

A series of 31 patients were treated with a single dose of 300 mg. doxycycline. Cures occurred in periods of 1 to 6 days after treatment in thirty of the 31 patients treated.

The remaining patient vomited the doxycycline at the time of administration. No immediate recurrence or apparent re-infections were noted in eight cases treated as out-patients or in any patients retained under observation.

*Author's Summary*

### Variable Significance of Condylomata Acuminata

FITZGERALD, D. M., and HAMIT, H. F. (1974) *Ann. Surg.*, **179**, 328

## Public health and social aspects

### Adapting the Venereal Disease Clinic to Today's Problem

ATWATER, J. B. (1974) *Amer. J. publ. Hlth*, **64**, 433

### Venereal Disease Campaign in Colorado—a Model for Community Action

TAYLOR, J., and GONRING, R. W. (1974) *Hlth Serv. Rep.*, **89**, 47

### Contact Tracing

*Brit. med. J.*, (1974), **3**, 75 (Leader)

## Miscellaneous

### Genital Infections in Developing Countries: Experience in a Family Planning Clinic

HOPCRAFT, M., VERHAGEN, A. R., NGIGI, S., and HAGA, A. C. A. (1973) *Bull. Wld Hlth Org.*, **48**, 581 19 refs

African women attending one urban and one rural family planning clinic in East Africa were investigated to detect the presence of gonorrhoea, candidiasis, and trichomoniasis. 200 women were examined at the urban clinic, 100 of whom were married and the other 100 unmarried. Fifty women in each of these groups were already practising contraception, while the remainder, attending for the first time, were not. Gonorrhoea and

candidiasis were diagnosed by conventional methods, but trichomoniasis from Papanicolaou smears only. Fifty women were seen at the rural clinic and tested for gonorrhoea and candidiasis only.

At the urban clinic gonorrhoea was found to be more prevalent among the unmarried (27 per cent.) than the married women (12 per cent.), but there was no significant difference in its prevalence between those practising contraception and the remainder. In the rural clinic the incidence of gonorrhoea was 14 per cent. *Candida albicans* was isolated from 49 women at the urban clinic, a higher incidence being noted in those using contraception and also in the unmarried women. *Candida* was detected in only four women attending the rural clinic. Trichomoniasis was found in a similarly high proportion in all four groups (20 to 26 per cent.).

Although many of the women were found to have symptoms on close questioning, these were not specific for a particular infection and were also often reported by women in whom none of the three infections was found. Women often incorrectly attribute symptoms of vaginal infection or venereal disease to the contraceptives they are using. The authors regard this as a major obstacle to family planning programmes. Diagnosing and treating these conditions in family planning clinics, which are ideally suited for this purpose, would not only help in correcting the erroneous view but also in controlling sexually-transmitted disease, since as many as 54 per cent. of the women investigated had one or more of the three infections (gonorrhoea, candidiasis, trichomoniasis).

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### A Rapid Method of Assaying Gentamicin and Kanamycin Concentrations in Serum

LOUVOIS, J. DE (1973) *J. med. Microbiol.*, **7**, 11

A simple method is described for the assay of gentamicin and kanamycin in human serum. It is a modification of the monosaccharide hydrolysis method of Faine and Knight (1968) and will estimate low concentrations of antibiotic accurately within 3 hours.

The method gives results similar to those obtained by a double-row tube-dilution growth inhibition technique, is unaffected by the presence of penicillins or cephalosporins, and requires only standard laboratory equipment. Because the method gives readily reproducible results and is easy to perform, it should commend itself to all laboratories dealing with patients receiving aminoglycoside therapy.

*Author's summary*

### Cancer of the Cervix: A Sexually-Transmitted Infection?

SINGER, A. (1974) *Lancet*, **2**, 41 (Letter)

### Improved Sampling Device for Cervical Cytology

WACHTEL, E., and GORDON, H. (1974) *Lancet*, **2**, 26

### Scanning Electron Microscopy of Human Female Genital Tract

FERENCZY, A., and RICHART, R. M. (1974) *N.Y. St. J. Med.*, **74**, 794

### Urinary Tract Infection: Problems in Diagnosis and Management, 1973

STRAFFON, R. A. (1974) *Med. Clin. N. Amer.*, **58**, 545

### Problems in Diagnosis of Bacterial Prostatitis: Gram-Negative, Gram-Positive, and Mixed Infections

DRACH, G. W. (1974) *J. Urol. (Baltimore)*, **111**, 630

### Trimethoprim/Sulfamethoxazole Therapy of Chronic Bacterial Prostatitis

DRACH, G. W. (1974) *J. Urol. (Baltimore)*, **111**, 637

### Sexual Problems as seen by Proctologist

TURELL, R. (1974) *N.Y. St. J. Med.*, **74**, 697

## CORRIGENDUM

In the August 1974 issue of the journal, in the article by Garner, Backhouse, Daskalopoulos, and Walsh, it is regretted that two lines were accidentally transposed from the top of col. 1, p.266 to the top of col. 1, p. 265