National Reyes Syndrome Foundation UK

TRUSTEES REPORT
EXTRACTS – 30 SEPTEMBER 1991

Significant events

1. Research:

Since the establishment of the Foundation in 1983, a sum in excess of £100,000 has been expended on research into Reye's syndrome. The trustees during the current year have committed a further £50,000 towards the funding of the project "Enzymological studies into the aetiology of Reye's syndrome – the role of aspirin." The project is being undertaken at the Queen's University of Belfast and is payable by the Foundation in six half yearly instalments of £8,333 commencing 1st April 1991.

A programme of future areas of research has been established in the light of:-

(a) past achievements
(b) completed research undertaken by the Foundation and
(c) present day knowledge available to the medical profession

2. Poster "Consider Reye's"

A decision by the trustees to update the poster "Consider Reye's" incorporating information relating to Reye-like syndromes. The purpose of the poster is to enhance medical awareness. It is intended that this poster should be made available as soon as practicable and sent to consultant paediatricians etc.

3. Surveillance of Reye's Syndrome

The publication of information by CDSC indicating that in 1991 the annual number of reported cases of Reye's syndrome in the United Kingdom was 26 compared with *50* in 1986, the year in which paediatric aspirin was withdrawn by the Committee on Safety of Medicines. Although now, only some two per cent of children admitted to hospital with feverish illnesses have been given aspirin by their parents nevertheless the trustees are firmly of the view that public education measures should continue. In pursuance of this objective the trustees propose to revise and update the Foundation's official leaflet as soon as practical.

National Reyes Syndrome Foundation UK

APPENDIX
BRITISH PAEDIATRIC SURVEILLANCE UNIT
5th ANNUAL REPORT
1990

Reye's syndrome

Surveillance began as a joint BPA-CDSC venture in August 1981 and case ascertainment was transferred to the BPSU in July 1986. Annual totals of reports for Reye's syndrome surveillance years (1 August – 31 July) 1981/82 – 1988/89 were: 39, 60, 90, 61, *50*, 47, 44, 31. A total 24 reports were received between 1 August 1989 and 31 July 1990. Of these, eight (33%) later had their diagnosis revised and for one case no further information was received.

Of the remaining 15 cases, the male to female ratio was 7:8. The ages ranged from 3.4 months – 15.5 years, with mean and median ages of 39.6 months and 8.4 months respectively. Outcomes were as follows: seven patients died, giving a case fatality rate of 47% (identical to that of 1988/89); four survived with neurological sequelae; three survived apparently normal and the outcome of one case is unknown.

Pre-admission medications were reported in five of the 15 patients; three had been given paracetamol, one paracetamol and metoclopramide and one an over the counter teething preparation. No patients had a history of pre-admission exposure to aspirin.

Fourteen patients resided in England and Wales and one in Scotland, with no confirmed cases coming from either Northern Ireland or the Republic of Ireland. No marked seasonal distribution could be discerned due to the small number of reports.

Among the eight cases in whom the diagnosis was revised the most common revision made was to one of the inborn errors of metabolism (five cases, mean age 12.7 months): fructose 1:6diphosphate enzyme deficiency, lactic academia, long chain acylcoenzyme A dehydrogenase deficiency, one unspecified inborn error of organic acid metabolism and one unspecified metabolic disorder. The other revised diagnoses were: viral encephalitis with pneumonitis; haemorrhagic shock encephalopathy syndrome; myocarditis.

The annual number of cases of RS continues to decline. The median age of patients has remained constant at 8.4 months (eight months in 1988/89) and once again this may be due to an increasing proportion of patients with unrecognised inborn errors of metabolism. The 1990/91 surveillance questionnaire has incorporated additional questions to determine the extent to which patients are investigated for inborn errors of metabolism. To date (May 1991) 17 reports have been revised for 1990/91 and of the 12 cases with follow-up information, six patients have revised diagnoses.

Dr S Hall, Ms L Newton – PHLS CDSC