PostScript

MATTERS ARISING

Behçet's disease and thrombophilia

Surely the authors of the comprehensive review of Behçet's disease and thrombophilia¹ meant to cite the year 1937, not 1973, for Behçet's eponymic description of the disease. However, contrary to their statement, Behçet was not the first to describe the disorder that now bears his name. He was preceded by Shigeta in Japan (1924), Adamantiades in Greece (1931), and Whitwell in Great Britain (1934), probably also by Kurosawa, Lipschutz, and arguably even earlier by Hippocrates, among extant descriptions. Behçet deserves to have the disease named after him, however, because he was the first modern author to group the various ophthalmic, dermatological, and orogenital lesions together as a syndrome.

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- 1 Leiba M, Sidi Y, Gur H, Leiba A, Ehrenfeld M. Behçet's disease and thrombophilia. Ann Rheum Dis 2001;60:1081–5.

Authors' reply

The authors thank Dr. Ehrlich for his comments. Obviously an overlooked typing error led to the wrong year of Hulusi Behçet's first description in 1937, of the triad of recurrent oral aphthous ulcers, genital ulcers and uveitis as a single disease entity.

Because other reports cited by Dr Ehrlich, as well as a few others, were reports which did not group all the findings into one disease, we did not relate to them. These include Hippocrates as the first to describe fever, aphthous ulcerations, genital ulcerations, chronic eye ailment, loss of vision, carbuncles etc,¹ followed by Neumann in 1895,² Blüthe in 1908,³ Planner and Remenowsky in 1922,⁴ Gilbert in 1925,⁵ Adamantiades in 1931,⁶ Dascalopoulos in 1932,⁷ and Whitwell in 1934.⁸

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References

- 1 Feigenbaum A. Description of Behçet's syndrome in the Hippocratic third book of endemic diseases. Br J Ophthalmol 1956;40:355–7.
- 2 Neumann I. Die aphthen am weiblichen genitalen. Wien Klin Rundsch 1895;9:289–90.

- 3 Blüthe L. Zur kenntnis des rezidivierenden hypopyons. Heidelberg, 1908. (Inaugural thesis.)
- 4 Planner H, Remenowsky F. Beiträge zur kenntnis der ulcerationen am ausseren weiblichen genitalen. Arch Dermat Syphil Berlin 1922;111:162–88.
- 5 Gilbert W. Über chronische verlaufsform der metastatischen ophthalmie ("Ophthalmia lenta"). Arch Augenheilkd 1925;96:119–30.
- 6 Adamantiades B. Sur un cas d'iritis a hypopyon recidivant. Ann d'Oculist 1931;168:271–8.
- 7 Dascalopoulos N. Ann Oculist 1932;169:387.
- 8 Whitwell GPB. Recurrent buccal and vulval ulcers with associated embolic phenomenon in skin and eye. Br J Dermatol 1934;46:414–19.

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BOOK REVIEW

Treatment of rheumatic diseases: a companion to Kelley's textbook of rheumatology

Eds M H Wiseman, M E Weinblatt, J S Louie. (Pp 563; \$129.) London: Saunders, 2001. ISBN 0-7216-8464-5.

The excitement of the immense progress in patient management in chronic rheumatic diseases that has been made since the first edition in 1995 is felt throughout these pages. The second edition of *Treatment of rheumatic diseases: a companion to Kelley's textbook of rheumatology* provides excellent reviews of our improved understanding of cellular and molecular mechanisms in the pathogenesis of

inflammation and autoimmunity, accurate summaries of recent treatment trials in the various rheumatological disorders, reasonable and logical conclusions from the trials with an emphasis on the daily clinical importance, and comprehensive up to date knowledge of the management of patients with rheumatic diseases. Well written, inspiring and easy to read, it is valuable for both clinicians in primary care and specialists in rheumatology. Undoubtedly, it is a worthy companion to *Kelley's textbook of rheumatology*.

The predominantly American authorship of the book is the reason for a distinct bias in the approach to patients with rheumatic diseases which, however, is rarely a major problem. The 22 chapters from the previous edition are rewritten, and 18 new chapters have been included. Three main sections concentrate on the different diagnostic approaches, the management of patients with rheumatic syndromes when no definite diagnosis has been made and, in detail, on the management of patients with a definite diagnosis. The editors' goal of providing information on published data together with specific, sometimes personal, recommendations is met perfectly by most of the authors. However, the aim of maintaining as far as possible the uniqueness of each author's contribution is achieved at the cost of a lack of a uniform structure for the individual chapters. This is best exemplified by the varied use of subheadings and the different styles of tables and figures. Most notably, the personal recommendations of the authors to deal with the problem described are sometimes not so easily detectable.

An absence of cross references to other chapters is a minor irritation. The colour illustrations are excellent, the reference sections are wide ranging (though some most recent publications should have been included), and the index is precise and extensive. All the expectations raised by the editors in the preface are met: "The second edition of *Treatment of rheumatic diseases: a companion to Kelley's textbook of rheumatology* is now worthy of the name 'treatment' ". It is of great value for those seeking a concise and up to date textbook of the management of patients with rheumatic diseases.

H Schulze-Koops