References


Septicaemia in Sickle Cell Disease Patients at Qatif Central Hospital, Saudi Arabia

Sir,

I have read the article by A. M. El-Bashier et al. (Saud Med J 1992; 13(3): 220–223) on septicaemia in sickle cell disease patients (SCD) at Qatif Central Hospital. The topic of SCD in Saudi Arabia has attracted worldwide interest resulting in several studies and publications. It is unfortunate that the authors did not refer to more recent reports which are more relevant to the subject of their study. In this regard, I would like to make the following comments:

1. It is known that in Saudi Arabia there are at least two types of SCD which are distinguishable clinically, haematologically, and genetically. The 'mild' type occurs predominantly in patients whose ancestral origin is from the Eastern Province, and the 'severe' type occurs predominantly in patients whose ancestral origin is from the southwest of the Arabian peninsula. The severe type occurs in the Eastern Province, and it is similar to the disease described in Western literature in patients of African ancestry.

2. The risk for infections is different in these two groups of patients. In a prospective controlled study of infections in early childhood in patients with SCD, who were born and lived in the Eastern Province, we found that patients of eastern origin have high risk of infections in general. This finding contrasts with the high risk of overwhelming infections in young children of southwestern origins.

3. It would have been more informative if the authors had reported the ancestral origins of their patients in particular the children who died of overwhelming infections. In addition, differentiating between early childhood (up to 5 years) and later childhood, would lead to better definition of age at risk for infections and to results that are comparable with the literature. These age and origin risk factors for infections (as well as other clinical features of SCD) are important to identify because of prophylactic and therapeutic implications.

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References


Sir,

We would like to thank Professor El-Mouzan for bringing to our attention some of the interesting findings of other groups and for his suggestions especially with regards to age breakdown for analysis.

We wish to state, however, that our limited objectives are as stated in the second paragraph of our article, to identify causative organisms in septicaemia, their antibiotics susceptibility and their mortality rate. However, in previous studies we have clearly demonstrated that the disease is not as benign as was thought.

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References


Psychiatric Implications of the Wolfram Syndrome Gene

Sir,

I read with great interest the review of the Wolfram syndrome and the detailed case history by Drs Rifat Naghmi and his associates. From a medical point of view this review paper described all the most clinically significant details of Wolfram syndrome. In addition, thiamine-dependent sideroblastic anaemia has recently been reported in two paediatric patients from the Arab World. However, from a psychological perspective these papers did not highlight at all the psychiatric disorders in the families of Wolfram syndrome recently reported in two well-designed researches. This might be