A good indication of how relevant and topical a textbook is, is the frequency with which a reviewer consults it as a source of information. By this criterion, this book is a timely résumé of our current understanding of rheumatoid arthritis (RA) (above all its clinical and social consequences), as I was frequently consulting it for references on outcome in RA. The reader who is interested in the immunopathological aspects of the disease is also catered for, albeit briefly. For me, the strength of this book is in the excellent chapters concerning the clinical course, outcome, and assessment of RA—areas not well covered by the traditional textbooks of rheumatology, but which have become important fields of study that significantly influence clinical practice.

Only 20 or so years ago, we were taught that RA was a disease which had a good overall prognosis, and that our treatments were reasonably effective in controlling it. In the past decade, an explosion of new information overturning this rosy viewpoint has taken place. The editors of this book, Frederick Wolfe and Theodore Pincus, contributed significantly to this ideological change by their work, and they have written a most original chapter outlining how the new concepts challenge the old, setting the scene for the other contributors in this multiauthored text. They have described this as a 'paradigm shift' in our beliefs regarding RA. The shift is from an overly optimistic view of RA to a more realistic appraisal of the disease, based on long term clinical studies. This change also illustrates the importance of rigorous analyses in place of anecdote in clinical medicine, and that the old paradigm was not based on sufficient information on the disease. It has to be argued that RA is a heterogeneous disease, and this paradigm shift necessarily only concerns the patients who constitute a proportion of the whole; but, as this is the group which demands the most medical attention from rheumatologists, it merits our detailed study.

The RA patients who are the subject of this book are therefore those with the chronic progressive form of the disease: those who attend hospital based clinics and are admitted to hospital, and not the cases which show early spontaneous remission. The clinical experience drawn on is that of the North American and Western European clinics, which may not reflect that of other communities across the globe, as there are both geographical and temporal variations in prevalence, succinctly summarised by Symmons and Silman in their chapter on epidemiology. A number of excellent reviews by leaders in their field summarise our current knowledge of the course and outcome in RA, in addition to the current modes of assessment. The chapter on radiological assessment by John Sharp contains an excellent review of joint damage measurement in RA, and of the trials that showed that second line treatments actually altered (or failed to alter, as the case may be) the rate of erosion. In moving away from a purely 'physical assessment', the emphasis was laid on integrating the patient’s viewpoint into the medical evaluation of a disease process. The validity and uses of questionnaires as health status assessment instruments was clearly laid out by Robert Meenan, with equally succinct contributions by Yelin and Bradley on work disability and psychological impact, respectively.

Does this book reflect, then, a true(r) view of RA? The answer has to be a qualified 'yes' for that large part of the rheumatological community which deals with the chronic progressive polyarthritic form of the disease (a term German rheumatologists use instead of rheumatoid arthritis, that more accurately describes the cases met most frequently). How, then, should we deal with these cases? The book ends with a series of chapters on treatments, including a section on biotechnological advances. I found the chapters on patient education and physiotherapy useful reminders that we do not treat RA with drugs alone, but the precise indications and modes of treatment, and how and to whom to apply them, remain rather poorly understood, in my opinion.

The broad scope of this book, and the excellence of the majority of the contributions make it, in my view, one of the most useful texts available on the clinical dimensions of RA. If there are some minor defects such as repetition (of subject matter and of figures), these are easily compensated for by the clarity of the writing. The frequent use of tables helps to summarise and to present often complex data in a digestible form. This book will have a prominent place on my bookshelf.

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