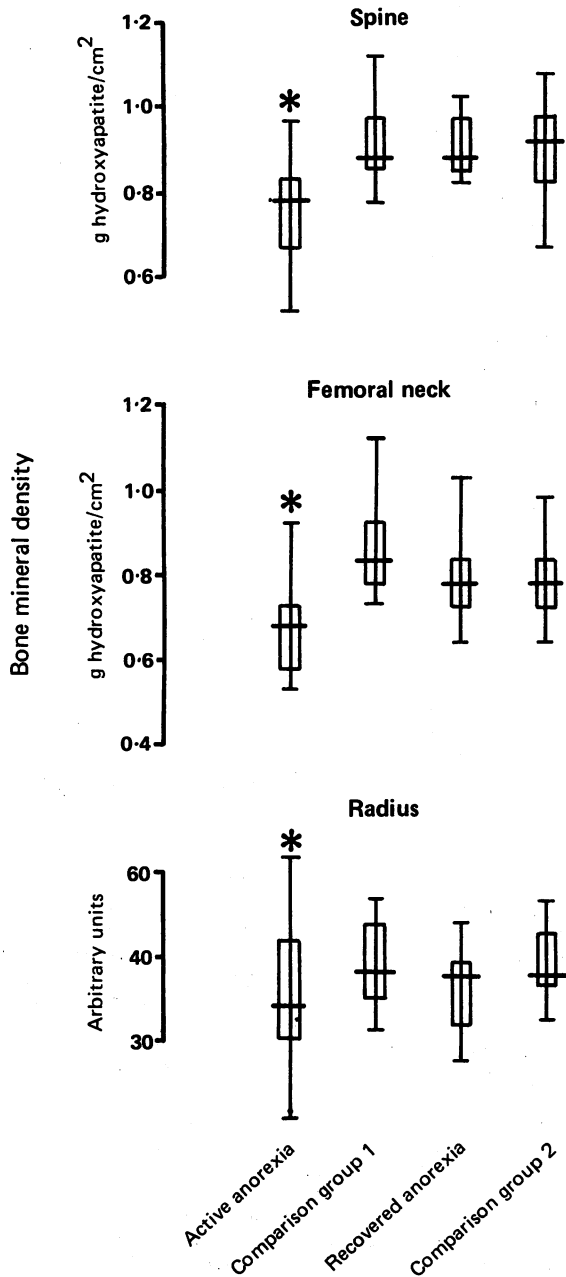


The figure gives the results of the bone density measurements. At all sites bone density was reduced in proportion to the duration of illness, and in all 20 patients with six years or more of amenorrhoea bone mineral density of the femoral neck was two standard deviations below the mean. Bone mineral density improved with increasing weight in patients with anorexia nervosa and was normal in patients recovered from the disorder. In the anorectic group the serum calcium concentration, alkaline phosphatase activity, and follicle stimulating hormone concentrations were normal but oestradiol and luteinising hormone values were low.



Bone mineral density in lumbar spine, femoral neck, and non-dominant radius expressed as median, quartiles, and range. * $p < 0.05$ (Mann-Whitney U test).

Comment

This study confirms that in anorexia nervosa there is significant loss of bone, which is probably general, affecting the wrist as well as the clinically important sites the spine and hip. It is related to the duration of illness, improves with weight gain, and returns to normal with recovery. Complete recovery after osteoporosis in adults does not seem to have been reported before. Pathological fracture occurred in nine patients, in eight of whom the illness had been present for over 10 years.

It is not possible to distinguish with certainty the effects of malnutrition from those of the secondary oestrogen deficiency. Nevertheless, bone

density did not correlate with basal oestrogen values and, though this may reflect the inadequacy of isolated sampling, the improvement with partial weight restoration, before return of menstruation, strongly suggests that body weight has an independent effect.

This study argues against giving oestrogen treatment in most young anorectic women, who will restore their bone density with weight gain.

We express our gratitude to Bernice Threadgold, who performed all the bone measurements. We also thank Dr G Dunn for statistical advice.

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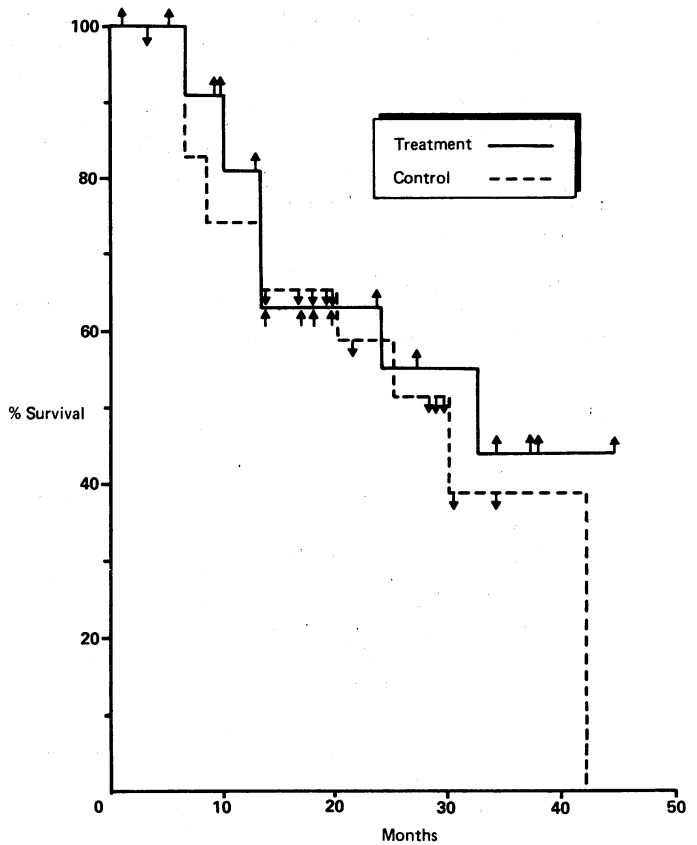
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Correction

Controlled trial of γ linolenic acid in Dukes's C colorectal cancer

An error occurred in the figure showing survival in patients and controls in this paper by M B McIllmurray and W Turkie (16 May, p 1260). The correct figure is shown below.



Survival in the two groups of patients. \uparrow = Survivors among treated patients; \downarrow = Survivors among controls.