Thrombocytosis in giant cell arteritis

Sir,

The interesting paper of Bergström and colleagues¹ comes to the conclusion that thrombocytosis in giant cell arteritis is reactive to the inflammation present in this disease. We came by other ways to the same conclusion.²⁻⁴ We evaluated platelet counts in 146 cases of rheumatoid arthritis, in 43 cases of juvenile chronic arthritis (22 cases of juvenile rheumatoid arthritis 6 Still's patients, and 15 cases of juvenile mono-oligoarthritis), in 7 patients with Sjögren's syndrome, in 41 with progressive systemic sclerosis, in 11 with rheumatic polymyalgia with or without Horton's arteritis, in 29 with ankylosing spondylitis, in 34 with psoriatic arthritis, and in 17 with gout. In all the groups of patients, except for juvenile mono-oligoarthritis, we found mean platelet counts greater than those in control subjects $214\,500 \pm 32\,886/\text{mm}^3$ ($214 \pm 33 \times 10^9/\text{l}$) by the method of Palumbo and Dini⁵. A clear thrombocytosis was present only in a percentage of the patients of the different groups. In these thrombocytosis patients there was a higher disease activity. Furthermore, we found a positive correlation between ESR and platelet count, serum mucoproteins, and platelet count; and a negative correlation between serum iron and platelet

count. Therefore it is possible to assume that thrombocytosis is an inflammation index in rheumatic and connective tissue diseases. The researches of Bergström and colleagues are an elegant confirmation of this assumption.

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References

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Obituary

Philip John Russell Nichols, MA, DM, FRCP, DPhysMed

Dr Philip Nichols died on 8 September 1979 after a short illness due to a brain tumour. He was 55 years old. His principal appointments were consultant in rehabilitation medicine and director of Mary Marlborough Lodge at Oxford, and consultant adviser in rehabilitation medicine to the chief medical officer at the Department of Health and Social Security.

The life force determines that no one is indispensable, but the same thrust causes some to be irreplaceable. Such a man was Philip Nichols. His personality and his singular combination of talents had fitted him for an unusual range of contributions to the common weal, and no one person will be able to bridge the void that has been left.

Philip went to school at Christ's Hospital, Horsham, his 8 years there culminating in the award of an open exhibition to Exeter College, Oxford. This university provided all his undergraduate medical training, during the course of which Philip gained the Radcliffe Infirmary prize for medicine. The years 1942 to 1947 were exciting but unsettled,

and 2 particular experiences could well have contributed to qualities evident in later maturity—Philip was an all-round athlete, and he produced pantomime, activities calling for judgment, direction, a sense of timing, and the ability for flexible response to uncertainties in unfolding situations. Also noteworthy is that it is from this period that his long friendship with a student contemporary, Kit Wynn Parry, dates.

Within a year of qualification Philip was drafted into the Royal Air Force, in which service he made his career for the next 16 years until he retired with the rank of wing commander. However, before entry he had found time to write his first scientific paper, 'Those who are constitutionally fat die more quickly than those who are thin', which was published in the *British Medical Journal* in 1947. After serving as a unit medical officer for 18 months Philip then entered the field of his life's major work. An appointment at the RAF medical rehabilitation unit at Headley Court allowed him to act also as a clinical assistant in the department of physical