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Caffey's Disease in Twins

Infantile cortical hyperostosis known as Caffey's Disease is a rare disorder of unknown etiology. Many reports came out in medical literature, and the largest series in India was published by me in 1976(1). But the disease occurring simultaneously in identical twins is hitherto unknown, and therefore is being reported for medical interest.

A well-to-do Bengalee housewife of 24 years delivered normally after an uneventful antenatal period twin female babies in a nursing home after a 34 week-gestation at an interval of about 5 minutes. The earlier one weighed 2 kg, and the latter 1.5 kg. They grew normally on tinned milk till 15 weeks of age when both of them presented with fretfulness, fever (101-102°F), and a diffuse firm swelling on the right chest. The babies weighing 4.5 kg and 4 kg, respectively looked pale and were crying shrilly on being examined. In each of the babies a diffuse swelling-wooden hard, tender, without superficial redness or local rise of tem-

perature, covered almost whole of the right chest, more extensive in the heavier one. Some leucocytosis (18600 and 16250, respectively), mild anemia (Hb 10.8 mm³ and 10.2 g/dl, respectively), and moderately elevated ESR (35 mm and 38 mm/h, respectively) were recorded in both of them. A clinical diagnosis of Caffey's disease was made.

Radiological skeletal survey in each of the babies revealed thickening and irregularity in outline of the ribs on the right side, increase of bone density of the affected ribs, and appreciable thickening of adjacent soft tissue. The involvement was more pronounced in the heavier baby who in addition also showed somewhat thickened irregular outline of the mandible with slight thickening of the soft tissue around (Fig. 1). The radiological findings were consistent with clinical diagnosis (Figs. 1 & 2). Only paracetamol drops produced clinical improvement in both the babies within a week.

Caffey's Disease, though reported widely in medical literature, still remains enigmatic. Some reports of familial occurrence of the disease are interesting(3), but the disease occurring in both the babies at

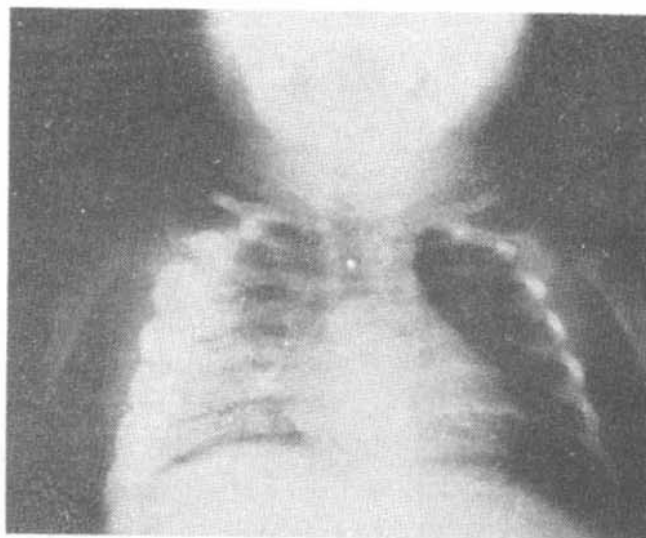


Fig. 1. Caffey's Disease in Twins

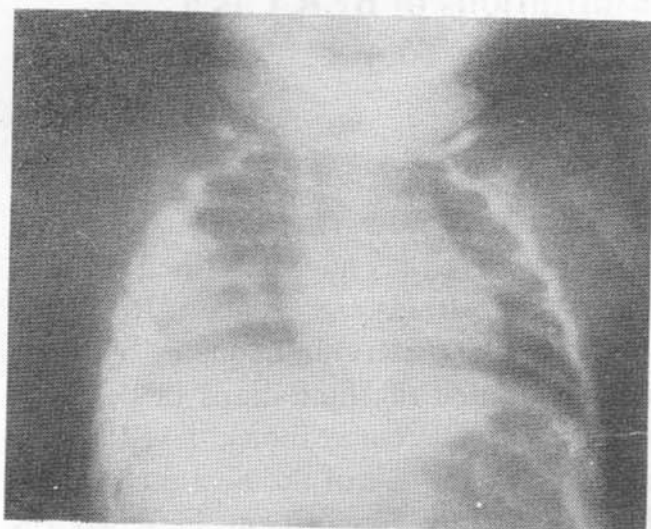


Fig. 2. Caffey's Disease in Twins

the same time and at the same site is really fascinating.

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ORS in Feeding Bottle— A Cause of Concern

Diarrhea is one of the leading cause of death in children in developing countries, approximately five million children, under 5 years of age die each year because of

diarrhea(1). The introduction of oral rehydration by the WHO in 1971, has greatly simplified the treatment of cholera and other acute diarrheal diseases(2). The aim of oral fluid therapy is to prevent dehydration and reduce mortality.

One of the leading predisposing factor of diarrhea is bottle feeding, where inadequately prepared feeds leads to a daily supply of enteral pathogens to the child's gut. Moreover, improper dilution of feeds leads to malnutrition. Hence, it precipitates in vicious cycle of diarrhea-malnutrition-diarrhea, thereby enhancing morbidity and mortality among infants.

Traditionally, the ingredients for ORS are provided in a prepacked powdered form in the market, to be reconstituted in home. But now, sterilized reconstituted ORS is being offered in a bottle, providing a feeding bottle as an added attraction by the manufacturers (Fig.). This naturally

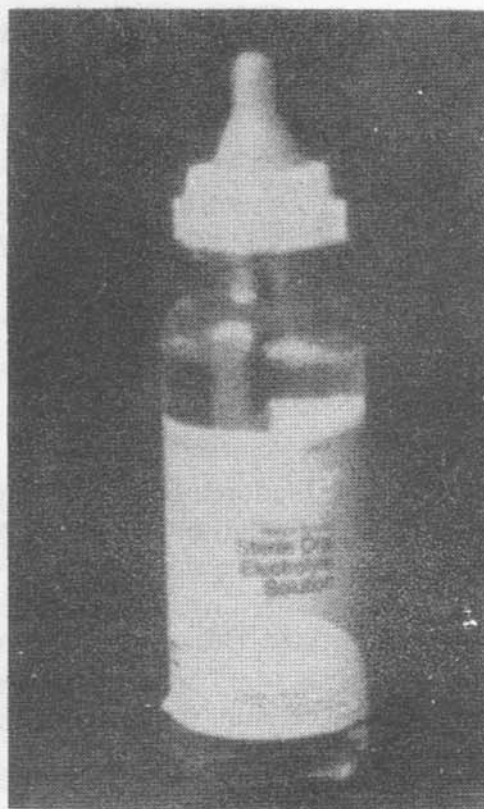


Fig. Pedialyte Feeding Bottle Containing ORS Solution