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All test results should be reported By Peter H. Gott, M.D.

DEAR DR. GOTT: In your practice, do you routinely give negative test results to your patients, or just results that are outside normal ranges? I find it disconcerting to pay for a test, then hear nothing from the doctor.

DEAR READER: I routinely report ALL test results, positive and negative, to patients.

I do this because I believe patients deserve the courtesy of a follow-up, not simply a telephone call if something is amiss.

I know that many doctors report only abnormal (positive) findings. This is pretty standard policy because it is easier for busy practitioners. But I don't agree with it. Since patients are paying for the tests (and worry about the outcomes), they should be informed of the results.

There's also a practical consideration. Not hearing about your test may mean that it was OK - or that the lab lost it and never reported it to the doctor. This glitch was brought home to me early in my practice when I thought I was being smart and "modern" to give only positive results. I'd done a Pap test on a woman and told her I would report any abnormality. I took the slide to the lab ... and promptly forgot about it. Three weeks later, the patient called back to check on the results. I didn't have them; the lab had mislaid the slide. It taught me not to assume that the test had reached the lab.

Therefore, I now report results and, I tell patients, if they don't hear from me within a week, call and bug me. It works. And, as you say, it's less disconcerting for patients.

For more information, I'm sending you a copy of my Health Report "Choosing a Physician." Other readers who would like a copy should send \$1.25 and their name and address to P.O. Box 91369, Cleveland, OH 44101-3369. Be sure to mention the title.

DEAR DR. GOTT: My 6-year-old daughter has been getting boils on different parts of her body since she was a year old. What starts out as a little

pimple swells with liquid and becomes very painful before it bursts and disappears. Then a dark spot remains. Several skin specialists have been unsuccessful in helping.

DEAR READER: Recurring skin lesions that start as blisters or boils can be caused by a variety of afflictions, some of which are common (such as staph infection) and others which are unusual (such as pemphigus).

Staph infection typically causes crops of large, pus-filled pimples. Because the diagnosis is easily established (by growing and identifying bacteria within the sores), I suspect that this is not your daughter's problem.

Pemphigus, a rare skin disorder in children, is caused by an autoimmune reaction (self-allergy) that a person develops to his or her own skin. It is marked by the periodic development. of large, fluid-filled blisters that eventually burst, leaving denuded and crusted areas. Pemphigus must be differentiated from other skin disorders that cause bullae (blisters), such as drug allergies, viral infections and other unusual forms of dermatitis. This disease can be serious if large areas of skin are involved, but is often successfully treated with cortisone drugs.

Since your daughter's problem has stumped the experts, I advise you to take her to the dermatology clinic at a teaching hospital. In such a setting, specialists have experience in diagnosing unusual skin ailments.

Also, in a teaching hospital, ultramodern methods of diagnosis are available. Let me know what happens.

DEAR DR. GOTT: What are the symptoms of cat scratch fever? Sometimes when I play with our cat, she will scratch me. This is occasionally followed by a cold and diarrhea. Is this from our cat or another source?

DEAR READER: The cold and diarrhea come from another source.

Cat scratch disease is a harmless infection caused by a break in the skin from a cat scratch. The ailment is characterized by a pimple at the site of the scratch, followed by painfully swollen lymph glands near the pimple. If the scratch is on the hand or arm, the glands in the armpit may swell; if the pimple is on the leg, the glands in the groin may become uncomfortable. Fever, headache and malaise (feeling ill) may accompany the disease, which usually subsides within a few weeks. The antibiotic tetracycline may aid recovery. Rarely, patients may develop complications of cat scratch disease including encephalitis (brain infection) and osteomyelitis (bone infection).

To my knowledge, diarrhea and cold symptoms are unrelated to cat scratches. DEAR DR. GOTT: My 32year-old daughter is a manic depressive. Three to four times a year she finds herself unable to cope. She just wants to "run away." Please don't tell me to talk to our family doctor. She just isn't any help. I need guidance.

DEAR READER: Manic depression, now known as bi-polar mood disorder, consists of cyclic emotional swings of excitement and euphoria alternating with depression. The condition probably has a biochemical basis and is easily treated with medicine, such as lithium, under medical supervision. The problem is getting patients to take the medicine; during the euphoric phase, they think they don't need it and during the depressed period, they don't care.

Your daughter seems to know something is wrong, yet she may be afraid or unwilling to be seen by a professional. I suggest that you seek the services of a psychiatrist in your community, or look for help from another, doctor who is familiar with mood disorders. Your family doctor, a community social service agency or a municipal mental health center can advise you where to find assistance. With the appropriate resources backing you up, you can encourage your daughter to get help-rather than running away.

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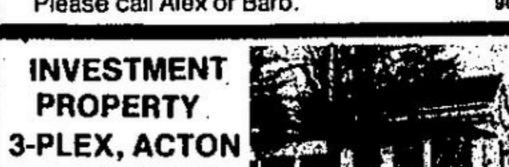
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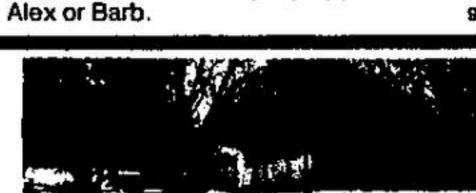
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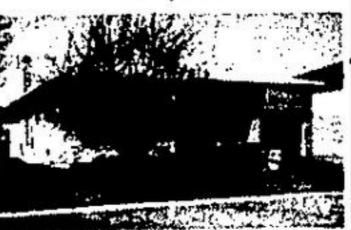
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