
Preface

*“He who studies medicine without books
sails an uncharted sea,
but he who studies medicine without patients
does not go to sea at all.”
—Sir William Osler (1849–1916)*

Symptoms of dry eyes and dry mouth negatively affect the “quality of life” of the patient with Sjögren’s Syndrome (SS). Patients have equated the “impact of sicca symptoms” at a level of disability equal to moderate angina and would be willing to “trade two to four years of (their) life expectancy” to be free of these symptoms. For example, a dry mouth alters the types of foods a patient can eat and thus interferes with “eating together.” Eating serves far more than nutrition needs and represents a major part of social interaction for women at home, business, and relaxation with friends. Dry eyes interfere with the ability to use a computer for prolonged periods at work or at home, since staring at a computer screen involves a markedly decreased blink rate and exacerbates symptoms of aqueous tear deficiency.

Extraglandular manifestations can range from vasculitis to lymphoproliferative infiltrates of many organs. SS patients have a markedly increased risk incidence of lymphoma. Many older patients diagnosed with systemic lupus erythematosus (SLE) actually have SS. Since the correct diagnosis is not made for many years in most patients, their symptoms and signs due to glandular involvement are not adequately recognized and treated. Even in rheumatology, SS is not listed in the “Primer of Rheumatic Diseases,” a major teaching instrument for residents and fellows in training.

This volume differs from other recent review publications that have appeared in “current opinion journals” or review volumes largely written by specialists in a single medical specialty. We have included a distinguished panel of authors in a broad spectrum of basic science, clinical, and surgical disciplines. Further, we have included authors from multiple areas of the world where SS has been studied.

Pathogenic studies reviewed in this volume include genetics and proteomics as well as cytokines and lymphoid regulation. The authors also emphasize that SS represents the intersection of the immune, secretory, and neural regulatory axes. An understanding of pathogenesis provides the backbone for understanding current diagnostic and therapeutic approaches. Further, basic science and astute clinical observation are the routes to future improved therapies.

Since the SS patient sees a wide variety of clinical and surgery specialists, we have included authors from many of the relevant areas to review their specialty's approach to diagnosis and therapy. For example, the management of SS often involves Ophthalmology, Oral Medicine, Oral Surgery, Otolaryngology, Gastroenterology, Dermatology, Nephrology, Chest Medicine, Hematology and Oncology, Neurology, and Rheumatology. Each specialty has been given the task of providing useful clinical hints as well as their "pearls of wisdom." By integrating the expertise by these eminent scholars in their respective clinical fields, we try to accomplish the fundamental goal of this book—to present cutting-edge diagnosis and therapeutic approaches to SS in one authoritative source.

The collaborative efforts of contributors in this book geographically span Europe, the Middle East, Asia, India, Australia, as well as the USA. This collection of enlightening chapters not only reflects our goal to recognize the outstanding contributions of each of these groups located around the world, but also emphasizes that the "medical world" is increasingly a global community composed of patients and their physicians.

In different regions of the world, the disease may have subtly different presentations, and the available diagnostic and therapeutic resources are dramatically different. Our patients increasingly present to us from different parts of the world, and they also travel to different regions for work or holiday. The inclusion of authors from around the world renders this resource an interconnective conduit between US rheumatologists and our counterparts throughout the world, in order to provide a universal spectrum of educational and clinical resources for our SS patients as well as for ourselves.

It is our hope that the reader finds this book to be a useful "first stop on Osler's journey" toward the procurement and utilization of reputable information that promotes the superior medical and nursing care that our courageous Sjögren's patients deserve.

We also wish to express our profound gratitude to: (a) our esteemed Authors, (b) our developmental editor Judi Brown, and (c) Springer Science+Business Media, for the immense amount of time, effort, and vision dedicated to the inception and evolution of this volume—without this degree of synergistic collaboration, this book would not have been possible.

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Sjögren's Syndrome

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