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## Editor's Note

### Why Blood Remains So Special

In her wonderful text, *History of Medicine: A Scandalously Short Introduction*, Dr. Jacalyn Duffin entitles the chapter on the history of hematology (her own subspecialty) "Why is Blood Special?". Of the four "humours" of ancient medicine, blood alone remains a vital substance. Dr. Duffin explains how simple it is to understand why blood is so important. Everybody is acquainted with blood; of the internal substances, it is the one that surfaces regularly, and all are aware of how essential blood is to maintain life. From a medical point of view, both points are still valid.

Blood also is relatively easy to study (particularly if it is not your own blood being drawn), and its importance in human physiology and in maintaining life is still very obvious. In fact, in recent decades we have learned that functions once considered related to blood only (clotting and platelet function, among many) have widespread effects on function in many other organs as well, and are of profound biological significance. In the era before widespread invasive procedures in internal medicine, there was a unique satisfaction in examining a blood film or a bone marrow preparation, and being able to make or confirm a diagnosis. Those satisfactions, although no longer unique, are still present, and bone marrow and blood film preparations can be quite beautiful to examine.

The focus of this month's issue is benign hematological disorders, for which we have a superb collection of articles. I really feel my age when I see that former residents have written four of the featured articles. Drs. Shabbir Alibhai and Sudeep Gill have collaborated on two articles, folate deficiency in the elderly, and the controversial topic of diagnosing vitamin B<sub>12</sub> deficiency in the elderly. Dr. Anne McLeod discusses inherited and acquired coagulopathies, while Dr. Vikas Gupta writes about hypercoagulable states, an extremely common circumstance in the elderly. Drs. Anne Grand'Maison and William Geerts review the appropriate use of traditional anticoagulants, as well as highlighting the newer agents. The renowned amateur Gilbert and Sullivan singer (and hematologist), Dr. Richard Wells, reviews the myelodysplastic syndromes. I have fond memories as a resident of reviewing Block's initial article in *JAMA* in the early 1950s on this topic while preparing a presentation. At that time, the term was "preleukemic" syndrome, but shortly after Block's article it became clear that not everybody with this syndrome went on to develop leukemia. We also have a patient information page focusing on anemia from Dr. Durhane Wong-Rieger.

Our usual collection of column articles includes sun-induced skin damage by Dr. G. Daniel Schachter (I feel guilty, having just returned from Florida the day before writing this editorial), while Dr. Wilbert Aronow outlines the pharmacological management of acute non-ST-elevation coronary syndromes in the elderly. Dr. Chris MacKnight outlines the diagnosis and management of Creutzfeldt-Jakob disease, and Drs. Robert Chen and Guillermo Paradiso focus on a common and very troublesome problem in the elderly, restless legs syndrome.

Enjoy this issue. ◆



Barry J. Goldlist, MD, FRCPC, FACP, AGSF, Editor in Chief