

made little or no direct impact on clinical practice. However, it must not be forgotten that successive generations of medical students are becoming increasingly exposed to computing techniques. It is the attitude of tomorrow's consultants and of the patients under their care, as much as the development of new technology, which will determine the place of computing in the day-to-day care of patients in the future.

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Cancer of the colon and schistosomiasis

A nationwide retrospective survey of cancer in China for the 3-year period 1973–1975 covered 395 cities and 2136 counties, comprising a population of more than 850 million. Intestinal cancer was found to rank sixth in frequency, with an incidence of 3.54 per 100 000 population (Li & Li 1980).

Cancer of the large intestine is mainly distributed over the provinces of Zhejiang, Jiangsu, Fujian and Shanghai in the area of the lower reaches of the Changjiang (Yangtze) River. These are areas where schistosomiasis is endemic. In 1972, the population surveys of anorectal cancer reported by the Zhejiang Research Group showed that the incidence of cancer of the large intestine was 22.36 per 100 000 population in 10 communes in Jiashan, which are also areas where intestinal schistosomiasis is endemic (Zhejiang Research Group 1974). From 1977 to 1978, 450 477 persons over the age of 7 were screened for schistosomiasis and 198 950 over the age of 30 were screened for colorectal cancer in Haining County of Zhejiang Province. Seventy-five cases of colorectal malignant tumour were discovered, a positive rate of 37.69 per 100 000 (7 were colonic cancer, 14 rectal cancer, 20 polyp with cancerous

change and 34 carcinoid); 2701 had various types of polyps; and there were 5242 definitive diagnoses of schistosomiasis (Zhang *et al.* 1980). The Hospitals of the Shanghai Textile Industry Bureau (1980), in their 5½-year mass survey of rectal malignancies, reported that of 472 766 people examined, 142 cases of rectal malignancy were found – an incidence of 14.8 per 100 000 population.

The relationship between cancer of the large intestine and schistosoma has been studied by the pathology departments of several institutions in China. It has been noted that, on the whole, cases of carcinoma with schistosomiasis of the large intestine are not so much cases of carcinoma with coexisting schistosomiasis, but rather cases of schistosomiasis with subsequent development of carcinoma, and that a causal relationship exists (Wu *et al.* 1960, Chen *et al.* 1965, Chuang *et al.* 1979). The Hangzhou Cancer Hospital reported 337 cases of cancer of the large intestine associated with schistosoma; it was found that in the area of the ova there was ulceration of the mucous membranes, destruction of the mucomuscular layer, inflammation, dissolution of the tissues surrounding the ova, and even hyperplasia and metaplasia of the surrounding glands (Zhao 1979).

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