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The author of an original article should make adequate reference to previous work on his chosen subject.

A full summary of his observations and conclusions must be given.

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Cowan, J. (1929). *Quart. J. Med.*, **22**, 237.

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was found between the response of the pituitary gland to metopirone on the one hand and the dose and duration of treatment with corticosteroids on the other.

Discussion.—DR. J. R. DE ANDRADE (*Stoke Mandeville*): We have a great many patients who have been treated with a single daily dose of 5 mg. prednisolone for from 100 to 170 weeks. The metopirone test was performed in ten, in all of whom there was a positive pituitary response.

PROF. E. G. L. BYWATERS (*Taplow*): **Calcification in Joint Structures.** Calcification of synovial membrane, cartilage, and para-articular structures was described in five cases, in two of which it was clearly metastatic (hyperparathyroidism and sarcoidosis) whilst in the others the calcium metabolism was apparently normal. In chondrocalcinosis and other disease states where calcium metabolism was normal and there were multiple foci the possibility was discussed that the patients had passed through self-limiting episodes of hypercalcaemia (infarcted parathyroid adenoma, sarcoidosis, hyper-vitaminosis D, fractures, milk-alkali syndrome), but where deposits were single (for example in the sub-acromial bursa) a local tissue abnormality was thought to be responsible. It was suggested that the abnormality in some types might be associated with fibrin deposition and subsequent collagen fibre formation.

Discussion.—THE PRESIDENT described a girl who had eczema and developed polyarthritis at the age of 18. The Waaler-Rose and latex-fixation tests were positive. The arthritis was well controlled by small doses of steroids, but the patient subsequently developed multiple deposits of calcium in the muscles and subcutaneous tissues, some of which required surgical removal.

The serum alkaline phosphatase was normal.

DR. M. G. LONDON, DR. K. D. MURDEN, and MISS J. V. HEWITT (*Manchester*): **Serum Cholesterol in Rheumatic Disease.** The serum cholesterol was found to be significantly lower in patients with inflammatory polyarthritis (excluding gout) than in a random sample of the general population; this was unrelated to the anatomical location of the inflammatory process since there were similar findings in patients with chronic pulmonary inflammation. The cholesterol levels were apparently inversely related to the activity of the disease, and were not influenced by therapeutic doses of aspirin.

Patients with osteo-arthritis and gout were found to have higher mean values of serum cholesterol than the comparable population sample, but the results were not as impressive as expected, probably because a considerable proportion of the population samples used as normal also had osteo-arthritis.

Discussion.—PROF. E. G. L. BYWATERS (*Taplow*): When discussing these results, Dr. London said that the incidence of coronary heart disease is low in rheumatoid arthritis. It is difficult to ascertain the incidence of any disease in association with rheumatoid arthritis, but from my experience I question the statement that co-existing coronary artery disease is uncommon.

Future Arrangements

The Heberden Oration and Annual Dinner will be held on November 30, 1962 (*not* December 1 as previously published).

On May 17 and 18, 1963, a meeting is to be held at Groningen, The Netherlands.

NEW ZEALAND RHEUMATISM ASSOCIATION

The Annual General Meeting, 1961, was held at Rotorua. The President, Dr. B. S. Rose (*Rotorua*), reported to the meeting on recent developments in rheumatology overseas. While attending the Tenth International Meeting at Rome he had met many prominent workers in the field and this had proved of great value subsequently when he visited centres in France, the United Kingdom, and Denmark. He outlined some of the outstanding contributions to the International Conference and held a seminar on population studies. He placed before the meeting the proposal to form a new Regional League (South-East Asia and Pacific Area).

DR. T. C. HIGHTON (*Dunedin*), reporting on his year's basic research work, outlined further experience using

sera from patients with rheumatoid arthritis and Carriginin pouch techniques. Further work to characterize the substance leading to abnormality in the form of collagen is in progress.

DR. J. D. REID (*Wellington*) gave a review of the microscopic and electron microscopic appearances of connective tissue in health and disease. He laid particular emphasis on the changes in blood-vessel abnormalities.

DR. A. ROWATT BROWN (*Auckland*) reported on the work of his Rehabilitation Centre and reviewed the case material that had passed through the Centre and the results achieved.

DR. I. C. ISDALE (*Rotorua*) presented an analysis of the clinical aspect of gouty patients admitted to the Queen Elizabeth Hospital and drew particular attention to the

high incidence of hypertension and renal change among the Maori patients.

DR. J. J. VALENTINE (*Rotorua*), in talking on hydrotherapy in New Zealand, stressed the wealth of potential spas in the country and outlined the types of treatment currently in use.

DR. A. O. GILMORE (*Auckland*) presented a case of pulseless syndrome showing spontaneous recovery.

DR. K. R. TAYLOR (*Rotorua*) presented a case of renal rickets, admirably controlled by large doses of vitamin D.

He outlined the family history, which included a large number of patients all traceable to a common ancestry.

MR. H. B. COATES MILSON (*Tauranga*) gave a profusely illustrated discussion of mechanics of the spine, paying particular attention to a spondylolisthesis and the maintenance of the erect posture.

DR. A. ROWATT BROWN (*Auckland*) described a case of familial polyarticular osteo-arthritis, and the staff of Queen Elizabeth Hospital presented a number of clinical cases; this was followed by a long discussion.

INTERNATIONAL CONGRESS OF MEDICAL HYDROLOGY AND CLIMATOLOGY

Baden-Baden, September 30 to October 4, 1962

The congress will be held under the presidency of Prof. V. R. Ott, M.D., Bad Nauheim, Giessen, Germany. The main subjects to be discussed are:

General Medical Hydrology (Balneology)

Medical Climatology

Balneotherapy of Extra-articular Rheumatism.

Lecturers: Fährdrich (*Baden-Baden*), Yenel (*Istanbul*), Terrier (*Baden/Switzerland*), Françon (*Aix-les-Bains*), Forestier (*Aix-les-Bains*), and Lenoç (*Prague*).

Spa Treatment of Hepato-biliary Disorders

The Role of Balneotherapy, Climatotherapy and Thalassotherapy in Medical Rehabilitation.

The official languages of the Congress are German, French, English and Italian. Further information may be obtained from the Congress Office, ISMH-FITEC, Augustaplatz 1, Baden-Baden, Federal Republic of Germany.

LIGUE EUROPÉENNE CONTRE LE RHUMATISME

The next congress is to be held in Stockholm from August 25-28, 1963.

URUGUAYAN RHEUMATOLOGICAL SOCIETY

II Congress, 1962

The II Uruguayan Congress is to be held on December 5-8, 1962, in Montevideo, under the presidency of Dr. Pedro M. Gaudiano. As well as free papers, the following special subjects will be discussed:

Vertebral rheumatism

Rheumatic disorders in relation to diffuse mesenchymopathy

Diagnosis of chronic polyarticular rheumatism (symposium)

Treatment of chronic humero-scapular peri-arthritis (symposium)

Further information may be obtained from the secretary:

Dr. Gonzalo Lapido,
Avenida Agraciada, 1464,
Agrupacion Universitaria del Uruguay,
Montevideo.

MEXICAN RHEUMATOLOGICAL SOCIETY

Officers, 1962

The following will hold office from May 4, 1962, until the end of the 1st Mexican Congress of Rheumatology:

President: Dr. Pindaro Martínez Elizondo

Secretary: Dr. Fernando Quiroz Pavia

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1963

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