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Tiger bites

Further to the report by Mr Papadopoulos and colleagues (June 1999 *JRSM*, pp. 303–14), there are at least three other reported cases of severe spinal injuries caused by tiger bites, two of which also cite infective complications^{1–3}. The proprioceptors located in the teeth and jaw allow cats to align their teeth between the cervical vertebrae of their prey, severing the spinal cord as the neck is hyper-extended—hence the severity of spinal injuries reported.

Like their smaller domestic relatives, most large cats carry *Pasteurella multocida* in their mouths. Two cases of infection due to *P. multocida* following cougar bites have been reported^{4,5}, again associated with severe injuries. The first reported case of tiger-bite-associated *P. multocida* infection stimulated a study of the 'fang flora' in seven tigers, from all of which were isolated *Pasteurella*¹. An 11-year-old girl developed *P. multocida* meningitis following severe cervical injuries after being bitten by a Bengal tiger³. She recovered fully, apart from residual weakness of the limbs due to spinal cord trauma.

In general, cat bites pose a greater risk of infection than dog bites. This is due to a combination of sharp teeth causing deep wounds that are difficult to clean properly, a high inoculation of anaerobic bacteria in the wounds, and inadequate antimicrobial prophylaxis. Where clinically justified (severity of wound, lower limb, immunosuppression, etc), co-amoxiclav is the prophylactic antimicrobial of choice, covering staphylococci, streptococci, pasteurella and anaerobes. I suggest co-amoxiclav would be the best choice of prophylactic antimicrobial after bites by large cats.

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Antenatal screening for HIV

Professor Hudson and colleagues usefully highlight many of the important ethical dilemmas arising from antenatal HIV testing (July 1999 *JRSM*, pp. 273–76). We believe that the

ethics of anonymized testing warrant further discussion. Many women are not informed that their blood, or that of their babies, is tested anonymously for HIV antibodies. If they are, the benefits of having a named linked test (and the disadvantages of not having a linked test) are not necessarily spelled out. The main justification given for this policy is that it is the only way to obtain accurate seroprevalence data. A particular ethical concern is that 'unlinking' deprives the woman (and her fetus) of the benefit of a named test should the result be positive¹. In one study, only 5% of women fully understood the nature of such testing, and a substantial proportion believed that they would be informed if the result was positive².

The implications of a positive result may differ according to the woman's personal, cultural and social setting and the offer of an HIV test should be tailored accordingly. The values and beliefs of a woman, her partner, and her family may strongly influence her perception of the benefit of having the test; pretest discussion should include a genuine attempt to explore her fears and concerns. We are worried that the UK trend towards routine screening with voluntary opt-out, in its current 'steamroller' format, does not allow important and sensitive issues to be discussed in a patient-centred way. A medical recommendation to some women, especially those from ethnic minorities³, may amount to lack of choice.

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Coeliac disease in adults

The report by Dr Bhattacharyya and colleagues (June 1999 *JRSM*, pp. 286–8), on unusual presentations of adult coeliac disease, reminds me that I have often wondered whether the muscular weakness so often reported in relapse may be due not so much to the relatively mild associated anaemia as to the urinary phosphate loss induced by chronically raised levels of parathormone—presumably secreted in order to maintain an adequate blood calcium level. It would be interesting to know whether muscle phosphate and phosphate-containing compounds as measured by nuclear magnetic resonance are abnormal in such cases and whether a phosphate supplement might not speed recovery. The bone pathology in coeliac disease may not be entirely a