a case for such treatment in every variety of the disease, save perhaps in early cases which may go into remission spontaneously. Severe progressive rheumatoid arthritis provides many difficulties, but good results may be achieved, and in the long-standing crippled cases a combination of hormone therapy and orthopaedic treatment should be considered. They have also been impressed with the action of these drugs in scleroderma.

They conclude by stating that cortico-suprarenal hormone therapy has become a part of current practice for rheumatic conditions, both acute and chronic. They believe this to be warranted by the good results obtained, as compared to the ineffectiveness of other treatments, but feel disquieted because of the risks which are run when these drugs are used, and the uncertainty, as yet, of the long-term results. They stress the need for further research, particularly on mixed courses of cortisone and ACTH, the combination of chryso- and hormone therapy, and the local use of hydrocortisone. OSWALD SAVAGE.

Les Rhumatismes en Médecine et dans la Société. By François Françon. 1952. Pp. 158. Editions Universelles, Paris.

This pocket edition was written with the intention of presenting rheumatism and its social aspects to the non-specialist and to the cultured public.

The difficulties of a comprehensive classification of the rheumatic diseases are fully discussed in the introduction. The author, however, comes to a compromise by closely following the nomenclature recommended by the Rheumatism Commission of the French Ministry of Health (Paris, 1937), which is in many ways similar to the British classification suggested by the Royal College of Physicians in England. A useful table is then drawn under sixteen headings of the differences existing between the inflammatory and degenerative forms of rheumatism. Rheumatic fever (*maladie de Bouillaud*) is fully described, and its classical treatment by salicylates is discussed at length. The uses of ACTH and cortisone, and the prophylactic application of sulphonamides and penicillin, are briefly reviewed.

The chapter on the chronic forms of rheumatism gives to the reader a very good clinical picture of the different grades of rheumatoid arthritis, and treatment is discussed under the headings of internal medication, hygiene, diet, physical methods and orthopaedic measures. Though ACTH and cortisone may have their uses, gold remains the only drug which has stood the test of time.

Ankylosing spondylitis is included with Still's disease, and psoriatic arthritis as a sub-variety of rheumatoid arthritis. The plan of treatment here is slightly too rigid. The use of a full plaster of paris jacket for several months would not be approved by many rheumatologists.

Tuberculous rheumatism, a French concept, is described as a clinical entity, a point of view which is hardly accepted in England and is rejected in America.

The available space has not permitted a description of the degenerative types of arthritis, but for those who can read French, this excellent little book will be found to be a helpful reference for diagnosis and treatment.

M. H. L. DESMARAIS.

Report on an Enquiry into the Aetiological Factors associated with Rheumatoid Arthritis. Prepared by E. Lewis-Faning. *Annals of the Rheumatic Diseases*, Suppl. Vol. 9, 1950. British Medical Association, London. (7s. 6d.)

The Empire Rheumatism Council's statistical investigation into thirteen possible aetiological factors and thirteen clinical features of rheumatoid arthritis was published in a special supplement to the *Annals of the Rheumatic Diseases* in 1950. The investigation entailed the detailed study of 532 cases and 532 controls and the analysis of the results. It was a time-consuming and expensive venture, unique in this field, and produced many interesting facts, invaluable to further workers, though perhaps disappointing in the lack of dramatic findings. The conclusions of this report occasioned a spate of critical correspondence, disagreeing with the negative findings on certain aetiological factors. Such unexpected negative findings are very valuable, as they cause people to think again, though they do not prove that these factors have no effect whatsoever on the rheumatoid state.

The sex incidence was 100 males to 162 females, and it was found that the risk of developing the disease rose between the ages of 20 and 50 years. One of the surprising features was the absence of significant increase in psychological trauma in the patients as compared with the controls. There was no tendency to association with allergic disease, but focal sepsis was slightly more common in the rheumatoid group. A familial tendency was statistically proved. 24 per cent. of cases had commenced at the menopause. In considering working and home conditions, cold appeared as the only factor which tended to increase the risk of rheumatoid arthritis. Peripheral vascular instability occurred in nearly five times as many rheumatoids as controls, and frequently antedated the onset of the arthritis.

Undue fatigue, loss of weight, transient pains, and sweating were frequent prodromal symptoms. The onset was febrile in 14 per cent. and acute in 44 per cent.; 81 per cent. consulted their doctor within 3 months of the onset of symptoms. 12 per cent. of the rheumatoid cases had nodules. Only 7 per cent. had normal sedimentation rates.

These are some of the findings discussed in the Report, which should be studied in full. G. D. KERSLEY.

Rheumatic Fever. A symposium edited by Lewis Thomas. 1953. Pp. 349, 56 figs, 59 tables. University Press, Minnesota. Geoffrey Cumberlege, London. (80s.)

This is the report of the 29 papers and the consequent discussions which were contributed to a symposium held at the University of Minnesota in November, 1951. The publication of such symposia is an increasingly common practice which often lacks adequate justification. Sometimes the delay in publication is so great that the rapid advance of research has raced ahead of the contributors; sometimes the real merit of such symposia lies in the free exchange of ideas between writers in separate but contiguous fields and the printed page fails to recapture the