REVIEW

RHEUMATISM. A PLAN FOR NATIONAL ACTION. Lord Horder.
H. K. Lewis and Co., 2s.

Lord Horder has written this book as Chairman of the Empire Rheumatism Council. In it he attempts the difficult task of making himself intelligible both to the profession and the lay public and succeeds well.

The broadest definition of rheumatism is accepted, and not only are rheumatic fever and arthritis in its various forms included, but non-articular rheumatism—fibrositis, neuritis, sciatica, lumbago, bursitis, etc.—is also considered.

It is estimated that the number of sufferers from rheumatic disease in England and Wales is not less than a million adults and 200,000 children. Vast as the figures are, I believe them to be, if anything, an under-estimate. A few years ago I had occasion to visit every house in a certain district of a large provincial town. I was astonished to find the number of chronic invalids of all ages that were to be found in almost every street, and even more surprised to discover that by far the commonest cause of invalidity was rheumatic disease.

The chapter on the etiology of rheumatism is a good one. The importance of occupation, climate and focal sepsis are all stressed, as well as the need for a reasonable standard of comfort in the home, especially in the case of children. An investigation is quoted that indicates that acute rheumatism is three times as common in children coming from poor homes as in children of the same social class living in well-managed children's institutes.

The next chapter sets out fairly and squarely what can be expected from the treatment of rheumatic disease and the point is repeatedly stressed that the one thing necessary above all else is early and correct diagnosis. It is suggested that the various types of treatment can be divided into two classes: (1) the ordinary, which can be carried out in any clinic—mainly physical but to a less extent medical; and (2) the more unusual, which require special technique and experience for their application, or which are still on trial and have not yet been generally accepted.

The third chapter is the most important; it is the one that gives the book its essential value; it is a plan for national treatment. It is, of course, a bold man who is prepared to propound a scheme for the treatment of a disease the etiology of which is so obscure. But the scheme is here and it seems reasonable and workable. Its author realises two important facts: firstly, that prevention, treatment, research and education of the medical profession are both essential and intimately associated; and, secondly, that no scheme can be efficient that does not include the doctor who first sees the patient and has to make the first diagnosis, however provisional it may have to be.

The plan for national treatment is divided into two sections: (1) for children and (2) for adults. In connection with the former a high tribute is paid to the L.C.C., whose scheme "can be said to be the best existing to-day in any quarter of the world." The first essential of this scheme is a complete medical examination of every scholar at least four times during school life, together with re-examinations and special examinations whenever there is the slightest indication of the desirability of either. The pivot on which the whole L.C.C. scheme hinges is the Rheumatism Supervisory Centre. To these centres are referred—(a) children with a history of acute or sub-acute rheumatism or chorea; (b) children having symptoms (such as muscular pain) suggestive of a mild rheumatic infection; (c) suspected cases for diagnosis. The centres act as clearing-houses and from them cases are referred for treatment. Those requiring in-patient treatment are sent for the most part to the five Rheumatism Units containing in all about a thousand beds and situated well away from the smoky area of central London. Children continue their education while in hospital, and the keenness and kindness of the teachers in these hospital-schools is beyond all praise. Some children are able to return to an ordinary school when they leave hospital, but a good many have to attend a school for physically defective children, to which they are conveyed daily from their homes by motor ambulance. In all cases there is thorough after-care supervision. The scheme is admittedly an expensive one, and it is not too easy to estimate correctly the value of the results obtained. We know, however, that rheumatism is the principal cause of heart troubles in children and that the incidence of heart disease in L.C.C. school children has fallen from 2 to 0·77 per cent. between 1926 and 1937. Lord

Horder is full of praise for this scheme. He would like to see similar schemes applied to all children in all areas. His only suggestion for improvement is "that there should be a sustained effort to raise the standard of knowledge in regard to rheumatic disease of the school medical officers in order to reduce to the lowest possible degree the chance of early indications being overlooked."

The proposed scheme for adults is heralded by the astounding statement (which I believe to be only too true) that it is probable that less than 10 per cent. of sufferers from rheumatism obtain the special treatment necessary in the early stages. The scheme for adults follows closely on that for children. There are to be a relatively few Specialised Rheumatism Treatment Centres where everything necessary for diagnosis and for all forms of treatment will be at hand, and where research can be carried out and new methods tried under accurate observation. Hospital beds must obviously be provided for these centres, and I would put in a plea for their close association with a large general hospital whenever possible, so that the necessary pathological and specialist services may be readily available. It is suggested that these Specialised Treatment Centres should also have important educational functions, teaching patients where necessary self-help and "home therapy" and giving post-graduate instruction to general practitioners in the early recognition of rheumatic disease and the simpler methods of treatment. Under the direct supervision of these Specialised Centres would be Local Treatment Centres. These should be for out-patients only and much more numerous. There should be a Medical Supervisor and full staff for the simpler methods of physical treatment. Patients would be sent on by their local doctor and would remain under his care for everything except special rheumatism therapy.

The last chapter is on finance. I have no space left to deal with it, and perhaps it is just as well, for it is less clear and definite than the rest of the book and by no means easy to summarise in a few words.

The plan for the national treatment of rheumatic disease is a good one. The thoughtful reader may be pardoned if he enquires whether a similar plan might not usefully be adopted for the treatment of many other diseases, or perhaps indeed of all.

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