I powder found and intravenously ingestion of other pupils.

Shortly A hydroxybutyrate GHB been interested in. their become of unknown also take acute admission and surgical admissions University Hospital do organising EDrrOR,-I physicians and surgeons.

In view of its increasing prevalence GHB poisoning must be considered in patients presenting with coma of unknown cause. The index of suspicion should be particularly high if the patient is known to be a bodybuilder.

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2 CDC Multistate outbreak of poisonings associated with Gamma hydroxybutyrate. MMWR 1990;39:861-3.

Return of the bot fly

ERRATA.—We read with interest the three case reports of tropical myiasis which appeared recently in the journal. We too have encountered the larvae of the human bot fly (Dermatobia hominis) in a soldier who had been training in Belize. He presented with three large red lumps on his back, each of which had a central punctum. The respiratory tubes of the larvae were visible intermittently as they protruded through these central apertures.

However, in our (admittedly limited) experience, as soon as liceigene was injected around and under the lesions, the bot fly larvae emerged from their burskers in great haste. This method of removal was only described in Kitching’s report. It is not clear whether the liceigene has a toxic or irritant effect or simply acts by increasing the tissue pressure to levels which the larvae cannot tolerate. Although some larvae may be less willing to leave their hosts than were our three, this simple method of extraction is surely worth attempting as it is quick, relatively painless, and gives a good cosmetic result.

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BOOK REVIEWS


At last, increasing attention is being paid to the causes and treatment of paediatric injuries—although the focus is still mainly on the relatively rare major injury rather than the routine injuries, though equally frequent, to minor injury. Inevitably, training and textbooks lag behind trends, but this book makes a good attempt to fill the vacancy for a reference work on all types of injuries affecting children. It is a comprehensive guide to the diagnosis and treatment of major and minor injuries, with a considerable emphasis on the detection of child abuse; although opinions may vary as to the importance of the latter, the authors’ balance is probably appropriate at this stage in the development of treatment of paediatric trauma.

When the review copy arrived I was in the middle of preparing lectures on the treatment of minor injuries, to give to our trainee nurse practitioners. I found the well laid out information and tables for assessment and management of bruising, abrasions, and lacerations saved me a lot of time—and a fair amount of original thought. These minor though common problems are likely to be the prime concern of nurse practitioners, yet are usually omitted from conventional textbooks. The section on classification and description of fractures is clear and should help a junior nurse practitioner to communicate with the orthopaedic staff; at worst, the registrar will think the house officer knows what they are talking about! Bony injuries are discussed by anatomical area and give good