We could easily have included known activators of complement (e.g., zymosan or sephadex particles). This would be relevant in quantifying the potential for complement activation of poly(L-lactide) pins compared to other materials, which was not the scope of our short report.

It is not at all surprising that in heparinized plasma incubated at 37 °C for 2 h, the C5a levels may be in the range described in our paper, possibly due to some inherent enzyme activity when blood is withdrawn into syringes or tubes. Similarly, the C5a level in serum is higher than in plasma because of enzymatic activity induced during coagulation. To illustrate this effect in serum, we have found C5a levels in sera incubated at 37 °C for 30 min in the range of 15–70 ng/mL (Bergh et al. 1993), whereas C5a levels in the EDTA-plasma of healthy individuals are in the range of 6.4–18.8 ng/mL (Bergh and Iversen 1992).

Although the total number of reports on the biocompatibility of poly(L-lactide) is large, we believe that complement activation has not been satisfactorily investigated. Taking into account the not inconsiderable number of reports on inflammatory complications in patients, we disagree with Dr. Mainil-Varlet and suggest further studies on the complement activating potential of poly(L-lactide) pins. In particular, such studies should be performed at various stages during polymerization of the material. Moreover, studies of complement-activating potential of material removed during its biological degradation would be relevant.

Agnar Tegnander and Kåre Bergh
Departments of Orthopedics and Microbiology
Trondheim University Hospital
N-7006 Trondheim, Norway

References

Simmonds' test

Sir—I read with interest the review by Professor Gillquist on the book “Sports Injuries, Mechanisms, Prevention, Treatment” by F H Fu and D A Stone.

It seems that the error in the book regarding the correct denomination of the Thompson test for Achilles tendon rupture has not been corrected. In the original book, it is described as “Thomas test”, in the review as “Thomsens test”.

Given the history of the test, the correct denomination should be Simmonds’ test. In the article on the topic of diagnosis of the ruptured Achilles tendon published 5 years before the Thompson papers (Simmonds 1957), Dr. Simmonds described the “calf squeeze test”.

Drs. Thompson and Doherty published jointly a paper exclusively dedicated to such a test in 1962 (Thompson and Doherty). Essentially the same article was published by Dr. Thompson on his own in the same year in Acta Orthop Scand (Thompson 1962).

To maintain some degree of historical accuracy, I teach my residents to describe the test as “calf squeeze test” and ascribe it to Dr. Simmonds, while telling them about the work by Drs. Thompson and Doherty.

Nicola Maffulli
Department of Orthopedics and Traumatology
The Chinese University of Hong Kong, Faculty of Medicine
Room 74002, Clinical Sciences Building
5th Floor, Prince of Wales Hospital
Shatin, New Territories, Hong Kong

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