LEADER

Palaeopathology and the rheumatic diseases p 885
The study of skeletal palaeopathology is a fascinating exercise in patient detective work, but is it just an absorbing hobby or does it have real relevance to the understanding of the rheumatic diseases? The leader argues that its importance is real, that it may provide important clues in the future, and that its study is becoming increasingly relevant.

SCIENTIFIC PAPERS

Interleukin-1 activated chondrocytes and immunohistochemistry p 889
In pig articular cartilage interleukin-1 activated chondrocytes have been successfully identified by immunolocalisation with a polyclonal antiserum. Not all the cells were positive at the dilution used, but they were heterogeneous and found at all zones in the cartilage. Possibly, as the authors suggest, this marks an early event before progressive proteoglycan depletion starts. At all events it is a potentially useful development in the study of the progress of the chondrocytes in disease. Similar changes were noted with human recombinant interleukin-1α.

Systemic lupus erythematosus (SLE), peripheral blood mononuclear cells, and the heat shock protein gene p 893
This paper demonstrates the spontaneous increase in the transcription of the heat shock protein gene in peripheral blood mononuclear cells in active SLE. The suggestion is that heat shock proteins might be produced when SLE becomes active and that they may change the function of the peripheral blood mononuclear cells: they are certainly developmentally regulated and are implicated in both the differentiation and proliferation of cells, so their role has to be an important one.

Children, brucellosis, and osteoarticular complications p 896
A study of children with brucellosis in Saudi Arabia describes their problems with resulting arthritis, myalgia, and osteomyelitis. Raw milk was the source of the infection, and bone scintigraphy was better than radiography in identifying bone and joint disease. Fortunately, the cure rate was high when antibiotics were used, but the authors plead for early detection.

Rheumatoid arthritis (RA), adipose tissue lipids, and disease duration p 901
Altered patterns of fatty acids in plasma and other tissues have been shown to occur in many diseases, so it is perhaps not surprising that the pattern may alter in RA too. This paper from Sweden shows that fundamental changes in fatty acid concentrations do indeed occur in this disease and that this tendency increases with disease duration. The decreases noted may be related to many factors, particularly the degree of inflammation. The concentration of selenium decreases too.

Rheumatoid factors, disease activity, and joint damage in RA p 906
Correlations between rheumatoid factors and progression of disease activity in RA were examined in this paper. Those between clinical activity of the disease and rheumatoid factor levels proved to be poor, as has been shown before, but at two years IgG rheumatoid factor was shown to be significantly associated with the change in radiological score. This correlation was subject to an initial time delay, indicating perhaps that the association is an indirect one.

Rheumatoid factors again and active RA p 910
Rheumatoid factors are antiglobulin antibodies: using an enzyme linked immunosorbent assay (ELISA) technique the authors showed that measuring rheumatoid factors that cross link human IgG and sheep IgG provides an almost complete specificity for active RA compared with healthy controls and those with other connective tissue diseases.

Judging disease activity in RA p 916
To try to develop a disease activity score in RA six rheumatologists assessed 113 patients over a period of up to three years. They used a variety of variables and found that their decisions as to whether or not to use slow acting antirheumatic drugs were based mainly on articular symptoms. The Ritchie score proved to be particularly helpful, laboratory abnormalities less so.

Pulmonary function, exercise tolerance, and ankylosing spondylitis p 921
Restriction of chest expansion is a common feature of ankylosing spondylitis, so how important is this? There was a significant association between the restriction and lung vital capacity, as has been shown before, but it did not seem to have much effect on exercise tolerance. It seems, therefore, that severely restricted spinal and chest wall mobility is not a bar to a satisfactory ability to work.

5-Fluorouracil in the treatment of scleroderma p 926
Scleroderma is a disease that we are not good at treating as a recent review in this journal has indicated. It is refreshing to learn that 5-fluorouracil has at least a modest effect, but it is slow to work and is toxic to use. Whether it works in the longer term is still not known.

Labial minor salivary glands in Sjögren’s syndrome and IgM monoclonality p 929
Patients with Sjögren’s syndrome have polyclonal B cell activation and express a mono-oligoclonal B cell process. This paper describes a study of patients with this syndrome with and without circulating cryoglobulins. Of those with monoclonal cryoglobulins, two had immunohistological features of immunocytomas. The data presented suggest that neoplastic transformation in primary Sjögren’s syndrome may occur in the exocrine glands.

Bone scintigraphy in early discitis p 932
Discitis is an inflammatory process affecting the intervertebral disc and as such is painful and may be mistaken for other conditions affecting the back. Bone scintigraphy was shown to be a valuable and useful procedure for helping to make an accurate diagnosis. It proved to be as accurate as computed tomography and better than conventional radiography in making an early diagnosis.
CASE REPORTS

Raynaud’s phenomenon, positive antinuclear antibodies, and malignancy  p 935
It is not usual to find either Raynaud’s phenomenon or the presence of antinuclear antibodies in malignancy, and the combination of both is exceedingly rare. Nevertheless, it happened in an unfortunate woman aged 78 years. The primary site of her adenocarcinoma was unknown.

Breast augmentation and autoimmune disease  p 937
Fortunately, it is uncommon to see autoimmune disease after silicone or paraffin enlargement of the breast in plastic surgery, though other complications are well known. It did occur, however, in the woman whose example is reported. She developed SLE with positive antinuclear antibodies, but the whole episode remitted when the breast implants were removed.

Cerebral infarction, the antiphospholipid syndrome, and intravenous gammaglobulin  p 939
A young woman with SLE and the antiphospholipid syndrome developed both severe thrombocytopenia and cerebral infarction. Treatment with cytostatic drugs and corticosteroids proved ineffective, but intravenous gammaglobulin treatment was of some help. The immunoglobulin infusions were associated with a rise in the platelet count but not with any change in the anticyclodiopin concentration. It is, however, a costly treatment.

Gout, cardiomyopathy, and neurological changes  p 942
The association of neurological abnormalities and gout has been described in the Lesch-Nyhan syndrome and is due to deficiency in the hypoxanthine guanine phosphoribosyl-transferase enzyme. A young man is described here who had a possible variant of this syndrome in association with cardiomyopathy.

Posterior compartment syndrome and ruptured Baker’s cyst  p 944
Rupture of a Baker’s cyst is a common event and may easily be mistaken for a deep vein thrombophlebitis of the leg. For understandable reasons just such confusion occurred here. The story was further complicated by the development of an posterior compartment syndrome. This has not been reported before.

DISPATCH

From the German Federal Republic  p 946
It is the turn of Germany this time. Rheumatology there has developed from the balneology clinics of the past rather than from academe. University chairs are as yet few and far between and the future of the specialty is going to be turbulent, but it is clearly going to be more identified with the universities. These trends are already becoming apparent. The recent amalgamation of East and West Germany adds a further dimension.

REVIEW

Overlap syndromes  p 947
We tend to fit our diagnoses into compartments: ‘rheumatoid arthritis’, ‘SLE’, and so on, but these compartments are man made and nature is not quite so tidy. Occasionally we find that a patient with RA has clear features of scleroderma, for example, and it is not easy to classify the disease. This article looks at some of the underlying mechanisms at work, not least being different observers’ approaches to diagnosis.

VIEWPOINT

Hyaluronate in rheumatology and orthopaedics  p 949
Hyaluronate is a glycosaminoglycan and is responsible for the viscoelasticity of synovial fluid. A decrease in its concentration may therefore be significant. Hyaluronate concentration increases with age, but its molecular weight decreases: how important are these changes and what are their implications for arthritis? We need to know more.

CONFERENCE REPORT

25th Anniversary of the Glasgow Centre for Rheumatic Diseases  p 953
Does it seem possible that the Centre is now 25 years old? Those who remember its early struggles will be glad to hear of the healthy organism functioning under the expert care of Hilary Capell and Roger Sturrock. They will also be glad to know that that old warrior Waton Buchanan is alive and well and stimulating us as well as ever. Past and present alumni as well as a host of other well-wishers hope that the Centre will be granted another 25 years as successful as the last.

EDITOR

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