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patients with chronic lumbosacral disc diseases as described in our study. We think there are important differences in pathophysiology. So far the testing of neuropathic conditions with heat pain stimulation has rarely resulted in strong evidence for hyperalgesic or hyperpathic changes. In a very recent publication,5 however, Wall gave a great number of examples of hyperalgesic changes produced by different kinds of neuropathies and he also pointed to the fact that a non-selective blockade of peripheral afferent impulses may lead to a "partial disinhibition" and, in consequence, to hyperalgesia. This is what seemed to have happened in our patients with chronic lumbosacral disc disease. That such an event might produce effects at the contralateral side appears not too speculative when the results of contralateral TENS-effects cited in our paper are considered. Taken together, we still believe that the conclusions drawn from the pilot study described are justified.

Finally, we want to answer the questions raised by Bowsher. Two patients were affected at the L5 root affection and 7 at the S1 root. We measured the thresholds at the medial (L5) and lateral (S1) side of the dorsum pedis, where the peripheral dermatomes are to be found, and verified the location of the dermatomes in the preceding neurogical examination. As Bowsher expected, the dermatones do normally not differ in warmth and pain sensitivity.

S LAUTENBACHER

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- 1 Strian F, Lautenbacher S, Galfe G, Hölzl R. Diurnal variations in pain perception and thermal sensitivity. *Pain* 1989;36:125-31.
- 2 Lautenbacher S, Strian F. Similarities in age differences in heat pain perception and ther-

mal sensitivity. Funct Neurol 1991:6:125-31. 3 Galfe G, Lautenbacher S, Hölzl R, Strian F. Diagnosis of small fibre neuropathy: computer-assisted methods of combined pain and thermal sensitivity determination. Hospimedica 1990:8:38-48.

4 Jensen TS, Bach FW, Kastrup J, Dejgaard A, Brennum J. Vibratory and thermal thresholds in diabetics with and without clinical neuropathy. Acta Neurol Scand 1991:84:326-33.

5 Wall PD Neuropathic pain and injured nerve: central mechanisms. Br Med Bull 1991: 47:631-43.

NOTICES

Tropical Neurology Symposium, London, 25 March 1993

The first Tropical Neurology symposium to take place in the United Kingdom will be held at Manson House, 26 Portland Place, London. It will be co-sponsored by the Tropical Neurology Research Group of the World Federation of Neurology jointly with the Royal Society of Tropical Medicine and Hygiene. It will be chaired by Lord Walton, Professor D Warrell, Professor N Wadia and Dr CM Poser.

Further details from: The Administrator, Royal Society of Tropical Medicine and Hygiene, Manson House, 26 Portland Place, London W1N 4EY. Telephone: 071-580 2127; Fax: 071-436 1389.

First Congress of the International Stereotactic Radiosurgery Society, Stockholm, Sweden

This congress will be held from 16-19 June 1993. Further information from The Con-

gress Secretariat ISRS 1993, Stockholm Convention Bureau, PO Box 6911, S-102 38 Stockholm, Sweden.

Ciba-Geigy \cdot ILAE \cdot IBE \cdot Epileptology Prize

Ciba-Geigy has agreed with the International League Against Epilepsy (ILAE) and the International Bureau for Epilepsy (IBE) to establish a new prize of SFr. 20.000. to be awarded in recognition of outstanding achievement in the field of epilepsy. The prize is designed to encourage applied human research in epilepsy. By cooperating with both ILAE and IBE, Ciba-Geigy emphasises that application for the prize is open to candidates from all fields of applied research.

Anyone outside the pharmaceutical industry who considers that he or she has made a significant scientific contribution in the field of epilepsy may compete for the prize. Deadline for submission is 15 January 1993.

Entries for the prize will be judged by an Adjudicatory Panel consisting of the Presidents and one further delegate each of ILAE and IBE, and an independent chairman.

The prize will be awarded at the opening ceremony of the International Epilepsy Congresses (for the first time in Oslo on 3 July 1993, and subsequently in Sydney in 1995).

For further details and a set of the rules and application forms, those interested should write to Mrs. G Haldemann, Ciba-Geigy Limited, CH-4002 Basel, Switzerland.

Correction

In the article by M Manford and SD Shorvon, Prolonged sensory or visceral symp-

toms: an under-diagnosed form of nonconvulsive focal (simple partial) status epilepticus (August 1992 issue of the jour-

nal), the figure was incorrect. The figure should have been as follows:

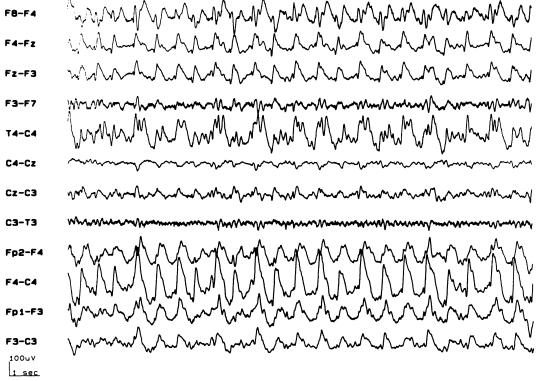


Figure Case 1: Standard 10–20 scalp EEG during a prolonged epigastric sensation, showing rhythmical slow activity, predominantly in the right frontocentral leads.