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squamous lesions, unusual tumours and tumour-like conditions, thyroid lesions in unusual places, cytology and needle biopsy and special techniques. The major emphasis is on histopathological diagnosis, supported by over 160 figures, mostly photomicrographs, over 50 tables and an enormous bibliography: there are 504 references to the chapter on medullary carcinoma alone.

The style is clear and readable. The author points out problems, cites opposing views and gently gives her own interpretation or viewpoint. The text is up to date, comprehensive, and satisfactorily illustrated. The recently described types of clear celled tumour, signet-ring carcinoma, insular carcinoma, hyalinising trabecular adenoma, grooved nuclei in papillary carcinoma, are all there. A photomicrograph not included that would have been helpful is an example of capsular invasion which the author considers diagnostic of malignancy in follicular tumours, even in the absence of vascular invasion or complete capsular transgression. Dr LiVolsi is to be congratulated on this excellent monograph. It should be on the bookshelf in every laboratory responsible for service histopathology.

I DONIACH

Principles of Drug Action. The Basis of Pharmacology. 3rd ed. Ed WB Pratt, P Taylor. (Pp 816; £37.50.) Churchill Livingstone. 1990. ISBN 0-443-08676-1.

The organisation of most pharmacology texts is based on organ systems, classes of drugs, or disease states. In this easily readable but detailed book a novel approach is taken. The biological, chemical, and molecular concepts which are the basis of pharmacology and thus underlie the principles of drug action are presented.

The opening chapters cover the molecular basis of drug specificity, and this is one of the few general pharmacology books to include information on the influence of chirality and stereoselectivity on the interaction between the drug molecule and its site of action. Many examples in which an unusual response to a drug may be precipitated by hereditary factors are given in the chapter on pharmacogenetics. This book also covers the areas of carcinogenesis, mutagenesis, and teratogenesis in addition to drug metabolism, allergy, resistance, tolerance, and physical dependence.

There have been tremendous advances in the understanding of drug action in the 16 years since the last edition of this textbook and, with the advent of new technology that knowledge is still evolving. My major criticism is that textbooks which include state-of-the-art research in a rapidly advancing area will quickly become out of date. It is to be hoped that we do not have to wait another 16 years for the next revision. There is a definite need for a frequently updated text of this kind available at a reasonable price.

In short, this is a book which will help not only the pharmacologist, but also the biological scientist, chemist, and clinician to understand the factors which regulate and determine drug action.

L LENNARD

Advanced Histopathology. GWH Stamp, NA Wright. (Pp 350; soft cover DM60.) Springer. 1990. ISBN 3-540-19589-0.

The arrival of an "Aids to MRCPATH" book has been long awaited by histopathology trainees such as myself for whom the final exam looms large on the horizon. *Advanced Histopathology* admirably fills this gap in the market. Contrary to what its title may suggest, this is not a conventional textbook of pathology; rather, it is a trainee's vademecum aimed specifically at how to pass the MRCPATH.

The book is divided into sections covering all aspects of the examination including the written paper, post mortem, practical, and viva voce. The largest section of the book (242 pages) is devoted to the written exam. Papers have been reviewed back to 1969 and specimen answers are illustrated. About one quarter of the answers are in the form of essay plans, the remainder as explanatory paragraphs. The post mortem and practical sections are reviewed in slightly less detail, although this is inevitable given the variability of the exam from centre to centre.

The style of the book is informal rather than didactic and I found it very readable. One minor criticism is that for many candidates at this stage of their career, much of the information is superfluous; how many of us need to be reminded to take an extra pen to the exam in case the one we're using runs out? This aside, the book is helpful and informative and will, I believe, help most candidates optimise their approach to this formidable exam.

P DOMIZIO

NOTICES

Association of Clinical Pathologists Junior Membership

Junior membership of the Association is available to medical practitioners who have been engaged in the practice of pathology for a period of less than four years. Junior members are able to remain in this category for a maximum of six years or on the attainment of consultant status. The annual subscription is £24 for those resident in the United Kingdom and £55 for those overseas. The annual subscription may be claimed against tax.

Junior members receive the *Journal of Clinical Pathology* each month. Other benefits are reduced registration fees to attend ACP scientific meetings, all the documents regularly sent to full members of the Association including *ACP News*, which has a regular column for juniors, and the twice yearly summary of pathology courses included in the ACP programme of postgraduate education. Junior members have their own representative body, the Junior Members' Group, which has a direct input to Council.

For Junior Membership apply to: The Honorary Secretary, Association of Clinical Pathologists, School of Biological Sciences, Falmer, Brighton, BN1 9QG. (0273) 678435.

ACP Locum Bureau

The Association of Clinical Pathologists runs a locum bureau for consultant pathologists.

Applicants with the MRCPATH who would like to do locums and anyone requiring a locum should contact The General Secretary, School of Biological Sciences, Falmer, Brighton, BN1 9QC. Tel and Fax: 0273 678435.

Corrections

We are indebted to Dr Hatchérian of Fresnes for pointing out some errors in units given in the article "Thrombotic thrombocytopenic purpura (TTP) complicating leptospirosis" (1990;43:961). The fibrinogen concentration should have been expressed as g/l throughout (not g/dl as it was in one instance), and the bilirubin should have been indicated to be 101 μ mol not 101 mmol. The editors try to be vigilant about such things, but slip-ups occur occasionally and we are grateful to the readers who keep us on our toes.

An error appeared in the paper, Importance of sampling method in DNA analysis of lung cancer (1990;43:820-3): in the second to last line of the abstract tumour selection should have been printed rather than turnover selection.