Abstracts

These abstracts have been specially commissioned for this Journal. Many of the titles have been taken from Abstracts of World Medicine and Ophthalmic Literature, published by the British Medical Association, and the references to these sources are given. The subjects are arranged in the following sub-sections:

Rheumatic Fever
Rheumatoid Arthritis
Still's Disease
Osteoarthritis
Spondylitis
Gout
Other Forms of Arthritis
Bone Disease
Non-articular Rheumatism, including Disc Syndromes, Sciatica, etc.
Connective Tissue Studies
Pararheumatic (Collagen) Disease
Immunology and Serology
Biochemical Studies
Therapy
Surgery
Other General Subjects

Not all sub-sections may be represented in any one issue.

Rheumatic fever

Role of the Pediatrician in Rheumatic Fever Control MORTIMER (1971) Pediatrics, 47, 1

Prophylaxis of Inflammatory Heart Disease with Special Reference to Rheumatic Fever [In German] ANSCHÜTZ, F. (1971) Med. Welt (Stuttgart) 22, 543

A Newly Prevalent Type of Beta-Hemolytic Streptococcus in Chicago POTTER, E. V., SEIGAL, A. C., and BEARFIELD, J. L. (1971) Amer. J. Epidem., 93, 102 2 figs, 21 refs

Rheumatoid arthritis

A peripheral corneal opacity of a distinctive character, involving the anterior third of the corneal thickness, was seen in five patients with long-standing rheumatoid arthritis. The opacity was present over the whole of the circumference of the peripheral cornea in most of the eyes affected and the condition was bilateral to some degree in all five patients.

Inflammation and vascularization were minimal.

AUTHOR’S SUMMARY


Two female sibs are presented, with peripheral corneal opacities and severe progressive intra-articular joint destruction. Fibroblast cultures of skin biopsies showed an increase in intracellular mucopolysaccharides and these two patients are considered to be suffering from a new autosomal recessive mucopolysaccharidosis.

BARRIE JAY


Rheumatoid Arthritis and Rheumatoid Heart Disease BARKER, A. (1971) N.Z. med. J., 73, 14 5 figs, 39 refs


Psychosomatic Aspects of Rheumatoid Arthritis DU BOIS, R. (1971) Praxis, 60, 747
Rheumatoid Arthritis and Personality: A Controlled Study
WARD, D. J. (1971) Brit. med. J., 2, 297, 18 refs


Relationship of Wrist Motion to Ulnar Nerve Drift in the Rheumatoid Patient SHAPIRO et al. (1971) Hand, 3, 68

Trigger Finger Syndrome in Rheumatoid Arthritis not caused by Flexor Tendon Nodules STELBREIN (1971) Hand, 3, 76


Osteoarthritis


Spondylitis


Gout


This is a study of renal transport mechanisms in primary gout. From uric acid turnover data using 14C-labelled uric acid, and by comparison with control subjects, fifteen patients with gout were separated into two groups of nine uric acid overproducers and six normal producers. These two groups were compared with regard to urate excretion, the factors of tubular reabsorption and secretion being analysable separately by the administration of pyrazinamide, which suppresses the latter. Studies were repeated after allopurinol-induced normouricaemia, so that values were obtained over a wide range of plasma urate and filtered urate load levels.

Both groups were found to have a normal pattern of urate reabsorption, this being virtually complete in all cases. Tubular secretion, however, differed, in that overproducers secreted urate at the normal rate while normoproducers showed a diminished rate of secretion. An abnormality of renal tubular behaviour is thus shown to be a significant factor in at least a substantial proportion of gout patients.

J. T. SCOTT


An Unusual Form of Renal Disease associated with Gout and Hypertension GOOR, W., VAN, KOOIKER, C. J., and MEES, E. J. D. (1971) J. clin. Path., 24, 354 3 figs, 22 refs


A Method for Deriving Normal Ranges from Laboratory Specimens applied to Uric Acid in Males COOK et al. (1970) J. clin. Path., 23, 778


The Kidney and Hyperuricemia (Rein et hyperuricémie) LAGRUE and MENARD (1971) Presse méd., 79, 845

Experimental Study on Certain Methods of decreasing the Urinary Excretion of Uric Acid SORRENTINO, F. (1970) Urol. int. (Basel), 25, 444 6 figs, 12 refs


Other forms of arthritis

New Therapeutic Attempts in Behçet's Disease (Report II) [In Japanese with English Summary] FUTAGAMI, T., AOY, K., SAI TO, K., SANE FUI, M., FUIHOKA, K., KIKUCHI, K., and KATO, H. (1970) Rinsho Ganka, 24, 357 4 figs, 8 refs

Fifteen cases of Behçet's syndrome were follow-up for from 5 to 15 months after irradiation of the spleen applied in five divided doses of 200r each completed within one week. The treatment resulted in definite improvement in the ocular as well as the extraocular symptoms in two cases, while in three cases only the ocular symptoms improved. In a further five cases there was a slight improvement in the systemic findings but the ocular symptoms persisted. In the remaining five cases, the clinical course was not affected by the therapy.

A 10-year-old male child was treated by surgical removal of the thymus. This was followed by a state of angio-Behçet syndrome and resulted in a fatal outcome due to the Budd-Chiari syndrome.

J. TSUITSU


A 15-year-old boy with Behçet's disease was treated with cyclophosphamide and prednisone. The condition responded to this combined treatment but not to prednisone alone. Measurements of delayed cutaneous hypersensitivity were made using a battery of 24 common antigens each having a known likelihood of reactivity and a defined geometrical mean response in a control population. It is claimed that the evaluation of immunological function in this way may be a reliable measure of the effectiveness of therapy.

N. R. GALLOWAY


An encouraging report concerning a small group of patients who were treated with this immuno-suppressive agent. Both the ocular and neurological features of the disease improved.

P. J. H. SELLOWS


A statistical analysis of 39 cases which showed that vision was lost in an average of 3.36 years after the onset of ocular disease.

P. J. H. SELLOWS
Clinical Picture of the Neural Form of Behçet’s Syndrome

In fourteen (15 per cent.) of a total of 94 patients diagnosed as cases of Behçet’s syndrome the condition included neural symptoms. There was a preponderance of males over females in the ratio of 11:3.

A clear-cut classification of the neural signs was not possible because of the variegated clinical manifestations. In five cases, the clinical picture was similar to that of multiple sclerosis. Demyelinating processes in the central nervous system were confirmed in two cases by autopsy.

The prognosis for life was generally poor. Sudden death also occurred in cases without apparent neurological symptoms.

J. TSUTSUI

Therapy of Gilbert Behçet’s Disease

Cortisone used locally and systemically in high dosage in four cases had a good effect on the acute inflammatory changes, especially in the anterior segments of the eye. Recurrences could not be prevented, however, especially since cortisone has to be discontinued sooner or later. Azathioprine at a low dosage of 1·5 to 2·0 mg./kg. daily had no influence on the frequency and severity of the recurrences, which could be cut short only by high doses of corticosteroid. The additional application of antibiotics, antiphlogistics, gammaglobulin, etc., did not enhance the therapeutic result.

L. WITTELS

Medical Treatment of Behçet’s Disease

A description of a 45-year-old patient with a 16-year history of Behçet’s disease and 8 years of observation. The disease began with bilateral peripheritis, complicated later by aphthous stomatitis, ulcers of the genital mucosa, and, finally, severe hypopyon iritis. Therapy, which consisted of sulphonamides, tetracyclines, then additional cortisone, and lastly all three supplemented by immunosuppressants, had little effect on the course of the disease.

L. WITTELS

Adamanntiades Behçet Syndrome

The authors observed this rare syndrome in a man who was affected with hypopyon iritis at the age of 30 years. There were the typical eczematous changes of the skin, especially at the genitals and junctions with the mucous membranes, further rheumatic affections of joints and muscles, and a cardiac infarction. The retinal and iris haemorrhages after many relapses produced a cloudy vitreous cataract, and secondary glaucoma in both eyes. One eye became blind after 2 years and the other after 24 years. The authors suggest that the condition may be a vascular collagenous disease. Cortisone has only a symptomatic effect.

H. LYTTON

Reiter’s Disease and Behçet’s Syndrome

In a typical case of Reiter’s disease, consisting of urethritis, arthritis and conjunctivitis, a virus is possibly the causative organism, while mixed pictures of the disease with involvement of the uvea are possible due to autoimmune processes. A virus has not been unequivocally proved to be the cause of Behçet’s syndrome, and the clinical picture suggests an autoimmune rather than a viral genesis.

L. WITTELS

Inclusion Conjunctivitis and Reiter’s Syndrome in a Married Couple

The report of a married couple. The wife had conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Roentgenology of Reiter’s Syndrome

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Involvement of Veins in Behçet’s Syndrome

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Antibacterial Activity of Synovial Fluid during Therapy of Septic Arthritis

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Suppurative Arthritis of the Hip Joint in Infancy

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Electrocardiographic Abnormalities and Arthritis in Patients with Yersinia enterocolitica Infection

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Mycoplasmal Arthritis

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Chronic Synovitis as a Manifestation of Calcium Crystal Deposition Disease

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS

Posterior Synovial Leaks in Arthritis of the Knee

The report of a married couple. Conjunctivitis and iritis. The husband had developed Reiter’s syndrome 2 years previously. Chlamydia was demonstrated in husband and wife. It is pointed out that some patients with Reiter’s disease have keratitis and keratoconjunctivitis.

A. G. CROSS
Bone disease

Treatment of Paget’s Disease of Bone with Mithramycin


Connective tissue studies


Synovial Structures of Normal and Rheumatoid Digital Joints Kuczyński (1971) Hand, 3, 41


Relationship Between the Anti-Inflammatory and Irritant Properties of Inflammatory Exudate ATKINSON, D. C., and HICKS, R. (1971) *Brit. J. Pharmacol.*, 41, 480 4 figs, 15 refs


Pararheumatic (Collagen) Diseases


The authors, both on the staff of the University of British Columbia and Vancouver General Hospital, discuss the clinical aspects of thirteen cases of juvenile dermatomyositis seen over a 10-year period from the Greater Vancouver Hospital district, an area in which about 900,000 people live and where about 250,000 are under 15 years of age.

The clinical features of the cases are discussed in some detail and the effect of treatment by oral prednisone and the results are assessed. Two of the children died; one, in whom the dermatomyositis was extremely acute, died from respiratory infection; the second died possibly from a complication of corticosteroid treatment, but no conclusive cause of death was established. Apart from these cases, the patients were followed-up for 3 to 8 years from the onset of their disease. Four case histories are discussed and the rest illustrated in tabular form.

A review of the literature is given. In this the high incidence of calcinosis in children is noted, as is the fact that this would appear to carry a favourable prognosis probably on account of the long-standing nature of the disease. The incidence of malignant disease in these cases is shown to be significantly lower than in adults and the prognosis better. Laboratory investigations, according to the sources quoted, rarely assist in diagnosis. Reference is made to serum enzyme levels, particularly SGOT levels. The use of methotrexate is referred to, but the two patients receiving it failed to show benefit.

It is observed that the disease is extremely variable, making it difficult to draw valid conclusions from a particular series. The authors are particularly impressed by the prompt improvement in muscle strength and concurrent lessening in muscle pain when large doses of steroids are given.

This is a useful article, although the list of references cited by the authors omits some of the most important and thoughtful articles on the subject. No reference is made to the importance of creatinine metabolism.

O. L. S. SCOTT


Biopsy of temporal arteries has become an important diagnostic measure in the diagnosis of temporal arteritis and polymyalgia rheumatica. These conditions occur in the elderly, so that one must be aware of normal ageing changes in the vessels. In the present study 150 temporal arteries were taken from random autopsies and age-categories defined.

Infantile pattern: no intima, thick unblenched internal elastic lamina (IEL).

Youth pattern: distinct intima, less than half thickness of media, commencing reduplication of largely intact IEL.

Adult pattern: diffuse intimal thickening, attaining or exceeding that of the intima, increase of intimal and medial collagen, fragmentation and fraying of IEL.

Senile pattern: intima often twice as thick as media, gross disruption of IEL, degeneration of elastic fibres.

No lipid material was demonstrated in any of the arteries; calcification was found in one-fifth of arteries from patients aged over 50. None of the arteries showed thrombosis or the giant-cell reaction characteristic of active temporal arteritis. It was considered that the residual changes of temporal arteritis (which may persist for many years) were sufficient enough from the ordinary changes of senescence to enable a distinction to be made, the single most helpful feature being a difference in the zonal arrangements of intimal proliferation.

This paper with its illustrations should be seen by all histologists and clinicians interested in temporal arteritis.

J. T. SCOTT

Electron microscopic studies of biopsies in temporal arteritis showed that in the early stages the smooth muscle was involved and an inflammatory reaction was present. After 6 weeks of treatment the artery showed fibrosis of the muscle wall and fragmentation of the elastica, while the inflammatory signs were considerably reduced. BARRIE JAY


Since the ophthalmic signs are often the first to be noticed in temporal arteritis, the importance of the role of the ophthalmologist is emphasized. This is a good bibliographical review of the disease. Mention is made of Burian's electroretinographic findings of anomalous waves which he considers to be typical of temporal arteritis.

The authors comment on the important role of the corticosteroids in the treatment and prognosis of the disease. The beneficial effect of retrobulbar cortisone acetate is mentioned. Systemically, intramuscular ACTH administration followed, when the diagnosis has been confirmed, by prednisone administration is recommended. Anticoagulants and intermittent oxygen inhalations are beneficial; vasodilators are contraindicated.

ALFREDO ARRUGA


A case report. Bilateral bruits were found in a man aged 76 who had episodes of amaurosis and a raised erythrocyte sedimentation rate. The bruits ceased on steroid therapy. A. S. MUSHIN


Sjögren’s Syndrome studied by Fluorescent Antibody Technique [In Japanese with English Summary] INUKAI, K. (1970) Rinsho Ganka, 24, 1251 3 figs, 3 refs


Laboratory Abnormalities in the Diagnosis and Management of Lupus Erythematosus ROWELL, N. R. (1971) Brit. J. Derm., 84, 210 10 refs

Lupus Erythematosus Panniculitis (Profundus) TUFFANIELLI (1971) Arch. Derm., 103, 231


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Systemic Lupus Erythematosus presenting as Subarachnoid Haemorrhage and Space Occupying Lesion Casey and Symon (1971) *Brit. J. Derm.*, 84, 157


Immunology and serology


This study comes from the section of Arthritis and Connective Tissue Diseases of North Western University, Chicago. The rheumatoid factor (RF) employed was obtained from high titre sera by elution from an insoluble absorbent of human IgG cross-linked by bis-diazotized benzidine. The immune complexes were prepared from bovine serum albumin (BSA) and rabbit anti-BSA (IgG).

The results clearly showed that complexes formed at near equivalence of antigen and antibody, which fix maximum amounts of complement (C), give some increased fixation when RF is previously bound to the complexes. Complexes formed at higher ratios of Ag to Ab, which alone fix only small amounts of C, give even greater enhancement of fixation when RF is previously bound. By the use of anti-BSA serum treated with mercaptoethanol, which considerably impairs its ability to fix C but without interfering with the ability of its complex with BSA to bind RF, the authors also showed that the binding of C by complexes of antigen, antibody, and RF is mainly due to the binding of the C to the RF component.

Although these investigations were carried out entirely *in vitro*, the results support the view that RF is potentially pathogenic rather than protective, in so far as it can increase the binding, and hence the activation, of the C system by soluble immune complexes.

L. E. GLYNN


An indirect immunofluorescent method of detecting serum antinuclear antibodies is compared with an indirect method in which the anti-human IgG was labelled with horseradish peroxidase (Type II) by glutaraldehyde conjugation. For fluorescence, cryostat sections of mouse liver were fixed in 40:60 acetone/ethanol, dried, treated with patients' sera (neat—1:128), washed, dehydrated in graded alcohols (an unusual step) and then stained.

For horseradish peroxidase (HRP), cryostat sections of mouse liver were briefly formalin-fixed, treated with patients' sera, washed, incubated with HRP-labelled anti-IgG, washed again, and then incubated with 3,3'-diaminobenzidine and H_2O_2. The brown colour of the insoluble reaction product was enhanced with osmium tetroxide and the preparation dehydrated, cleaned, and mounted. With positive sera, the brown nuclei were distinct, with negative sera the nuclei were clear. Sera from patients with systemic lupus erythematosus, rheumatoid arthritis, progressive systemic sclerosis, and a range of connective tissue diseases were tested for antinuclear antibodies by both methods, and close, but not absolute, comparability was demonstrated, both for positivity and for titre. The HRP method was thought to have some advantages over immunofluorescence, such as reproducibility, ease of standardization, lack of non-specific staining, and lack of need for special microscope illumination.

E. J. HOLBOROW


This paper from the Venereal Disease Research Laboratory, Atlanta, Georgia, describes the finding of biological false positive reactions for syphilis (BFP) in F_1_ hybrids of New Zealand Black and A/J mice. The 'rapid plasma reagin' (RPR, 18mm. circle) card test was used on fresh serum. This has a sensitivity for cardiolipin antibodies comparable to the VDRL agglutination test. Specific treponemal antibodies as detected by FTA-ABS were absent in these animals. 32-3 per cent. of male hybrids had cardiolipin antibodies and only 2 per cent. of females. This compares with 2-5 and 3-7 per cent.

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respectively in the pure NZB strain. In many instances a positive RPR test was associated with ANA in the serum. Chronic BFP reactions are known to occur mainly in female patients with collagen disorders and genetic factors are probably involved in humans as in these mice. NZB hybrids of several kinds develop features of collagen disorders, and studies of autoantibodies including BFP reactions should prove a useful model for the human diseases. DEBORAH DONIACH

Erythrocyte Sedimentation Rate Pattern in Uveitis


The erythrocyte sedimentation rate was determined in 107 active endogenous cases of uveitis in the uveitis clinic of the Philippine General Hospital, and it was found to be elevated in 78 cases (72-9 per cent). There was no significant difference between the granulomatous and non-granulomatous cases. The ESR, however, was significantly elevated in the anterior type of uveitis and in patients whose aetiology was related to a generalized condition such as tuberculosis or rheumatoid arthritis.

R. B. ESPRITU

Effect of Aging on Human Serum Immunoglobulin Concentrations


Microscope Slide Electrophoresis of Serum Lipoproteins in Agarose Gel

ELPHICK, M. C. (1971) J. clin. Path., 24, 83 2 figs, 7 refs

Serum Protein Concentrations in Normal Children


Lysis of Erythrocytes by Complement in the Absence of Antibody


Complement System in Rheumatoid Synovitis. II. Intracytoplasmic Inclusions of Immunoglobulins and Complement

BRITTON, M. C., and SCHUR, P. H. (1971) Arthritis and Rheum., 14, 87 5 figs, 34 refs

Interaction of Rheumatoid Factor with Infectious Herpes Simplex Virus—Antibody Complexes


Rheumatoid Arthritis with Dissociated Serology (In French)


Rheumatoid Factor in the Aged (In French)


Interpretation and Value of Slide Tests in the Detection of Rheumatoid Arthritis (In English)


Cryoglobulin and Rheumatoid Factor in Primary and Secondary Syphilis


Antinuclear Antibodies, Rheumatoid Factor, and C-Reactive Protein in Serum of Normal Women using Oral Contraceptives


Changes in C3 (B2-A-Globulin) Concentration in Inflammatory Rheumatic Diseases

KLEIN, G. (1971) Z. Rheumatoforsch., 30, 104 16 refs

Presence of a Group A Variant-like Antigen in Strep-tococci of Other Groups with Special Reference to Group N


Immunoglobulin G Subclasses of Antinuclear Antibodies and Renal Deposits. Comparison of Systemic Lupus Erythematosus, Drug-induced Lupus, and Rheumatoid Arthritis


Selective IgA Deficiency

AMMANN, A. J., and HONG, R. (1971) Medicine (Baltimore), 50, 223 5 figs, 92 refs

Pathogenesis of Autoimmunity in New Zealand Mice. III. Factors influencing the Formation of Anti-nucleic Acid Antibodies

STEINBERG et al. (1971) Immunology, 20, 523

Antibody Plaque-forming Cells in Mice Immunized with Human Gamma Globulin. I and II

HÉGE and EPSTEIN (1971) J. Immunol., 106, 786 and 793

Radioimmunoassay of Plasma ACTH in Intact Rats

MATSUYAMA et al. (1971) Endocrinology, 88, 692

Bioassay and Radioimmunoassay of Plasma ACTH in Adrenalectomized Rats

MATSUYAMA et al. (1971) Endocrinology, 88, 696

Intra-articular 5-fluorouracil in Antigen-induced Arthritis


Papain-induced Degenerative Arthritis of the Hip in Rabbits


Relationships between Relative Binding Affinity and Electrophoretic Behavior of Rabbit Antibodies to Streptococcal Carbohydrates

Biochemical studies

Intrafollicular Amyloid in Primary Hyperparathyroidism

Multiple Amyloid Tumors of the Lung. A Case Report
Teixidor and Bachman (1971) Amer. J. Roentgenol., 111, 525

Metabolism of Fibrinogen in Patients with Rheumatoid Arthritis and in a Control Group
Andersen, R. B., and Freis, Th. (1971) Acta rheum. scand., 17, 94 2 figs, 20 refs

Fibrinogen Degradation Products in Serum and Urine of Patients with Systemic Lupus Erythematosus. Relation to Renal Disease and Pathogenetic Mechanism

Release of DNA into Serum and Synovial Fluid

Transformation of Cortisol in Rheumatoid Synovial Tissue in vitro

Morphology of Acid Mucosubstances in Leukocytes Sticking to Endothelium in Acute Inflammation

Character of Anti-DNA Antibodies in Systemic Lupus Erythematosus

Virus-like Structures in Leucocytes of the Peripheral Blood in Systemic Lupus Erythematosus

Study of Blood Lymphocytes in Systemic Lupus Erythematosus
(Étude des lymphocytes du sang au cours de la maladie lupique)

Studies on Chemical Composition of Menisci from the Human Knee-Joint

Effect of Gold on Collagen Metabolism in the Skin and Bones of the Rat
(Der Einfluss von Gold auf den Kolla genstoffwechsel von Haut und Knochen der Ratte)

18F and 85Sc Scintimetry in the Study of Primary Arthropathies

Avoiding False-Positive Joint Scans by the Use of Labeled Albumins
Cohen, M. B., and Lorber, A. (1971) Arthr. and Rheum., 14, 32 4 figs, 10 refs

Isotope Studies in Normal and Diseased Knee Joints: 99mTc Uptake related to Clinical Assessment and to Synovial Perfusion measured by the 133Xe Clearance Technique

Therapy

Occurrence, Immunoglobulin Pattern, and Specificity of Antinuclear Antibodies in Sera of Procainamide-treated Patients

This study from the Tel-Aviv Medical School, Israel, describes the development of antinuclear antibodies (ANA) in 31 of 50 patients treated with procainamide for 2 to 16 months. Most of the patients were males suffering from coronary heart disease and auricular fibrillation and none had previous histories of rheumatic disorders or positive ANA. The antibodies developed gradually to titres varying between 1:10 and 1:2,000, about half the cases having titres greater than 1:100, and were of IgG, IgM and occasionally IgA classes. In five patients with high titres, LE cells were also found, and there was a clinical syndrome resembling lupus erythematosus, one case having a rash, another pleurisy, and in four a fleeting polyarthritis. The nuclear fluorescence could be inhibited with nucleohistone in eleven out of 23 sera having high titres and most of the reactions were unaffected by preincubation with DNA, whether native or denatured, or by procaine amide or the drug coupled to DNA. It was concluded that this drug may behave like a hapten, the change in antigenicity of nuclear components leading to antibody formation, or that PrA leads to release of tissue components or increases non specifically the degree of immune response to weak antigens.

Deborah Doniach

Recovery of Hypothalamo Pituitary-Adrenal Function in the Rat after Prolonged Treatment with Betamethasone

This paper reports the results of studies on the effects of oral corticosteroids upon the cerebro-hypothalamo-pituitary-adrenal (CHpA) axis and growth rates of Sprague-Dawley rats. Two concentrations (high and low dose) of betamethasone were given orally for different time periods (2 and 7 weeks), both regimens ultimately ensuring the ingestion of approximately 450 μg./100 g. Measurements performed were growth rates (in grammes), adrenal weight, circadian rhythm, plasma corticosterone increments after submaximal ether vapour or tetracosactrin adrenal stimulation, and adrenal corticosterone production in vitro.

Growth rates, which were reduced by the low dose regimen and reduced further by the high dose, recovered rapidly on cessation of treatment. Adrenal weights were reduced only by the high dose regimen and they returned...
to normal within 4 days after withdrawal. Circadian rhythm was suppressed by high-dose treatment but also returned to normal within 4 days. High dose treatment abolished and low dose reduced the plasma corticosterone response to adrenal stimulation but this again returned to normal within 4 days. Corticoidogenesis was likewise suppressed with low-dose treatment and returned rapidly to normal. 5 per cent. of the animals died, usually of infection.

The authors make the point that CHPA axis recovery was rapid. They suggest that ACTH secretion occurs soon after withdrawal and perhaps before the ability of the adrenal cortex to respond to ACTH has recovered. No relationship between CHPA axis suppression and total corticosteroid dose was detected; the duration and regimen of treatment seems to be more important.

W. CARSON DICK


Study of Niflumic Acid in Twenty Cases of Inflammatory Rheumatism treated with Corticosteroids (Etude de l'acid niflumique dans 20 cas de rhumatisme inflammatoire traités aux corticoïdes) ROSSUM, P. E. VAN (1971) Brux.-méd., 51, 387 16 refs


Cyclophosphamide Treatment of Rheumatoid Arthritis [In German] RAU, R. (1971) Dtsch. med. Wschr., 96, 992 (English summary, p. 1001) 5 figs, 41 refs

Treatment of Rheumatoid Arthritis with Cyclophosphamide (Endoxan) [In Danish] JARLOV, N. V., and SØRENSEN, K. (1971) Ugeskr. Laeg., 133, 587 12 refs

Long-Term Alternating Corticotherapy (Corticothérapie alternée de longue durée) GALMICHE, P. (1971) Rhumatologie, 23, 17 1 fig.

Comparison between Epidural Anaesthesia with and without Corticosteroids in the Treatment of Sciatica BÉLIVEAU, P. (1971) Rheum. phys. Med., 11, 40 1 fig, 14 refs


Differences in the Retinotoxic Action of Chloroquine and Phenoxyazine Derivatives Gregory at al. (1970) *J. Path.*, 102, 139


Irreversible Lysosomal Damage induced by Chloroquine in the Retinae of Pigmented and Albino Rats Abraham, R., and Hendy, J. R. (1970) *Exp. molec. Path.*, 12, 185 22 figs, 23 refs


Surgery


To compare the results of surgical removal of the prolapsed lumbar disc with conservative treatment, the author interviewed 89 surgical and 101 non-surgical patients treated in the neurological and neuro-surgical
departments of Ulleval Hospital, Norway, between 1960 and 1964. Aged between 20 and 60 years, they had had leg pain and neurological evidence of root compression. A prolapsed disc had been shown by myelography, in equal/numbers at L4/5 and L5/S1, and in ten patients at L4.

The lower roots showed no advantage for either treatment. Surgery was most effective in leptosome body types and those with associated mental problems. Long periods of incapacity made conservative treatment less effective. In all, surgery helped 95 per cent. of its group and conservative measures 70 per cent. At follow-up, almost all the sensory changes had recovered, but 19 per cent. of the surgical cases and 14 per cent. of the others had pareses. Absent ankle reflexes returned in 33 per cent. after surgery and in 48 per cent. after conservative treatment. Failure of spinal fusion, attempted in all but eight cases, was not related to a bad result.

C. B. D'A. FEARN


Long-Term Results in Knee Arthrodesis in Rheumatoid Arthritis BRATTSTROM, H., and BRATTSTROM, M. (1971) Acta rheum. scand., 17, 86 2 figs


Synovectomy in Rheumatoid Disease (La synovectomie dans la maladie rhumatoïde) POUGET, G., BENOIST, M., DEBURGE, A., and CAUCOIX, J. (1971) Presse méd., 79, 621 2 figs, 28 refs


Ulnar Deviation Splints COLLINS (1971) Hand, 3, 21

Dacron—Silicone Prosthesis for the Metacarpophalangeal and Interphalangeal Joints NIEBAUER and LANDRY (1971) Hand, 3, 55


New Thoughts on Hand Prostheses COLLINS (1971) Hand, 3, 9


Other general subjects


Elements of the Biomechanics and Comparative Anatomy of the Shoulder (Eléments de bio-mécanique et d'anatomie comparée de l'épaule) WELLINGER, CL. (1971) Rhumatologie, 23, 7 24 figs

Arteriographic Investigations of the Normal Hip in Adults
14 figs, 17 refs

Serious Ophthalmological Complications in the Ehlers-Danlos Syndrome

Ocular Changes in Auto-immune Diseases (Augenveränderungen bei Autoimmunerkrankungen)

Association of Perthes' Disease with Congenital Anomalies of the Genitourinary Tract and Inguinal Hernia
CATTERALL, R. D. et al. (1971) Lancet, 1, 996


Morquio's Disease and Mucopolysaccharide Excretion