
This analysis of the clinical and pathological findings in 138 cases of systemic lupus erythematosus (SLE) together with a review of the literature emphasized that with improved methods of diagnosis a broader concept of the character of this disease was necessary. Important features described were the episodic clinical course of the illness and the development of multiple serum protein abnormalities. [The SCI® indicates that this paper was cited 316 times in the period 1961-1976.]

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"In 1948 we observed a number of cases SLE in which the classical pathological changes were found at postmortem examination; however, the clinical manifestations and course of the illness suggested that the disease not only appeared as a fulminating, rather rapidly fatal illness but was often characterized by recurrent, seemingly unrelated mild illnesses, with prolonged asymptomatic intervals.

"We were stimulated to study this problem in more detail when asked to write an article for a memorial issue on the 100th anniversary of the birth of Sir William Osler for the *Bulletin of the Johns Hopkins Hospital* in 1949. In reviewing the series of articles which Osier published between 1895 and 1903 on 'The Visceral Complications of Erythema Exudativum Multiforme,' it was apparent that this brilliant clinician had described in detail what we were rediscovering some half a century later.

"In Osier’s Gulstonian lectures on ulcerative endocarditis in 1885, he stated: 'It is of use from time to time to take stock, so to speak, of our knowledge of a particular disease, to see now exactly where we stand in regard to it, to inquire to what conclusions the accumulated facts seem to point and to ascertain in what direction we may look for fruitful investigations in the future.'

"By 1954, we had accumulated and analyzed our clinical and laboratory studies in 138 patients. These results fully confirmed the protean nature of the disease and supplied more details to the framework of the clinical picture contributed by Osler. It was shown that the course of the disease is frequently chronic, often characterized by recurrent, seemingly unrelated mild illnesses, with prolonged asymptomatic intervals. Emphasis was placed on the abnormalities of the serum proteins as illustrated by the LE cell factor.

"This review drew attention to the disease at a time when new advances in immunology provided novel approaches to the study of its pathogenesis. The article provided an important reference for the expanded concept of the clinical pattern of the disease and a complete description of its various manifestations. It served, as we had hoped, to point the direction for future fruitful investigations."