

U.N. 364377

24th July 1995

Dr. Scott
The Surgery
9 Brook Street
HOLYWOOD
CO. DOWN

Dear Dr. Scott

RE: ADAM STRAIN [REDACTED] **DOB 04.08.91**

As you know over the last few weeks we have been having considerable problems with Adam who has developed a pyrexia of unknown origin. He has been extensively investigated in an effort to get to the bottom of this. He has had multiple blood cultures, a lumbar puncture, peritoneal fluid cultures, urine cultures. He has had a CAT scan of his head and abdomen. He has had blood sent for viral serology including Brucella abortus, Typhoid screen, Paul Bunnell and Mantoux Test but eventually, having identified no underlying problem other than a weakly positive herpes simplex titre in his blood, we took 40mls of his blood, labelled his white cells with isotope and re-injected these. We found that these labelled white cells aggregated around his gastrostomy button. It has therefore been removed.

He has had ten days of broad spectrum antibiotic and anti-fungal treatment with Ciproxin, Fucidin, Rifampicin and Fluconazole. This has now been stopped for a week. His pyrexia has gradually been settling. He was extremely irritable and cross during this illness but is returning to normal form. Although I am not totally convinced that the gastrostomy inflammatory area has been the true source of his infection this is the only definite evidence that we have other than the herpes simplex titre. We are currently giving him five days Acyclovir because of that but fortunately clinically he seems to be recovering either spontaneously or because of the treatment.

We are keeping him under regular review in the ward.

Yours sincerely

MAURICE SAVAGE
CONSULTANT PAEDIATRIC NEPHROLOGIST

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