

NOTICE TO SUBSCRIBERS

Subscriptions are payable to the British Medical Association. Address: British Medical Association House, Tavistock Square, London, W.C.1.

NOTICE TO CONTRIBUTORS

Papers submitted to this Journal are accepted on the understanding that they have not been and will not be published in any other journal, and are subject to editorial revision. All papers and other editorial communications should be addressed to Dr. C. W. Buckley, Bentley Cottage, Ashbourne, Derbyshire.

The author of an original article should make adequate references to previous work on his chosen subject.

A full summary of his observations and conclusions must be given.

A paper describing a single case will not be accepted unless the case is sufficiently rare, or shows important features not previously described, or has been made a subject of special observation or experiment.

Articles must be as concise as possible and be typewritten on one side of the paper only, with double spacing and a margin of not less than $1\frac{1}{4}$ inches. Only recognized abbreviations should be used. Graphs, charts, tables, and legends for them should be presented on separate sheets and not included in the text. When half-tone reproduction of x-ray illustrations is required, the author is advised to send the original film unless he wishes to bring out special points in a print of his own choice. Photographs and photomicrographs should be printed on glossy paper, should be larger than the size desired for reproduction, and, if transmitted through the post in a tube, should be rolled with the picture outside. With the exception of letters and numbers, which should be lightly written in pencil, everything that is to appear in the reproduction of a graph or chart should be carefully drawn in black ink on tracing linen, or Bristol board, or stout, smooth, white paper.

References should be arranged according to the Harvard system. In the text, the year of publication must follow the author's name, more than one paper in any one year being indicated by a small letter (*a, b, c*) after the date. No numbering of references is necessary. At the end of the contribution references are arranged in the alphabetical order of the author's names. The reference details are given as follows: Author's name and initials, year of publication (in parentheses), title of periodical (in italics, abbreviated according to the *World List of Scientific Periodicals*), volume number (bold type, Arabic numerals), and first page number (ordinary type, Arabic numerals), thus:

Cowan, J. (1929). *Quart. J. Med.*, **22**, 237.

When a book is referred to, the full title, publisher, the place and year of publication, edition and page number should be given.

Contributors will receive one proof in page, but it is assumed that all but verbal corrections have been made in the original manuscript; an allowance at the rate of ten shillings per sheet of sixteen pages is made for alterations in the proof (printer's errors excepted), and contributors will be responsible for any excess.

Fifty free reprints of articles will, if desired, be given to contributors. A limited number of additional reprints at cost price can be supplied if application is made when returning proofs. An estimate of costs will be given on application to the Publishing Manager, British Medical Association.

Papers which have been published become the property of this Journal, and permission to republish must be obtained from the Editors.

Application for Advertisement space should be addressed to the Advertisement Manager, British Medical Association, Tavistock Square, London, W.C.1.

pain and suffering, the real aim must be the prevention of rheumatism, and until some work is done on the causation we are not likely to get very far on the preventive side.

A problem of this kind cannot be tackled without Government help, and I want to make it perfectly clear so far as my Ministry is concerned that we are going to make rheumatism one of the big problems that will be tackled under the National Health Service. Of course, we can do only what accommodation and staff will permit. No doubt difficulties in this respect will be overcome, but we must have adequately trained staff to deal with the problem.

Then I want to say to the medical profession that if rheumatism is to be properly studied in these centres as I have indicated we must have at any rate a group of young people who are adequately trained in the first instance as general physicians and who, over and above that, have had training in the study of rheumatic diseases up to the point to which we can carry it at the present time. *If young people will come forward and take advantage of the opportunities now available, we can offer them scope in this field of rheumatism. They will be general physicians with rheumatic diseases as their particular speciality.* In addition we need physiotherapists, we need social workers, and other groups of workers, and to those who have ambitions in that direction I say the same thing. If they care to interest themselves in this problem there will assuredly be a place for them in the National Health Service so far as rheumatism is concerned. More than that, the medical student should have

more opportunity during his undergraduate days of studying this great problem of chronic disease, for it is what he will have to deal with so often in his subsequent practice as a general practitioner, and in the past he has had very little opportunity of studying cases of chronic disease.

I wanted to make it clear what the intention of the Ministry is in respect of rheumatism. I wish the Council an even more successful ten years in the future than they have had in the past. All these official schemes for National Health Services and the like will not thrive in the absence of first-class voluntary effort, and if the Empire Rheumatism Council will go on in the same way for the next ten years no one will be better pleased than the Ministry of Health."

Research

In the tenth Annual Report of the Empire Rheumatism Council, Lord Horder said that, acting on the recommendation of the Scientific Advisory Committee, the Council has appointed two whole-time Registrars, whose duty it will be to investigate the factors in the causation of rheumatoid arthritis: in the first instance it has been decided to deal with a token 100 cases. If this preliminary piece of clinical research is promising it is intended to investigate 2,000 cases of the disease. A carefully planned questionnaire and case-note has been prepared by the S.A.C., and this work will make it possible for new facts to be revealed and correlated in connexion with this important group of rheumatic cases.

UNDERGRADUATE WEEK-END COURSE IN RHEUMATIC DISEASES

The first undergraduate week-end course in rheumatic diseases was given by the Empire Rheumatism Council on Nov. 22, 23, and 24 at the British Red Cross Society's Clinic for Rheumatism, Peto Place, London. The inaugural lecture was given by Lord Horder. This was followed by a lecture on specific arthritides, by Dr. K. Stone. Dr. M. B. Ray then gave a survey of the apparatus used at the Clinic, and this was followed by a complete tour of the Clinic and demonstration of hydrotherapeutic treatments.

Saturday's lectures began with one by Dr. W. S. C. Copeman on non-articular rheumatism, followed by Dr. W. S. Tegner on rheumatoid arthritis. A luncheon was then given by the Council at the White House. Dr. W. S. C. Copeman, in the absence of Lord Horder, took

the chair. In the afternoon there was a demonstration and lecture on osteo-arthritis by Dr. E. Fletcher, who was followed by Dr. G. D. Kersley, speaking on ankylosing spondylitis, and by Dr. J. W. Shackle who dealt with laboratory investigations. Miss L. Raftery gave a lecture on the gynaecological causes of low back pain.

On Sunday morning Dr. D. Baker lectured on rheumatism in childhood, and Mr. P. Ascroft on sciatica. In the afternoon Dr. H. Turney spoke on Gout and Dr. F. C. Golding on x-ray diagnosis. The final lecture was given by Mr. W. D. Coltart on orthopaedic aspects of rheumatic disease.

The course was limited to forty undergraduates in their final year, and those attending represented most of the London teaching hospitals.

lesion seemed to disappear completely under anaesthesia. Dr. Kersley suggested that this might support Elliott's theory of local spasm of muscle fibres being a cause of pain frequently diagnosed as fibrositis but which could originate as the result of many causal factors.

Dr. Alan Stoddard said that, although fibrositic trigger points might well be referred sites of tenderness

from a cause more centrally placed, yet pressure over tender fibrositic nodules frequently gave rise to referred pain, which pain could be relieved at least temporarily by local anaesthesia; therefore the fibrositic nodules themselves were the cause of these pains. Dr. Stoddard also asked what part the sympathetic nervous system played in the production of somatic pain.

INTERNATIONAL SOCIETY OF MEDICAL HYDROLOGY

A number of distinguished foreign visitors to this country attended the first annual meeting since the war of the International Society of Medical Hydrology, which was held at Buxton from October 4 to 6 last. Among those present were Dr. Loring Swaim and Dr. Abraham Cohen from the U.S.A., Dr. V. Ott of Zurich, Dr. P. Petit from France, Dr. J. Michez of Brussels, Prof. F. Lenoch of Prague, and Dr. J. van Breemen from Holland.

The following officers were elected for 1946-47: president, Lord Horder; chairman of council, Dr. J. B. Burt; vice-chairman, Dr. G. D. Kersley; hon. treasurer, Dr. Frank Clayton; hon. secretaries, Prof. Frantisek Lenoch and Dr. Donald Wilson; thirty-nine new members and five associates were elected. Arrangements for renewing the publication of the society's journal were discussed.

Lord Horder, in his presidential address, said that interchange of friendship and ideas amongst medical men of all countries would be a most important factor in restoring international relations.

Dr. van Breemen discussed infection, constitutional anomalies, abnormalities of peripheral circulation and of the skin, and social and environmental influences, in relation to medical hydrology. Dr. Ott gave an interesting description, published at p. 206 of this issue, of Swiss research work on the effects of thermal treatment on the autonomic nervous system.

Dr. Abraham Cohen described the use made, at the Philadelphia General Hospital, of physostigmin in the

relaxation of muscle spasm. He said that physostigmin salicylate was as efficacious as prostigmin, and was less expensive and less toxic. At the Philadelphia General Hospital, in-patients with arthritis were given injections of isotonic saline daily for a week. If these, together with complete rest, produced no improvement, hypodermic injections of atropine (0.06 mg.) was given daily, also for a week. If there was still no improvement, physostigmin was given with atropine mixed in the same syringe, beginning with 0.06 mg. of each. The dosage was adjusted according to the side-effects produced on the autonomic nervous system of individual patients, and the two drugs were given for about six weeks. The best results were obtained in rheumatoid arthritis with severe spasm. Dr. Cohen said that the treatment was not a cure but it might produce considerably amelioration of symptoms, particularly relief from pain. Among other conditions in which good results had been obtained were spasm due to war wounds and other traumata, Felty's syndrome, and paralysis from nerve injuries.

Dr. Loring Swaim discussed American ideas on the treatment of chronic rheumatism, and particularly emphasized the physician's responsibility in reorientating the patient. Dr. R. B. Whittington of Manchester discussed the correlation between the plasma viscosity of the blood and the erythrocyte-sedimentation rate, and gave evidence to show that the former was the better guide to the progress of various diseases.

LIGUE INTERNATIONALE CONTRE LE RHUMATISME

BRITISH BRANCH

The Scientific Advisory Committee of the Empire Rheumatism Council has been asked to re-start a British branch of the Ligue Internationale contre le Rhumatisme, and they have appointed a sub-committee to act as executive for this purpose.

A European branch has been formed and is holding its first Congress in Copenhagen in September; and an American branch, sponsored by the American Rheumatism Association, has also been formed. The first Congress of the whole Ligue will be held in the U.S.A. in 1949, though members are, of course, welcome at any of the branch congresses.

A meeting of the British Executive Committee has been held and the following officers were elected: Dr. W. S. C. Copeman, Chairman and National Representative; Dr. G. D. Kersley, Treasurer; Dr. Oswald Savage, Secretary; Drs. B. Schlesinger and W. Tegner, members.

It was decided that the *Annals of the Rheumatic Diseases* should be the official Journal of the British Branch of the Ligue, this Journal having already been adopted as the official organ of the American branch.

The subscription for members was fixed at one guinea, this subscription to hold good for the year September, 1947-48 (i.e. dating from the first post-war congress). The Treasurer, Dr. G. D. Kersley, 6 The Circus, Bath, would, however, be glad if members would send their subscriptions to him, when they enrol, in order to avoid the need for extra correspondence for all parties concerned.

The British Committee of the Ligue are anxious to set the British branch on a firm financial footing, and to enrol members who are really interested in the welfare of the speciality and who will reflect honour on the British branch. Any would-be members are asked to apply to the Hon. Treasurer.

FIRST CONGRESS OF THE EUROPEAN BRANCH

The First Congress of the European Ligue Internationale contre le Rhumatisme will be held in Copenhagen from Wednesday, Sept. 3, to Saturday, Sept. 6, 1947. The President of the Congress is Prof. Cai Holten, and the Vice-President, Prof. E. Jarlov; Honorary Presidents include a representative from each of the countries participating in the congress. The Congress Committee is composed of the Chairman, Professor Cai Holten; the Secretary General, Chief Physician G. Edström; the Treasurer, Director Ove de Bornemann; and the Corresponding Secretary and leader of the Congress Bureau, K. Kalbak. The address of the Congress Bureau is Rigsforeningen til Bekaempelse af de reumatiske Sygdomme, Rysenteensgade 16, Copenhagen V, Denmark.

The scientific lectures are to be divided into the following groups: (1) the aetiology and pathogenesis of arthritis, especially with regard to streptococci; (2) electrodiagnosis and electrotherapy; (3) the social importance of the rheumatic diseases; (4) climatotherapy and treatment with hyperpyrexia; (5) free lectures. The speaking time is to be limited to twenty minutes for each lecture, and the official languages will be English and French.

A typewritten résumé of any lecture to be delivered should be received by the congress bureau before April 1, 1947. The résumé will be sent to the congress members before August 1, 1947, together

with the final programme for the congress, probably as the first issue of the new *Acta Rheumatologica*.

A preliminary programme has been made up as follows. A reception of the congress members, with ladies, a social gathering, and visit to the Tivoli, will take place on Wednesday, September 3. The following day, at 9 a.m., the congress will be opened, and from 9.15 to 12 there will be lectures on the aetiology and pathogenesis of arthritis, especially with regard to streptococci. The afternoon session will be devoted to electrodiagnosis and electrotherapy, and at 7 p.m. there will be an official banquet (evening dress). The social importance of the rheumatic diseases will be discussed on Friday morning, September 5, and in the afternoon there will be free lectures.

On Saturday, September 6, the congress will be held in Lund (Sweden). The congress members will go by boat from Copenhagen to Malmo, and by car from there to Lund. The morning session will be from 11 a.m. to 2 p.m., and will be devoted to climatotherapy and treatment with hyperpyrexia. After lunch there will be arrangements for sight-seeing, and at 7 p.m. there will be a closing banquet in Malmo (day dress). Delegates will return to Copenhagen at 10 p.m.

Reservation forms may be obtained from the Empire Rheumatism Council, Tavistock House North, Tavistock Square, London, W.C.1, to whom they should also be returned.

The book is well printed and lavishly illustrated; and though the price is high which is inevitable in these days, the investment will be found well worth while; it can be strongly recommended to all who are concerned with the study and treatment of rheumatic diseases.

C. W. BUCKLEY.

Conferences Cliniques de Rhumatologie Pratique.

By François Francon. 1946. Vigot Frères. Paris. Pp. 386. No price given.

More than a quarter of a century has passed since Dr. François Francon started to practise in Aix les Bains. He is Vice-President of the French Ligue Française contre le Rhumatisme, a research worker, and a physician whose interests have embraced the social as well as the clinical aspects of his chosen subject, rheumatism.

This new book, written primarily for the general practitioner, is practical in its outlook. From among the diverse conditions that may be included in the term "rheumatism" he has taken certain fairly well-defined clinical pictures and, in simple terms, described their main clinical features and pathology, and detailed the treatment that his rich

and varied experience has taught him to consider as the best available. Unlike many French authors he has read widely, and is familiar with, the work of his British and American colleagues. All who are interested in the rheumatic diseases will learn something from his description of rheumatism affecting the shoulder, and of brachial neuritis and stenosing tenosynovitis. His description of Looser's syndrome, with its diffuse pains, paraesthesiae, and crippling, the multiple fractures seen in the radiographs, and the rapid clinical improvement that follows rest, adequate diet, calcium gluconate, vitamin D, and irradiation with ultra-violet light, is based on a larger series of patients than anyone has studied in this country. The author discusses without bias the indications for spa treatment, and the part that the spa can play in the treatment and prevention of the rheumatic diseases. In brief, in this—his latest—book, Dr. Francon has given of his best; he has discarded that which his clinical experience has led him to believe to be of little value, and has set an example which might be followed with profit by some of those who are writing, or have a yearning to write, a book on rheumatism.

FRANCIS BACH.

NUFFIELD MEDICAL FELLOWSHIPS FOR ADVANCED TRAINING IN CHRONIC RHEUMATISM

The Nuffield Foundation is prepared to award a few fellowships to enable some suitably qualified medical men and women to obtain advanced training in chronic rheumatism. So far as possible, the amount of any award and the conditions attached to it will be adapted to the need of the recipient having regard to the purpose for which these fellowships are offered. Normally the annual value of a fellowship will be between £500 and £800. In the event of a Fellow being required to travel abroad to obtain special experience or study facilities, the Foundation will pay the travelling expenses involved in addition to the award. A fellowship will be awarded for one year, but may be renewed for a second.

Fellowships will be open to men or women who are British subjects holding a medical qualification registrable in the United Kingdom, and who are normally resident there and who desire to specialize in the diagnosis, treatment, and study of chronic rheumatism. Candidates must have spent at least one year since qualification in the general medical practice of a hospital, and preferably should hold

the M.R.C.P. diploma. A Fellow may not hold any other award concurrently with his fellowship without the permission of the trustees of the Foundation.

Fellows will be required to carry out, at institutions approved by the trustees of the Foundation, a programme of work and training similarly approved. Other work, paid or unpaid, may not be undertaken without the permission of the trustees. A Fellow will be required to submit to the trustees, at the end of each year's tenure of his fellowship, a report on his work during that year. Should the trustees at any time find that a Fellow neglects or has neglected the obligations of his appointment, they shall have power immediately to terminate his fellowship.

The Foundation is prepared to receive applications at any time. Medical officers at present serving with the armed or auxiliary forces of the Crown may apply for fellowships tenable on their release from such forces.

Forms of application are obtainable from The Secretary, Nuffield Foundation, 12 and 13, Mecklenburgh Square, London, W.C.1.

INDEX TO VOLUME V

A

- Acetarsol, sodium salt of, for pleuropneumonia-like organisms (G. M. Findlay), 158
ACKERMAN, W. L.: A benign type of rheumatic fever, 14
Actinomyces muris and L¹ (G. M. Findlay), 153
Acute rheumatism (J. Alison Glover), 126
Air, bacteriological investigation of, during an epidemic of haemolytic streptococcal throat infection (C. A. Green, S. W. Challinor, and J. P. Duguid), 36
Allergy, and rheumatism (V. Ott), 207
American Medical Association, message to Empire Rheumatism Council, 217
American Rheumatism Association, message to Empire Rheumatism Council, 217
Anatomy and physiology of diarthrodial joints (D. V. Davies), 29
Ankylosing spondylitis: its aetiology and pathology (C. W. Buckley), 49
Ankylosing spondylitis (review article) (W. Tegner), 103
Antidromic nervous impulses and axon reflexes (M. Kelly), 5
Army, the management of chronic arthritis and other rheumatic diseases among soldiers of the U.S. (P. S. Hench and E. W. Boland), 106
Arthritis, lesions in muscle in (H. J. Gibson, G. D. Kersley, and M. H. L. Desmarais), 131
Arthritis, the management of chronic, and other rheumatic diseases among soldiers of the U.S. Army (P. S. Hench and E. W. Boland), 106
Arthritis, pleuropneumonia-like organisms and (G. M. Findlay), 153
Arthritis, rheumatoid (see rheumatoid arthritis)
Articular cartilage, anatomy and physiology of (D. V. Davies), 29
Asterococcus canis isolated from dogs (G. M. Findlay), 153

B

- β -diethylaminoethyl dehydrocholate, fibrositis and (H. Coke), 96
Bacteriological investigation of air during an epidemic of haemolytic streptococcal throat infection (C. A. Green, S. W. Challinor, and J. P. Duguid), 36
BAILONE, S. (and O. and M. Lucchesi): Weltmann coagulation reaction in rheumatoid arthritis, 78
BASTOW, J.: Orthopaedic aspects of rheumatoid arthritis, 55
Benign rheumatic fever (W. L. Ackerman), 14
Biochemical factors, in ankylosing spondylitis (C. W. Buckley), 51
Blood uric acid, and gout (L. C. Hill), 171
BOLAND, E. W. (and P. S. Hench): The management of chronic arthritis and other rheumatic diseases among soldiers of the U.S. Army, 106
BOOK REVIEWS: Arthritis and allied conditions, 20; Arthritis, what can be done about it, 20; N.A.P.T. Handbook of tuberculosis activities, 104; Journal of gerontology, 140; Medical Disorders of the Locomotor System, 224; Conférences Cliniques de Rhumatologie Pratique, 225
Bornholm disease, and epidemic myalgia (D. Wilson), 211
British Expeditionary Force (to France), rheumatism in (W. S. C. Copeman), 116
BUCKLEY, C. W.: Ankylosing spondylitis: its aetiology and pathology, 49
BUCKLEY, C. W.: Chronic rheumatic diseases from the services in E.M.S. hospitals, 122
BUCKLEY, C. W.: Presidential address to Heberden Society, 64

C

- Central Mediterranean Force, rheumatism in (W. S. C. Copeman), 119
CHALLINOR, S. W. (and C. A. Green and J. P. Duguid): Bacteriological investigation of air during an epidemic of haemolytic streptococcal throat infection, 36
Chemotherapy and pleuropneumonia-like organisms (G. M. Findlay), 158
CHRISTIE, T. A. (and L. G. C. E. Pugh): A study of rheumatism in a group of soldiers with reference to the incidence of trigger points and fibrositic nodules, 8
Chronic rheumatic diseases from the services in E.M.S. hospitals (C. W. Buckley), 122
Chronic rheumatic diseases in the world war 1939-45 (W. S. C. Copeman), 115
Chronic rheumatism (Loring T. Swaim), 192
Chronic rheumatism in Scotland, 26
Chrysotherapy, in chronic rheumatism (Loring T. Swaim), 194
Cinchophen, for gout (L. C. Hill), 175
Cinema, bacteriological investigations in (C. A. Green, S. W. Challinor, and J. P. Duguid), 41
COKE, H.: Fibrositis and β -diethylaminoethyl dehydrocholate, 96
Colchicine, for gout (L. C. Hill), 175
Cold-reaction test for peripheral vasomotor disturbances in rheumatism (A. Woodmansey), 99

COMROE, Bernard. (Obit.), 140

- COPEMAN, W. S. C.: The chronic rheumatic diseases in the world war 1939-45, 115
COPEMAN, W. S. C.: Rheumatism in Sweden, 17
Coronary disease and peri-arthritis of shoulder (M. Kelly), 72

D

- DAVIES, D. V.: Anatomy and physiology of diarthrodial joints, 29
Deep pain system, and fibrositis (M. Kelly), 5
DESMARAIS, M. H. L. (and H. J. Gibson and G. D. Kersley): Lesions in muscle in arthritis, 131
DESMARAIS, M. H. L. (and G. D. Kersley and H. J. Gibson): Nodule formation in rheumatic disease, 141
Diarthrodial joints, anatomy and physiology of (D. V. Davies), 29
Diet, for gout (L. C. Hill), 175
Disks, intra-articular (D. V. Davies), 30
Diuretics, for gout (L. C. Hill), 176
Dormitory, bacteriological investigations in (C. A. Green, S. W. Challinor, and J. P. Duguid), 39
Droplet-nuclei, air-infection with respiratory (C. A. Green, S. W. Challinor, and J. P. Duguid), 46
DUGUID, J. P. (and C. A. Green and S. W. Challinor): Bacteriological investigation of air during an epidemic of haemolytic streptococcal throat infection, 36
Dust, air infection with (C. A. Green, S. W. Challinor, and J. P. Duguid), 46

E

- East African Command, rheumatism in (W. S. C. Copeman), 121
Emergency Medical Service, admissions to hospitals from the services (J. Alison Glover), 129
Emergency Medical Service, chronic rheumatic diseases from the services in E.M.S. hospitals (C. W. Buckley), 122
EMPIRE RHEUMATISM COUNCIL: Annual Report, 1945, 21; and Heberden Society, 64; Annual meeting, 1945, 67; postgraduate course, 139; tenth anniversary of foundation, 217
Epidemic myalgia affecting the trapezius muscle (D. Wilson), 211
Erysipelothrix polyarthritis of swine, 178

F

- Fellowship of Postgraduate Medicine, week-end course in chronic rheumatism, 179
Fibrositic nodules and trigger points, a study of, in a group of soldiers (L. G. C. E. Pugh and T. A. Christie), 8
Fibrositis and β -diethylaminoethyl dehydrocholate (H. Coke), 96
Fibrositis, differentiation from psychogenic rheumatism (P. S. Hench and E. W. Boland), 110
Fibrositis, the nature of (M. Kelly), 1, 69
Fibrositis, nodule formation in (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 141
Fibrositis in the services (C. W. Buckley), 122
FINDLAY, G. M.: Pleuropneumonia-like organisms and arthritis, 153
FLETCHER, E.: Necrobiotic nodule of rheumatoid arthritis type with lipid deposition, 88
Focal infection in rheumatism (V. Ott), 207
Formol-gel test on plasma and serum in rheumatic cases (H. J. Gibson and R. M. Pitt), 83

G

- Gibraltar, rheumatism in (W. S. C. Copeman), 119
GIBSON, H. J. (and R. M. Pitt): The formol-gel test on plasma and serum in rheumatic cases, 83
GIBSON, H. J. (and G. D. Kersley and M. H. L. Desmarais): Lesions in muscle in arthritis, 131
GIBSON, H. J. (and G. D. Kersley and M. H. L. Desmarais): Nodule formation in rheumatic disease, 141
Globulins, non-rouleaux-forming pathological, in rheumatism (H. J. Gibson and R. M. Pitt), 83
Gloucester, Duke of, message from, to Empire Rheumatism Council, 217
GLOVER, J. Alison: Acute rheumatism, 126
Gold compounds in chronic rheumatism (Loring T. Swaim), 194
Gold compounds for pleuropneumonia-like organisms (G. M. Findlay), 158
Gonorrhoeal arthritis, in the U.S. Army (P. S. Hench and E. W. Boland), 109
Gout, nodule formation in (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 141
Gout, review of, 1939-46 (L. C. Hill), 171
Gout, in the services (C. W. Buckley), 124
GREEN, C. A. (and S. W. Challinor and J. P. Duguid): Bacteriological investigation of air during an epidemic of haemolytic streptococcal throat infection, 36

H

- Haemolytic streptococcal throat infection, bacteriological investigation of air during (C. A. Green, S. W. Challinor, and J. P. Duguid), 36
HEBERDEN SOCIETY: Annual dinner, 1945, 64; Scientific meeting, 1945, 65; Business meeting, 1945, 66; meeting in May, 1946, 139; Annual General Meeting, 1946, 177; Presidential address by Mr. S. L. Higgs, 220; discussion on somatic pain, 220
HENCH, P. S. (and E. W. Boland): The management of chronic arthritis and other rheumatic diseases among soldiers of the U.S. Army, 106
HENCH, P. S.: Discussion on paper by Herz, 204
 Herniation of subfascial fat as a cause of low back pain (R. Herz), 201
HERZ, RALPH: Herniation of subfascial fat as a cause of low back pain, 201
 Heredity, and gout (L. C. Hill), 171
HIGGS, S. L.: Presidential address to Heberden Society, 220
HILL, L. C.: Review of gout, 1939-46, 171
 Histology, of nodule formation (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 141
 Histology, of rheumatoid arthritis (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 131
HÖJER, J. AXEL: Organization of rheumatism research and treatment in Sweden, 183
HORDER, LORD: Annual report of Empire Rheumatism Council for 1945, 21; tenth anniversary of E.R.C., 217
 Hospitals, in Sweden, 186
 Hyoscine, for gout (L. C. Hill), 176

I

- Incidence of rheumatism (B. R. Nisbet), 168
 India and S.E.A.C., rheumatism in (W. S. C. Copeman), 121
 International Society of Medical Hydrology, annual meeting, 222
 Injury, and fibrositis (M. Kelly), 162
 Invaliding, from the services (J. Alison Glover), 129

J

- JAMESON, Sir Wilson**, speech at Empire Rheumatism Council, 218
 Joints, anatomy and physiology of diarthrodial (D. V. Davies), 29

K

- KELLY, M.**: The nature of fibrositis, 1, 69, 161
KERSLEY, G. D. (and H. J. Gibson and M. H. L. Desmarais): Lesions in muscle in arthritis, 131
KERSLEY, G. D. (and H. J. Gibson and M. H. L. Desmarais): Nodule formation in rheumatic disease, 141
KERSLEY, G. D.: Rheumatoid arthritis (review article), 61
 Kilmarnock, incidence of rheumatism in (B. R. Nisbet), 168

L

- Lead poisoning, and gout (L. C. Hill), 174
 Lesions in muscle in arthritis (H. J. Gibson, G. D. Kersley, and M. H. L. Desmarais), 131
 Leukaemia, and gout (L. C. Hill), 174
LIGUE INTERNATIONALE CONTRE LE RHUMATISME: British Branch, 223; First European Congress, 223
 Lipoid deposition, necrobiotic nodules of rheumatoid arthritis type with (E. Fletcher), 88
 Low back pain, herniation of subfascial fat as a cause of (R. Herz), 201
LUCCHESI, M. and O.: Personal experience with neostigmine therapy in rheumatoid arthritis, 214
LUCCHESI, M. and O.: Return to normal of x-ray changes in rheumatoid arthritis, 57
LUCCHESI, O. and M. (and S. Bailonie): Weltmann coagulation reaction in rheumatoid arthritis, 78

M

- Management of chronic arthritis and other rheumatic diseases among soldiers of the U.S. Army (P. S. Hench and E. W. Boland), 106
 Middle East Force, rheumatism in (W. S. C. Copeman), 116
MORRIS, N.: on osteoporosis, 139
 Multiple lesions in fibrositis (M. Kelly), 161
 Muscle, lesions in, in arthritis (H. J. Gibson, G. D. Kersley, and M. H. L. Desmarais), 131
 Musculo-tendinous junction, physiology of (M. Kelly), 6
 Myalgia, epidemic, affecting the trapezius muscle (D. Wilson), 211
 Myalgic lesions (M. Kelly), 2, 69, 161

N

- Nature of fibrositis (M. Kelly), 1, 69, 161
 Necrobiotic nodules of rheumatoid arthritis type with lipoid deposition (E. Fletcher), 88
 Neostigphenamine, preventing arthritis in mice (G. M. Findlay), 158
 Neostigmine therapy in rheumatoid arthritis (M. and O. Lucchesi), 214
 Neural hypothesis, and fibrositis (M. Kelly), 161
 Neuropathic joints (M. Kelly), 166
NISBET, B. R.: The incidence of rheumatism, 168
 Nodule formation in rheumatic disease (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 141
 Nodules, fibrositic (L. G. C. E. Pugh and T. A. Christie), 8
 Nodules, necrobiotic, of rheumatoid arthritis type with lipoid deposition (E. Fletcher), 88
 Nuffield Medical Fellowships, 225

O

- OBITUARY**: Comroe, Bernard, 140; Aldred-Brown, G. R. P., 180; Bogomoletz, Prof., 180; Nissé, Bertram, 180;

- Observations on the treatment of rheumatic fever with vitamin P (J. F. Rinehart), 11
 Organization of rheumatism research and treatment in Sweden (J. Axel Höjer), 183
 Orthopaedic aspects of rheumatoid arthritis (J. Bastow), 55
 Osteo-arthritis, in the services (C. W. Buckley), 124
 Osteomalacic spondylitis, 139
 Osteoporosis, and ankylosing spondylitis (C. W. Buckley), 50
 Osteoporosis, Heberden Society discussion on, 139
OTT, VICTOR: Present Swiss concepts of rheumatism and physical medicine, 206

P

- P.A.I. FORCE**, rheumatism in (W. S. C. Copeman), 120
 Pain, low back (R. Herz), 201
 Pain, varieties of somatic (M. Kelly), 70
 Peripheral vasomotor disturbances in rheumatism, cold-reaction test for (A. Woodmansey), 99
 Physical medicine, Swiss concepts of rheumatism and (V. Ott), 206
 Physiology, and anatomy of diarthrodial joints (D. V. Davies), 29
PITT, R. M. (and H. J. Gibson): The formol-gel test on plasma and serum in rheumatic cases, 83
 Plasma and serum, formol-gel test on, in rheumatic cases (H. J. Gibson and R. M. Pitt), 83
 Pleurodynia (M. Kelly), 74
 Pleuropneumonia-like organisms and arthritis (G. M. Findlay), 153; discussion on, 177
 Polyarthritis of swine, erysipelotheix, 178
 Pressure-pain, and fibrositis (M. Kelly), 3
 Prophylaxis, against rheumatic fever (J. Alison Glover), 129
 Psychogenic rheumatism, in the U.S. Army (P. S. Hench and E. W. Boland), 110
 Psychosomatic aspects in rheumatoid arthritis (Loring T. Swaim), 195
 Psychosomatic rheumatism, and fibrositis (M. Kelly), 165
PUGH, L. G. C. E. (and T. A. Christie): A study of rheumatism in a group of soldiers with reference to the incidence of trigger points and fibrositic nodules, 8
 Purine metabolism, and gout (L. C. Hill), 172

R

- Reflex theory of fibrositis (M. Kelly), 1
 Reiter's disease, and pleuropneumonia-like organisms (G. M. Findlay), 159
 Renal disease, complicating gout (L. C. Hill), 174
 Return to normal of x-ray changes in rheumatoid arthritis (M. and O. Lucchesi), 57
 Rheumatic disease, nodule formation in (G. D. Kersley, H. L. Gibson, and M. H. L. Desmarais), 141
 Rheumatic diseases, management of chronic arthritis and other, in soldiers of the U.S. Army (P. S. Hench and E. W. Boland), 106
 Rheumatic fever, a benign type (W. L. Ackerman), 14
 Rheumatic fever, decline in and epidemics of (J. Alison Glover), 127
 Rheumatic fever, observations on treatment with vitamin P (J. F. Rinehart), 11
 Rheumatism, chronic (see chronic rheumatism)
 Rheumatism, cold-reaction test for peripheral vasomotor disturbances in (A. Woodmansey), 99
 Rheumatism, formol-gel test on plasma and serum in (H. J. Gibson and R. M. Pitt), 83
 Rheumatism in a group of soldiers (L. G. C. E. Pugh and T. A. Christie), 8
 Rheumatism, incidence of (B. R. Nisbet), 168
 Rheumatism, the management of among soldiers of the U.S. Army (P. S. Hench and E. W. Boland), 106
 Rheumatism and physical medicine, Swiss concepts of (V. Ott), 206
 Rheumatism in Sweden, organization of research and treatment (J. Axel Höjer), 183
 Rheumatism in Sweden (W. S. C. Copeman), 17
 Rheumatism in Sweden, 67, 179
 Rheumatoid arthritis, histology of muscle in (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 131
 Rheumatoid arthritis, necrobiotic nodules of, with lipoid deposition (E. Fletcher), 88
 Rheumatoid arthritis, neostigmine therapy in (M. and O. Lucchesi), 214
 Rheumatoid arthritis nodule formation in (G. D. Kersley, H. J. Gibson, and M. H. L. Desmarais), 141
 Rheumatoid arthritis, orthopaedic aspects of (J. Bastow), 55
 Rheumatoid arthritis, psychosomatic aspects of (Loring T. Swaim), 195
 Rheumatoid arthritis, return to normal of x-ray changes in (M. and O. Lucchesi), 57
 Rheumatoid arthritis (review article) (G. D. Kersley), 61
 Rheumatoid arthritis, Weltmann coagulation reaction in (O. and M. Lucchesi and S. Bailonie), 78
RINEHART, J. F.: Observations on the treatment of rheumatic fever with vitamin P, 11

S

- Salicylates, for gout (L. C. Hill), 176
 Sauna bath (V. Ott), 208
 Schoolroom, bacteriological investigations in (C. A. Green, S. W. Challinor, and J. P. Duguid), 42
 Sciatica, in the services (C. W. Buckley), 123
 Scotland, chronic rheumatism in, 26
 Sedimentation rate, and gout (L. C. Hill), 175
 Sedimentation rate, and Weltmann reaction (O. and M. Lucchesi), 79
 Serum and plasma, formol-gel test on, in rheumatic cases (H. L. Gibson and R. M. Pitt), 83

- Services, chronic rheumatic diseases from the (C. W. Buckley), 122
 Sex hormones, and ankylosing spondylitis (C. W. Buckley), 52
 Soldiers, the management of chronic arthritis and other rheumatic diseases among U.S. soldiers (P. S. Hench and E. W. Boland), 106
 Soldiers, a study of rheumatism in a group of (L. G. C. E. Pugh and T. A. Christie), 8
 Somatic tissues, injured (M. Kelly), 162
 Splintage, in rheumatoid arthritis (J. Bastow), 55
 Spondylitis, ankylosing (see ankylosing spondylitis)
 Spondylitis, osteomalacic, 139
 Spondylitis, rheumatoid and osteo-arthritic, neostigmine for (M. and O. Lucchesi), 215
 Spondylitis, in the services (C. W. Buckley), 124
Streptobacillus moniliformis, and L¹ (G. M. Findlay), 153
 Streptococcal throat infection, bacteriological investigation of air during epidemic of (C. A. Green, S. W. Challinor, and J. P. Duguid), 36
 Streptomycin, for arthritis in rats (G. M. Findlay), 159
 Study of rheumatism in a group of soldiers with reference to the incidence of trigger points and fibrositic nodules (L. G. C. E. Pugh and T. A. Christie), 8
 Subfascial fat, herniation of (R. Herz), 201
 SWAIM, Loring T.: Problem of chronic rheumatism, 192
 Sweden, organization of rheumatism research and treatment in (J. Axel Höjer), 183
 Sweden, rheumatism in (W. S. C. Copeman), 17; note on, 67
 Swiss concept of rheumatism and physical medicine (V. Ott), 206
 Symmetry, bilateral, and rheumatic disease (M. Kelly), 163
 Synovial membrane, anatomy and physiology of (D. V. Davies), 31
- T
- TEGNER, W.: Ankylosing spondylitis (review article), 103
 Throat infection, bacteriological investigation of air during an epidemic (C. A. Green, S. W. Challinor, and J. P. Duguid), 36
 Trapezius muscle, epidemic myalgia affecting the (D. Wilson), 211
 Trauma, the rôle of, in low back pain (R. Herz), 203
- Trigger points and fibrositic nodules, a study of, in a group of soldiers (L. G. C. E. Pugh and T. A. Christie), 8
 Trigger points, of pain (R. Herz), 203
- U
- Undergraduate course in chronic rheumatism, 219
 United States, the management of chronic arthritis and other rheumatic diseases among soldiers of the (P. S. Hench and E. W. Boland), 106
 Urinary calculi, and gout (L. C. Hill), 174
- V
- Vascular disease, complicating gout (L. C. Hill), 174
 Vasomotor disturbances, peripheral, in rheumatism (A. Woodmansey), 99
 Visceral disease, and myalgic lesions (M. Kelly), 161
 Vitamin P, observations on the treatment of rheumatic fever with (J. F. Rinehart), 11
 Vitamin therapy for chronic rheumatism (Loring T. Swaim), 194
- W
- War, acute rheumatism in the war 1939-45 (J. Alison Glover), 126
 War, chronic rheumatic diseases in the world, 1939-45 (W. S. C. Copeman), 115
 Weltmann coagulation reaction in rheumatoid arthritis (O. and M. Lucchesi, and S. Bailonie), 78
 WILSON, Donald: Epidemic myalgia affecting the trapezius muscle, 211
 WOODMANSEY, A.: The cold-reaction test for peripheral vasomotor disturbances in rheumatism, 99
- X
- X-ray changes in rheumatoid arthritis, return to norma (M. and O. Lucchesi), 57
 X-ray treatment of chronic rheumatism (Loring T. Swaim), 194