LETTERS TO THE EDITOR

Lack of Efficacy of Short Term Thyroid Hormone Therapy in Down Syndrome

horrowned Lein

生 海绵砂块加强

It has been frequently observed that a large number of Down Syndrome children and others with mental retardation with no clinical or laboratory evidence of hypothyroidism have been recommended thyroid hormone therapy as a non-specific central nervous system stimulant drug by several eminent pediatricians of the country but without any significant benefit.

With references to the above I would like to quote a recent study done on 44 subjects of Down Syndrome by Tirosh et al. which has concluded that close monitoring of thyroid functions in subjects with Down Syndrome is essential and the risk of hypothyroidism appears to be higher as these individuals grow older, probably secondary to thyroiditis(1). A double blind cross over drug placebo trial failed to document any significant short-term developmental, functional or medical gains attributable to the 8 to 14 weeks thyroxine treatment period in subjects with low normal thyroid function, as compared to an untreated matched control group. Hence the common practice of short term thyroid hormone supplementation in mentally retarded children without any evidence of hypothyroidism should be

discontinued, although previous studies by Harrell et al. found a beneficial effect(2).

A.P. Parikh,

Genetic and Medical Unit, Smt. Motibai Thackersey Institute for Research in the Field of Mental Retardation, Sewri Hill, Sewri Road, Bombay-400 033.

REFERENCES

- Tirosh E, Taub Y, Scher A, Jaffe M, Hochberg Z. Short-term efficacy of thyroid hormone supplementation for patients with Down Syndrome and low-borderline thyroid function. Am J Mental Retardation 1989, 93: 652-656.
- Harrell RF, Capp RH, Davis DR, Peerless J, Ravitz LR. Can nutritional supplements help mentally retarded children?
 An exploratory study. Proceedings of the National Academy of Sciences of the United States of America, Washington, 1981, 78: 574-578.

Gastric Perforations in Newborns

Neonatal gastric perforation is a rare and potentially fatal complication. We present our experience with three cases of gastric perforation (Table I) and emphasize the danger of using feeding tubes either for lavage or decompression, especially in stressed newborns who have gastric distention, with or without a distal obstruction.