Pain

VAS		4-point	
a	p	a	p
10.1	12.0	2.92	3.44
-1.9	-5.6	-0.07	-0.89
Grip strength			
a	p		
415 mm	415 mm of Hg		
+55	+60		
Articular index			
a	p		
15.4	13.2		
-5.7	-4.7		
Geigy ring size			
a	p		
592.5	596.9		
-11.7	-18.9		
Early morning stiffness			
a	p		
116.5 mins	126.4 mins		
-33.7	-101.1		
ESR			
a	p		
54.2 mm	55.8 mm		
-9.8	-27.3		
Latex			
a	p		
6.95	7.17		
-1.30	-2.00		
Weight			
a	p		
63.2 kg.	62.2 kg.		
-1.99	+0.10		
Hb			
a	p		
11.85 g	12.03 dl		
+0.27	+1.13		

All parameters showed a highly significant change ($P<0.01$) in the penicillamine-treated group except for weight change. Improvement in articular index, latex, and reduction in Geigy ring size were highly significant, grip strength was significant ($P<0.05$) on azathioprine: changes in other parameters were not significant. There was a deterioration in x-ray appearance.

Analysis between the two treatment groups showed a significantly greater fall in ESR and rise in Hb in the penicillamine-treated group compared with the azathioprine-treated group. No other difference between the two treatment groups was detected.

A total of 61 toxic effects were encountered (33 on penicillamine, 28 on azathioprine). 30 were gastrointestinal—15 on each treatment. 8 patients had early transient proteinuria on penicillamine and 6 lost their taste temporarily. 8 patients had to be withdrawn from azathioprine therapy, 6 due to extreme nausea and 2 due to lack of response. 3 stopped penicillamine, 2 due to flare-up of disease necessitating admission to hospital and 1 due to severe sickness.

Effects of local steroid injection for supraspinatus tears. Controlled study. E. N. Coomes and L. G. Darlington (St. Stephen's and St. Mary Abbot's Hospitals, London)

Shoulder pain is common but a minority of patients are referred to hospital. Diagnosis can be difficult and the criteria for treatment uncertain. We investigated supraspinatus tears by arthrogram correlating with the clinical findings and then assessed the effects of local Depo Medrone injection. 40 patients with clinical supraspinatus tears entered the trial. Those with successful arthrograms were separated into two groups, the first treated with local steroid injection, the other with a local anaesthetic injection. All had Conray mixed with the injection checking the site radiologically.

The two groups were similar with respect to age, sex, and ruptures of the shoulder capsule shown on the arthrogram. They were assessed over 5 weeks and seen weekly. Shoulder movement was recorded and patients volunteered the effect of the injection. None knew what the injection contained.

In our clinic shoulder pain referrals accounted for 3% of new patients over the years 1970–74. Of the 40 patients, 37 had successful arthrograms (93%). 81% had the anterior approach, 19% the posterior approach. The anterior approach hurt more but was more successful for the arthrogram. All 37 patients had clinical supraspinatus tears, arthrograms confirmed ruptures in 73%. Pain relief in the Depo Medrone group was significantly better for the first 3 weeks but there was little difference at a month. Movement range and the presence of painful arcs were unaffected by the steroid injection; however, resisted abduction was painful in only 6% of the Depo Medrone group at week 3 compared to 56% of the other group.

(1) Arthrography can be a useful adjunct in shoulder pain diagnosis. (2) The majority of the arthrograms confirmed the rupture of the supraspinatus. (3) Local steroid injection gives pain relief initially but after a month there is little difference between the two groups. (4) Apart from initial pain relief on resisted abduction there is no objective evidence to show local steroid improves the condition.

Rheumatic disorders in primary biliary cirrhosis. A. K. Clarke, R. M. Galbraith, E. B. D. Hamilton, and Roger Williams (King's College Hospital, London)

In the past 5 years 56 patients with primary biliary cirrhosis have been seen. Diagnosis depended on prolonged pruritis, a serum alkaline phosphatase in excess of twice normal, the presence of mitochondrial antibodies, and compatible histological features on liver biopsy. Of these patients, 11 showed features of scleroderma, 7 showed evidence of the so-called CRST syndrome which is characterized by soft tissue calcification (1 patient), Raynaud's phenomenon (6 patients), sclerodactyly (7 patients), and telangiectasia (2 patients). 4 patients showed evidence of systemic involvement, 3 with oesophageal disease and 2 with lung involvement. In those patients tested there appeared to be an increased frequency of the histocompatibility antigens 1 and 8. In contrast to the very high incidence of scleroderma, other rheumatic disorders were relatively uncommon but did include 6 other patients of whom 3 had an unusual destructive large joint arthritis.