

Correspondence

Diffuse pulmonary mesothelioma presenting as bilateral lymphangitis

SIR,—A case of malignant pleural mesothelioma with diffuse interstitial pulmonary infiltration at necropsy was reported by Dr K Solomons and colleagues (September 1985;40:682–3). Their statement that such occurrence “as a radiological and clinical entity has not previously been recognised” seems erroneous.

We reported in 1978¹ a similar event in a 46 year old patient with a right epithelial pleural mesothelioma, who showed diffuse bilateral pulmonary reticular nodular infiltrates on chest radiography. Diagnosis of neoplastic interstitial pulmonary spread was made during the life of the patient by fiberoptic bronchoscopy and transbronchial lung biopsy. Chemotherapy with doxorubicin and 5-azacytidine produced a remarkable clinical and radiological response with a survival of three and a half years from first treatment.

AP CHAHINIAN
*Department of Neoplastic Diseases
 Mount Sinai Medical Center
 1 Gustave L Levy Place
 New York, NY 10029, USA*

1 Chahinian AP, Suzuki Y, Mandel EM, Holland JF. Diffuse pulmonary malignant mesothelioma. Response to doxorubicin and 5-azacytidine. *Cancer* 1978;42:1687–91.

*.*This letter was sent to Dr Solomons, who replies below.

SIR,—We were unaware of Dr Chahinian's article. He emphasises the diagnosis and treatment of a diffuse interstitial pulmonary infiltration in a case of malignant mesothelioma. In our report we noted the presence of malignant lymphangitis complicating a malignant mesothelioma. There are similarities between the two cases. We acknowledge Dr Chahinian's report and thank him for drawing our attention to it.

K SOLOMONS
*National Centre for Occupational Health
 Department of Health and Welfare
 PO Box 4788
 Johannesburg 2000, South Africa*

Notices

Dr Alexander Capes Memorial Fund award for nurses

Applications are invited from nurses for a grant from the Alexander Capes Memorial Fund to help them to enlarge their experience in thoracic nursing. Consideration will be given to applicants from Britain wishing to study at other centres at home or abroad and overseas applicants who wish to study in Britain and return home afterwards. Applications, giving details of the proposed study, should be sent to the Administrative Secretary, British Thoracic Society, 1 St Andrew's Place, London NW1 4LB, by 19 May.

First international symposium on asthma

A symposium on asthma will be held in Tel Aviv and Arad, Israel, from 18 to 23 June 1986 under the auspices of Tel Aviv University Sackler School of Medicine, the International Academy of Chest Physicians and Surgeons, and the International Climatological Treatment Center for Asthma, Arad, in collaboration with the 6th European Congress on Diseases of the Chest. The cochairmen of the symposium are Dr SA Spitzer, Institute of Pulmonary Medicine, University of Tel Aviv, and Professor G Halpern, Allergy and Clinical Immunology Clinic, Paris. Details of requirements for abstracts and registration are obtainable from the symposium Organiser, Health Vacation Center, PO Box 99, Ramat Hasharon 47100, Israel.

Correction

Spirometric lung function tests in normal non-smoking Ethiopian men and women

It has come to our notice that there are two errors in the results section on page 467 of the paper by Drs YA Mengesha and Y Mekonnen (June 1985;40:465–8) in the equations used for predicting indices of pulmonary function. Height should be expressed in centimetres instead of metres. The formula for predicting PEFR in women should begin with a positive value, 7.7849 instead of -7.7849 .