The patient’s mental condition improved only slightly, but she became more cooperative. However, delirium with delusions sometimes recurred. Gradual recovery from adrenocortical hyperfunction was evidenced by: (1) a drop of morning plasma-hydrocortisone level (but without the typical diurnal rhythm); (2) later a normal response to the 2 mg. dexamethasone test; and (3) normal values of plasma-hydrocortisone with a return to a normal diurnal rhythm 3 months after admission. The patient was then transferred to a psychiatric institution where her condition did not improve significantly. After 1 year, plasma-hydrocortisone values were: 9 A.M. 16-6, 4 P.M. 10-3, g/ per 100 ml. Glucose-tolerance curve was nearly normal, and serum-potassium was 4.7 meq. per litre.

This study suggests that chronic alcoholic encephalopathy may be accompanied by adrenocortical hyperfunction and be eventually confused with Cushing’s syndrome. Our patient differs from those described by Dr. Butler and Dr. Besser in two main features: (1) normalisation of adrenocortical function without improved mental condition; (2) the finding of hypokaliaemia, which was most probably secondary to corticosteroid excess.

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A NEW POLYDACTYLY/IMPERFORATE-ANUS/VERTEBRAL-ANOMALIES SYNDROME?

SIR,—Dr. Say and Dr. Gerald (Sept, 21, p. 688) report a triad of polydactyly, imperforate anus, and vertebral anomalies in man. Professor Fuhrmann (Oct, 26, p. 918) observed a familial case of polydactyly and imperforate anus. 4 According to Dr. Say and Dr. Gerald the triad is comparable to “dominant hemimelia” in mice, which is characterised by polydactyly or oligodactyly of the hind-limbs, hypoplasia or aplasia of the tibia, and various anomalies of the vertebrae and ribs. 6 Besides minor abnormalities in the gastrointestinal and urogenital systems, heterozygous mice have no spleen and 44% of homozygous mice die before birth.

Among 103 patients with anal atresia born in the administrative area of Münster between 1950 and 1961 (0·22 per 1000 of all births) there was 1 with bilateral duplication of thumb and “blindness” who died at the age of 14 days. No X-rays were taken of the vertebral column. The father was 34, and the mother 35 years old when the patient was born. There had been 2 miscarriages, and 4 normal children were alive.

In view of the findings in mice, Dr. Say and Dr. Gerald wonder whether the proposed syndrome in man may include limb deformities other than polydactyly. My observations here may help to elucidate this problem.

In the series of 103 patients with anal atresia, 3 had unilateral hypoplasia or aplasia of the thumb, and a further 1 an “abnormality of the thumb”. 7 The main findings in these patients, and in 2 others with similar anomalies, are briefly recorded.

Case 1.—This boy, born in 1955, was the second of male twins. He had an imperforate anus, with fistula from rectum to urethra, absence of right thumb, 1st metacarpal, and thenar eminence, spina bifida occulta c5-c4, flattening of the left side of L4, and deformed sacral vertebrae. The other twin is normal. Serological analysis revealed dizygosity. Parents and 4 sibs are normal. The father was 30, and the mother 37 years old at the birth of the twins.

Case 2.—This girl, a first-born child, was born in 1957, when the father was 27 and the mother 33 years old. She had anal atresia with rectovaginal fistula, absence of left thumb, biphid and fused vertebrae in various parts of the spinal column, abnormalities of ribs, and aplasia of left lung. She died at the age of 10 months.

Case 3.—This girl was born in 1956 with anal atresia complicated by rectovaginal fistula. “Right thumb without osseous connection to the hand.” She died in the 2nd month of life. No X-rays were taken of the spine. The father was 37, and the mother 43 years old when patient was born.

Case 4.—This girl was born in 1950, when the mother was 24 years old. “Anal atresia, abnormality of the thumb.”

Case 5.—This girl, a second child, was born in 1965, when the father was 29, and the mother 21 years old. She had atresia of anus and oesophagus with fistula to the trachea, “abnormality of the left thumb, rudimentary right thumb, septal defect, and aplasia of the spleen. She died 1 day after birth.