

CLINICAL HEMORHEOLOGY, Vol. 7, p. 1, 1987
0271-5198/87 \$3.00 + .00 Printed in the USA.
Copyright (c) 1987 Pergamon Journals Ltd. All rights reserved.

F O R E W O R D

J.F. STOLTZ

President of the French Society of Biorheology - President of the International Society of Biorheology.

Research into the rheological properties of biological systems has developed quite substantially over the past two decades and it is a simple matter to assess the progress achieved in this field since the 1st International Congress on Hemorheology organized in Reykjavik (Iceland) by A.L. Copley in 1966. It is now twenty years, then, since hemorheology - which lies at the crossroads between mechanics, physics, chemistry, engineering science, biology, clinical medicine and pharmacology - was first recognized as a scientific discipline in its own right. Wrongly apprehended by many researchers as a hermetic science, hemorheology is capable not only of throwing new light on pathological phenomena, but also of acting as a stimulant for rheology and physics on account of the original nature of the problems involved.

This volume, originally published in French by 'Editions Medicales Internationales' (Paris) in 1986 (ISBN2-85206.340.9) contains the texts of the conference given during the 1st International Symposium on Erythrocyte Aggregation (held in Geneva in January 1986), organized by the French Biorheology Society and sponsored by Negma Laboratories. The meeting was devoted to the one specific subject of erythrocyte aggregation, which is an essential parameter in hemorheology, and was held midway between the 4th Symposium on Clinical Hemorheology in Sienna in June 1985 and the 6th International Congress on Biorheology due to take place in Vancouver in July 1986. The Symposium was the occasion for compiling research on the mechanisms involved in erythrocyte aggregation in pathological processes. Erythrocyte aggregation does indeed play an essential part towards understanding the hyperviscosity syndromes observed during venous and arterial diseases.

It is crucial that future clinical and pharmacological studies should confirm how important this parameter is. Although practitioners do in fact have a full range of testing procedures at their disposal, rheological tests are not yet carried out as an automatic reflex. This is where the stumbling block lies for passing on the scientific message : it is time to progress from purely theoretical and research involvement to the stage where the medical profession is fully informed of the techniques available and is ready to apply them on a daily routine basis. Teaching is probably the only way of achieving this target.