

shoulder osteomyelitis was due to re-infection rather than recurrence of his previous infection.

### Discussion

Given the absence of a travel history, *S. Typhi* was almost certainly acquired from a carrier or an asymptomatic case in the local community. All household contacts were negative on screening. The recent Health Protection Agency enhanced surveillance study of enteric fever reported that 6.5% (26/399) of enteric fever patients did not travel outside the UK before their illness.<sup>1</sup> Lack of a travel history therefore does not preclude a diagnosis of typhoid fever. This case highlights several other aspects of *Salmonella* enterica serovar Typhi infection; not least the importance of taking blood cultures prior to empirical antibiotics but also its potential to cause osteomyelitis and a subsequent abscess.

### Acknowledgements

Laboratory of Enteric Pathogens at the Centre for Infections, Health Protection Agency, 61 Colindale Avenue, London, NW9 5EQ (Elizabeth de Pinna and John Wain).

### Reference

- 1 Health Protection Agency. *Pilot of enhanced enteric fever surveillance in England, Wales, and Northern Ireland: 1 May 2006–30 April 2007*. London: HPA, 2008. [www.hpa.org.uk/web/HPAweb&HPAwebStandard/HPAweb\\_C/1206575041900](http://www.hpa.org.uk/web/HPAweb&HPAwebStandard/HPAweb_C/1206575041900) (accessed 26 February 2009).

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## Corrigendum

Gangopadhyay KK, Gupta R, Baskar V, Gautam N, Toogood AA. With a pinch of salt. *Clin Med* 2010;10:86–7.

Please note there are two amendments to this ‘Lesson of the month’ as follows:

1. The first sentence of the summary reads ‘This report highlights a case of severe hyponatraemia **secondary to excessive sweating – poor fluid consumption** and low salt diet in hot conditions.’ It should read ‘This report highlights a case of severe hyponatraemia **secondary to excessive sweating and salt poor fluid consumption** and low salt diet in hot conditions’
2. The second paragraph of the discussion reads ‘Hyponatraemia secondary to **excessive salt and poor fluid ingestion** is now being recognised as a cause of morbidity and mortality among athletes and in the military (where inadequate dietary salt intake in hot countries could be another factor) but is not well appreciated outside these communities.’ It should read ‘Hyponatraemia secondary to **excessive salt poor fluid ingestion** is now being recognised as a cause of morbidity and mortality among athletes and in the military (where inadequate dietary salt intake in hot countries could be another factor) but is not well appreciated outside these communities.’