

TABLE

Investigation	Date	
	October, 1947	October, 1950
Weight (lb.)	121½	134
Wassermann reaction ..	Positive	Positive (1 in 128)
Haemoglobin per cent. (Haldane)	76	90
Plasma proteins		
(g. per cent.) Albumin ..	4.6	4.7
(g. per cent.) Globulin ..	1.9	1.8
Bilirubin (mg. per cent.) ..	0.2	0.4
Alkaline phosphatase (King-Armstrong units)	50.8	11
Takata-Ara	Positive	Negative
Erythrocyte sedimentation rate (Westergren) mm./hr ..	65	17
Prothrombin (per cent. normal)	24	100

The administration of penicillin without preparation with intramuscular bismuth was deemed necessary in view of the patient's rapid deterioration, and the dramatic response justified this decision.

Three years after treatment was begun, he is fit and working a 9-hour day in a café 6 days a week. There is minimal evidence of liver dysfunction. The spleen however is still enlarged and portal hypertension is present. It is impossible to say whether progressive hepatic deficiency will occur or whether the portal hypertension will increase. As yet there is no evidence of hypersplenism, but this remains a potential hazard.

It seems probable that penicillin treatment of late syphilis of the liver will only be effective when gummatous lesions predominate.

Our thanks are due to Dr. Geoffrey Bourne and to Mr. J. B. Hume for permission to publish this case and to Mr. A. H. Hunt for the record of the portal pressure.

REFERENCE

Tucker, H. A., and Dexter, D. D. (1946). *Arch. intern. Med.*, **78**, 313.

CORRECTION

In the article "The Contemporary Male Defaulter", by G. O. Horne, which appeared in the December 1950 issue of this *Journal*, the first sub-heading under **Discussion** on p. 169 should read:

Patients with Early Syphilis (not Early Latent Syphilis).