the induction of skin changes by tar and the occurrence of pigmentation within this change. Nearly all of the series of 111 patients seen by Gotz showed pigmentation that progressed with duration of exposure.⁷ In both human and animal systems it has been shown that tar products will stimulate melanogenesis, 10 and one of the clues to aetiology in this particular case was the intense pigmentation that presented in these lesions. It was much denser than one finds in multiple seborrhoeic keratoses and coupled with the glistening papular nature of the lesions was a clue to the aetiological factors.

Treatment was with curettage and diathermy under local anaesthetic and was particularly effective because these lesions were not aggressive tumours. None of the lesions was deeply invasive and all remained discrete.

Throughout the period of observation new tumours continued to form but they could be adequately suppressed by regular two monthly sessions of treatment.

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 respiratory" for all categories should read 82, 121 ft. 115. 123. 151. Under "other circulatory" the No for formation. In: Rook A, ed. Recent advances in dermatology.

Correction

Mortality of men in the Rhondda Fach 1950-80 (November 1985)

The following corrections should be made to two tables on p 743. In table 6 the SMRs under "other

115, 123, 151. Under "other circulatory" the No for category 0 should read 184. The SMRs under "other" should read 92, 92, 73, 86, 85. In table 7 the SMRs for category 0 should be 125 for "violence etc" and 152 for "stomach". should read 92, 92, 73, 86, 85. In table 7 the SMRs for