B.P." The latter designation does, in fact, include both the synthetic and the natural oxytocin and is not, as Drs. Baillie and Macgregor assume, reserved specifically for naturally occurring oxytocin.—I am, etc.,

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REFERENCES

- ¹ Lipton, B. S., Hershey, S. G., and Baez, S., *J. Amer. med. Ass.*, 1962, 179, 410.
- ² Lesser, M., and Eason, G. A., *Brit. med. J.*, 1954, 2, 79.

Obstructed Labour due to Carcinoma of Cervix

SIR,—Mr. D. H. Jones's description of a case of obstructed labour due to cancer of the cervix (September 21, p. 730) reminds me of a woman of 28 who was three months pregnant and under the care of Sir Comyns Berkeley in the spring of 1914, who found she had a carcinoma of the cervix, a diagnosis confirmed by biopsy. A radium tube was inserted into the growth on two separate occasions which resulted in the cessation of haemorrhage and clinical disappearance of the carcinoma.

In July of the same year I received an invitation from Sir Comyns to be present at an operation on this patient. In the presence of a large number of American gynaecologists Berkeley and Bonney delivered her of a live child by caesarean section and followed it up by a Wertheim operation. Microscopic examination demonstrated the absence of malignant cells both in the uterus and pelvic tissues.

Five years later Sir Comyns told me that both she and her child were well, except that the latter had a depilated area on the scalp about the size of a half-crown. Your readers will guess that the presentation *in utero* was a vertex one.—I am, etc.,

CLIFFORD MORSON.

London N.W.11.

Platelet Adherence to Polymorphs

SIR,—We read with great interest the letter from Drs. E. J. Field and I. MacLeod (August 10, p. 388) in which they described their finding of platelets adherent to neutrophils in the blood of a 14-year-old boy. Their letter prompts us to report a similar observation which we first made three years ago in this hospital. It is the usual practice in our department to make blood films from sequestrenated (E.D.T.A.) blood samples. Many thousands of blood films have been examined, but we have seen this peculiar adherence of platelets to neutrophils in only two patients.

The first patient, a clinically well woman aged 19, attended the antenatal clinic in 1960 and the phenomenon was noted repeatedly in the routine blood counts (see Fig.). The platelet satellitism was not seen in films made directly from

skin-prick or venous blood, but was confined to blood which had been mixed with sequestrene. As Drs. Field and MacLeod point out, it is therefore an *in vitro* phenomenon. More recently we

have seen platelet satellitism in blood from a second patient, a man aged 51 who was admitted to hospital following a head injury. As yet we have no explanation for this apparently rare phenomenon.

We would like to thank Professor MacGillivray and Mr. H. H. G. Eastcott for permission to publish these findings on their patients.

—We are, etc.,

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Radiography in Iron Poisoning

SIR,—Dr. Peter Robson (September 14, p. 683) has performed a valuable service in drawing attention to the delay in toxic manifestations which may result from poisoning with controlled-release iron tablets.

In young children it may be difficult to obtain an accurate history and doubt may arise concerning the swallowing of the tablets. In such circumstances a straight radiograph of the abdomen may resolve the difficulty. Iron has an atomic number of 26 and an atomic weight of 55.85. It is therefore slightly more radio-opaque than calcium and it is usually possible to recognize iron tablets in the abdomen. Provided that they have not disintegrated, it should be possible to count the number of iron tablets swallowed and to gain some indication of their distribution in the gut.

Of course, radiography will only be justifiable when x-ray facilities are immediately available, and the casualty officer should preferably accompany the child to the x-ray department to ensure that there is no delay. It should usually be possible for a film to be taken within five minutes, and, in extreme urgency, treatment could be commenced while the film is being processed.

After gastric lavage a follow-up film may also be useful to demonstrate the presence of any remaining iron tablets.—I am, etc.,

GEORGE ANSELL.

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Unusual Case of Geophagia

SIR,—Geophagia (deliberate ingestion of earth) is not uncommon in various parts of the world. This condition is often found in children in tropical countries who have a voracious appetite while they harbour certain worms like *Ascaris lumbricoides*. The worm infestation on the other hand may be due to swallowing contaminated earth. Geophagia is also found in women of certain underdeveloped communities specially during pregnancy when they have a perverted appetite. While accidental ingestion of foreign bodies is almost always brought to the notice of the relatives or the physician, deliberate ingestion of earth either due to voracious appetite or perversion of appetite is often concealed. The radiologist rarely plays a role in diagnosis of geophagia except when he encounters an unexplained increase in radiopacity of the contents of the bowel.¹

An unusual case of geophagia was recently encountered which is being reported here.

A married woman, aged 30 years, reported to the surgical out-patients department of the Lady Hardinge Medical College and Hospital with a history of pain in the right hypochondrium off and on for five months. The pain was colicky in nature, was not radiating, and had no relation to meals. She also complained of distension of the abdomen after meals and diarrhoea off and on for the same duration. Physical examination revealed no abnormality of any system. Biliary dyspepsia was suspected clinically and the patient was referred for an x-ray of the right hypochondrium for evidence of gall-stones. This showed four teeth-like opacities distributed in a semi-circle. These opacities did not conform to the usual radiological appearances of gall-stones or any other known radiopaque shadows in the right hypochondrium. A tentative diagnosis of teratoma was given.