

Krömer, Scott, and Watts, 1968). Maximum depression of urate production by allopurinol is usually reached by between 4 days and 2 weeks, remaining constant thereafter. When allopurinol is discontinued the level of plasma uric acid rises quite rapidly, usually attaining its original value within a week (Loebl and Scott, 1974).

None of our patients had any undesirable side-

effects from taking 300 mg in a single daily dose and there seems to be no reason why allopurinol should not be prescribed in this convenient way.

Enzymatic estimations of uric acid were carried out by Mr. Ian Moss. The work was supported by grants from the Arthritis & Rheumatism Council.

References

- CHALMERS, R. A., KRÖMER, H., SCOTT, J. T., AND WATTS, R. W. E. (1968) *Clin. Sci.*, **35**, 353 (A comparative study of the xanthine oxidase inhibitors allopurinol and oxipurinol in man)
- DUNN, J. P., BROOKS, G. W., MAUSNER, J., RODNAN, G. P., AND COBB, S. (1963) *J. Amer. Med. Ass.*, **185**, 431 (Social class gradient of serum uric acid levels in males)
- ELION, G. B. (1966) *Ann. rheum. Dis.*, **25**, 608 (Enzyme and metabolic studies with allopurinol)
- LIDDLE, L., SEEGMILLER, J. E., AND LASTER, L. (1959) *J. Lab. Clin. Med.*, **54**, 903 (The enzymatic spectrophotometric method for determination of uric acid)
- LOEBL, W. Y., AND SCOTT, J. T. (1974) *Ann. rheum. Dis.*, **33**, 304 (Withdrawal of allopurinol in patients with gout)
- MILLS, J. N. (1966) *Physiol. Rev.*, **46**, 128 (Human circadian rhythms)
- ROBIN, J. A., TOLCHIN, S., AND RODNAN, G. P. (1973) *Arthr. and Rheum.*, **16**, 128 (Efficacy of single daily dose allopurinol in gouty hyperuricemia)
- RUBIN, R. T., PLAG, J. A., RANSON, J. A., CLARK, B. R., AND RAHE, R. H. (1969) *J. Amer. Med. Ass.*, **208**, 1184 (Serum uric acid levels)
- SNAITH, M. L. (1973) M.D. Thesis, University of Newcastle (Studies on gout and uric acid excretion in man)
- TALBOTT, J. H., AND SEEGMILLER, J. E. (1967) *In 'Gout'*, 3rd ed., p. 60. Grune and Stratton, New York and London

SI units

As announced in the November 1974 number, the *Annals* will be adopting SI (Système International) units. To familiarize readers with the system a few of the more commonly used units are listed below. (An article on this subject by Professor V. Wright appeared in the *Annals*, 1974, **33**, 568.)

Determination	To convert from old to new units multiply by	Approx. normal range in new units
<i>Plasma</i>		
Albumin	10	37–49 g/l
Calcium (total)	0.25	2.25–2.60 mmol/l
Chloride	No change	98–107 mmol/l
Creatinine	88.4	50–124 μ mol/l
Glucose	0.0555	(fasting) 2.5–4.7 mmol/l
Iron	0.179	(males) 14.0–31.0 μ mol/l (females) 11.0–29.0 μ mol/l
Urate	0.0598	(males) 0.20–0.45 mmol/l (females) 0.14–0.38 mmol/l
Urea	0.166	2.5–7.1 mmol/l
<i>Blood</i>		
Haemoglobin	Change in symbol only	(males) 13.5–18.0 g/dl (females) 11.5–16.5 g/dl
Leucocytes	10^6	4.0–11.0 $\times 10^9/l$
Platelets	10^6	150–400 $\times 10^9/l$

Book review

Future Trends in Inflammation. Proceedings of an International Meeting on Inflammation, Verona, June 28–30, 1973. Edited by G. P. Velo, D. A. Willoughby, and J. P. Giroud. 1974. Pp. 480, figs and tabs. Piccin Medical Books, Padua and London. (£45·00)

This book reports the Proceedings of an International Meeting on Inflammation sponsored by the European Biological Research Association, held in Verona, June 1973. It is divided into sections dealing with prostaglandins in inflammation, cellular events in inflammation, mechanism of anti-inflammatory drugs, general aspects of inflammation, immunological aspects of inflammation, and current research trends in chronic inflammation. Most of these sections begin with a brief introduction, and close with a good review of the field by the chairman for each session of the meeting. The discussion is published *verbatim*, and is particularly notable for the aptly pungent comments by a Dr. Vinegar. In common with many other books containing collected conference papers, it all adds up to a curate's egg, the standard varying from some highly interesting and informative accounts of current work on the one hand to variably restructured accounts of work previously published (albeit much of it of a very high standard) on the other. There are also a small number of very brief abstracts. I feel that the editors should have risked offending some of the authors by including at length only material which was new, and thereby also justifying the use of the misleading title. One does not

disagree with the need for the presentation of a verbal review of previously published work to place it in perspective at a meeting of this kind, but many contributors would probably be happy not to have to submit a lengthy manuscript when an abstract with appropriate references would suffice. Despite these strictures, particularly recommended for attention are the contributions by Giroud and co-workers on the distribution of prostaglandins in inflammatory exudate; Søndergaard and Greaves on the release of prostaglandins in human cutaneous sustained inflammatory reactions; Mariano and Spector on the formation and possible role of giant cells in chronic inflammation; Ferreira and Vane on the inhibition of prostaglandin biosynthesis and the mechanism of action of nonsteroidal anti-inflammatory drugs; Brune and co-workers on the role of polymorphonuclear leucocytes as mediators in acute inflammation; Asherson on the role of T cells in inflammation; and Turk and Poulter on macrophage activation in delayed hypersensitivity. Absolute priority of attention must be given to the final paper by Allison and Davies which is an outstanding review of some of the mechanisms underlying chronic inflammation, liberally seasoned with hypotheses while drawing attention to unresolved problems open to investigation. On reflection, perhaps this typically stimulating Allison offering is alone enough to justify the inclusion of 'Future' in the title of this book.

B. VERNON-ROBERTS

Note

Equipment for the Disabled—Change of Responsibility

The National Fund for Research into Crippling Diseases pioneered the publication 'Equipment for the Disabled' in 1960, when the idea of providing simple aids to daily living for disabled people was still relatively new and there was very little information available. From 1960–1974 three editions were published; the first two were 4-volume loose-leaf books and the third edition a series of 10 booklets (see below). The Oxford Regional Health Authority, on behalf of the Department of Health & Social Security, has assumed responsibility for publishing subsequent editions. The compilation and editing of 'Equipment for the Disabled' will continue to be carried out at Mary Marlborough Lodge.

Professional inquiries concerning equipment should be addressed to: Equipment for the Disabled, Mary Marlborough Lodge, Nuffield Orthopaedic Centre, Headington, Oxford OX3 7LD.

Orders for booklets (£1·50 each + postage; overseas prices quoted on request) should be sent to: Equipment for the Disabled, 2 Foredown Drive, Portslade, Sussex BN4 2BB.

The 3rd edition of 'Equipment for the Disabled'—10 illustrated booklets on aids and equipment—can be purchased as a complete set or as single copies. The information in the booklets is intended for those professionally concerned in advising and selecting equipment for handicapped persons of all ages. Aids shown have been assessed in use with disabled people and 'guidelines' are given to assist in the selection of an appropriate aid for a particular individual. Brief details and an illustration are included, together with manufacturers' and suppliers' addresses, and an indication of the price. The series is constantly being updated and notice will be given before publication of revised issues, together with any titles which may be added.

Titles available are: 'Wheelchairs and Outdoor Transport' (special suppl.), 'Communication', 'Clothing and Dressing for Adults', 'Home Management', 'Disabled Mother', 'Personal Care', 'Leisure and Gardening', 'Housing and Furniture', 'Hoists and Walking Aids', 'Disabled Child'.