

General Notes

FIRST BRITISH CONFERENCE ON THE USE OF THE CO₂ LASER IN
E.N.T. AND ALLIED SURGERY

ANAESTHESIA IN LASER SURGERY IN E.N.T. AND BRONCHOSCOPY

CURRENT CONCEPTS AND FUTURE OF HPD THERAPY

PRE-CONFERENCE INSTRUCTIONAL COURSE

26, 27, AND 28 SEPTEMBER 1983

VENUE

The Post House Hotel
Low Lane, By Stainton Village,
Thornaby, Cleveland, TS17 9LW.
(Tel. 0642 591213)

For further details please contact:
Miss Julie Beckley, Conference Secretary,
North Riding Infirmary, Newport Road,
Middlesbrough, Cleveland, TS1 5JE.
(Tel. 0642 246002)

THE 10TH ANNUAL UNIVERSITY OF PITTSBURGH SYMPOSIUM

THE BREAKERS, PALM BEACH, FLORIDA

10-14 DECEMBER 1983

EAR, Nose and Throat Diseases in Children: A 1983 Update, including the most recent results of the Pittsburgh and Boston Studies of Ear and Sinus Disease and Tonsillectomy and Adenoidectomy.

Otolaryngologists, pediatricians, and other health care professionals, update your knowledge through scientific presentations by University of Pittsburgh School of Medicine faculty and invited speakers, small-group workshops, and informal discussions. Simultaneous translation in Spanish available.

Course Co-Directors: Charles D. Bluestone, M.D.
Jack L. Paradise, M.D.
Sylvan E. Stool, M.D.

For further information, contact: Department of Otolaryngology, Children's Hospital of Pittsburgh, 125 De Soto St., Pgh., Pa. 15213 (412) 647-5466.

TEMPORAL BONE SURGICAL DISSECTION COURSES

OFFERED BY

THE DEPARTMENT OF OTORHINOLARYNGOLOGY

THE UNIVERSITY OF MICHIGAN MEDICAL SCHOOL, ANN ARBOR, MICHIGAN

MALCOLM D. GRAHAM, M.D.—COURSE DIRECTOR

12–16 SEPTEMBER 1983	9–13 APRIL 1984
26–30 SEPTEMBER 1983	11–15 JUNE 1984
31 OCTOBER–4 NOVEMBER 1983	24–28 SEPTEMBER 1984
14–18 NOVEMBER 1983	15–19 OCTOBER 1984
9–14 JANUARY 1984	12–16 NOVEMBER 1984

INTENSIVE one-week courses emphasize the surgical and anatomical approaches to the temporal bone, and are presented in a manner relevant for the otologic surgeon, utilizing lectures, videotapes, and dissection.

Mornings and afternoons are spent in the dissection laboratory, giving extensive drilling experience in temporal bone anatomy and surgical techniques. All instruments and high-speed handpieces will be provided.

Course fee is \$1,000.00.

For further information write: Malcolm D. Graham, M.D.,
Department of Otorhinolaryngology,
University of Michigan,
Ann Arbor,
Michigan 48109,
U.S.A.

ROYAL COLLEGE OF SURGEONS IN IRELAND

PRE-FELLOWSHIP TRAINING PROGRAMME IN OTOLARYNGOLOGY

VACANCIES will occur in this training programme on 1st January, 1984. Posts will be of Registrar status on a three year rotation.

Applicants must have passed the Primary Fellowship Examination and have had at least 12 months E.N.T. experience.

Application forms and further details are obtainable from:

The Administrative Officer,
Postgraduate Bureau,
Royal College of Surgeons in Ireland,
123 St. Stephen's Green,
Dublin, 2,

to whom the completed application forms must be returned on or before Friday, 19th August, 1983.

CIALIT—WARNING

WE have recently encountered problems with the above solution, a mercurial which is used to preserve bone and cartilage for a number of surgical grafting procedures. These were brought to our attention by a particular solution contaminated with *Pseudomonas fluorescens*.

We would be interested to hear if any Ear Nose and Throat surgeons have experienced problems with Cialit and would be grateful if they could write to us.

We are currently working with the Division of Hospital Infection to try and assess potential defects in current procedures in the preparation and use of Cialit.

We would like to draw attention to the following facts:

1. Hoechst, the distributors, but not the manufacturers, of Cialit in the U.K. do not recommend autoclaving, but ultra filtration in the preparation of Cialit, as the active ingredient is thermolabile.
2. Hoechst also recommended a shelf-life of three months at +4°C in the dark, or eight weeks if kept in the dark at room temperature.
3. Graft insertion in an initial concentration of 1:1000 for twenty-four hours, followed by two weeks in a 1:5000 solution before use, is recommended by some workers (Helms, 1972). The 1:5000 solution should then be changed at six-weekly intervals.
4. Large grafts, such as costal cartilage, should be immersed in saline for twelve hours or more, before use, to abolish inplant-bed reactions (McGlynn and Sharpe, 1981).

We would also be interested to see how existing practices are at variance with the above recommendations.

B. D. Cookson,
M. Webster,
Infection Control Team,
Department of Microbiology,
St. Thomas' Hospital,
London SE1 7EH.

P. N. Hoffman,
Division of Hospital Infection,
Public Health Laboratory Service,
Central Public Health Laboratory,
Colindale Avenue,
London NW9 5HT.

References

- HELMS, J. (1972) The diffusion of preservatives from preserved tissue. Measurements following preservation with Cialit and Merthiolate. *Helvetica Nordica Orthopoedica*, **20**: 271–273.
- MCGLYNN, M. J. and SHARPE, D. T. (1981) Cialit preserved homograft cartilage in nasal augmentation. A long-term review. *British Journal of Plastic Surgery*, **34**: 53–57.

