

resolving pneumonia. There was history of a momentary bout of cough, choking and breathlessness preceding the present illness. X-ray chest done revealed a radio-opaque foreign body in the left main bronchus and tracheal and mediastinal shift to the left side along with collapse consolidation (Fig. 1). Before the bronchoscopy could be undertaken, the child had a severe



Fig. 1. X-ray chest showing radio opaque foreign body in the left main bronchus.

bout of cough and brought out a sharp irregular stone along with some blood stained sputum. Spontaneous expulsion of foreign body in the airway is well known but expulsion of a sharp pointed foreign body, as in the present case, is rare(4). A foreign body may also change its site due to coughing(5). A fresh skiagram before bronchoscopy, therefore, becomes mandatory.

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Inequal Drop Rate with Different Droppers

With our collective effort, we have been able to introduce a measuring cap for accurate measurement with most syrup preparations. This step has minimized the danger of variable dosage with tea spoons of different sizes. Now we are encountering a similar problem with droppers. Some of us depend upon drops instead of 1 ml, 0.5 ml or 0.25 ml. This can be misleading specially with the in-built or improperly calibrated droppers.

We must remember that solutions with different viscosity have different drop rates per ml. For instance, we found a drop rate of 20, 25, 30 and 40, respectively for water, oil, a preparation containing domperidone and another containing dicyclomine.

Different droppers are also likely to give different drop rates because of poor quality control. For example, a preparation containing domperidone gave a drop rate of 25, 35, 35 and 42, respectively when checked with droppers provided with two multivitamin preparations, a preparation containing metoclopramide and another containing Vitamin C.

Some practitioners recommend syringes for this purpose. But even this system can be inaccurate. When tested, a one ml syringe provided 18 drops per ml, a two ml gave 12-13 drops per ml and a five ml provided 9 drops per ml.

All this is unacceptable. I would request the Indian Academy of Pediatrics to take up this matter with appropriate authorities. Till then, let us prefer such

preparations with which calibrated dropper is provided and also use that dropper only for that particular drug. If we decide to prescribe a drug in drops, we should test the particular dropper for drop rate before advising the child's relatives. For instance, if a preparation is supposed to provide 100 mg per ml and the child requires 50 mg, let us prescribe 0.5 ml as per the calibrated dropper. If we decide to prescribe in drops, let us ourselves count the drops available per 0.5 ml with the dropper provided and prescribe accordingly.

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NOTES AND NEWS

ADVANCES IN HUMAN NUTRITION

Under the auspices of Research Department of B.J. Wadia Hospital for Children, a Symposium on "Advances in Human Nutrition" is being organised on Saturday the 12th October, 1991 at Hotel Oberoi, Bombay. The faculty members from India and abroad are outstanding in their own field.

Registration fee is only Rs. 100/- and last date of registration is 20th September, 1991. For further information and registration, contact:

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