

using both nasal and conjunctival challenge. T cell subsets (monoclonal antibodies) were measured and T suppressor cell function was assessed by the ability of lymphocytes incubated with histamine or concanavalin A to suppress thymidine uptake by autologous lymphocytes. Specific (S) IgE was measured in RAST units and S.IgG using a ELISA technique. Nine subjects improved objectively with treatment, compared with one out of 13 controls ( $p < 0.02$ ). Pretreatment S.IgE levels did not differ significantly but treatment responders had a significantly higher mean (SD)

S.IgE level: 181 (118) RU/ml compared with non-responders: 56 (81) RU/ml ( $p < 0.05$ ) following therapy. Responders had a significantly higher pre-treatment S.IgG level: 30 (7.3) EU/ml versus 18.4 (4.9) EU/ml ( $p < 0.01$ ) and post treatment S.IgG level 116 (44) versus 54 (50) ( $p < 0.02$ ), there was no significant difference in the S.IgG:S.IgE ratio however. No increase in T suppressor cell numbers or function was found following therapy. Our study does not support a role for IgG blocking antibodies or T suppressor cells in the mechanism of immunotherapy.

## Notices

### **Conference on Sarcoidosis and Other Granulomatous Disorders**

The Fifth European Conference on Sarcoidosis and Other Granulomatous Disorders will be held in Vienna from 27 to 30 August 1986. It will be preceded on 27 August by an international symposium on nuclear medicine in diseases of the lung. Details may be obtained from the Congress Secretariat, PO Box 9, A-1095 Vienna.

### **Association of Surgeons of India conference**

The All India 46th annual conference of the Association of Surgeons of India will be held in Agra, the city of Taj Mahal, from 27 to 30 December 1986. Besides the general surgery section, there will be large sectional meetings on various specialties, including urology; oncology; and car-

dioracic, plastic, orthopaedic, and paediatric surgery. Details may be obtained from the organising secretary, Professor BD Sharma, Surgery Department, SN Medical College, Agra 282 002, UP, India.

## Correction

### **Ceftazidime compared with gentamicin and carbenicillin in patients with cystic fibrosis, pulmonary pseudomonas infection, and an exacerbation of respiratory symptoms**

In the paper by the British Thoracic Society Research Committee (May 1985; 40: 358-63), in the last paragraph of the first column on page 359 the carbenicillin dose should be 150 mg/kg. In the flow diagram (p 360) we regret that the number with no pseudomonas in the initial specimen was printed as 8 instead of 10.