

Gut

*Journal of the British Society of Gastroenterology which
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key topics' category. It should be judged in these terms, of course, as it is not a textbook of paediatric gastroenterology. The authors of the chapters are well recognised names in the community of paediatric gastroenterologists, from North America and from the United Kingdom, with one representative from continental Europe. Predictably, all have undertaken their task competently and successfully.

The success of the publication must depend on the choice of topics included. This is good in the main, but at times somewhat specialist. The generalist who sees children with gastrointestinal problems will find the chapters on oral rehydration solution, constipation, food allergy, inflammatory bowel disease, gastro-oesophageal reflux, recurrent abdominal pain, and gastrointestinal bleeding, of great interest and educational value. The chapter on 'when to transplant the liver in children' fits uncomfortably; it is a very interesting question for the paediatric hepatologist or specialist gastroenterologist but of little relevance to the probable readership of the publication. The chapters on the role of gastrointestinal motility studies and of home parenteral nutrition fall in between, probably. The relevance of the book to a reader will depend on the number of children with these problems they see, and I suspect that the book will be most useful to the general paediatrician and not the general gastroenterologist.

In keeping with the ethos of counting credits, I would rate this book as being worth three credits (assuming that most generalists would probably read six chapters, and perhaps spend half an hour on each). By doing this, they are probably learning more than by earning six credits by listening to the same authors giving lectures on the same topics, and in addition they have the book on their shelves afterwards. Paediatricians should put it on their reading list for next term, as should any general gastroenterologist who sees children.

S P DEVANE

NOTES

Wilson's disease and Menkes' disease

The 7th International Symposium on Wilson's disease and Menkes' disease will be held in Vienna, Austria on 25–27 August 1995. Further information from: Prof Dr Peter Ferenci, Department of Internal Medicine IV, Gastroenterology and Hepatology, Währinger Gürtel 18–20, A-1090 Vienna, Austria. Tel: (43 1) 40 400 47 41; fax: (43 1) 40 400 47 350.

Neurogastroenterology

An International Symposium on Neurogastroenterology will be held on 10–11 November 1995 in Rome, Italy. Further information from: Dr Enrico Corazzari, Cattedra di Gastroenterologia I, Clinica

Medica II, Policlinico Umberto I, V.le del Policlinico, 00161, Rome, Italy. Tel/fax: 39 6-4469965.

Paediatric gastroenterology

The 1st International Congress of Pediatric Gastroenterology will be held in Jaipur, India on 12–16 December 1995. Further information from: Dr Balvir S Tomar, Head, Department of Pediatric Gastroenterology, 4 Govind Marg, Jaipur, 302 004, India. Tel: 91 141 604040 or 605050; fax: 91 141 563788.

Gastroenterology

A Postgraduate Gastroenterology Course will be held in Oxford on 7–10 January 1996. Further information from: Dr D P Jewell, Gastroenterology Unit, Radcliffe Infirmary, Woodstock Road, Oxford OX2 6HE. Tel: 01865 224829; fax: 01865 790792.

Inflammatory bowel disease

The International Inflammatory Bowel Disease Symposium will be held in Chester on 14–16 April 1996. Further information from: Prof Jonathan M Rhodes, Department of Medicine, Liverpool University, L69 3BX. Tel: 0151 706 3558; fax: 0151 706 5802.

ABIM announcement regarding change in training requirements for certification in gastroenterology

The American Board of Internal Medicine announces a new policy requiring three years of accredited training in a gastroenterology fellowship programme.

This decision follows a lengthy review by the ABIM Subspecialty Board on Gastroenterology and has the support of the American Gastroenterological Association, the American College of Gastroenterology, the American Society of Gastrointestinal Endoscopy, the American Association for the Study of Liver Diseases, and the Gastroenterology Training Program Directors.

This new policy becomes effective for fellows entering gastroenterology fellowship training programmes in June 1996 and thereafter. Trainees who have questions about this policy should contact the American Board of Internal Medicine, 3624 Market Street, Philadelphia, Pennsylvania, 19104-2675, USA.

Falk Symposia

Details of Falk Symposia for 1995 and 1996 and the Basel Liver Week 1995 are now available. Further information from: Falk Foundation V, Leinenweberstraße 5, Postfach 65 29, D-79041 Freiburg, Germany. Fax: 0761/13034-59.

Sir Francis Avery Jones BSG Research Award 1996

Applications are invited by the Education

Committee of the British Society of Gastroenterology who will recommend to Council the recipient of the 1996 Award. Applications (**eighteen copies**) should include:

(1) A manuscript (2 A4 pages *only*) describing the work conducted.

(2) A bibliography of relevant personal publications.

(3) An outline of the proposed content of the lecture, including title.

(4) A written statement confirming that all or a substantial part of the work has been personally conducted in the UK or Eire.

Entrants must be 40 years or less on 31 December 1996 but need not be a member of the BSG. The recipient will be required to deliver a 40 minute lecture at the Spring meeting of the Society in 1996. Applications (**eighteen copies**) should be made to: The Honorary Secretary, BSG, 3 St Andrews Place, London NW1 4LB by 1 December 1995.

CORRECTIONS

The authors (Van't Hof *et al* *Gut* 1995; **36**: 691–5) omitted an acknowledgement from their paper and would like to gratefully acknowledge the support of the Medical Research Council, South Africa.

An authors' error occurred in the paper by Khulusi *et al* (*Gut* 1995; **36**: 193–7). The second sentence under Clinical Methods should read 'One duodenal biopsy was obtained from the ulcer margin and two from the anterior duodenum', and on the same point the second paragraph of the Discussion should re-affirm that the three duodenal bulb biopsy specimens included 'two from the anterior wall'.

Some editorial errors occurred in the paper by Mothes *et al* (*Gut* 1995; **36**: 548–52). The tenth line of the Methods section should read 'was stopped by the addition of 10 ml acetic acid' and not 100 ml. In the legend to Fig 1: lane 2 should read 'gliadin (gli)' and not 'purified gliadin', lane 3 should read 'tryptic digested gliadin (t-gli)' and not 'gliadin'. The abscissa to Fig 3 should begin with zero and not 1. The legend to Fig 4 should read 'MHC expression by HT-29 cells – influence of gliadin (gli) (●), tryptic digested gliadin (t-gli) (○), casein (▼), tryptic digested casein (▽), and β lactoglobulin (■). Culture in the presence of interferon γ without addition of food derived peptides was 100%. Means of three or four (t-gli, four to seven) individual cultures are shown (*only two cultures performed). For sake of clarity the SEM is given in only one direction'.

Also, 'trypsin' and 'tryptic digestion' has been printed as 'tryptin' and tryptin digestion' throughout the text.

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Gut publishes original papers, short rapid communications, leading articles, and reviews concerned with all aspects of the scientific basis of diseases of the alimentary tract, liver, and pancreas. Case reports will only be accepted if of exceptional merit. Letters related to articles published in *Gut* or with topics of general professional interest are welcomed. Authors should include the names and addresses of four experts whom the authors consider suitable to peer review their work.

COMMUNICATIONS Two copies of the manuscript and figures should be addressed to the Editor, *Gut*, BMA House, Tavistock Square, London WC1H 9JR, UK. Manuscripts should follow the Vancouver conventions (see *BMJ* 1979; i: 532-5. *Gut* 1979; 20: 651-2). They should be in double spaced typewriting on one side of the paper only. The title page should include the name of the author with initials or distinguishing first name only, and the name and address of the hospital or laboratory where the work was performed. **The paper must include a precise summary of the work of less than 200 words, which should be divided into six sections headed background, aims, patients (or subjects), methods, results, and conclusions. Keywords (maximum six) should be included.** Use of abbreviation is discouraged. Short rapid communications should not be more than 10 double spaced A4 pages including references, tables, and figures. These papers will be subject to peer review in the normal way. The interval from acceptance to publication will be much shorter. A covering letter should include a request for the paper to be considered in this category with valid reasons for that request. A separate covering letter signed by all authors must state that the data have not been published elsewhere in whole or in part and that all authors agree to publication in *Gut*. Previous publication in abstract form must be disclosed in a footnote. Papers must not be published elsewhere without prior permission of the Editorial Committee. If requested, authors shall produce the data upon which the manuscript is based for examination by the editor.

ACKNOWLEDGEMENT OF MANUSCRIPTS Manuscripts will only be acknowledged if an addressed postcard is enclosed.

ILLUSTRATIONS *Photographs* Unmounted photographs on glossy paper should be provided. Illustrations should not be inserted in the text but marked on the back with the figure numbers, title of paper and name of author. All photographs, graphs, diagrams should be referred to as figures and should be numbered consecutively in the text in Arabic numerals. The legends for illustrations should be typed on a separate sheet.

ETHICS Ethical aspects will be considered in the assessment of papers (see the Medical Research Council's publications on the ethics of human experimentation, and the World Medical Association's code of ethics, known as the Declaration of Helsinki (see *BMJ* 1964; ii: 177)).

SI UNITS All measurements except blood pressure are expressed in SI units. In tables and illustrations values

are given in SI units. For general guidance on the International System of Units and some useful conversion factors, see *The SI for Health Professions* (WHO, 1977). **NB: Such conversion is the responsibility of the author.**

REFERENCES These follow the Vancouver system – that is, references numbered consecutively in the text and listed numerically with journal titles abbreviated in the style of *Index Medicus*, *Standard journal article*. List up to six authors, then add *et al.*

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