

# Prof. Dr. Hulusi Behcet (A Famous Turkish Physician) (1889-1948) and Behcet's Disease from the Point of View of the History of Medicine And Some Results

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## Summary

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Prof. Dr. Hulusi Behcet is a famous Turkish physician. He described Behcet's Disease. Moreover, he studied many topics on dermatology. Dr. Hulusi Behcet who was born in Istanbul on February 20, 1889, and got his primary education in Damascus because of his father's business there. Dr. Hulusi Behcet graduated from Gulhane Military Medical Academy and completed his specialization in 1914.

Moreover, between 1918-1919, he firstly went to Budapest and then to Berlin's Charity Hospital to improve his medical knowledge. He had the opportunity to meet with some famous colleagues there at that time. He was appointed as the head-physician at the Hasköy Venereal Disease Hospital in Istanbul in 1923 and six months later he was appointed to Gureba Hospital which is now a part of the Istanbul Faculty of Medicine as a dermatologist. He received the title of professor in 1933. As well as his position as a professor at the university, he worked in a private consulting office. After 1933 University Reform, he set up the department of dermatology and venereal diseases. Prof. Dr. Behcet was the first Turk who received the title of Professor in the Turkish academic life.

The most important discovery of Dr. Hulusi Behcet is Behcet's Disease. Dr. Behcet had studied on this disease's symptoms for years and described it in a meeting in 1936. So, these findings were published in the Archives of Dermatology and Venereal Diseases. In 1937, he wrote his ideas in Dermatologische Wochenschrift Journal and in the same year, he presented it at the meeting of the Dermatology Association of Paris. At this meeting, he declared that a dental infection might cause the etiology of disease. In 1947, at the suggestion of Prof. Mischner of Medicine during the International Congress of Medicine of Genoa, this finding of Dr. Behcet was named Morbus Behcet. Though it was evaluated in the early days as Behcet's Syndrome, Trisymptom Behcet and Morbus Behcet, today, this disease is universally called Behcet's Disease in the medical literature. Hulusi Behcet also studied other some dermatological diseases.

Prof. Dr. Hulusi Behcet translated many foreign articles into Turkish to help the education of new generations and published original case reports in the international reviews in order to make contact with foreign countries. Moreover, he published many books. Moreover, Hulusi Behcet also published 126 national and international articles between 1921-1940. Fifty-three of those appeared in prestigious European Scientific Journals. Prof. Dr. Hulusi Behcet died on March 8, 1948.

In this paper, the importance of **Prof. Dr. Hulusi Behcet and Behcet's Disease** is pointed out from the point of view of the History of Medicine and some original documents are studied.

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## Hulusi Behcet's Biography And Behcet's Disease

**Prof. Dr. Hulusi Behcet** is a famous Turkish physician. He described Behcet's Disease. Moreover, he studied many topics on dermatology. Dr. Hulusi Behcet who was born in Istanbul on February 20, 1889 got his primary education in Damascus because of his father's business there.

His father, Ahmet Behçet, was a well known businessman and his mother, Ayşe Behçet, was also Ahmet's cousin. Hulusi Behçet lost his mother when he was a child and he was raised by his grandmother.

His childhood was difficult for him and this gloomy state of mind had a detrimental influence on his whole life, leading him to become very introverted.

After the Turkish Republic was established and the "Family Name Law" was accepted, his father Ahmet Behçet, who was among the friends of Mustafa Kemal Atatürk, the founder of Turkish Republic, received private permission to use his father's name Behçet which had the meaning of shining, brilliant as a family name.

Hulusi Behcet learned French, Latin and German as a native speaker and his knowledge and curiosity

led him to decide to become a medical doctor and he never regretted this decision.

At this time, because there was no civil medical faculty, Dr. Behçet pursued his education at Gülhane Military Medical Academy. He was 16 years old when he had started at the Academy, graduating at the age of 21 in 1910. After he had become a medical doctor, he specialized in dermatology and venereal diseases at Gülhane Military Medical Academy and he completed his specialization in 1914. He served at the Edirne Military Hospital during 1914-1918 as a specialist in dermatology and venereal diseases and an assistant to the head of the hospital. After the war between 1918-1919, he went to Budapest and then to Berlin's Charite Hospital to improve his medical knowledge. He had the opportunity to meet some famous colleagues at that time.

He never thought of living in Europe, however, and after his return to Turkey he worked as a free medical doctor. Then in 1923 he was appointed as the head physician at the Hasköy Venereal Diseases Hospital. Six months later, he moved to Gureba Hospital, as a dermatologist. As well as his position as a professor at the university, he worked in a private consulting office.

In 1923, the year of the establishment of the Turkish Republic, he married Refika Davaz, who was sister of one his patients. His wife was the daughter of a famous diplomat, which led him to accept many patients from high society of Istanbul. He had a daughter, Güler, from this marriage and she now live in England working as a decorator.

After the establishment of the Turkish Republic, many social reforms were enacted. In 1933, the old-fashioned medical college (Dar-ul-fünun), which did not approve of scientific progress and insisted on religious principles, was abolished and the University of Istanbul was established. During this period of reform, the scientific vision and knowledge of academic staff was reevaluated and some were dismissed. Dr. Behçet stayed and he set up the department of dermatology and venereal diseases which remains the base of dermatology. At that time, the dermatology department, which had been at Vakıf Guraba Hospital, moved to a place on campus which had once be-

en a tobacco depot. It still houses the Department of Dermatology.

Dr. Behçet was the first Turk who received the title of professor, in Turkish academic life. His curiosity for investigation, writing and discussion were his intellectual characteristics. Starting from the early years in his profession, his participation in national and international congresses with original articles was very apparent, publishing many articles in his own country and abroad. The famous German pathologist Prof. Schwartz called him a scientist who was well known in the world. He translated many articles into Turkish and he published original case reports in international reviews in order to make contact with such countries as Korea. He had been interested in syphilis since 1922 and he had published many international articles on its diagnosis, treatment, hereditary properties, serology and social aspects. Leishmaniosis (Oriental Sore) was another disease which Dr. Behçet worked on, beginning in 1923. He wrote about it in many articles and succeeded in its treatment with diathermic. He first described "the nail sign" appearing by the removal of the crust of an Oriental Sore.

A part of his published work was concerned with parasitosis. In 1923, he described the etiologic agents of "gale cereal" in Turkey. He had dealt with superficial and deep mycoses and their treatments. Due to his observations, he described the dermatitis of fig (dermatitis figus carica) in 1933. In 1935, at the Dermatology Congress in Budapest, he was honored for his studies on mycosis.

He was also in the publishing vanguard to improve Turkish medicine and he was responsible for the first dermato-venerology journal of Turkey called "Turkish Archives of Dermatology and Syphilology" in 1924. In 1939, he was elected as a correspondent member to the German journals "Dermatologische Wochenschrift" and "Medizinsche Wochenschrift".

The most important work that Dr. Behçet brought to Turkish medicine was the monograph published in 1940 called "Clinical and Practical Syphilis, Diagnosis and Related Dermatoses". Every page of this book contains an aspect of syphilis and the footnotes, provides a wealth of detailed information about the differential diagnosis of other skin diseases. As a re-

sult, scientists had the chance to learn about syphilis and dermatology at the same time.

Dr. Behçet continued as the Head of the Department of Dermatology and Venereal Diseases until 1947. In 1939, he received the degree of "ordinarius".

The most important discovery of Dr. Hulusi Behçet is Behçet's Disease. His first observations on Behçet's disease started with a patient he met between 1924-1925. This patient had been consulted for 40 years in Istanbul and Vienna several times. According to his symptoms, the illness had been diagnosed as "aphte recidivante chronique", "erythema nodosum", "sarcoide de Boeck" or "erythema exudativum multiformis". From the etiology, syphilis and tuberculosis were suspected. Austrian doctors had called an unknown protozoal disease. Ophthalmologists had described the ocular symptoms as "iritis recidivante a l'hypopion". Iritis might be the result of syphilis, tuberculosis or streptococcal or staphylococcal infections. After several iridectomies, the patient had completely lost his vision. Dr. Behçet continued to follow up the patient for many years.

In 1930, a woman suffering from irritation in her eye and with lesions in her mouth and genital regions was referred to Dr. Behçet's clinic and told him that these symptoms had been recurring for several years. Dr. Behçet consulted the woman until 1932 and tried to diagnose the etiological agent for tuberculosis, syphilis or mycosis etc. by biopsy and other laboratory analysis, but he could not find anything. The prominent ophthalmologists Murat Rahmi and Iggescheimer had evaluated the ocular symptoms as "episcerite" and "conjunctivitis".

Following those two patients, in 1936 a male patient from a dental clinic with oral pemphigus like wounds, acneiform signs on the back, scrotal ulcer, eye irritation, evening fever, and abdominal pain was sent to the clinic. After the consultation, nothing except a dental cyst was found. Dr. Behçet thought the recurrent symptoms might be due to a virus. He referred the patient to Prof. Braun who did a viral investigation and found some corpuscular structures. Dr. Behçet, with the symptoms of these three patients whom he had followed for years, then decided that they were the symptoms of a new disease and in

1936, he described the situation in a meeting and this was published in the "Archives of Dermatology and Venereal Disease".

In 1937, he wrote his ideas in "Dermatologische Wochenschrift" Journal and in the same year he presented it at the meeting of the Dermatology Association of Paris. At this meeting, he declared that a dental infection might cause the etiology of the disease.

In 1938, Dr. **Niyazi Gözcü** and **Prof. Frank** reported two new cases with the same symptoms. In 1938, Belgian scientists Weekers and Reginster, and the Italian Franchesetti reported some patients with similar symptoms. Therefore, European doctors had accepted the appearance of a new disease. Ophthalmologists had begun to accept "Behçet's Disease" but dermatologists kept denying the new disease, insisting they could be symptoms of pemphigus, ulcus vulvae acutum, dermatomyozitis, aphthosis of Neumann, erythema exudativum multiforme, etc. While that debate was taking place, some new cases were reported from Belgium, Austria, the U.S., Japan, Denmark, Switzerland and Israel. When they had been published, the whole world finally came to accept that they had confronted with a new disease. In 1947, at the suggestion of **Prof. Mischner** of the Zurich Medical Faculty during the International Medical Congress of Geneva, this finding of Dr. Behçet's was named "**Morbus Behçet**". Though it was evaluated in the early days as "**Behçet's Syndrome**", "**Trisymptom Behçet**", and "Morbus Behçet", today the disease is universally called Behçet's Disease in medical literature. In order to give the disease its place in medical literature, credit should go to **Niyazi Gözcü, Iggescheimer, Murad Rahmi, İrfan Başar, Naci Bengisu, Marchionini, Braun and Obendorfer** from Turkey, Weekers, Reginster from Belgium, **Franchesetti** from Italy, **Jensen Tage** from Denmark, Sulzberger & Wise from U.S. who all supported and participated in the work. **Hulusi Behçet** died from a sudden heart attack on March 8, 1948.

Behçet Disease has been called with various names in the literature from yesterday to today;

### 1. Triple symptom complex:

Behçet, H. Some observation on the clinical picture of the so-called triple symptom complex. *Dermatologica* 1940; 81:73-83.

## 2. Syndrome de Behçet:

Jensen T. Sur les ulcerations aphteuses de la muqueuses de la bouche et de la peau genitale combinees avec les semptomes oculaires (Syndrome Behçet). Acta Derm Venereol 1941; 22:64-79.

## 3. Behçet's Disease:

Sezer FN. The isolation of virus as the cause of Behçet's disease. Am J. Ophthalmol 1953; 36:301-15.

## 4. Adamantiades-Behçet's Symptom Complex:

Bouzas A. The Adamantiades-Behçet's syndrome. Bull Soc Helen Ophthalmol 1956; 24:41.

## 5. Behçet's Multiple Symptom Complex:

Strachan RW, Wigzell FW. Polyarthritis in Behçet's multiple symptom complex. Ann Rheum Dis 1963; 22:26-35.

Other,

## 1. Mucocutaneous-ocular syndrome

Robinson HMJ, Mc Crumb FRJ. Comparative analysis of the mucocutaneous ocular syndrome: report of eleven cases and review of the literature. Arch Dermatol Syphil. 1960; 61:539.

## 2. Magic syndrome

Frestein GS, Gruber HE, Weisman MH, Zvaifler NJ, Barber J, O'Duffy JD. Mouth and genital ulcers with inflamed cartilage: Magic Syndrome. Five patients with features of relapsing policondritis and Behçet's disease. Am J Med 1985; 79:65-72.

## 3. Levine JA, O'Duffy JD. Pseudo-Behçet's syndrome a description of twenty-three cases. In: Godeau P, Wechsler B, eds. Behçet's Disease, Proceedings of the Sixth International Conference on Behçet's Disease. Paris 30 June to 1 July 1993: Elsevier Sci Pub, Amsterdam, 1993: 295-8.

**Prof. Dr. Hulusi Behçet** translated many foreign articles into Turkish to help the education of new generations and published original case reports in the international reviews in order to make contact with foreign countries. Moreover, he published many books. Moreover, Hulusi Behçet also published 126 national and international articles between 1921-1940.

Fifty-two of those appeared in prestigious European Scientific Journals.

Hulusi Behçet interested deeply in the arts, particularly literature

Among his colleagues and close friends were **Prof. Dr. Fahrettin Kerim Gökay, Ord. Prof. Dr. Murad Rahmi, Prof. Dr. Muzaffer Şevki, Prof. Dr. Gougerot and Prof. Dr. Cartoud.**

In 1975, many years after his death, he was honored with the TUBITAK Scientific Award. Several classes, laboratories and libraries had been named in his honor; and masks and statues have been made in his likeness. A new generation of scientists continue to carry on the excellent work he began, working with foundations and units that bear his name. In national and international congresses, events like "**Korea-Turkey Behçet Days**" are taking place. The results of this studies are published every year in various journals.

In 1980, on the initiative of one of his students, **Dr. Ali Arban**, a stamp was published in his commemoration, about which an article was published in "The Journal of the American Dental Association". His biographies were published in the "Journal of Philatelic Society" and in the "Medical Bulletin of the United States Army, Europe and Seventh Army's Medical Bulletin".

In 1982, he was awarded with the Medical Award of the Turkish Republic by **Eczacıbaşı Foundation of Scientific Investigation**. In October 1996, the Turkish mint released commemoration coins for **Dr. Behçet** during the National Dermatology Congress. This silver coin designed by **Sculptor Suat Özyönüm**, was presented in Portugal. The coin is still presented by the Cerrahpaşa Medical Faculty, Dermatology Department and by the Turkish Dermatology Association.

The life story of Hulusi Behçet, his curiosity for investigation, his delicate observation ability and his patience resulted in a gift to medicine, a mysterious new disease which is focus of wide research and interest to this day.

*We can see some knowledge on Behçet's Disease in the books and journals:*



## Health Encyclopedia-Diseases and Conditions Behcet's Disease

- [What is the Definition of Behcet's Disease?](#)
- [Description of Behcet's Disease](#)
- [Causes of Behcet's Disease](#)
- [Symptoms of Behcet's Disease](#)
- [Diagnosis of Behcet's Disease](#)
- [Treatment for Behcet's Disease](#)
- [What Questions to ask Your Doctor About Behcet's Disease?](#)

*What is the Definition of Behcet's Disease?*

Behcet's disease is a chronic, relapsing inflammatory disorder marked by eye inflammation, oral and genital ulcers, and certain other skin lesions, as well as varying, multisystem involvement including the joints, blood vessels, central nervous system, and gastrointestinal tract.

### *Description of Behcet's Disease*

In 1937, Hulusi Behcet, a Turkish dermatologist, described a disease associating uveitis (inflammation of the uvea, the middle coat of the eye comprising the choroid, ciliary body, and the iris) with genital and oral ulcers. Fifty years later, Behcet's disease has expanded and is now recognized as a chronic, multisystem disorder with vasculitis (inflammation of blood vessels) as its underlying pathological process.

### **Hulusi Behçet's Publications in European Journals**

1. Histologische Untersuchungen von Porokeratosis Mibelli. *Derm Wschr* 75(40) 993-1006, 1922.
2. Die Behandlung der Orientbeule mit Diathermie. *Derm Wschr* 76(20) 433-438, 1923.
3. Histologische Untersuchung und Experimentelle Studien Über Pathogenese einer durch Gerstenpollen her vorgerufenen Juckenden, Erythematös-Vesikulösen Hauterkrankung. *Derm Wschr* 76(10) 209-215, 1923.
4. Sur l'Origine des Dermatose Céréale. *Ann Derm* 6(8), 1923.
5. Histologische Untersuchung der blasigen und atrophischen Partien eines Falles von Epidermolyxis bullosa (Köbner). *Derm Wschr* 77(44) 1288-1290, 1923.
6. Un Cas d'Aspergillose Cutanée de la Gauche. *Gaz Med Or* 69(9) 808-811, 1924.
7. Über eine juckende, erythematösblasige Hauterkrankung, die durch Pollenstaub von Gerste und anderen Getreidearten her vorgerufen wird. *Derm Wschr* 78(1) 31, 1924. (Übersetzung von Annales de Derm Syph 538-539,1923)
8. Ein Fall von Hautaspergillose der linken Wange. *Derm Wschr* 80(13) 476-479, 1925.
9. Ein seltener Fall von im Anschluss an benigne fibromatöse Tumoren aufgetretener juveniler Form von Acanthosis nigricans mit histologischer Untersuchung. *Derm Wschr* 80(17) 609-612,1925.
10. Juckende, durch Getreide her vorgerufene Dermatosen im Orient. *Derm Wschr* 84(9) 296-198,1927.
11. Zwei Fälle von Aktinomykose und ihre Behandlung mit Iontophorese. *Derm Wschr* 84(22) 736-738, 1927.
12. Recklinghausensche Krankheit und Kongenitale Syphilis. *Derm Wschr* 84(4) 144-146, 1927.
13. Die Behandlung der Orientbeule mit Diathermie. *Derm Wschr* 84(18) 619-621, 1927.
14. Über Urotropin in der Dermatologie. *Derm Wschr* 85(28) 988-995, 1927.
15. Die Trichophytie der Augenbrauen und der Wimpern und die seltenen Formen der Trichophytie. *Derm Wschr* 85(43) 1486-1488, 1927.
16. Einige Betrachtungen über Syphilis und Malaria. *Derm Wschr* 85(39) 1351-1359, 1927.
17. Ein Fall von primär akuter toxischen Erythrodermie mit histologischen Untersuchung. *Derm Wschr* 85(43) 1486-1488, 1927.
18. Der Kampf gegen die Syphilis in der Türkei und die in einem halben Jahrhundert erzielten Erfolge. *Derm Wschr* 86(23) 767-770, 1928.
19. Behandlung des Rhinophyms. *Derm Wschr* 86(4) 129-130, 1929.
20. Deux cas d'Hypotrichose Familiale due a des Troubles Endocriniennes Occasionés par la Syphilis Congenitale. *Am M Ven* (7), 1930.
21. Ein Fortgeschrittener Skrophuloderma imitierender Aspergillus-Fall mit gummösen Ulzerationen. *Derm Wschr* 91(32) 1157-1161, 1930.
22. Epidermophytie Castellani oder Epidermophyton purpureum Bang. *Derm Wschr* 91(44) 1623-1624, 1930.

23. Multiple gangrenöse diphtherische Geschwüre der Haut. *Derm Wschr* 91(35) 1303-1305, 1930.
24. Ein weiterer Fall von Hautdiphtherie der mit einer Afektion des Auges begonnen hat. *Derm Wschr* 91(48) 1751-1752, 1930.
25. Die Behandlung und die seltenen Formen der Orientbeule. *Derm Wschr* 94(4) 138-142, 1930.
26. Traitment du Sycosis Lupoide par Diathermie. *La Medecine* (16), 1931.
27. Achromie Partielle Traumatique. *Bull Soc Franc Derm Syph* (5), 824-825, 1931.
28. Iodide Bulleuse Pemphigoide. *Ann M Ven* (11), 1931.
29. Syphilides Secondaires Pemphigoides. *Ann M Ven* (12), 1931.
30. Une Observatione Rare d'En vahissement de Phtirus Inguinalis. *Ann M Ven* 26(9) 660-661, 1931.
31. A propose de la Valeur Symptomatique de la Petit Papules Rouge de Gougerot Eliascheff dans la Poikiloderma de Petges Jacobi. *Bull Soc Franc Derm Syph* (2), 279-292, 1932.
32. Deux Observations et Quelques Considérations L'Acanthosis Nigricans. *Bull Soc Franc Derm Syph* (1), 192-212, 1932.
33. Leishmaniose Cutanée ou Bouton d'Orient. *E. Congrès International d'Hygiène Méditerranéenne* 313-335, Marsilles, 1932.
34. Dermatitis de Figue et Figuier. *Bull Soc Franc Derm Syph* (5), 787-792, 1933.
35. A Propos de Communications Faity sur les Leishmanioses du Premier Congrès. Inter Mediterr Hyg a Marseilles. *Bull Soc Franc Derm Syph* (40) 134-137, 1933.
36. Zu den Mitteilug LTber Leishmaniosen auf dem I. Internationalen Hygiene Congress der Mittermeerländer in Marseille. *Derm Wschr* 96(24) 832-834, 1933.
37. Epidermodysplasia Verruciformis. *Virch Arc* 291(3) 739-740, 1933.
38. A propos de la Note de M Prof Agrégé Montpellier. *Bull Soc Franc Derm Syph* 41(5), 732-734, 1934.
39. Deux Point Important et Negligés dans le Tableau Clinique de Boutons de Wright. *Bull Soc Franc Derm Syph* 41(1) 97-105, 1934.
40. A propos de l'Articles du Medecin Colonel Dr Escher Concernant les Leishmanioses Cutanées. *Bull Soc Franc Derm Syph* 41(9), 1847-1849, 1934.
41. Considerations Concernant le Fait de Savoir s l'on doit ou non distinguer les Ichtyoses Hystrix des Ichtyoses Vulgaires. *Bull Soc Franc Derm Syph* 41(4), 710-716, 1934.
42. Kératoses, Hyperkératoses et Keratodermies Palmo-Plantaires et leur Raports Avec la Syphilis. *Ann M Ven* (8), 1935.
43. Über rezidivierende Aphtösedurch Ein Virus verursachte Geschwüre am Mund, am Auge und an der Genitalien. *Derm Wschr* 105(36) 1152-1163, 1937.
44. Consideration sur les lesions Aphteuses de la Bouches et des Parties Genitales, ainsi que sur les Manifestations Oculaire d'Origine Probablement Virutiques et Observations Concernant leur Foyer d'Infection. *Bull Soc Franc Derm Syph* (45): 420-433, 1938.
45. Kurze Mitteilung über Fokal sepsis mit aphtösen Erscheinungen an Mund, Genitalien und Veränderungen an den Augen, als wahrscheinliche Folge einer durch Virusbedingten Allgemeininfektion. *Derm Wschr* 107(35) 1037-1041, 1938.
46. Kazuistik Bildern. *Derm Wschr* 105(51) 1618-1620, 1938.
47. Kazuistik Bildern. *Derm Wschr* 106(8) 222, 1938.
48. Kazuistik Bildern. *Derm Wschr* 107(40) 1178-1179, 1938.
49. A propos d'une entite morbide due probablement à un virus special, donnant lieu à une infection generalisée, se manifestant par des poussés recidivantes et trois régions principales et occasionnant en particulier des iritis répétées. *Bull Soc Franc Derm Syph* 46, 674-687, 1939.
50. Einige Bemerkungen zu meinen Beobachtungen über den Tri-Symptomen Komplex. *Med Welt* 35, 1222, 1939.
51. Some observations on the clinical picture of the So-Called Triple Symptom Complex. *Dermatologica* 81, 73-83, 1940.
52. Trisymptomes Complex (answer to Prof.Kummer). *Derm Wschr* (88) 129, 1943.

### Hulusi Behcet's Turkish Articles

1. Behçet H. İstanbul'da emrazı cildiye ve efrenciye tebabeti. *Ist Ser* 1921;1(8): 37-38.
2. Behçet H. Spiroketa pallida-I. *Ist Ser* 1921;1(9): 185-188.
3. Behçet H. Spiroketa pallida-II. *Ist Ser* 1921;1(10): 221-223.
4. Behçet H. Spiroketa pallida-III. *Ist Ser* 1922;1(13): 311-313.
5. Behçet H. Şereşefski kapilariyle frenginin çabuk teşhisi. *Ist Ser* 1921;1(11): 247-249.
6. Behçet H. Pandorf. *Ist Ser* 1922;1(14): 359.
7. Behçet H. Blumentalin Wassermann teamülündeki tadili. *Ist Ser* 1922;1(15).
8. jnelmilel Kopenhag cilt ve frengi kongresi (2). *Ist Ser* 1930;12(8): 3691-3697.
9. Behçet H. Çelik OS. Müteaddit ve kangren şekli gösteren ciltte difteri tekarruhatı. *Ist Ser* 1931;12(12): 3826-3828.
10. Behçet H. Sofya'da ilmi faaliyet. *Ist Ser* 1931;12(12): 3835-3838.
11. Behçet H. Menşeyini gözden alan ikinci bir cildi difteri vak'ası. *Ist Ser* 1931;13(1): 3851-3852.
12. Behçet H. Guogerot'nun konferansı münasebetiyle emrazı zühreviye ile mücadele. *Ist Ser* 1931;13(1): 2-4.
13. Behçet H. Fuş ve heyeti içtimaiye. *Ist Ser* 1931;13(12): 12-14.
14. Behçet H. Şark çibanları ve nadir bir istilası. *Ist Ser* 1931;13(2): 66-67.
15. Behçet H. Phthirus inguinalis'in nadir bir istilası. *Ist Ser* 1931;13(3): 66-67.
16. Behçet H. Sycosis lupoides'in diyatermi ile tedavisi. *Ist Ser* 1931;13(8): 147-148.
17. Behçet H. İncir ağacı dermatitleri hakkında. *Pra Doktor* 1932;1(5-6): 226-228.
18. Behçet H. Behandlung des sycosis lupoides mit diathermie. *Ist Ser* 1932;14(1).
19. Behçet H. İyodürden mütevellit vechin faavi tenebbüti pamfigoit indifai. *Ist Ser* 1932;14(1): 183-184.
20. Behçet H. Acanthosis nigricans'lar hakkında bazı mülâhazalar (1). *Ist Ser* 1932;14(3): 221-225.
21. Behçet H. Acanthosis nigricans'lar hakkında bazı mülâhazalar (2). *Ist Ser* 1932;14(5): 271-274.
22. Behçet H. Poikilodermalar hakkında bazı mütalaat. *Ist Ser* 1932;14(6): 296-298.

23. Behçet H. Halep çibanı. *Sıhhat Almanakı* 1933; 458-462.
24. Behçet H. Leishmaniose cutanée ou bouton d'Orient. *Ist Ser* 1933;15(3): 507-510.
25. Behçet H, Plevnelioğlu H. Mycotique hastalardan kültür. *Ist Ser* 1933;15(3): 526-527.

### Behcet Societies in Turkey and in The World

#### Association of Behçet Patients

Association of Behçet Patients is a society founded in Turkey in 1986 by the patients suffering Behçet's disease and who were members thereafter. Not only the patients may be members, but also the related physicians and medical staff are welcome.

The membership requires a recent photograph, the identity card, the residential address and a fee of 5 million Turkish Liras.

The aim of this society is to provide the finance required for the evaluation and medication of the diseased members, with the aid of the members' fees and donations. With more than 3700 patients, the financial requirement for them is evident.

The society also aims the psychosocial treatment of the patients, the preparation of brochures for the education of the patients and their household and adaptation of the patients in social activities.

Society's principal purpose is to provide the optimal conditions for Behçet patients, to be able to maintain their daily social and physical activities and to prevent them from being outsiders.

#### International Society For Behcet's Disease

A multidisciplinary International Society for Behçet's Disease (ISBD) (derived from the activities of the International Study Group for Behçet's Disease formed in 1977) was established at the 9th International Conference on Behçet's Disease, Seoul, May 2000

## **Constitution**

### **1. Aim**

To advance the knowledge of the aetiology, pathogenesis, diagnosis, natural history, clinical features, treatment and management of Behçet's Disease (BD).

### **2. Membership**

- 2.1. individual, not representative of country, society or discipline, by application to the Honorary Secretary (see 4.3.3.4)
- 2.2. three categories of multidisciplinary membership
  - 2.2.1 Full - medical & dental - physicians and surgeons involved in the clinical care of patients with BD and/or in research - non-medical scientists - those involved in research relevant to BD
  - 2.2.2 Associate - members of professions allied to medicine with a particular interest in BD - members of patient self-care groups
  - 2.2.3 Supporting - pharmaceutical industry
  - 2.2.4 Honorary - by nomination of the Council to the General Assembly of Members (see 4.1)
  - 2.2.5 HONORARY LIFE PRESIDENTS by nomination of the Council to the General Assembly of Members (see 4.1)
- 2.3 only full and Honorary members have the right to vote at a General Assembly of Members (see 4.1)
- 2.4 members will be required to pay an annual subscription to cover the organisational costs of the society

### **3. Activities** - to extend and communicate knowledge of BD

- 3.1 these may be delegated to an executive committee
- 3.2 inter alia these may include:-
  - 3.2.1 organisation of multidisciplinary International Conferences on BD
  - 3.2.2 co-ordination of research activities on an international basis
  - 3.2.3 to provide a forum for communication between interested individuals and groups
  - 3.2.4 to promote the formation of Specialist Working Groups as necessary (*see 4.3 below*)
  - 3.2.5 to produce a newsletter
  - 3.2.6 to promote acknowledge and support research in BD, with the intentions of supporting the individual researcher
  - 3.2.7 to raise funds to support research in BD
  - 3.2.8 to promote good management of BD
  - 3.2.9 to promote teaching and CME activities on BD
  - 3.2.10 to represent the interests of BD to other professional, scientific, representative and international bodies.

### **4. Organisation**

4.1 **General Assembly of Members** - to be held during each International Conference on BD, under the chairmanship of the President, to:

- 4.1.1 receive reports from the Executive Committee (see 4.3)
- 4.1.2 agree such membership dues as necessary from time to time on recommendation of the Executive Committee (noting that the Executive Committee may exercise discretion in individual cases).
- 4.1.3 receive audited accounts
- 4.1.4 decide times and venues of International Conferences (see 5)
- 4.1.5 elect the Council (see 4.2), and the Executive Committee (see 4.4) on nominations from the Council
- 4.1.6 elect members (see 2)
- 4.1.7 conduct any other relevant business

#### **4.2 Council:**

- 4.2.1 to be chaired by the President, and organised by the Secretary, of the ISBD
- 4.2.1 to consist of a maximum of 40 Full Members active in BD
- 4.2.2 to represent a wide geographical spread
- 4.2.3 no more than 3 ordinary members (see 4.2.9) from any one country
- 4.2.4 to include ex officio, the members of the Executive Committee (see 4.4) and the Convenors of specialist working groups (see 3.2.4 & 4.3)
- 4.2.5 to be elected at the General Assembly of Members (see 4.1.5)
- 4.2.6 to nominate officers of the society (see 4.1.5 & 4.4), the Secretary and the Treasurer being nominated by the President (see 4.4.2.5 & 4.4.2.6), the members of the Council (see 4.2.9), the Convenors of the Specialist Working Groups (see 4.3.2) and the ordinary members of the Executive (see 4.4.2.7), for election at the General Assembly of Members
- 4.2.7 to nominate Honorary Life Presidents to the General Assembly of Members



- 4.2.8 to nominate Honorary members to the General Assembly of Members
- 4.2.9 one third of the "ordinary" (not being those listed in 4.2.4) members of the Council will retire at every General Assembly of Members without direct renewal having served a maximum of 6 years. (addendum – To establish this rotation 1/3<sup>rd</sup> of those Council members elected in 2000 retired in 2002. Half of the remaining members elected in 2000 will retire in 2004 and the rest in 2006. Those new Council members elected in 2002, and those who will be elected in 2004 and 2006 will serve a full 6 years)
- 4.2.10 a member of Council may be elected as an officer of the ISBD
- 4.2.11 meetings of Council should be held after the Executive Committee meeting immediately before the International Conference.
- 4.3 Specialist Working Groups (to take effect at the time of the International Conference in 2006)**
- 4.3.1 The aim of the Specialist Working Groups is to promote collaborative research activities – laboratory, epidemiological, clinical and therapeutic – on a multidisciplinary basis, with as wide a geographical spread as is possible, in the name of the ISBD.
- 4.3.2 Convenor(s) of each Specialist Working Group shall be nominated by the Council, after seeking names of potential candidates from individual members and from the working groups, for election by the General Assembly.
- 4.3.3 Convenors of Specialist Working Groups – term of office 4 years; renewable; maximum 8 years.
- 4.3.4 Convenors will attend the meetings of the Executive Committee, as non-voting members, held at the time of International Conferences
- 4.3.5 Specialist Working Groups may be created or dissolved by the Council, and are listed as an Appendix to this constitution
- 4.4 Executive Committee:**
- 4.4.1 the officers, and ordinary members of the Executive Committee, should, as far as is possible, represent different interested disciplines and geographical regions, and not more than two may come from any one country.
- 4.4.2 The officers and ordinary members forming the Executive Committee, and their terms of office shall be:
- 4.4.2.1 President – four years, not renewable
- 4.4.2.2 President-elect – for the two years before taking office as President
- 4.4.2.3 Past-President – for the two years after leaving office as President
- 4.4.2.4 Vice President – four years (initially 2 years 2000-2002; and then 4 years)
- 4.4.2.5 Secretary – four years renewable, nominated by the President
- 4.3.2.6 Treasurer – four years renewable, nominated by the President
- 4.4.2.7 Up to Four "ordinary members" – to represent specialities not adequately represented by the officers - four years, not renewable
- 4.4.2.8 organiser (President) of the previous International Conference
- 4.4.2.9 organiser (President) of the next International Conference
- 4.4.3 additional members may be co-opted as necessary
- 4.4.4 officers shall be elected by the General Assembly of Members on nominations of the Council (see 4.1.5)
- 4.4.5 Functions - to administer the activities of the ISBD
- 4.4.6 Meetings of the Executive Committee are to be held:
- 4.4.6.1 immediately before the Council meeting and before the International Conference / General Assembly of Members, with the presence of those officers who have held office since the previous General Assembly. 4.4.6.2 at the end of the International Conference with the presence of the newly elected officers and the outgoing members
- 4.4.6.2 or at any other time deemed necessary
- 5. International Conferences**
- 5.1 to be held at intervals and at venues decided by the General Assembly of Members (see 4.1.4), on the recommendation of the Executive Committee and Council which will assess the suitability of invitations received
- 5.2 the scientific programme is to be designed by the organiser/host (President) of the conference in conjunction with a Scientific Advisory Committee which should include members drawn from both the Executive Committee and the Convenors of

the Specialist Working Groups of the ISBD.

5.3 The President of the conference will convene the Council meeting, Executive Committee meetings and the General Assembly of Members in collaboration with the Secretary.

5.4 Finances:

5.4.1 International Conferences are to be financially self supporting

5.4.2 a statement of account is to be submitted to the Treasurer and to the Executive Committee

5.4.3 any proceeds (profits) are to be divided between the ISBD and the host organisation in a proportion to be decided by the Executive Committee.

## 6. Amendment to the Constitution

Amendments to the constitution may be recommended to the Council, and after discussion, proposed to a General Assembly of Members. A two-thirds majority of those attending is required to amend the constitution.

## 7. Dissolution

The ISBD may be dissolved on a two-thirds majority of the members. Assets should be passed to an appropriate charity.

### Appendix - Specialist Working Groups - 2004

Basic Science

Clinical Studies including Drug Trials

Disease Assessment

Education

Epidemiology

Eye Involvement

Paediatrics

### **Forrthcoming Meetings**

#### **13th International Conference on Behcet's Disease**

Innsbruck, Austria 2008

#### **Previous Meetings**

11th International Conference on Behcet's Disease  
Antalya, Turkey 27 - 31 October 2004

12th International Conference on Behcet's Disease  
Lisbon, Portugal 20 - 23 September 2006

The 11th International Congress of Behçet's Disease (BD) was held in Antalya, Turkey during 27-31 Oc-

tober 2004 under the auspices of the International Society for Behçet's Disease and the Turkish Society for Education and Research in Rheumatology. Two hundred and sixty four medical doctors participated in the meeting and 250 abstracts were presented

### **Highlights of the conference**

#### **10th International Conference on Behcet's Disease Berlin, Germany 27 - 29 June 2002**

**The 10th International Conference on Behçet's Disease** was held in the Free University of Berlin during June 27-29, 2002 under the auspices of the International Society for Behçet's Disease. 167 physicians participated in the meeting during which around 200 abstracts were presented.

#### **1st Workshop of the International Society for Behçet's Disease (ISBD) on Pathophysiology and Treatment of Behcet's Disease Kühtai, Austria. 2-5 April 2003**

##### **Executive Committee**

###### **President**

Hasan Yazici (*Turkey*)

E-mail: [hyazici@attglobal.net](mailto:hyazici@attglobal.net)

###### **Vice-President**

Sungnack Lee (*Korea*)

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###### **Past President**

Colin G. Barnes (*UK*)

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###### **Secretary**

Vedat Hamuryudan (*Turkey*)

E-mail: [behcetsociety-secretary@yahoo.com](mailto:behcetsociety-secretary@yahoo.com)

###### **Treasurer**

Dorian Haskard (*UK*)

E-mail: [d.haskard@imperial.ac.uk](mailto:d.haskard@imperial.ac.uk)

#### **President of the Next International Conference of BD (Lisbon 2006)**

Jorge Crespo (*Portugual*)

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BD (Antalya 2004)**

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**Behçet's Syndrome Society (1983)**

The Society was formed in 1983 in York by Judith Buckle, a sufferer from Behçet's disease. With friends from her local Church she held a fund-raising wheelchair push and raised enough money to start the Society. As a result of the publicity for the event, the newly-formed Society acquired around 60 members at its outset.

It had taken Judith 10 years to get a diagnosis and no-one, either amongst the public or the medical profession, seemed to have heard of it, so she thought something should be done about it. A Society should be formed so that people should be informed of its existence, sufferers should be able to get a diagnosis and treatment, and all involved should understand what the disorder was. No-one should ever again have to struggle like she had. At that time it was also early days for small specialised patient support groups so she was a pioneer in many ways.

Although the Society has grown from its original nucleus to its present size of over 1600 members its basic aims have never been forgotten.

***Aims***

- To provide information and support for people with Behçet's disease and for those who care for them.
- To provide financial aid in hardship caused by Behçet's disease.
- To foster education, collaboration and networking

in the medical and allied professions with an interest in Behçet's disease.

- To promote and assist with research into Behçet's disease.
- To promote the cause of patient support groups and of rare diseases amongst the appropriate influential institutions, authorities and decision-making bodies and to provide them with information about se

**The American Behçet's Disease  
Association (ABDA)**

**The American Behçet's Foundation** was founded by a parent of a child with Behçet's Disease in 1978 in Orange County, California. In 1986, the Organization changed its name to The American Behçet's Association (ABA) and was moved to Rochester, Minnesota. Recently the name was changed to the American Behçet's Disease Association (ABDA) to clarify the nature of the organization. In 1987, **the American Behçet's Association** was incorporated as a nonprofit organization in the state of Minnesota and in 1989, was granted 501(c)3 tax exempt status by the Internal Revenue Service. In 1988, a medical advisory board was formed of Behçet's experts from around the country.

**Mission:**

**The American Behçet's Disease Association** works towards the following goals:

- Locating people with Behçet's Disease and providing them with information and support.
- Providing current and pertinent educational information to the medical community and to aid in diagnosing and treating Behçet's Disease.
- Decreasing isolation and stress from the lives of people with Behçet's Disease and their family members.

**Patient And Family Support:**

The ABDA works hard to support patients, family and caregivers in the following ways:

- The American Behçet's Disease Association Newsletter is now published Quarterly. The news-

letter is a critical part of our effort to bring news of diagnosis, treatment, and research and support to our network.

- The ABDA ListServe is an e-mail forum supported by the ABDA where hundreds of Behcet's Sufferers from all over the world communicate as a family and share knowledge, advice, support and hope.
- Pamphlets, articles and books with some of the most current information about Behcet's Disease and its treatment are available online, or through the newsletter.
- The ABDA Website at [www.behcets.com](http://www.behcets.com) is full of information and support, including:
- A place to post your story or reach out to others of similar situations
- A place to recommend or search for a doctor who is knowledgeable about Behcet's Disease
- Message Boards where members can post and review posts about a variety of Behcet's related topics
- Access to a chat room where sufferer's chat online with others around the world
- Event calendars and news about the Behcet's Community
- We continue to operate an 800 information hotline (1-800-7BEHCETS) with volunteers answering 7 days a week.

[Italian Behcet's Association](#)

[Behcet Israel Group \(B.I.G.\)](#)

[Korean Behcet's Association](#)

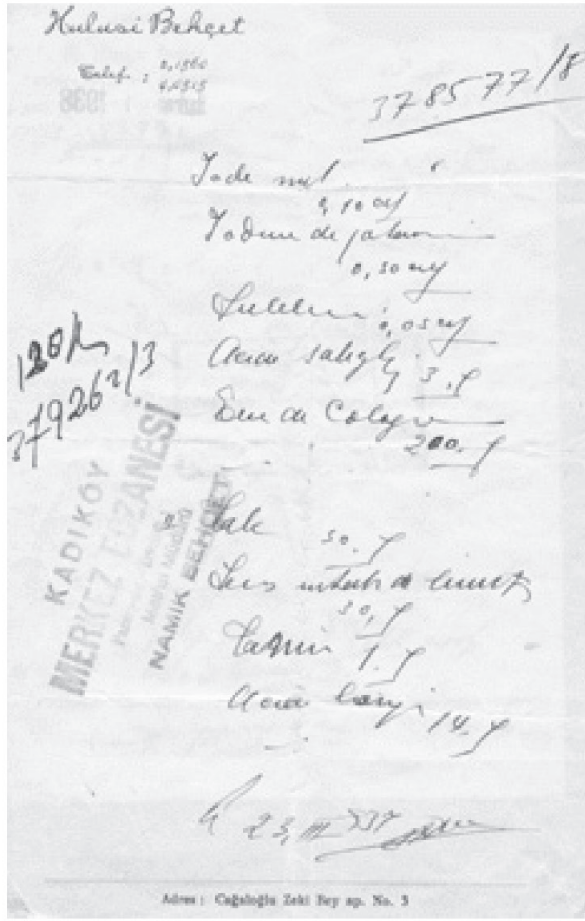
[French Behcet's Association](#)

[Japanese Behcet's Association \(Osaka\)](#)

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**Hulusi Behçet's Prescription**



**Hulusi Behçet**

Hulusi Behçet at Nice 1934



**Hulusi Behçet in Nice in 1934**



**A Stamp About Hulusi Behçet**