ENDOSCOPY UPDATE—1980

The American Society for Gastrointestinal Endoscopy postgraduate course "Endoscopy Update—1980," will be held on Thursday and Friday, May 22 and May 23, 1980 in Salt Lake City, Utah. The one and one-half day course will emphasize new concepts and advances in gastrointestinal bleeding, ERCP, papillotomy, and colonoscopy. Formal presentations and panel discussions will take place in the mornings. The afternoon session will be divided into videotape sessions of colonoscopy, colonoscopic polypectomy, ERCP, and papillotomy. Distinguished faculty will provide indepth commentary dealing with each endoscopic technique. The other half of the afternoon session will be composed of small group seminars. A distinguished faculty has been assembled to present the course. The Course Director is Francis J. Tedesco, M.D. and Assistant Course Director is Joseph W. Griffin, Jr., M.D.

For further information, contact the A.S.G.E. Postgraduate Registration Supervisor, Charles B. Slack, Inc., 6900 Grove Road, Thorofare, New Jersey 08086. Telephone (609) 848-1000.

AMERICAN MOTILITY SOCIETY MEETING

The first meeting of the American Motility Society will be held in Tucson, Arizona on October 27-28, 1980. These meetings will be held every other year, alternating with the International Motility Meeting. Abstract forms and additional information can be obtained from Dr. Tom Burks, Department of Pharmacology, College of Medicine, Arizona Health Science Center, University of Arizona, Tucson, Arizona 85844. Abstracts should be submitted to Dr. Burks by June 15, 1980. If possible, all abstracts will be presented.

A course on "Practical Applications of Clinical Esophageal Motility" will be held on October 26, 1980. Course Directors are Walter Hogan and W.J. Dodds. Fee: \$100. Seats are limited. Please address inquiries to: W.J. Hogan, MD, Department of Gastroenterology, 8700 W. Wisconsin Avenue, Milwaukee, Wisconsin 53226.

ERRATUM

Two errors appeared in Table 3 of a paper by Craig et al in a previous issue of this journal.* The table, in its correct form, is printed here.

TABLE 3. GALLBLADDER DISEASE BY INDEPENDENT CLINICOPATHOLOGICAL CRITERIA*

	All patients	Patients with nonvisualized gallbladders	
		$CC < 3.5 \mu M$	$CC > 3.5 \mu M$
Normal	37	0	11
Abnormal	10	8	2
Indeterminate	11	6	5

^{*}Patients with nonvisualized gallbladders categorized by knowledge of gallbladder disease according to independent clinicopathologic criteria and by serum cholate conjugate levels. Note that all patients with known normal gallbladders failed to visualize when the cholate conjugate level was greater than 3.5 μ M.

^{*}Craig RM, Caster M, Cochrane C: Serum bile salts as an aid to oral cholecystogram interpretation. Dig Dis Sci 24:583-587, 1979