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We showed recently that having a child on HPN has a major impact on the quality of life of the parents. We studied 11 parents of children with chronic intestinal failure requiring HPN. Following an initial focus group meeting to identify important issues, semistructured interviews were held with the parents. The General Health Questionnaire (GHQ-28) and a questionnaire developed for the British Artificial Nutrition Survey (BANS) were also administered. A control group of 11 parents with age matched healthy children also answered the BANS questionnaire.

The GHQ-28 showed that seven of the 11 parents with children on HPN exceeded the threshold for psychiatric morbidity. The BANS described a significant deterioration before and after the child's illness for social life (p<0.007), family life (p<0.007), sex life (p<0.003), and work (p<0.004) in these parents compared with controls. Parents caring for children on HPN were also more likely to be physically tired and to have difficulties in taking holidays, going shopping and spending time with their partners. Many of them admitted to feeling frustrated, annoyed, stressed, and having problems sleeping.

With the advent of HPN, increasing numbers of children with chronic intestinal failure are now being managed at home. Although HPN has given life to many of these children who would otherwise have died, the burden of care on these parents is enormous and could have a significant impact on their quality of life. Health care professionals should be aware of this problem and endeavour to offer the necessary support for families who provide this demanding type of care. The services of a dedicated community nutritional support team is recommended.

C WONG A K AKOBENG V MILLER A G THOMAS

Department of Paediatric Gastroenterology, Booth Hall Children's Hospital, Charlestown Road, Blackley, Manchester M9 7AA. UK

Correspondence to: Dr Thomas.

1 Brook G. Quality of life issues: parenteral nutrition to small bowel transplantation: a review. *Nutrition* 1998;**14**:813–16.

Helicobacter pylori infection and autoimmune pathogenesis of gastric neoplasias

EDITOR,—We read with great interest the article by Kawahara et al (Gut 1999;45:20–23) reporting the increase of antibody titres to HGC-27 cells in Helicobacter pylori positive patients with mucosa associated lymphoid tissue (MALT) lymphoma when compared with titres in patients with other gastroduodenal diseases and in healthy subjects. Previously, other authors' showed that antigenic mimicry between H pylori and the host mucosa may induce autoimmune responses which lead to the development of the disease.

Recently, we have diagnosed a few cases of synchronous gastric adenocarcinoma and low grade MALT lymphoma (unpublished data). Although the development of simultaneous primary gastric lymphoma and carcinoma is a rare event, in view of Kawahara *et al*'s data we think that the occurrence of both pathologies could be underestimated. In fact, the gastric glandular epithelium present inside a MALT lymphoma might be susceptible to neoplastic

transformation, owing to either the presence of common oncogenic factors or to the induction of immune responses to host components. The latter mechanism may lead to tissue injury of an autoimmune nature. The possibility of coexisting MALT lymphoma and gastric adenocarcinoma should be kept in mind, especially in patients infected with $H\ pylori$ as an aetiopathogenic role for this bacterium in both diseases has been postulated

H pylori plays a key role in the natural history of gastric MALT lymphoma and represents an example of antigen mediated tissue stimulation and lymphoproliferation, with possible subsequent lymphomagenesis. We agree with Kawahara et al that undefined bacterial components or the host immune response to the bacterial infection could promote autoimmune responses to host antigen in certain subjects. Further studies are needed to clarify the role of antibodies to Hsp60 and HGC-27, but it is possible hypothesise that other as yet unidentified antibodies may also be involved.

G CAMMAROTA G GASBARRINI Policlinico "A. Gemelli", Università Cattolica del Sacro Cuore, Istituto di Medicina Interna e Geriatria, Largo A. Gemelli, 8, 00168 Rome, Italy

Correspondence to: Dr Giovanni Cammarota. email: dora.erasmo@tiscalinet.it

1 Negrini R, Savio A, Poiesi C, et al. Antigenic mimcry between Helicobacter pylori and gastric mucosa in the pathogenesis of body atrophic gastritis. Gastroenterology 1996;111:655-65.

NOTES

11th Annual International Colorectal Disease Symposium

The 11th Annual International Colorectal Disease Symposium will be held at the Marriott Harbor Beach Resort, Fort Lauderdale, Florida, USA, on 17–19 February 2000. Further information from: Cleveland Clinic Florida, Department of Continuing Education, 2950 West Cypress Creek Road, Fort Lauderdale, Florida 33309, USA. Tel: +1 954 978 5056; fax: +1 954 978 5539; email: jagelms@ccf.org

5th World Congress on Trauma, Shock, Inflammation, and Sepsis

The 5th World Congress on Trauma, Shock, Inflammation, and Sepsis will be held in Munich, Germany, from 29 February to 4 March 2000. Further information from: Prof Eugen Faist, Department of Surgery, Ludwig Maximilians University Munich, Klinikum Grosshadern, Marchioninistrasse 15, 81377 Munich, Germany. Tel: +49 89 7095 5461/2461; fax: +49 89 7095 2460; email: faist@gch.med.uni-muenchen.de

Second Annual Gastrointestinal Cancer Update: A Multidisciplinary Approach

The Second Annual Gastrointestinal Cancer Update conference will be held at the Yarrow Hotel and Conference Centre, Park City, Utah, USA, on 15–19 March 2000. Further information from: Rosalie Lammle. Tel: +1 801 581 8664; fax: +1 801 581 3647; email: rosalie.lammle@hsc.utah.edu

European Courses on Laparoscopic Surgery

The European Courses on Laparoscopic Surgery will be held at the University Hospital Saint Pierre, Brussels, Belgium, on 4–7 April 2000 and 21–24 November 2000. Further information from: Conference Services S.A., Drève des Tumuli, 18, B-1170 Brussels, Belgium. Tel: +32 2 375 1648; fax: +32 2 375 3299; email: conference.services@skynet.be

Third Scandinavian Course on Inflammatory Bowel Diseases

The Third Scandinavian Course on Inflammatory Bowel Diseases will be held at the Wilanderselen, Örebro Medical Centre, Örebro, Sweden, on 12–14 April 2000. Further information from: Kurskansliet, Regionsjukhuset, S-701 85 Örebro, Sweden. Tel: +46 19 15 37 05; fax: +46 19 15 37 95.

XVIIIth European Workshop on Gastroenterology and Endotherapy

The XVIIIth European Workshop on Gastroenterology and Endotherapy will be held in Brussels, Belgium, on 26–28 April 2000. Further information from: Administrative Secretariat, Ms Nancy Beauprez, Gastroenterology Department, Erasme Hospital, Route de Lennik 808, B-1070 Brussels, Belgium. Tel: +32 2 555 4900; fax: +32 2 555 4901; email: beauprez@ulb.ac.be

Digestive Disease Week

The Digestive Disease Week will be held at the San Diego Convention Centre, San Diego, California, USA, on 21–24 May 2000. Further information from: DDW Administration, 7910 Woodmont Avenue, 7th Floor, Bethesda, Maryland 20814, USA. Tel: +1 301 272 0022; fax: +1 301 654 3978; website: www.ddw.org

International Hepato-Pancreato-Biliary Association 4th World Congress

The International Hepato-Pancreato-Biliary Association 4th World Congress will be held in Brisbane, Australia, from 28 May to 1 June 2000. Further information from: Intermedia Convention and Event Management. PO Box 1280 (Intermedia House, 11/97 Castlemaine Street), Milton, Queensland 4064, Australia. Tel: +61 (0)7 3369 0477; fax: +61 (0)7 3369 1512; email: hpb2000@im.com.au