Some phenylalanine is necessary for positive nitrogen balance, approximately 15 mgm/kg per day. Milk contains 42 mgm phenylalanine per ounce, and the requisite amount of milk is added to the above diet. The older children get in addition vegetables, except pulses and potatoes, whose phenylalanine content is high. Biscuits made from sugar, gluten-free flour and kosher margarine are allowed as well as sugar confectionery.

Summary.

Two phenylketonurics are presented aged 3 years and 1½ years who have been on a phenylalanine restricted diet from earliest infancy. The motor and mental development of both these children is well within the normal range for their ages.

References


HAMARTOMA OF THE LUNG.

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Albrecht (1904) considered that a group of tumour-like structures existed whose characteristics justified their being separated from the true neoplasms. He introduced the class "Hamartoma," describing it as a tumour-like hypertrophy at the site of faulty tissue mingling of normal components of the organ. The abnormality may take the form of a change in quantity, arrangement or degree of differentiation, or may include all of these defects.

These tumours are usually described as being subpleural or at least peripheral, though they may occur, rarely, in the centre of a lobe or in the larger bronchi. They are nearly always single, lobulated, round, sharply separated from the surrounding lung tissue, and usually have a capsule which strips easily. The cut surface is white, avascular, is not anthracotic, and may have areas of cartilage or calcification.

Microscopically, areas of cartilage separated by connective tissue are found. There may be foci of epithelial tissue, resembling small bronchi, lined by simple cuboidal or columnar cells. Fibrous tissue, smooth muscle, bone and/or fat cells are sometimes present.

Incidence.

The incidence of this tumour is not easily determined as it may be very small, usually symptomless and, mostly, is found at post-mortem examination.

Goldsworthy (1934) stated that there were 45 hamartomas of the lung
recorded at that time and that Hickey and Simpson, reviewing the literature
in 1926, found 38 reports of it in man.

McDonald et al. (1945) reported 23 cases from the Mayo Clinic, 20 of which
were found incidentally at 7,980 autopsies. They concluded that this
tumour occurs once in 400 autopsies. Liebow (1952) gives the incidence
as approximately one in 400 individuals. Jones (1949) stated that there
were 132 reports of this tumour, but 25 of them represented abnormal
development of vascular components of the lung.

In 655 autopsies performed by the staff of this laboratory, no report of
hamartoma of the lung has been made.

Hood et al. (1953) reported that in a review of 156 solitary, circumscribed
lesions of the lung, removed surgically, 16 per cent. were hamartomas.

In 349 consecutive surgical specimens, examined in St. Kevin's Hospital
laboratories, which included lungs, lobes of lungs and segments of lungs,
a hamartoma was found in two instances. Obviously, this figure is not
comparable to that quoted by Hood et al., as those authors were concerned
only with solitary circumscribed lesions. This tumour is apparently not
uncommon in the U.S.A. or Scandinavia, but would appear to be rare in
this country. This paper reports the second of these two cases encountered
in the surgical material examined in the above laboratories.

Case History.

A woman, aged 50 years, was admitted to hospital on 15th August, 1958.
She had always felt perfectly well; but a routine chest X-ray showed a
round, solid lesion in the upper lobe of left lung. This was symptomless,