

strike the note of caution that Dr Pickworth sounded this afternoon, that you may have to stay your hand a little in these circumstances to be absolutely sure of the diagnosis, because, of course, rheumatic fever can mimic osteomyelitis, septicaemia and various other conditions in which steroid therapy could be hazardous, but once you are sure of your ground prednisolone and aspirin represent the safest, most effective and most morally justifiable treatment of very severe acute rheumatism in children, especially if there is carditis.

Question: Should trained physiotherapists be available for treatment of patients in the home?

Dr Pickworth: My answer is "yes and no". If the hospital is near and if travel to hospital is really quite easy, I am inclined to think that patients should go to hospital because of the power of the group urge. In my part of the country where some patients live a long way from hospitals, to have a physiotherapist for the treatment of patients at home would be a very good thing.

SUMMING UP

Chairman of Faculty: It is now my pleasant duty to propose a vote of thanks to all those who have helped to make this meeting the great success it has undoubtedly been. Firstly, Professor Kellgren, may I say how much we have appreciated your presiding over the meeting today. We count ourselves fortunate to have had such an eminent person as yourself as our chairman. Dr Dudley Hart of the Westminster Hospital, Dr Mason from the London Hospital, and Dr Duthie from the University of Edinburgh have all travelled considerable distances to be with us, I am sure at great inconvenience to themselves. As some recompense, gentlemen, please be assured that your contributions have been highly valued. Dr Malcolm Thompson is of course our own consultant in physical medicine; he has not only addressed us, but has also taken a personal interest in many of the arrangements for today. Dr Newton has, I think, put into perspective the more controversial aspects of the problems of arthritis, namely, the role of manipulative treatment. Undeterred by the presence of a number of well-known physicians, Mr Peter

Robson very bravely accepted our invitation to join the panel, and he has given us most interesting orthopaedic opinions. We expected that our own ambassadors of family doctoring, Dr Pickworth and Dr Hodgkin, would have much to contribute, and in this we have not been disappointed. It has been refreshing to hear about our own problems in general practice, and to have them so well presented and so sharply focused. Finally, a word of thanks to the organizers. Without Geigy there would have been no symposium; it is as simple as that. And as we would expect with a firm of such high repute, the amount of help and guidance we have received has been commensurate with their reputation. Our own secretary, Dr Roland Freedman, has of course put a vast amount of work into this symposium; a great deal of credit is his. Gentlemen, I have thanked you all with a brevity which may belie enthusiasm. Nothing could be further from the truth; we are all greatly indebted to you.
