While patients with a history of asthma will invariably exhibit bronchospasm as part of an anaphylactoid response, such a history is not a reliable predictor of anaphylaxis to atracurium or any other anesthetic drug.

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SERVICES

ANAESTHETIC MANAGEMENT OF ACHONDROPLASIA

Sir—I have read with interest the article by Kella, Fening and Obiaya [1] entitled "Anaesthetic Management of Achondroplasia". The authors state that the literature is scanty concerning the anaesthetic management of achondroplastic patients, and refer to Mather's description of laryngoscopy and intubation as difficult in achondroplastic subjects [2]. I should like to draw attention to our article "Anaesthesia for the Achondroplastic Dwarf" [3] in which we reviewed the literature and found only two other articles which mentioned the management of the achondroplastic [2, 4]. In 36 anesthetics we observed, as did the present authors, that airway management was not difficult. We also noticed that drug doses based on weight resulted in no differences in clinical response in the achondroplastic patient when compared with that of normal volunteers. As far as I am aware, our series, although small in number, remains the largest series to date on the anaesthetic management of a patient with achondroplasty.

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