

JOURNAL OF CLINICAL PATHOLOGY

The Journal of the Association of Clinical Pathologists
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The Journal uses a structured form of abstract in the interests of clarity. This should be short (no more than 300 words) and include four headings: *Aims*—the reasons for the study; *Methods*—what was done, and with what material; *Results*—what was found; and *Conclusions*—what the findings mean and the message that the authors wish to convey.

Leaders are published by editorial invitation; unsolicited reviews or commentaries are unlikely to be accepted, though the editors are always pleased to receive suggestions.

Single case reports of outstanding interest or clinical relevance, short technical notes, and brief investigative studies are welcomed and usually published in the form of a Short Report. The format for Short Reports is that they should not exceed 1000 words, there should be up to two figures or tables, and no more than 10 references.

Letters to the Editor should be no more than 500 words with a maximum of five references and one figure or table. These should be double spaced in the same way as papers.

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Results should not be shown as both tables and graphs and should not duplicate information in the text of the article. Histograms should not be used instead of tables to document numerical data, but may be acceptable if used simply to illustrate differences between data sets or distribution of a parameter.

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If requested, authors shall produce the data upon which the manuscript is based for examination by the editor.

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The top of the figure should be marked and the name of the first author and the figure number should be written on the back of the illustration using an adhesive label or very soft crayon; ball point and felt tip pens must not be used.

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Description of laboratory methods

When a manufacturer's method is used in a study with a particular item of equipment or kit of reagents, the source of this method and reference to the scientific literature on which it was based should be given. Authors might consider it courteous to inform manufacturers that an article assessing their product has been submitted for publication.

Sponsors of research must be declared.

For quantitative methods, information on the sensitivity, precision, and accuracy in the hands of the authors should always be provided. When a well recognised method is used, these requirements could be met simply by providing the references to the methodology and discussing the performance in a recognised current quality assurance scheme. Modifications to a method that have not been previously published should be detailed in the text and supported by evidence of their efficacy.

It is useful to indicate, either from personal observations or by reference, the working range of an assay and the normal reference range when it is used on samples from human beings. When information is expressed as mean $\pm 2SD$, the distribution of the range (normal, skew, or logarithmic) should be stated.

References

References should be double spaced and numbered in the order in which they are first mentioned in the text. References in the text should be identified by arabic numerals in parentheses or superscript. The sequence for numbering references cited only in tables or legends to figures is determined by the first identification in the text of the particular table or illustration. At the end of the article

the numbered list of references should include the names and initials of all authors (unless there are more than six when only the first three should be given, followed by *et al*); the title of the article, which should be abbreviated in the style of *Index Medicus*: the year of publication; the volume number; and the first and last pages of the reference. Titles of books should be followed by the edition, the place of publication, the publisher, and the year of publication, and the page numbers of the chapter cited.

Manuscripts accepted but not yet published may be cited, followed by (in press), but "unpublished observations" and "personal communications" should not be used in the list of references. Similarly, abstracts presented at symposia should not be referenced unless they have been published. It is the responsibility of the authors to check the accuracy of the references; they should be verified against the original documents or photocopies of them before submitting the article.

Journal reference:

- 1 Fletcher CDM, McKee H. Sarcomas—a clinicopathological guide with particular reference to cutaneous manifestations. I. Dermatofibrosarcoma protuberans, malignant fibrous histiocytoma and the epithelial sarcoma of Enzinger. *Clin Exp Dermatol* 1984;9:451-65.

Book reference:

- 2 Washington JA. Conventional approaches to blood culture. In: Washington JA, ed. *The detection of septicemia*. West Palm Beach, Florida: CRP Press, 1978:41-87.

Proofs

After acceptance for publication the article will be subedited into house style and prepared for press. Page proofs will be sent to the correspondence author and should be carefully checked. Proof corrections should be kept to a minimum, should conform to the conventions given in *Whitaker's Almanack*, and should be typed on a separate sheet of paper for clarity; changes made to the text at proof stage are expensive and if extensive, the authors may have to bear the cost of correction.

Reprints

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Pathology, but as would be expected from the Boston School, *Basic Pathology* is much stronger on disease mechanisms. On this subject, Underwood's otherwise attractive book is seriously flawed; acute inflammation accompanied by a denial of all knowledge of cytokines and cell adhesion molecules, and scant coverage of shock, contrasts with four pages of up to date coverage in *Basic Pathology*.

A more worthy competitor is found in the revamped Muir which has benefited from both awareness of advances in cellular and molecular biology, and a noticeable improvement in the typesetting and presentation of the text.

For the student with a liking for smaller books, the current edition of *Basic Pathology* can be recommended. However, a new edition of Underwood with properly written chapters on the basic mechanisms of disease (of primary importance to the undergraduate student), might well prove to be an overwhelming competitor.

WR ROCHE

Essentials of Cytology. An Atlas. G-K Nguyen, TS Kline. (Pp 251; £90.) Waverly Europe Ltd. 1993. ISBN 0-89640-231-2.

This atlas would be a useful benchbook in any cytology department, as it combines the essentials of both gynaecological and non-gynaecological cytology. The layout of each chapter with its tables, lists of pitfalls, illustrations, and suggested reading makes this a handy reference book. It is a great pity that the excellent photomicrographs are in black and white, and not in colour.

My initial excitement at seeing decidual cells and Arias-Stella cells included under pitfalls in the section on "adenocarcinoma and related lesions of the cervix" gave way to disappointment, as there is no explanation of how these cells may be identified. The examples illustrated are not particularly helpful in this respect. A favourable point is that the various squamous lesions are described using both the Bethesda classification and the terminology used in this country—namely, cervical intraepithelial neoplasia (CIN) and dysplasia.

The chapter on the endometrium fills a noticeable gap in reported cytology as it describes the appearances seen with direct sampling—a technique which is becoming more widely used—and is accompanied by useful illustrations.

A feature that detracts somewhat is that the photomicrographs in the chapters on the "gastrointestinal tract" and "breast" appear to be in no particular order. For example, gastric, colonic, oesophageal, and rectal cytology are intermingled, and benign and malignant breast cases appear in a random manner.

No mention is made of the commoner conditions diagnosable on cerebrospinal fluid examination such as meningitis and multiple sclerosis.

To summarise, this is a very useful book with excellent photomicrographs. Changing to colour photomicrographs would add much to its value as appearances vary considerably between wet fixed, Papanicolaou stained material, and its air dried counterparts. The book is well worth having in a cytology laboratory which processes both cervical and non-gynaecological samples, and will be of help to both medical laboratory scientific officers and trainee pathologists alike.

G MCKEE

Pediatric Dermatology and Dermatopathology. A Text and Atlas. Vol 2. R Caputo, A Bernard Ackerman, EQ Sison-Torre. Vol 2. (Pp 505; £167.) 1993. ISBN 0-8121-1414-4.

This is the second of a planned set of four volumes with the same title, the first having been published in 1990 (ISBN 0-8121-1166-4).

Volume 2, like its predecessor, is a book of great distinction. The text is complemented by well chosen, full colour clinical photographs, which are generous in number and in size of reproduction. Large numbers of full colour photomicrographs accompany outstanding descriptions of the histopathology of the disorders under consideration. These photomicrographs are of peerless quality. The appearance, inside and out, of these books can only be described as sumptuous, and, overall, the result is arguably the most beautiful textbook of dermatology ever produced.

Any criticism of this book must be measured against this background. The conditions described are listed in alphabetic order, so that Volume II covers the ground between "Darier's disease" and "hydroa vacciniforme". This is fine, but since some disorders have different names in different countries, locating the relevant subject can be difficult. Thus what an English reader would call "napkin dermatitis" is listed under "D" for "diaper dermatitis". This difficulty is compounded by the lack of an index in the two volumes published so far, and of course, by the fact that only half of the subject matter has so far been covered. One presumes that an index will appear with the final volume, but life with these books will be less than perfect in the meantime.

These are books for the enthusiast. There are others that more or less cover the same ground and which can be obtained more economically. However, the great beauty of the books and the combination of wonderful illustrations, exceptional histopathological descriptions, and excellent referencing put these works in a class of their own, defying comparison. Anyone deeply interested in paediatric dermatology would wish to own copies if ownership can be afforded, and they should find a place in any self respecting dermatology or pathology library. They are at their very best on those rare occasions when one finds oneself with a little time for browsing.

DJ ATHERTON

Some new titles

The receipt of 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.

Biocatalyst Design for Stability and Specificity. Ed M E Himmel, G Georgiou. ACS Symposium Series 516. (Pp 335; no price given) American Chemical Society. 1993. ISBN 0-8412-2518-4.

Oxygen Free Radicals in Tissue Damage. Ed M Tarr, F Samson. (Pp 295; 168 sw fr.) Birkhauser. 1993. ISBN 0-8176-3609-9.

Notices

Diagnostic Medical Mycology

Organised by British Society for Mycopathology

Leeds: 11 April to 15 April

Intended for MLSOs and medical graduates working in diagnostic laboratories.

Course fee (excluding accommodation) £285 + VAT.

Further details can be obtained from Professor E G V Evans, PHLS Mycology Reference Laboratory, Department of Microbiology, University of Leeds, Leeds, LS2 9JT.

Association of Clinical Pathologists Trainee Membership

Trainee membership of the Association is available to medical practitioners who are in training in pathology. Trainee members are able to remain in this category until they achieve consultant or other career grade status (this includes staff grades). The annual subscription is £32.50 for those resident in the United Kingdom and Republic of Ireland and £75 for those overseas. The annual subscription may be claimed against tax.

Trainee 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 trainees, and the twice yearly summary of pathology courses included in the ACP programme of postgraduate education. Trainee members have their own representative body, the Trainee Members' Group, which has a direct input to Council.

For Trainee Membership apply to: The Honorary Secretary, Association of Clinical Pathologists, 221 Preston Road, Brighton BN1 6SA. Tel: (0273) 561188. Fax: 0273 541227.

Corrections

In the final paragraph of the reply to Dr Benbow's letter on ethics and necropsies (*J Clin Pathol* 1993;46:973) the reference should be 2 and not 3.

In the September issue of the journal, a printing error appeared in Dr Appleton's leading article. Dr Appleton's maiden name is Dr McCarthy and not Dr McGrehy, as published. The study referred to in reference 76 was also done under the name of Appleton and not McCarthy.

In the leading article on the update on special techniques in routine cytopathology by Dr Buley (October issue), there is an error in line 23 of the introduction. This refers to ultrasound scanning as an in situ destructive technique; the term scanning was incorrectly inserted during the editorial process.