Letter to the Editor

Bacteroides in the genital tract of non-pregnant females

We wish to report the preliminary findings of an investigation of the significance of bacteroides infections following gynaecological operations. Lederger et al (1971) considered most postoperative gynaecological infections were endogenous, and recently it has been demonstrated that most of these infections are caused by non-sporing anaerobes, most frequently bacteroides (Report, 1974).

We investigated the carriage of bacteroides in relation to the stage of the menstrual cycle in two selected groups of non-pregnant females. Patients seen for the first time in the gynaecological outpatient clinic were admitted to group 1, and all patients admitted to the gynaecological ward for elective surgery were admitted to group 2. High vaginal swabs were collected from each patient in both groups; cervical swabs were also collected from patients in group 1. These swabs were sent to the laboratory in transport medium and examined with standard bacteriological methods; Gram-negative obligate anaerobic bacilli which did not produce spores were accepted as Bacteroides spp.

Five-hundred and seventy-nine patients were investigated and they included 415 women of child-bearing age. The carriage rate of bacteroides in women of child-bearing age in groups 1 and 2 was 23% and 19% respectively, and 24-5% from postmenopausal women (table). In group 1, both high vaginal and cervical swabs were examined from each patient; in most instances, when bacteroides were present they were isolated from both swabs, and there was no evidence that either site of swabbing was more efficient than the other. In group 2, which is the group admitted to hospital for elective surgery, bacteroides was isolated most frequently in the first half of the cycle, whereas in group 1, which included women attending a gynaecological outpatient clinic, the incidence did not show a noticeable fall until the last week of the cycle.

This investigation indicates that, although the carriage of bacteroides may be related to the stage of the menstrual cycle, bacteroides can be isolated from the vagina throughout the cycle. This investigation does not support the findings of Neary et al (1973), who found the carriage of bacteroides was predominant in the first week of the cycle. It therefore appears unlikely that the incidence of postoperative bacteroides infection can be significantly reduced by a restriction of elective gynaecological operations to the second half of the menstrual cycle, as suggested by Neary et al (1973). The prophylactic use of metronidazole (Report, 1974) appears to be most effective in the prevention of these infections.

I. D. Farrell, D. N. Hutchison, and L. Robertson
Public Health Laboratory and Department of Microbiology, Royal Infirmary, Meadow Street, Preston PR1 6PS.

References

The table shows the carriage of bacteroides in the genital tract of non-pregnant females. Figures in parentheses are percentages. LMP = last menstrual period.

<table>
<thead>
<tr>
<th>Interval since LMP (weeks)</th>
<th>Group 1</th>
<th>Group 2</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>11/45</td>
<td>11/49</td>
<td>22/94 (23-5)</td>
</tr>
<tr>
<td>2</td>
<td>24/99</td>
<td>15/52</td>
<td>39/151 (26-0)</td>
</tr>
<tr>
<td>3</td>
<td>18/62</td>
<td>3/38</td>
<td>21/100 (21-0)</td>
</tr>
<tr>
<td>4</td>
<td>5/46</td>
<td>2/24</td>
<td>7/70 (10-0)</td>
</tr>
<tr>
<td>Total</td>
<td>58/252</td>
<td>31/163</td>
<td>89/415 (21-5)</td>
</tr>
<tr>
<td>Postmenopausal</td>
<td>18/74</td>
<td>22/90</td>
<td>40/164 (24-5)</td>
</tr>
</tbody>
</table>

[Table: Carriage of bacteroides in the genital tract of non-pregnant females]

Book reviews


This excellent handbook properly assumes that the majority of those engaged in the training of medical laboratory technicians have not had any formal instruction in education and that many of them have limited practical experience of teaching. Thus the book deals briefly but well with the theory and practice of instruction and gives clear and sound advice on the construction and delivery of lectures, on the use of visual aids, the arranging of practical demonstrations, and the moderating of group discussions and seminars. There is a useful and critical evaluation of examinations and other methods of assessment of learning with advice to examiners.

The importance of ensuring that what is taught is appropriate to the work to be undertaken by the various grades of technician is rightly stressed in the book, and indeed an annex contains an outline of the work and responsibilities of medical laboratory technicians. A sensible chapter gives consideration to the selection of student technicians and their initiation to laboratory procedure. Whereas the book is designed primarily for laboratory tutors, it is appreciated that such training is undertaken by senior technical staff in busy hospital laboratories. It is essential reading for senior technicians, and many pathologists could read it with profit.

J. Burston


This book is based on a postgraduate course for immunopathologists held in San Francisco in 1974. Many of the lecturers were distinguished investigators in various fields of immunology, and each contributed an essay on his particular subject. These are meant to introduce and stimulate interest in new approaches to the study of diseases. For instance, the section on immunoochemistry includes an article by E. C. Franklin, the discoverer of 'heavy chain disease', on how to investi-
Letter: bacteroides in the genital tract of nonpregnant females.

I D Farrel and L Robertson

doi: 10.1136/jcp.29.5.465-a

Updated information and services can be found at:
http://jcp.bmj.com/content/29/5/465.1.citation

**Email alerting service**

*These include:*

Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

**Notes**

To request permissions go to:
http://group.bmj.com/group/rights-licensing/permissions

To order reprints go to:
http://journals.bmj.com/cgi/reprintform

To subscribe to BMJ go to:
http://group.bmj.com/subscribe/