Encore

Lipocortin 1 production and hydrocortisone

A report from Bath (one of the authors is called Godolphin—a name steeped in Cornish history) showed that the production of the anti-inflammatory protein lipocortin 1 by plasma and peripheral blood leucocytes was greatly increased by hydrocortisone. It is clear that therapeutic doses of the drug can rapidly increase the concentration of this anti-inflammatory protein. The implications are considerable. *Lancet* 1990; 335: 1416–8.

Nasal cocaine usage

A case report describes lesions in the nose and oropharynx of a 36 year old white man who was a heavy user of nasal cocaine. The lesions looked very like Wegener's granulomatosis, but biopsy did not show any vasculitis. Cocaine is abused much more commonly now—be on your guard when a possible example of Wegener's disease comes your way. *J Rheumatol* 1990; 17: 838–40.

Progression of psoriatic arthritis

A study over a minimum of five years of patients with psoriatic arthritis showed that although treatment with gold, psoralen and ultraviolet light, retinoids, and intra-articular corticosteroid injections seemed to slow the rate of progression of the disease, sadly it failed to stop it. At the end of the study the proportion of patients with five or more damaged joints had doubled. Despite our best efforts it remains a progressively deforming arthritis. *J Rheumatol* 1990; 17: 809–12.

Eye complications in Behçet's syndrome

A letter from Israel describes a much lower proportion of patients with Behçet's syndrome who develop eye complications than that seen in Turkey. The HLA pattern may be different in the two countries, suggesting different subtypes. This certainly seems to be the British experience. *N Engl J Med* 1990; 323: 195–6.

Cyclical etidronate treatment in osteoporosis

I make no apologies for repeatedly drawing readers attention to the subject of osteoporosis. It is such a scourge of postmenopausal women and thus of increasing concern to rheumatologists. Intermittent cyclical etidronate treatment certainly seems worthy of a second look according to a group from the United States, and without side effects of oestrogen treatment. It significantly increases spinal bone mass and reduces the incidence of vertebral fractures. *N Engl J Med* 1990; 323: 73–9.

Still's disease and the adult

Although we are all familiar with the occasional development of Still's disease in some unfortunate children, we are less aware that it may also occur in adults. High dose corticosteroids often have to be used and the risk of complications with or without their use is high. A recent leader in the *Lancet* draws attention to this rare but troublesome disease in adults. Anyone who has had to deal with it knows just how troublesome it can be. *Lancet* 1990; 336: 92.

Lyme arthritis and HLA

Just a few patients with chronic Lyme arthritis do not respond to antibiotic treatment. Those with chronic arthritis are much more likely to be associated with HLA-DR4 than those with arthritis of short duration. A secondary associa-

tion with HLA-DR2 seems to exist too. These seem to determine the host immune response and the lack of effect of antibiotic treatment.

N Engl J Med 1990; 323: 219–23.

The future of rheumatology

A recent leader in the *Journal of Rheumatology* calls for a rethink about the way the specialty should evolve in the North American continent. The number of medical graduates there choosing rheumatology as a lifetime career has declined dramatically owing to many causes. A call is made for a much more systematised, multidisciplinary approach in recognised centres. There will be few dissenters from that approach on this side of the Atlantic.

J Rheumatol 1990; 17: 577–8.

Joint motion and calcium pyrophosphate dihydrate crystal arthritis

Experimental work on rabbit knees showed that immobilisation is worse for a joint than chronic crystalline inflammation. The authors suggest that this implies an optimum balance for patients with such an arthritis between rest and exercise. Clinical experience suggests that they are right.

J Rheumatol 1990; 17: 644–55.

Myocardial fibrosis and systemic sclerosis

Myocardial fibrosis in systemic sclerosis is associated with a poor survival. But how do we identify those at risk? A recent study suggests that this is indeed possible; it seems to be associated with microvascular coronary vasospasm—'myocardial Raynaud's phenomenon'. The clue seems to be in noting left ventricular dysfunction in the absence of other underlying causes.

J Rheumatol 1990; 17: 656–62.

Systemic lupus erythematosus (SLE), heart valve disease, and phospholipid antibodies

A recent prospective report in *Lancet* found that over one fifth of patients with SLE had valvular heart lesions. Only 2.9% of controls were similarly affected. Valve vegetations and mitral valve regurgitation were particularly associated with the presence of phospholipid antibodies. Only one patient required an operation, but a worrying proportion had cerebrovascular occlusions.

Lancet 1990; 335: 1541–4.

Hospitals and energy conservation

We are increasingly conscious that world fossil fuel reserves are only too finite, and the wasteful emission of carbon dioxide into the environment is to be deprecated. It is refreshing therefore to see a hospital development designed (even in murky Britain) using solar power, energy conservation, and attention to air quality. Full marks, and about time too one might add.

Hospital Development 1990; 6: 15–17.

Age and health care

Arthritis is much commoner over the age of 50 years. Medical care is increasingly costly and resources are finite: Should we use age as a criterion for rationing health care? The case has been seriously advanced that this should be so. A recent sounding board article in the *New England Journal of Medicine* strongly refutes the argument. I am relieved to hear it or we shall all approach old age with great fear.

N Engl J Med 1990; 322: 1813–6.

GEMAENNES