	<i>Eosinophilia alone</i>	<i>Eosinophilia + side effect</i>	<i>Side effect alone</i>	<i>No side effect or eosinophilia</i>
Raised IgE	9	8	2	3
Normal IgE	0	3	1	24

Resolution of side effect and fall of eosinophil counts and IgE levels were monitored in all patients on stopping gold. In 4 patients where gold therapy was reinstituted after a reaction, eosinophilia and raised IgE levels reappeared. Serial serum gold levels performed on all patients throughout the study confirmed the finding (Jessop and Johns, 1973) that these did not correlate therapeutic affect or the development of side effects to gold therapy.

It is concluded that these results support the concept that dermatological reactions to gold salts are mediated by a type 1 hypersensitivity response and that serial measurements of eosinophil counts and IgE levels may be a useful therapeutic guide to their development.

References

- Empire Rheumatism Council (1961) *Ann. rheum. Dis.*, 20, 335
DAVIS, P., EZEKOE, A., MUNRO, J., HOBBS, J. R., AND HUGHES, G. R. V. (1973) *Brit. Med. J.* 3, 679
JESSOP, J. D., AND JOHNS, R. G. S. (1973) *Ann. rheum. Dis.*, 32, 228

November 28–29 Annual General Meeting, Royal College of Physicians, London.

Notes

Articular Cartilage Symposium

Imperial College, London, September 2–6, 1974

The symposium was organized by Drs. G. E. Kempson, A. Maroudas, and B. O. Weightman for the Biomechanics Unit, Imperial College. There were 80 participants in the six sessions on the structure of articular cartilage, chemistry of matrix, metabolism, enzymes and degradation, functional properties, and pathogenesis of osteoarthritis. The symposium will be published by the *Annals* as Supplement 2 to Volume 34.

Heberden Society

Programme, 1975

- May 23 Clinical Meeting, Taplow, Berks.
June 1–6 8th European Rheumatology Congress, Helsinki, Finland.
October 3–4 Joint meeting with the Spanish Society of Rheumatology, Madrid.

Immunoglobulin levels during rubella in children suffering from Still's disease. By A. HOWARD, B. M. ANSELL, and R. POWELL (*The MRC Rheumatism Unit, The Canadian Red Cross Memorial Hospital, Taplow, Maidenhead, Berkshire*)

Previous work has shown that in children suffering from active Still's disease there is an increase in all the immunoglobulin levels, particularly IgG and IgA, which are significantly higher than in the control healthy children.

Ten inpatients, 9 girls and 1 boy, with active Still's disease developed rubella with a typical rash and significant rise in antibody titre. In all the immunoglobulin levels were known before the infection; further samples were obtained during the rubella and approximately weekly afterwards for up to 12 weeks. All the children showed an increase in IgM which began at day one or two in three of them, and in the remainder was evident by the end of the first week; it was maximum between the first and second weeks, rising to about three times normal and then fell steadily over the next 5 weeks. The IgG levels rose steadily from the infection reaching a maximum at 5 to 6 weeks, about the time the IgM was falling away. By 12 weeks the IgM was at preinfection levels in all and the IgG had returned to their previous levels in all except three.

From this small study, it appears that infection with the rubella virus in children suffering from Still's disease causes the same antibody response as found in healthy persons.