BOOK REVIEWS


In Germany, as in other European countries, the incidence of early syphilis is rising whilst that of late syphilis is declining. Latent syphilis is also on the increase, though perhaps less so than early symptomatic infection.

This monograph analyses a number of serological tests for syphilis in 4,070 apparently healthy individuals believed to be a representative sample of the German population. The sample consisted of adult persons resident in Berlin, half of whom had their home elsewhere in Germany. The distribution of age and social class was comparable to that found in the general population but for administrative reasons there were only 20 per cent. of women in the sample as against 43 per cent. in the general population for the same age and social groups. Four classical serological tests (two complement-fixation and two agglutination reactions) were performed, both as a dry-blood technique and as a serum test. If the results were positive or doubtful, the treponemal immobilization (TPI) test was used as a confirmatory procedure. 42 persons or just over 1 per cent. of the sample were confirmed to be positive reactors. This is much higher than the official figures for the country. Of these 42 persons, nineteen admitted having had syphilis; of the 23 who gave no such history, one had congenital syphilis, six had neurosyphilis, and the remainder were diagnosed as suffering from latent syphilis.

There was a divergence in the serological results of the classical tests which became more pronounced in the basically weak positive sera. Reproducibility of any single classical test was not good and experience showed that a combination of dry-blood techniques which included complement-fixation and flocculation tests gave the best results for epidemiological investigation. Since the final arbiter was the TPI test, the authors examined the problem of false positive reaction to this test as recorded in some large series in the literature and believed to be of the order of 0.4 per cent. For this purpose 400 clinically healthy individuals without a history of syphilis were selected; 2 per cent. of the sera were toxic and not suitable for the TPI test; 3 to 4 per cent. gave a weakly positive or doubtful result and on repetition the TPI became negative, and it is assumed that these 3 to 4 per cent. represent the labile non-specific reaction to this test. Therefore the interpretation of doubtful or weak positive TPI must be critical and is only to be attempted after repetition. It also became obvious that the reproducibility of the TPI test is faulty in about 6 per cent. of tests and together with the expected 3 to 4 per cent. of non-specific reactions the TPI can no longer be regarded as "infallible".

In eight cases of the sample, serial examinations of the sera gave contradictory results of the classical tests and the TPI and no diagnosis could be made. Statistical analysis of the classical serological tests used, showed that the cardiolipin-microflocculation test was the most specific, with a probability of 90 per cent. being correct; by combination of a variety of classical tests correct results of up to 99.7 per cent. could be expected because the syphilitic sera are more likely to give a positive reaction to different serological tests than nonsyphilitic sera. G.W.C.


The recent tendency of research into the rheumatic diseases to seek for chronic foci of infection in the pelvis has stimulated widespread interest in the possibility of an infective aetiology for many of these diseases. During the past few years data published by the group working at The London Hospital have confirmed that both acute and chronic genital infections are frequently associated with polyarthritis, spondylitis, sacro-iliitis, and uveitis in men. Evidence suggests that a similar association also occurs in women, but is probably less frequent and is certainly more difficult to demonstrate satisfactorily. Other workers have been able to show an association of arthritis with an acute and chronic inflammatory disease of the gastro-intestinal tract. It is of interest that the aetiology of ulcerative colitis continues to defy modern scientific investigation in the same way as the aetiology of non-specific urethritis and chronic prostatitis. All these three conditions are often associated with arthritis. This field of medical investigation is obviously of great importance and