

## CORRESPONDENCE

<b>Hospice care for children</b>		
S R Burne, MRCP	1400	
<b>Oral opiates and respiratory function</b>		
T D Walsh, MRCP	1401	
<b>Survival and desferrioxamine in thalassaemia major</b>		
J A Murray, MRCP	1401	
<b>Intraspinal opiates and itching: a new reflex?</b>		
D M Justins, FFARCS, and Felicity J M Reynolds, MD	1401	
<b>Injuries incurred at "roller discos"</b>		
J G Moss, MB; T D Bunker, FRCS, and Ninian S Peckitt, MB	1401	
<b>Failure of hyposensitisation in treatment of children with grass-pollen asthma</b>		
H M Brown, FRCPED; Betty E Wallace, FRCPATH; D J Hill, FRACP, and others	1402	
<b>Preparing a leaflet for patient education</b>		
R Dickinson, FPS	1403	
<b>Stability of glyceryl trinitrate tablets</b>		
E R Tallett, FPS	1403	
<b>Pulmonary hypertension and fenfluramine</b>		
D P Doogan, MRCP	1403	
<b>Fact and speculation on nuclear war</b>		
N J Simpson, MRCPsych	1403	
<b>Short-term prophylaxis with cefotaxime for prostatic surgery</b>		
R Hole, FRCS	1404	
<b>What has happened to charity?</b>		
R M Dawood, MB; A D McG Steele, FRCS, and T A Casey, FRCS	1404	
<b>Failure to heal vitamin D-deficiency rickets and suppress secondary hyperparathyroidism with conventional doses of 1,25-dihydroxy vitamin D<sub>3</sub></b>		
D R N Gillies, MRCP, and P J Congdon, MRCP	1404	
<b>Are all born equal? Incidence of febrile convulsions by season of birth</b>		
Zarrina Kurtz, MFCM, and others	1404	
<b>Recurrent cancer after restorative resection of the rectum</b>		
B J Cummings, FRCP	1405	
<b>Cause, diagnosis, and chemotherapy of lactose intolerance</b>		
E Sztalóczy, MD	1405	
<b>Pruritus after administration of hetastarch</b>		
J M Mishler, MRCPATH; N E Parker, MRCP, and others	1405	
<b>Is carditis less common in rheumatic fever than it used to be?</b>		
C Sonnex, MB	1406	
<b>Renal failure—dilemma and developments</b>		
J R T Gabriel, FRCP	1406	
<b>Renal function after prolonged consumption of aspirin</b>		
D N S Kerr, FRCP	1406	
<b>Ventricular fibrillation induced by xipamide</b>		
D B Rowlands, MRCP, and W A Littler, FRCP	1407	
<b>Clinical trials of immunotherapy</b>		
H B Hewitt, MD	1407	
<b>Plasmodium falciparum malaria in Nigerians who live in Britain</b>		
L J Bruce-Chwatt, FRCP	1407	
<b>Abolish course organisers in general practice</b>		
A A Lewis, MRCP	1408	
<b>Sinus arrest during treatment with amiodarone</b>		
I R Starkey, MRCP	1408	
<b>Hepatitis B virus infection in medical and health care personnel</b>		
A K R Chaudhuri, FRCPGLAS, and E A C Follett, MRCPATH	1408	
<b>Skin suturing techniques</b>		
N R McLean, FRCSGLAS; G B Hopkinson, FRCS	1408	
<b>Is bran useful in diverticular disease?</b>		
M V Math, MD	1408	
<b>Physiological changes underlying jet lag</b>		
H W Simpson, MRCPATH	1409	
<b>The legal threat to medicine</b>		
Jean Davies	1409	
<b>Survey of pulmonary tuberculosis in south and west Wales (1976-8)</b>		
H A Buechner, MD	1409	
<b>Genetics of Alzheimer's disease</b>		
I Janota, FRCPATH	1410	
<b>Is early antenatal attendance so important?</b>		
A M Mander, MRCP	1410	
<b>A giant ovarian cyst in a Javanese woman</b>		
A A Haspels, MD, and P J Zuidema, MD	1410	
<b>Mitral valve prolapse and a Marfanoid habitus</b>		
M K Davies, MRCP	1410	
<b>Effect of rubella vaccination programme in schools on rubella immunity in a general practice population</b>		
S C Rowlands, MRCP, and R G H Bethel, MRCP	1411	
<b>Conversion to U100 insulin</b>		
B Thalayasingam, MRCP	1411	
<b>Planning services for the mentally handicapped: a look at Sweden</b>		
D Chakraborti, MRCPsych	1411	
<b>Points</b> Case clustering in pityriasis rosea (J A Stewart); Dr Michel Odent (Janet E Willis); Advantages of deputising services: a personal view (H K Ford); Late delivery of "BMJ" (B von Preyss); Thin students for thin medical schools (T J Coats); A plain man's guide to the management of migraine (M Segal); Non-smoking: a feature of ulcerative colitis (G Laszlo); Rubella prevention: two methods compared (Hilary Henson); Lead in petrol (Jill Runnette)	1412	

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## Hospice care for children

SIR,—Minerva (24 April, p 1275) asks whether infants whose death is inevitable could be transferred to a hospice environment where they may be cared for and allowed to die in an atmosphere of peace and dignity. Until now such an idea might have seemed impossible, not least because no such facility exists. In recent years there has been an increasing amount of interest in developing terminal care for children along the lines followed so successfully by the adult hospice movement. In America Martenson<sup>1</sup> and Lauer and Camitta<sup>2</sup> have described successful programmes of home care for children with terminal cancer, while in this country Chapman and Goodall<sup>3</sup> have published their advice on symptom control in ill and dying children.

While terminal care within a child's own home may be the ideal, circumstances often make this impossible. The alternative is usually for the child to be nursed in an acute

hospital ward. While the care in such a setting will be first class, it is of necessity directed principally towards cure. In such a busy environment it is exceedingly difficult to provide peace, tranquillity, and above all time, which is so desperately needed both by the dying child and by his whole family. Motivated by these considerations and by the unhappy illness of Helen, who suffered permanent brain damage after surgery for a cerebral tumour, the Society of All Saints in Oxford is building a hospice for children to be known as Helen House.<sup>4</sup>

Helen House will open in October 1982 and will provide its facilities to gravely ill children and their families when specialist hospital care is not considered necessary or advisable. Admission to Helen House will usually be for short periods to provide intermittent relief to the family, although children will also be able to come to Helen House to stay at short

notice, where this is necessary. At all times the aim will be to help families to care for their child in his or her own home as far as possible.

Although Helen House will provide facilities for terminal care the numbers involved will not thankfully be large. The other and larger group of children who will be helped are those like Helen herself who have permanent severe illness or grave handicap and are capable of being cared for at home with the continuing support and constant availability of a hospice.

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<sup>1</sup> Martenson IM. In: Saunders C, Summers DH, Teller N, eds. *Hospice, the living idea*. London: Edward Arnold, 1981:43-53.

<sup>2</sup> Lauer ME, Camitta BM. *J Pediatr* 1980;97:1032-5.

<sup>3</sup> Chapman JA, Goodall J. *Journal of Maternal and Child Health* 1980;5:144-54.

<sup>4</sup> Farrow G. *Nursing Times* 1981;12 August: 1433-4.