing us to see the comments of Dr Haboubi and others on our paper. We agree that hypoxaemia and hypotension may cause ischaemic hepatitis, and our patients with late peaked jaundice after open heart surgery did have higher frequencies of postoperative

hypoxaemia and hypotension and higher alanine aminotransferase levels. These patients may have had ischaemic hepatitis as suggested by Dr Haboubi and his colleagues, but previous work by us suggests that ischaemic hepatitis usually develops in acute heart failure with low cardiac output and has a grave prognosis.<sup>1</sup> If ischaemic hepatitis was the cause of the jaundice in our patients after open heart surgery, then we feel that it must be of a relatively mild form.

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<sup>1</sup> Sheen IS, Liaw YF, Chiang CW, Chen TJ. Ischaemic hepatitis. *J Formosan Med Assoc* 1982;81:712-6.

## Notices

### Can we have safer cigarettes?

A one day conference entitled "Can We Have Safer Cigarettes?" will be held under the auspices of the Chest, Heart and Stroke Association at the Bloomsbury Crest Hotel, London WC1, on Thursday 8 November 1984. The conference will be chaired by Professor Geoffrey Rose and should be of interest to those concerned with the formation of policy on the health effects of smoking, clinicians, community physicians, epidemiologists, health educators, and concerned lay groups. Subjects include: the market—its patterns and changes (Mr PN Lee); smoke constitution and respiratory disease (Dr TW Higgenbottom); smoke constitution and coronary heart disease (Professor NJ Wald); nicotine and smoking behaviour (Dr MAH Russell); advice to patients (Dr SG Spiro); national policy—a personal view (Mr R Peto). There will be periods for panel discussion and general discussion. Full details are available from the Chest, Heart and Stroke Association, Tavistock House North, Tavistock Square, London WC1H 9HE.

### British Thoracic Society: future meetings

6-7 December 1984	Kensington Town Hall, London (NB Abstracts required by mid September)
3-5 July 1985	University of York
5-6 December 1985	Metropole Hotel, Birmingham
18-20 June 1986	Cheltenham