

In Memoriam

Dr. Paul K. Pybus

M.A., M.B., B. Chir. (Cambridge),
M.R.C.S.,
M.R.C.P. (London), D.R.C.O.G.
(London), F.R.C.S. (England)

12 April 1924 to 9 May 1988

by *Perry A. Chapdelaine, Sr.*

I regret very much not having had the funds to publish this final work while my friend and teacher, Dr. Paul K. Pybus, was alive!

Paul was a wonderful man, filled with hope and energy and excited about the formation and successes of the Arthritis Trust of America (Rheumatoid Disease

Foundation) officially titled “The Roger Wyburn-Mason and Jack M. Blount Foundation for the Eradication of Rheumatoid Disease, Inc”.

The official title, you see, honored his mentor and friend Professor Roger Wyburn-Mason [M.D., Ph.D.], a man much respected by Dr. Pybus. (Jack M. Blount, M.D. was one of the first two American physicians to consider seriously Wyburn-Mason’s works, and to succeed in treating effectively Rheumatoid Diseases, Robert Bingham, M.D., being the other.)

As founding member of the American “Rheumatoid Disease Foundation,” Paul constantly sought with open mind to push us into challenging research opportunities. He contributed by his personal contacts with other physicians, medical studies letters submitted to professional medical journals, letters to patients when requested, and in his generous attendance and clinical demonstrations at all of our medical conventions.

He was a founding member of The Rheumatoid Disease Foundation (American) and on inception of the Foundation he went on to help establish the English and the Republic of South Africa counterparts.

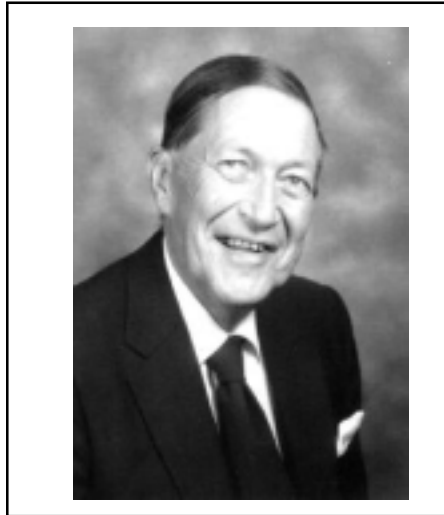
Paul was a fighter, demanding honesty and integrity in the

research and practice of medicine. He was that unusual physician who is willing to set aside prejudice and look anew.

As executive director and secretary of the Arthritis Trust of America, I found Paul more than just a very close friend and confidante but also a man who — as though he’d found a new and worthy goal — provided every kind of ethical support for this great hope for suffering arthritics.

Paul was a man who cared deeply!

He always gave full credit to Professor Roger Wyburn-Mason for his discoveries in intraneural therapies, but we all



knew that Paul Pybus was the man who had taken a theory unimplemented and turned it into a golden bonanza for both Rheumatoid Arthritis and Osteoarthritis.

This publication, Intraneural Therapy, and the good results that have consistently stemmed from his work, are testimony to his brightness and desire to help patients in pain.

Kay Hitchen, formerly Executive Director/Secretary of the English Rheumatoid Disease Foundation, has this to say of her friend and teacher:

“Shortly after Charity status [similar to non-profit tax-exempt status] was granted to the South African branch, we were stunned to hear of the death of The Rheumatoid disease Foundation’s Chief Medical Advisor, Dr. Paul Pybus.

“Dr. Pybus studied at Cambridge and was houseman to Professor Roger Wyburn-Mason nearly 40 years ago; which was the beginning of a life-long friendship that was to continue, even after Dr. Pybus emigrated to South Africa in the 1950’s.

“He was in regular contact with the Professor, and continued his work into the use of [Wyburn-Mason’s] medicines to treat Rheumatoid Arthritis.

“Dr. Pybus developed his own technique of intraneural injections to bring relief from arthritic pain. A technique which he shared freely with any physician who wished to know of it. This method is now in use widely throughout the U.S.A. and also at our New Hope Clinic in Southampton. England]. [New Hope Clinic no longer functions:Ed.]

“Although we had been [corresponding] for some years, I did not actually meet Dr. Pybus until The Rheumatoid Disease Foundation’s first board meeting in the

U.S.A. in 1983 and was overwhelmed by his kindness and professionalism, his desire to ‘fly the flag’ and maintain the British ‘stiff upper lip’

“He always encouraged us when we were setting up the Foundation in England; that was at a time when the Professor [Wyburn-Mason] had just died, his wife [Joan] was grieving and it seemed as if David [Hitchen] and I were the only people in the country who wanted the Foundation to exist. Dr. Pybus was always writing, or sometimes phoning, from South Africa to remind me, ‘of course we can do it — Good God, We’re British!’

“He was a true British gentleman, who was also a gentle man which is why his patients loved him dearly.

“I will never forget his humour, and sense of ‘fair play’.

“David and I have lost a great friend; his loss to The Rheumatoid Disease Foundation is immeasurable.”

The day before Paul died, I talked with him via telephone across the Atlantic to Pietermaritzburg, South Africa. He had an aneurysm, he said. He was scheduled for an operation the next day. I begged him to have several chelations with EDTA prior to the operation as other doctors had told me that it would soften up the intima, the inner part of the arteries, and this would be a safety factor for Paul.

Being a surgeon, himself, he declined, stating that he was in good hands.

Alas! He died on the operating table.

A brief resume’ of Dr. Paul K. Pybus’ experience and education follows:

Internship, St. Mary’s Hospital, Paddington; House Surgeon to Obstetric Unit, Mr. Alex Bourne; Service in the Royal Air Force, 1948; Discharged with

rank of Squadron leader 1950; House Physician to Professor Roger Wyburn-Mason, 1951-52; House Surgeon at Royal Cancer Hospital, London. Also worked with Roger Wyburn-Mason, 1951-52; Senior Medical officer, Battersea General Hospital, London. Surgical and Orthopaedic Registrar, St. Alban's Hospital Hertfordshire, 1953-54; Surgical Registrar, Torbay Group of Hospitals, England, 1954-57; Proceeded overseas to Dares Salaam, Tanganyika and then to Nakuru War Memorial Hospital, Nakuru, Kenya, 1957. Emigrated to South Africa. Senior Surgeon, Edendale Hospital, Pietermaritzburg, Natal. 1962; Principal Surgeon, South West Africa Group of Hospitals, Windhoek, 1973. Commenced general practice and rheumatology in Pietermaritzburg, Republic of South Africa, 1977. Chief Medical Advisor, Rheumatoid Disease Foundation, 1983 through May 9, 1988.

Dr. Paul K. Pybus serendipitously but independently discovered the effect of intraneural injections on certain key neuromata in the treatment of Osteoarthritis and Rheumatoid Disease, as based on theories taught by Roger Wyburn-Mason thirty years earlier.

The Arthritis Trust of America feels that Dr. Paul Pybus' booklet, *Intraneural Injections for Rheumatoid Arthritis and Osteoarthritis & The Control of Pain in Arthritis of the Knee*, is a must for all forms of arthritits and arthritis-like pain, and that the use of designated intraneural injections decreases the time to wellness, regardless of what other modalities are used on the patient.¹

Note

Englishman Roger Wyburn-Mason, M.D., Ph.D., nerve specialist, was the first to describe the causation principle of joint damage from tender nerve locations, sometimes called "trigger points," in arthritis and arthritis-like pain.

South African Dr. Paul K. Pybus, his former house physician, learned to implement in clinical

practice Wyburn-Mason's theories of intraneural injections, successfully using his discoveries for more than 20 years.

American Keith McElroy, M.D. independently discovered the same principles, and applied them to his patients, also for many years.

Dr. Paul K. Pybus and Gus J. Prosch, Jr., M.D. explored additional key "trigger points," until it became clear to them that a virtual one-to-one correspondence existed between painful neuroma and acupuncture points -- but not always so.

Dr. I.H.J. Bourne, a friend of both Dr. Roger Wyburn-Mason and Dr. Paul Pybus, also developed the use of intra-neural injections which he published as "Musculoskeletal Disorders: Local Injection Therapy." His paper has been added to the rear of this booklet.

Specialists in musculoskeletal pain have long used area-wide; i.e., non-specific "trigger points," intraneural injections and intra-articular injections, as well as nerve blocks to relieve pain. In other words, although their medical territory was not really inclusive, they unwittingly discovered some of the same patient points for pain relief. At suggestion of Dr. Curt Maxwell, we recommend the W.B. Saunders book, *Atlas of Pain Management Injection Techniques* by Steven D. Waldman, M.D., J.D. as an excellent supplementary book. (It is very convenient for doctors who are into reimbursement via insurance, as it gives the insurance code that is acceptable for each of the injections.) The artwork is excellent, and there can be no doubt as to how to inject in the various parts of the body. The text is quite appropriate, giving not only the how, but also contra-indications, et. al.

Of most importance, however, for more than 50 years American Harry H. Philbert, M.D. independently developed the use of "Specific Injection Therapy," covering many of the same aspects as the publications reported above. *The Anatomy of Pain: Specific Injection Therapy*, is a well-done report of Dr. Philbert's research that can be obtained by writing or calling Harry H. Philbert, M.D., 213 Live Oak St., Metairie, LA 70008, telephone (504) 837-2727; Fax (504) 831-3380.

Dr. Philbert's work will shock most medical practitioners, as he claims through his techniques alone to have improved the lot of many painful patients, and, in particular, has easily cured bronchial asthma, and other conditions, includ-

ing some coronary problems.