SARCOMAS OF THE BRAIN By James W. Kernohan and AlfredUhlein (viii + 192; 96 figures. £8·0) Springfield, Illinois:Charles C. Thomas. 1962. The authors describe, largely from the files of the Mayo Clinic, 241 sarcomas of the brain out of a total of 8,070 intracerebral tumours. Even from such a vast number of brain growths most British pathologists would be surprised at the number of sarcomas identified and the major feeling which the volume will arouse will centre around the justification for including some of the described growths under the heading of sarcoma. Doubt about the nomenclature detracts little from the value of the book which gives an excellent account of some unusual tumours of the brain which are difficult to classify anyway, but which occur with sufficient frequency to justify a distinctive nomenclature.

The authors give a brief historical account of each of the six types of brain sarcoma they have accepted and are careful to present the views of other authorities who have reached different conclusions about the origins of some of the growths. The numerous different names under which the growths have been described are given along with a considerable bibliography so that apart from anything else the book is a valuable reference for alternative names to some unusual intracerebral growths.

They classify brain sarcomata into fibrosarcomas, giant cell sarcomas, circumscribed sarcomas of the cerebellum, meningeal sarcomatosis, haemangioendarctomas, and sarcomas of the reticuloendothelial system, the latter divided into reticuloendothelial-cell sarcomas, Hodgson's sarcomas, and microgliomas. Of the major groups, many pathologists will be reluctant to accept the giant cell sarcomas as an entity separate from glial tumour, or from the angiolastic meningeoma. There will be little dispute about the fibrosarcoma arising from the meninges or within the brain, for some growths in these situations cannot be distinguished from fibrosarcomas which would be readily accepted in any other part of the body. Whether, however, astrocytic gliomas with apparent sarcomatous elements should be regarded as mixed gliosarcomas is a matter of some doubt. Few would challenge their cases of sarcomas of the reticuloendothelial system occurring within the brain, nor diffuse meningeal sarcomatosis for cases of uniform invasion of the meninges by sarcomatous growths occur in which the most scrupulous and careful search reveals no primary in the brain or elsewhere. In children one is inclined to think that a small medulloblastoma may have been missed, but the appearance of some diffuse meningeal growths in children is somewhat different from diffusely spread medulloblastomas. Without doubt also the growth described as a circumscribed sarcoma of the cerebellum presents a histological appearance which merits its separation from other cerebellar growths although instances of this neoplasm must often have been designated as medulloblastomas. Its relatively more frequent occurrence in adult life, coupled with its distinctive histological features, establishes the case for placing this growth in a separate category.

In all their accounts the authors have given valuable clinicopathological correlations and studied the prognosis of the cases they have been able to follow. The book is, therefore, as complete an account of the tumours that might be called sarcomas of the brain as one could obtain. British pathologists, influenced by the tendency to simple nomenclature of tumours, may react with some initial antagonism to the additional diagnoses suggested in this book, but to anyone interested in the accurate identification of brain growths this volume provides much valuable information and is clearly the result of great experience and thought. The majority of the illustrations are good and demonstrate well the points made in the text.

ANAEROBIC BACTERIOLOGY IN CLINICAL MEDICINE, 2nd ed. By A. Trevor Willis. (xiv + 234; 18 tables. 47s 6d) London: Butterworths. 1964. The first edition of this book has proved deservedly popular as a laboratory handbook. In the preface the author says that he was stimulated to write the book by 'the dread often expressed by students and colleagues about the difficulties of growing anaerobes'. With the clear exposition of laboratory methods for the growth and identification of anaerobes presented in the first half of this book, no bacteriologist should find the subject too difficult for him. The second half of the book gives a clear and concise account of the essentials of anaerobic infections and the toxicology of anaerobes, together with the guiding principles of prophylactic and curative treatment.

The new edition is essentially similar, with certain additions. The most notable of these are a considerable increase in space allotted to the anaerobic cocci, largely on the basis of the work of Professor Hare and his colleagues; a much fuller bibliography; and a discussion. In relation to the latter the author is firmly in favour of using tetanus antitoxin for prophylaxis 'for all persons with soiled wounds, including women who have had a criminal abortion', if they have not been previously immunized. He of course goes on to point out the necessity for taking precautions against hypersensitivity phenomena, and adds that if antitoxin be given, either for prophylactic or curative purposes, 'subsequent active immunization may be mandatory, and should be the responsibility of the physician who orders the antitoxin to be given.'

The new edition also contains descriptions of a few extra culture media, a fuller account of clinical cases of infection, and recent work on the lecithinase and lipase activity of Clostridia. The brief sections on the Fusiform group remain the least satisfactory parts of the book, but as the author points out Cowan and Steel 'found it convenient to omit them from their diagnostic
SARCOMAS OF THE BRAIN

B. E. Tomlinson

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