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If the translocation had taken place before DNA replication, the chromosome that lost a segment to the No. 22 would be detectable as shorter and/or as showing an abnormal fluorescence pattern.

Trisomy 22 and the possibility of the marker being an isochromosome could be definitely ruled out by the fluorescence banding patterns. Unfortunately this analysis did not disclose which chromosome was involved in the translocation with the No. 22. Since, on the other hand, the clinical features in our patient are not in agreement with any recognized trisomy syndrome, the segment translocated to chromosome 22 remains unidentified.

We think that it is reasonable to conclude that the obvious chromosomal imbalance must have had some deleterious effect on fetal development; however, in view of the patient's gestational and neonatal history, it is not possible to decide which manifestations are due to the chromosome defect and which are due to environmental effects.

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Announcements

The next **Birth Defects Conference** will be held at the Newporter Inn, Newport Beach, California from 16-20 June 1974 under the joint sponsorship of The Harbor General Hospital Campus of the UCLA School of Medicine and The National Foundation March of Dimes. Topics for discussion will include: heritable disorders of connective tissue; epiphyseal dysplasias; mucopolysaccharidoses; new malformation syndromes; hypogonadism and genital tract malformation syndromes; new chromosomal syndromes and fetal visualization, and sampling techniques (fetoscopy). Further information can be obtained by writing to: David L. Rimoin, MD, PhD, Harbor General Hospital, 1000 West Carson Street, Torrance, California, 90509, USA.

The **Teratology Society** will hold its 14th annual meeting on 7-10 July 1974 at the Totem Park Conference Center, University of British Columbia, Vancouver, British Columbia, Canada. For further information, write to James R. Miller, PhD, Department of Medical Genetics, University of British Columbia, Vancouver, British Columbia, Canada.