EDITORIAL
“THERE IS STILL SO MUCH TO BE DONE”

After describing the historical events behind the creation of the International Society of Lymphology (ISL), Ruttiman and Viamonte (the Society’s first two Presidents) concluded (Radiology 1968, 90:380) “Many mysteries about normal and abnormal functions of the lymphatic system remain unsolved creating a great need to improve our knowledge and apply our understanding to this neglected system. Limitations are placed on those interested in lymphatics by the widely disbursed sources of information in this field. Due to the increasing interest in this system which is part of the evolutionary scientific explosion of the 20th century, an International Society of Lymphology was founded in Zurich at the time of the First International Congress in 1966 ... [and] the Society’s official journal has been established ... In order to gather together lymphologists from all parts of the world who may present their work and discuss and exchange ideas with scientists from many countries, an International Congress of Lymphology will be held every two years in a different country* ... It is not the intention to create [just] another society, another medical journal, or just another congress for the medical profession to attend. The ISL will meet its goals only if a means of communication supported by interchange of information is established for those interested in lymphology.”

It is now 20 years since the ISL was born and almost that long since the launching of the Society’s “flagship,” Lymphology and the ideas expressed above. How far have we come? Surveying the expanding literature in both basic and clinical lymphology, it is clear that the impetus provided by the ISL has successfully rekindled global interest in this neglected and oft-forgotten third circulation as a key component in a multitude of disease processes. Once simply equated with peripheral lymphedema and disseminated cancer, disturbances in lymph flow and lymphatics now encompass nearly all aspects of clinical medicine. For example, the pathogenesis of pulmonary edema associated with heart failure, severe head injury, altitude sickness, uncontrolled sepsis, necrotizing pancreatitis, major burns or extensive trauma; the progression and intractability of ascites from carcinomatosis, hepatic cirrhosis; the pathophysiology of regional enteritis, pseudotumor cerebri, and Ormond’s disease (to name but a few) are now often considered in terms of altered microvascular permeability, macromolecular transport, abnormal tissue matrix, defective lymph formation and lymphatic transport. At the same time, the “fixed” lymphoid elements including the lymph nodes and the “mobile” lymphocyte and other circulating mononuclear pools continue to be pursued as the basic framework of humoral and cellular immunity with its broad implications for transplantation and cancer biology.

*The 11th Congress is scheduled for Vienna in 1987.
“Lymphographia,” “Lymphspiration,” “The Ignorance Corner,” and soon-to-be “Technical Corner” has facilitated presentations of illustrative, theoretical, and practical materials with a provocative bent not easily conforming to other more rigidly formatted periodicals. Not surprisingly, our subscriptions, financial status, and manuscript quality are on the rise. Thus, Lymphology is not only thriving, but in this era of economic instability for many medical periodicals, the voice of the ISL is healthy and vigorous.

For many years, the “bible” for students of lymphology has been the esteemed text “Lymphatics, Lymph, and the Lymphomyeloid Complex”. It has been particularly gratifying, therefore, to publish scholarly reviews by this renowned volume’s authors, both highly esteemed and active honorary members of the ISL. In the previous issue (1986, 19:65) F. C. Courtice traced the historical background and prevailing views regarding the formation and circulation of lymph. In the current issue, J. M. Yoffey takes a second look at the lymphomyeloid cellular migration streams, tracing this concept from the first rudimentary proposals to the spectacular network of cellular messengers and servomechanisms envisioned today. With focused insight and wisdom stemming from years of original contributions, these two lymphologic giants address the fundamental processes of liquid, protein, and lipid circulation and transport as well as the vast yet elusive immunosurveillance system linking bone marrow to lymph nodes, thymus, spleen, liver, and other lymphoid tissues. In a sense, Yoffey and Courtice’s renewed “collaboration” within the pages of Lymphology represents in miniature an updated edition of their classic text.

From this abbreviated review, it seems fair to conclude that we have indeed come a long way. Yet clearly this is no time to become complacent. After recalling fondly “the good old days” with his mentor and lymphologist extraordinaire Cecil Drinker, Hymen Mayerson, another lymphologic giant, in a letter written shortly before his death exhorted Lymphology to rise to the challenge ahead for “there is still so much to be done.”

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