who kept records of employees' distinguishing marks. With this information it was ascertained that the patient had a criminal record and had been admitted to many hospitals using at least five aliases, usually presenting with haemoptysis, both in this country and abroad. He had recently been deported from Holland.

He was finally persuaded to have an HIV test. It proved negative, and the patient was confronted; he admitted using a false name (the name of a Liverpool footballer), and agreed to give his real name, giving the name of another Liverpool footballer. He was discharged.

Throughout his admission the patient was treated cautiously, in case he did have AIDS or a psychiatric condition causing him to believe he had AIDS (Miller *et al*, 1985). This case, we believe, represents a particularly difficult and disruptive variant of Munchausen syndrome, because AIDS induces great anxiety in the staff involved with the patient's care and requires the institution of recommended precautionary measures (Fenton, 1987). In view of the special attention to the patient and the sympathetic approach required, one might expect AIDS to appeal to Munchausen patients. In this case, a fairly typical example of the syndrome, the disruption caused was maximised by our particular difficulty in finding any information about the patient. This surely adds further weight to the argument for a centralised register of Munchausen patients to allow earlier detection (Jones & Horrocks, 1987).

J. McDONALD
K. WAFER

Rainhill Hospital
Prescott
Merseyside L35 4PQ

References

FENTON, T. W. (1987) AIDS-related psychiatric disorder. *British Journal of Psychiatry*, **151**, 579–588.

JONES, J. & HORROCKS, F. (1987) Fictitious epilepsy associated with amnesia. *British Journal of Psychiatry*, **150**, 257–258.

MILLER, D., GREEN, J., FARMER, R. & CARROLL, G. (1985) A pseudo-AIDS syndrome following from fear of AIDS. *British Journal of Psychiatry*, **146**, 550–551.

Corrigenda

Journal, December 1988, **153**, 850 (R. J. Russell). On the fifth line, "current" should read "voltage".

Journal, September 1988, **153**, 355 (R. Manchanda *et al*). On the third line, ". . . patient (see Fig. 1, patient 1)" should read ". . . patient (their patient 1)".

https://doi.org/10.1192/S0007125000174537 Published online by Cambridge University Press