OPENING ADDRESS

BY

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Uric acid metabolism, the subject under consideration today, is of interest to many people other than rheumatologists, and the Society has, therefore, invited guests from other disciplines who may not fully know what the Heberden Society is or does. This Society was founded about thirty years ago out of discussions held by a group of six physicians who were on the staff of the Red Cross Clinic for Rheumatism, which was only a hundred yards down the road from the Royal College of Physicians, in Regent’s Park, London. As interest grew in the subject, this small group became the Committee for the Study of Rheumatic Diseases. This Red Cross Clinic was one of the first clinics in this country started to help sufferers from rheumatism.

In 1937 this Committee for the investigation of rheumatism obviously had to be enlarged. It was decided to throw it open to all medical men interested in the subject of rheumatology, and its name was changed to the Heberden Society. The Society now contains physicians, surgeons, radiologists, pathologists, basic scientists, and others who are interested, and the pressure to join the Society has grown so much that membership has had to be increased and a section of Associate Members formed.

It is appropriate that this Symposium should be held at the Royal College of Physicians of London, for there are many worthy past Fellows of this College who must often have debated the subject, perhaps not of uric acid metabolism but at least of the gout—Cadogan, Scudamore, and Sydenham among others. They will have spent long hours discussing, and maybe arguing, about such things as the classification of gout, in which they were extremely interested, its hereditary aspects and its treatment. Our patron, William Heberden, who was physician to George III, was an expert in this disease, and his nephew, the famous chemist Wollaston, picked from his own ear a tophus and found that it contained sodium urate.

Dr. Heberden would certainly have enjoyed being here today and hearing experiences from all over the world of the use of a new drug in this disease in which he was so much interested, and in the use of a new aspect, or a different principle, in treatment. The general plan of treatment of the ancients, as you know, was to get rid of all offending material in any way they could, by bleeding, purging, blistering, and so on. The first practical method of estimating a raised uric acid in the blood was reported in 1848, with the famous thread test of Garrod, and he became known as.
the high priest of gout. This led eventually to the type of study we shall be hearing about today involving isotopes and complicated metabolic analyses.

Only seventeen years ago the uricosuric drugs were discovered almost by accident as part of the research on penicillin, and so in a few years what Philip Hench called "the forgotten disease" has come full circle and is now the subject of intense study. I should like to welcome our visitors and invite them to take part freely in the discussion.