

- topenia: clinical, hematologic, and serologic response of dogs to *Ehrlichia canis* infection, tetracycline therapy, and challenge inoculation. *J Infect Dis.* 1974;130:357-367
6. Keefe TJ, Holland CJ, Salyer PE, et al. Distribution of *Ehrlichia canis* among military working dogs in the world and selected civilian dogs in the United States. *J Am Vet Med Assoc.* 1982;181:236-238
 7. Rapmund G. Rickettsial diseases of the Far East: new perspectives. *J Infect Dis.* 1984;149:330-338
 8. Edwards MS, Jones JE, Leass DL, et al. Childhood infection caused by *Ehrlichia canis* or a closely related organism. *Pediatr Infect Dis J.* 1988;7:651-654
 9. Taylor JP, Betz TG, Fishbein DB, et al. Serological evidence of possible human infection with Ehrlichia in Texas. *J Infect Dis.* 1988;158:217-220
 10. Rauch A. Kawasaki syndrome: review of new epidemiologic and laboratory developments. *Pediatr Infect Dis J.* 1987; 6:1016-1021

ERRATA

The title of the Letter to the Editor (*Pediatrics* 1989;83:1078) "Breed or Meadow?—Munchausen or Münchhausen?" should have been "Sneed or Meadow?—Munchausen or Münchhausen?"

In a Letter to Editor (*Pediatrics* 1989;83(suppl):639-640) the following letter was misprinted and it is repeated here.

CHEST PAIN IN AN ADOLESCENT: THINK OF COCAINE!

We appreciate Dr. Schwartz' thoughtful comments about our article.¹ Our failure to mention cocaine abuse in the discussion of chest pain was an oversight. previously, I reported the case of an adolescent who presented to our Emergency Department with acute, severe chest pain from cocaine abuse.² This teenager presented long after completion of our study of 407 children with chest pain, even after our manuscript was first drafted. We were surprised by his presentation, and by the fact that no others like him had presented during our one year study period. I think it is unlikely that we missed any cocaine abusers in our group of patients with "idiopathic" chest pain. As noted previously, cocaine can cause tachycardia, pneumothorax, hypertension, and coronary artery spasm with myocardial infarction.^{2,3} Thus, those with subsequent chest pain will undoubtedly have acute, severe chest pain and physiologic changes. These children would have been evaluated in our Emergency Department with electrocardiograms and further studies.

I agree that a drug history and toxicologic screening for cocaine abuse should be obtained for all adolescents with severe chest pain of sudden onset. This should even be considered for some younger children as drug abuse has become more widespread in our society. However, I do not think a drug screen is indicated for all children with idiopathic chest pain, especially if their pain is chronic and the physical findings are normal.

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REFERENCES

1. Selbst SM, Ruddy PM, Clark et al: Pediatric chest pain: a prospective study. *Pediatrics.* 1988;82:319-323
2. Woodward GA, Selbst SN: Chest pain secondary to cocaine use. *Pediatr Emerg Care.* 1987;3:153-154
3. Lugue MA, Cavallaro DL, Torres M, et al: Pneumomediastinum pneumothorax, and subcutaneous emphysema after alternate cocaine inhalation and marijuana smoking. *Pediatr Emerg Care.* 1987;3:107-109

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Steven M. Selbst
Pediatrics 1989;84;582

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