

## News

### **Second European Conference on Medicines Research: Perspectives in Clinical Trials**

This conference will be held on 5-6 December 1994 in Brussels and aims to review progress, needs and opportunities in all areas relating to multicentre randomised controlled clinical trials in obstetrics, perinatology, paediatrics, neonatology and geriatrics. For further information contact Janie Wardle, PO Box 806, Cottenham, Cambridge CB4 4RT, U.K. Tel. 0954 252516, Fax 0954 252517.

### **Second International Symposium on Drug Resistance in Leukaemia and Lymphoma**

This conference will be held in Amsterdam, Holland on 6-8 March 1995, the subject of which will be the clinical relevance of studies on drug resistance in both childhood and adult leukaemia and lymphoma. The aim is to review the current knowledge as well as to indicate future directions of studies on *in vitro* drug resistance and mechanisms of resistance for several classes of chemotherapeutic drugs in leukaemia and lymphoma. For further information contact Dr R. Pieters, Free University Hospital, Department of Paediatrics, De Boelelaan 1117, 1081 HV Amsterdam, The Netherlands. Tel. 20 444 2420, Fax 20 444 2422.

### **The 8th Paediatric Tumours Congress and New Trends in Medicine 1995**

This will be held on 1-5 May 1995 at Cukurova University Medical Faculty, Balcali, Adana, Turkey. For further information contact the Secretary of Congress, Assoc. Prof. Dr Atila Tanyeli, Department of Paediatric Oncology, Cukurova University, Medical Faculty, Adana, Turkey. Tel. 0322 3386060/3116, Fax 0322 3386906.

## Letters

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### **Salivary Glands Enlargement in Association With Cytosine Arabinoside Application in Patients With Acute Myeloid Leukaemia**

**P. Cetkovský and V. Koza**

CYTOSINE ARABINOSIDE (AraC), an effective antineoplastic agent, can produce a number of adverse reactions [1,2]. Recently published case reports have described acute bilateral parotitis during chemotherapy for acute leukaemias using regimens containing continuous infusion of AraC [3,4]. We report two examples of this rare complication of AraC.

A 36-year-old male with acute myeloid leukaemia (AML), received remission induction chemotherapy consisting of daunomycin (60 mg/m<sup>2</sup>/day on days 1-3) and AraC (200 mg/m<sup>2</sup>/day in continuous infusion on days 1-7). On day 5 of the therapy, the patient noted swelling in the parotid and submandibular regions associated with pain and tenderness. Salivary secretion was not altered, and examination of the ears, nose, throat and oral cavity revealed no abnormalities apart from parotid and submandibular gland swelling.

The serum amylase level was increased 4-fold. Chemotherapy was completed in 2 days, and the swelling, pain and raised amylase level disappeared promptly after discontinuation of the cytotoxic treatment. The patient received further treatment on day 21 with AraC (1000 mg/m<sup>2</sup>/day in 6-h infusion on days 1-6) and idarubicin (12 mg/m<sup>2</sup>/day on days 1-3). During and after this regimen, no swelling or discomfort in salivary glands was observed.

The second patient, a 16-year-old male suffering from AML received the same remission induction regimen. On day 4 he developed acute bilateral painful enlargement of the parotid and submandibular glands. The serology for mumps virus was negative and clinical examination of the ears, nose, throat and oral cavity revealed no pathology. The serum amylase level was increased 6-fold and normalised within 1 week. After discontinuation of the therapy, the discomfort disappeared but the swelling was present until day 20, when it spontaneously resolved in 2 days. On day 25, the patient received a first post-remission course consisting of AraC and mitoxantrone. There was no enlargement of salivary glands.

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