indirect evidence, that the aetiology was gonococcal. The failure to respond to cortisone was interesting in view of the three cases recently successfully treated in Toronto.

(5) Sjogren’s Syndrome (shown by Dr. F. Dudley Hart). A woman, aged 64, recently under the care of Dr. J. L. Lovibond, differed from most of the cases reported by Sjögren in that she looked younger than her age. She had suffered from kerato-conjunctivitis sicca and dryness of nose and mouth for 20 years. Arthritis had developed within the last three years and was still active and progressing. Dr. Hart asked if there was any evidence that such cases were anything more than a chance association of kerato-conjunctivitis sicca and rheumatoid arthritis.

Dr. J. H. Kellgren spoke of recent work in the Rheumatism Research Centre in Manchester. He had found that about 10 per cent. of elderly rheumatoids and a somewhat lower percentage of non-rheumatoids had dry eyes. Dr. W. A. Bourne commented on the absence of teeth, oral sepsis being common in these cases.

Sir Henry Cohen, in closing, thanked Dr. Dudley Hart for arranging the meeting and the Westminster Medical School for the use of the Meyerstein Theatre.

## EMPIRE RHEUMATISM COUNCIL

### FOURTEENTH ANNUAL REPORT

The fourteenth annual report of the Empire Rheumatism Council was presented by the Chairman, Lord Horder, at the Annual General Meeting held on January 24, 1951.

Research.—Referring to the Council’s investigation into the aetiology of rheumatoid arthritis concluded in 1949, he conveyed to the Journal Committee of the British Medical Association the Council’s deep appreciation of their kindness in publishing the Report as a supplement to the *Annals of the Rheumatic Diseases*. The Report should thus reach a wide field and prove a valuable document.

It was felt that some advantage might accrue from undertaking specific enquiries into the genetic factors connected with the causation of rheumatoid arthritis, and this work had been undertaken by Dr. G. M. V. Johns. Certain new facts had come to light, but were not felt to be sufficiently important to warrant an intensive continuance of the enquiry at the present.

A study of the allergic aspects of rheumatism, conducted by Dr. K. Maunsell under the able direction of Professors Rimington and Cameron, had been concluded at the Council’s laboratory at the Hospital of St. John and St. Elizabeth. This had freed the laboratory for new tasks, and during 1950 the Council had been fortunate in appointing as its research worker there Dr. A. A. Henly, Ph.D., Roche Fellow of the Council, who, with his assistant, Miss M. I. Potter, was studying the metabolic effects of various steroid hormones and related substances in rheumatoid arthritis.


In connection with a special research scheme instituted at the Royal National Hospital for Rheumatic Diseases, Bath, a grant of £400 had been placed at the disposal of Dr. G. D. Kersley, the Physician-in-Charge. This grant had met the payment of a laboratory technician, Mr. D. S. Bidmead, to assist in an investigation into the effect of insulin-produced hypoglycaemia in the treatment of rheumatoid arthritis and the use of a number of compounds in the treatment of gout. Mr. Bidmead had, incidentally, evolved an improved method of estimation of uric acid in the blood and urine.
In response to an application for assistance from Professor Maclagan, of the Westminster Medical School, in research into the synthesis and trial of new compounds related to salicylic acid, with the collaboration of Dr. F. Dudley Hart, a liberal grant had been made by the Council, enabling Dr. J. D. Billimoria to be appointed as from February 1, 1950, and good progress had already been made towards the preparation of cortisone analogues.

The Chairman said he was glad to announce the receipt of a substantial discretionary legacy awarded to the Empire Rheumatism Council for the institution of research fellowships. It had been decided to establish two research fellowships to investigate the aetiology and pathogenesis of ankylosing spondylitis. The "Elizabeth Macadam Fellowships", tenable for two years, had been awarded to Dr. G. Loewi, working at the Canadian Red Cross Memorial Hospital, Taplow, under the direction of Dr. E. G. L. Bywaters, and Dr. J. L. Potter, working at the Northern General Hospital, Edinburgh, under the supervision of Dr. J. R. Duthie.

Financial assistance had also been accorded to Mr. A. J. Whitte, F.R.Met.S., in furthering his investigation into the climatic effects in regard to rheumatism in general.

In no year since the Council's formation had there been a period of greater endeavour in research undertaken by the Council, commensurate with the funds at its disposal. The Finance Committee had made an allocation of £5,000 for 1950-51 in addition to the medical expenditure to which the Council was already committed, and it was probable that the sum to be expended on research and educational activities in 1950-51 would be the largest in any year since the Council's inception.

Education.—To ascertain what rheumatic treatment facilities existed in the Regional Hospital Board areas, the Education Sub-Committee had written to the Regional Hospital Board area representatives on the Council. The replies dealt mainly with existing facilities; it was found that in most areas no growth of facilities had occurred since the inception of the National Health Service Act, 1946, although many Regions had schemes "under consideration" for the establishment of Rheumatism Units. This matter deserved further attention.

In response to an invitation from the President of the Royal College of Physicians, the Education Sub-Committee had provided the following definition of a "Specialist in Rheumatic Diseases" which might prove helpful to the newly-constituted Committee of the Royal College of Physicians (see page 84):

The specialist in Rheumatic Diseases should be a general physician who is specially interested in the diagnosis and treatment of morbid conditions of the limbs and trunk, due to disorders of the bones, joints and connective tissues; and in the practice of certain therapeutic techniques. The "Rheumatologist" is therefore a general physician of consultant status with a special interest. Thus he is comparable with the neurologist or cardiologist. The specialty in Rheumatic Diseases is distinct from the specialty in Physical Medicine.

The circulation of the Annals of the Rheumatic Diseases, the official medium of the Council, was steadily increasing, and during the past year, as a compliment to certain distinguished foreign authors, their articles had been published in the language in which they were presented as part of the Heberden Round in Paris in May, 1950. The thanks of the Council were due to the Editor of the British Medical Journal, Dr. H. A. Clegg, for his valuable help in all matters affecting the publication of the Annals which had now attained an important position among British special journals.

Dominions.—A meeting of the Dominions Committee recently formed to effect the fullest collaboration with the affiliated organizations of the Canadian Arthritis and Rheumatism Society, the Australian Rheumatism Council, and the New Zealand Rheumatism Council, was to be convened.

The three affiliated bodies had had several meetings to stimulate medical interest in the rheumatic diseases, and the Canadian Society had already established fellowships whereby young medical men could have a year's training in Great Britain or the U.S.A.