

moving the upper right arm, and another had facial paralysis.

The examinations made showed hypercalcemia in all of them, and X-ray photographs showed raising of the periosteum in the patella of a 7 year-old child.

The 16 cases were hospitalized in Valencia, and treatment consisted in isolation from sunlight, a milkless diet, corticoids, and diuretics.

On 29 August a 6-year-old girl died. The autopsy showed marked acute bilateral pulmonary edema with bilateral bronchopneumonic foci, increased compactness of the lungs, moderately enlarged liver with mild jaundice, moderately enlarged spleen, hard pancreas

with calcified foci, large and hard kidneys, and right fibula with thickening of the periosteum. Microscopic examination confirmed the calcification of kidney tissues and of the spleen.

This was the only fatal case, but there were 9 cases with liver/kidney insufficiency and generalized calcinosis.

(Source: Government of Venezuela, Ministry of Health and Social Welfare, *Boletín Epidemiológico Semanal*. Nos. 30 and 47, 1979.)

Brucellosis Outbreak in Alberta, Canada

In 1977, eight cases of brucellosis were reported among workers in a meat packing plant in Alberta Province, Canada. Between May and November 1978, six cases of the disease, in which an occupational risk was indicated, were notified to the Alberta Workers' Health, Safety, and Compensation, the social security institution of the province. This led to an epidemiological investigation in which local, provincial, and federal agencies actively collaborated, as did the management and workers of the meat-packing plant.

To determine the presence of *Brucella* antibodies, 193 workers were examined; 17 of them (8.8 per cent)

were found to be seropositive. Of the latter 17, 14 had been employed at the plant for 5 years or less. The risk of infection was six times greater for workers who did not wear glasses than for those who did. It was estimated that the daily slaughter of 20-25 head of cattle that were reactors to brucellosis was the critical limit, above which the risk of human infection increased. This fact was associated with the outbreak of brucellosis in the plant.

(Source: *Canada Diseases Weekly Report*, 2 February 1980.)

Current Progress in Tuberculosis Chemotherapy*

Bacteriologic Bases of Short-course Chemotherapy

The purpose of tuberculosis chemotherapy is to sterilize lesions quickly and completely, and the drugs are

*Extract of the conclusions of the III Regional Seminar on Tuberculosis Chemotherapy, PAHO, Washington, D.C., 27-30 March 1979.

used to avoid the failures caused by bacterial resistance and to avert relapses.

Despite the high proportion of mutants resistant to drugs among wild strains of tubercle bacilli, selection of resistant bacilli is easily avoided by appropriate combinations of active drugs, that is, drugs to which the bacilli are sensitive.