

References

- ¹ Stokes EJ, Ridgway GL. *Clinical bacteriology*. 5th ed. London: Edward Arnold, 1980.
- ² Zinnemann KS. *Haemophilus influenzae* and its pathogenicity. *Ergebnisse der Mikrobiologie, Immunitätsforschung und experimentellen Therapie* 1960;33:307-68.
- ³ Kilian M. A taxonomic study of the genus *Haemophilus*, with a proposal of a new species. *J Gen Microbiol* 1976;93:9-62.

Trimethoprim susceptibility to staphylococci

We have observed that inclusion of 1-(4-nitrophenyl)-glycerol (PNPG) as an anti swarming agent in antibiotic susceptibility tests can give rise to anomalous results.

We performed disc tests in parallel to break point sensitivity tests in our studies. Isonitazet agar (Oxoid) with 5% added lysed blood and NAD was used in both methods, but PNPG was added at a final concentration of 50 mg/l (the concentration suggested by Mast Laboratories) to plates used in the break point method. The final concentration of trimethoprim used in the break point method was 0.5 mg/l and discs containing trimethoprim 1.25 µg were used in the disc diffusion method.

Forty-five of 118 clinical isolates of *Staphylococcus aureus* and 11 of 34 coagulase-negative staphylococci were resistant by the break point method, but all were sensitive by the disc method. Subsequent isolates were tested for susceptibility to trimethoprim by the break point method using media with and without added PNPG. Thirty of 90 strains of *Staph aureus* and one of 21 coagulase-negative staphylococci were found to be resistant only in the presence of PNPG. In tests to determine the minimum inhibitory concentration (MIC) of trimethoprim, all resistant isolates were inhibited by 0.25 mg/l without PNPG, but the MIC was 1.0 mg/l in its presence.

We wish to draw attention to our findings, which we have only observed when testing the susceptibility of staphylococci to trimethoprim. Reduction of the concentration of PNPG to 15 mg/l inhibits the swarming of proteus in our hands, but does not produce anomalous results in trimethoprim susceptibility.

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Book reviews

Immunofluorescence Technology. Selected theoretical and clinical aspects. Ed G Wick, KN Traill and K Shauenstein. (Pp 442; \$60.) Elsevier Biomedical Press BV. 1982.

This valuable book draws together information on the theory and practice of immunofluorescence. The fifteen chapters, on selected topics, are without exception clearly written. In the first part of the book the authors discuss the theoretical basis of immunofluorescence and ways of standardising the methods, as well as describing the techniques and instruments for measuring it. In the second part they discuss immunostaining techniques and their applications to pathology, in particular to identification of autoimmune sera, renal disease, and immune complexes. Throughout the book the reader is led gently through the complexities and finishes each chapter with useful insights into the problems. Details of the authors' individual ways of carrying out the techniques include the practical tips that are all too often omitted. Some bias towards the authors' preferred methods is apparent, but the bibliography is extensive, up to 1980, and references are given in full. The book is well illustrated and exceptionally clearly printed.

JULIA M POLAK

Anaerobic Infections. Public Health Laboratory Monograph Series. 3rd ed. AT Willis and KD Phillips. (Pp 53; paperback £2.75.) HMSO.

The Luton team now adds to its significant contributions to clinical anaerobic bacteriology by giving us a clear and straightforward guide that takes account of the considerable advances of the last decade, especially in relation to the non-sporing anaerobes. This new monograph is a fine example of realistic condensation based on much experience. There is obvious self discipline in restricting the text to useful simplified accounts. The practical methodology is within the compass of a busy clinical laboratory, and helpful Tables and identification schemes are easy to follow. Aerotolerant and microaerophilic species are included, with guidance on campylobacter isolation and identification. There is a very helpful general section on media and methods, and an informative note on gas-liquid chromatography.

This is essential reading for all clinical bacteriologists and it will be in constant demand at the bench.

JG COLLEE

Some new titles

The receipt of these books is acknowledged, and this listing must be regarded as sufficient return for the courtesy of the sender. Books that appear to be of particular interest will be reviewed as space permits.

Symposium on Vascular Malformations and Melanotic Lesions. Vol 22. Plastic Surgery Educational Foundation of the American Society of Plastic and Reconstructive Surgeons. Ed H Bruce Williams (Pp 421; £62.75.) Year Book Medical Publishers Ltd. 1983.

N-Nitroso Compounds: Occurrence and Biological Effects. Proceedings of the VIIth International Symposium on N-Nitroso Compounds held in Tokyo 1981. Ed H Bartsch, M Castegnaro, TK O'Neill and M Okada. (Pp 755; Sw fr 110.) World Health Organisation. 1982.

Renal Insufficiency in Children. Ed Monika Bulla. (Pp 235; Soft cover DM 96.) Springer. 1982.

Stem Cells. Their Identification and Characterisation. Ed CS Potten. (Pp 484; £24.) Churchill Livingstone. 1983.

Correction

With reference to the article by Thompson *et al* in the March 1983 issue¹ Professor Kohn's present address is now: Department of Clinical Pathology, Royal Marsden Hospital, Downs Road, Sutton, Surrey.

Reference

- ¹ Thompson EJ, Riches PG, Kohn J. Antibody synthesis within the central nervous system: comparisons of CSF IgG indices and electrophoresis. *J Clin Pathol* 1983;36:312-4.

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