Preservation of historic apparatus
Some time ago a Joint Working Party between the Royal College of Pathologists and the Institute of Medical Laboratory Science was set up in an endeavour to collect and preserve the old, obsolete, and now historic apparatus that was once used in medical laboratories. Many of the instruments that were employed have been supplanted by more modern and more sophisticated equipment. There is, we believe, a growing urgency to preserve examples of laboratory apparatus that are no longer used.

The Working Party’s quest has not been unsuccessful, and we now hold about 400 items of obsolete instruments, which are, and will increasingly be, of great historic interest. A few people from relatively few laboratories have made most of the collection, and we believe that there is still a great store of untapped old equipment, although rapidly diminishing, in many laboratories and possibly in the hands of some of the older general practitioners who did their own tests, scattered throughout the country.

We would therefore appeal to those who may have such equipment to search it out and let us know about it. It may be that some would wish to retain it; if so we would like a copy of the list of equipment held. Some, no doubt, would like to get rid of it on permanent loan, and we will do our best to store it. A little extra effort on the part of laboratory workers could vastly increase the interest and variety of the collection. Please help us if you possibly can in this matter. It may take a little time on your part, but it could increase your effective storage space. It will undoubtedly be of the greatest value to future generations of laboratory workers to see the tools of the trade on which their present work was based.

Offers of equipment (NOT equipment itself) should be sent in the first instance to Dr J. B. Penfold, Pathology Laboratory, St. Mary’s Hospital, Colchester or to Mr A. G. W. Webb, Bardis, 50 Walton Road, Frinton-on-Sea, Essex. It is hoped that eventually the collection will be housed in the Science Museum in London or some similar institution.

Thymidine mutants
May we comment on the interesting paper by Stokes and Lacey (1978).

They kindly refer to our work, but we think it is important to emphasise that the phenomenon we described is rare, certainly at present, and the knowledge that it can occur does not detract from the usefulness of cotrimoxazole in the great majority of patients.

We feel that our method of sensitivity testing using thymidine-free media (ISA Oxoid, SAF Mast) is an adequate guide to treatment. Failure of an organism to grow on these media alerts us to the phenomenon described in our paper (Maskell et al., 1978). Possibly the method of sensitivity testing suggested by Stokes and Lacey may be useful, but it needs confirmation in the context of the treatment of patients.

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References


The authors comment as follows:

We do not accept the interpretation of Drs Maskell and Okubadejo that, because thymidine (or thymine) mutants are isolated infrequently, cotrimoxazole therapy is rarely affected.

Such mutation occurs at very low frequency in vitro, and large amounts of thymidine could well occur in vivo, without the isolation of these mutants.

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Book review


Pathology monographs covering the various systems of the body have been coming out in a steady stream over the past quarter century. A notable deficiency until recently has been the lack of an English language monograph on the lymphoreticular system, and this book from a group of Sheffield workers is therefore to be welcomed. The editor, in his preface, makes it clear that the book is ‘intended for the histopathologist, the physician and the oncologist in training— as an introduction’. Although there is a chapter at the end on investigation and treatment of lymphomas, the greater part of the book is concerned with histopathology, and the text is necessarily accompanied by numerous photomicrographs. Some of these are good, but too many appear to show ‘just a lot of small round cells’ and are not particularly helpful in distinguishing one condition from another in this difficult area of histopathology. Nor do the descriptions in the text always bring out the salient points which differentiate, for example, follicular hyperplasia from follicular lymphoma. The inclusion of a number of high quality electron micrographs clearly reflects the interest of the senior author. Many are useful, but it may be argued that nine electron micrographs of Hodgkin’s disease are excessive in a book of this size.

One may also question the value of some of the large clinical photographs. The coverage is wide—perhaps too wide, for the descriptions of some conditions are too brief to be useful, but leukemias in general have been somewhat arbitrarily excluded.

Regrettfully this monograph cannot be recommended as an essential bench book for the aspiring histopathologist, although as an introduction to the subject it contains much of value.

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Members of the Joint Working Party
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