the site of maximal transport capacity for free amino acids in more than one species is distal (Matthews and Laster, 1965).

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References

Group B Streptococcus Meningitis in an Elderly Woman

We were interested to read Dr I. A. Harper’s account (July 1971) of group B streptococci as pathogens in the British Isles. The experience of this hospital group supports his view that the sparse literature does not reflect the incidence of infection, for group B streptococci are frequently isolated from clinical specimens and on occasion have a pathogenic role in chronic urinary tract infections, necrotic lesions, postpartum infections, and neonatal sepsis.

We recently observed a case of meningitis in an 80-year-old woman who was admitted to Bristol General Hospital having been found drowsy at home. After initial improvement she became pyrexial (38-2°C) and developed severe neck stiffness, a left facial palsy, and increased tendon reflexes on the left side. The ear drums and throat were normal and there was no sign of infection elsewhere.

The cerebrospinal fluid was white and opaque without xanthochromia. There were 600 leucocytes per cmm (73% neutrophils and 27% lymphocytes) and no red cells. The protein was 180 mg % and the glucose 80 mg %. A Gram-stained film showed many lanceolate Gram-positive cocci, mainly in pairs, and overnight culture yielded a heavy growth of beta haemolytic streptococci of Lancefield’s group B.

After three weeks’ treatment with benzyl penicillin the patient made a good recovery.

It has been observed that after the neonatal period group B streptococcal septicaemia usually occurs in the elderly (Butter and de Moor, 1967) but meningitis in adults has only rarely been reported. The eight cases we have been able to find in the literature are listed in the Table.

The two elderly patients in the series of Butter and de Moor were among 20 elderly patients with bacteraemia and most of these had underlying conditions similar to those listed for other patients in the Table. Our patient is unusual in that no such condition was demonstrated and no primary focus of infection with group B streptococci was found.

The Gram film appearances suggested pneumococcal meningitis, but fortunately the treatment for the two conditions is the same, since it appears that strains of group B streptococci from human sources are always sensitive to benzyl penicillin (Eickhoff, Klein, Daly, Ingall, and Finland, 1964).

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References

<table>
<thead>
<tr>
<th>Author</th>
<th>Date</th>
<th>Sex</th>
<th>Age</th>
<th>Underlying Conditions</th>
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</thead>
<tbody>
<tr>
<td>Rantz</td>
<td>1942</td>
<td>F</td>
<td>48</td>
<td>Laminectomy; removal of meningioma</td>
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<tr>
<td>Wheeler and Foley</td>
<td>1943</td>
<td>?</td>
<td>‘Adult’</td>
<td>'Postoperative'</td>
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<tr>
<td>Lazarus et al.</td>
<td>1965</td>
<td>F</td>
<td>56</td>
<td>Diabetes; infected lesion; chronic pyelonephritis</td>
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<tr>
<td>Butter and de Moor</td>
<td>1967</td>
<td>M</td>
<td>34</td>
<td>Otitis media</td>
</tr>
<tr>
<td>Butter and de Moor</td>
<td>1967</td>
<td>?</td>
<td>Elderly</td>
<td>(two patients)</td>
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<tr>
<td>Toft and Jespersen</td>
<td>1968</td>
<td>F</td>
<td>24</td>
<td>Pregnancy</td>
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<tr>
<td>Toft and Jespersen</td>
<td>1968</td>
<td>F</td>
<td>32</td>
<td>Diabetes; gangrenous lesion</td>
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</tbody>
</table>

Table Cases of streptococcal meningitis in the literature
Group B streptococcus meningitis in an elderly woman.

R S Wilson, G J Davies, C J Burns-Cox and D C Speller

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