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prognosis. Such cases were excluded from our study but there may be others which do well if left unpaced. Bergfeldt and Möller found an unexpectedly high frequency of HLA B27 in male patients with heart block (17% *vs* 6% of controls).³ Electrophysiological studies showed that the block was predominantly located in the atrioventricular node and follow up indicated that pacemaker implantation was not always necessary.⁴ In 1980 we looked at the HLA types of 60 patients with heart block but found only five with HLA B27 (three out of 42 males and two out of 18 females). Nine of those typed had second degree atrioventricular block but none was positive for HLA B27. Nevertheless, further HLA typing, perhaps including the D locus, might prove worth while especially if combined with cardiac electrophysiological studies.

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- 2 Guimond C, Puech P. Intra-His bundle blocks (102 cases). *Eur J Cardiol* 1976;4:481-93.
- 3 Bergfeldt L, Möller E. Complete heart block—another HLA B27 associated disease manifestation. *Tissue Antigens* 1983;21:385-90.
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Notice

British Cardiac Society

The Autumn Meeting will be held at the Wembley Conference Centre, London, on 25 to 27 November 1986, and the closing date for receipt of abstracts will be 11 July 1986.