

not staffed by people with an advanced formal physical education. As a result there is a growing body of people who use sensitive spectrophotometers without any clear understanding of the physics of their measurements, and I am not convinced that the presentation here is ideally suited for such people. Moreover, there is a flavour of the physicist about the derivations of the various equations. For example, the chapter on "laws of absorption" opens with a statement of Lambert's law in the form of a simple differential equation, which is integrated to give the familiar relationship between incident and transmitted light intensity. This is an elegant and economical treatment but is not, to my mind, the right approach for teaching the subject to (say) a zoologist using spectrophotometry for a biochemical estimation. Nevertheless, providing the reader is not frightened by the notation of elementary calculus, this book is readable and can be recommended.

I. D. P. WOOTTON.

The Determination of the ABO and Rh(D) Blood Groups for Transfusion. Medical Research Council Memorandum No. 36. (Pp. vi+46; 7 tables, 1 figure. 3s. 6d.) London: H.M.S.O. 1958.

As the authors state in their preface, blood transfusion has achieved such a prominent place in modern medicine that the present memorandum is, of necessity, much more than a revision of War Memorandum No. 9, 1943.

The working party set up by the Medical Research Council, consisting as it does of practical blood group serologists in daily touch with the complexities and dangers of grouping and cross-matching, concentrates on those techniques which have stood the test of time and stresses the need for these important investigations to be carried out only by those with special training.

It rightly emphasizes that in no other sphere of pathological investigation is an error fraught with such danger to the patient.

The whole memorandum is admirably set out, and, in particular, section VII, dealing with direct matching tests, is strongly recommended for study by all undertaking blood transfusion work.

The rapid direct matching test for use in emergency will be found particularly valuable in the laboratories of those hospitals dealing with accident cases.

R. A. ZEITLIN.

The Cytology of Effusions in the Pleural, Pericardial and Peritoneal Cavities. By A. I. Spriggs. (Pp. 71; 40 figures, 5 colour plates. 42s.) London: Heinemann. 1957.

Textbooks of cytology with their photographs and coloured plates often have a considerable aesthetic appeal. That written by Dr. Spriggs is no exception. Added virtues are a critical yet lucid text, plenty of

references, and the advocacy of Romanowsky stains. As an adjunct to standard textbooks and atlases of haematology this book can be recommended; but one may, perhaps, jib slightly at the price.

HUMPHREY KAY.

Coroner's Practice. By Gavin Thurston. (Pp. 180. 21s.) London: Butterworth. 1958.

In this short and handy publication the functions and duties of a coroner are clearly outlined. Its aim is to provide useful information for those beginning a career as coroner, and Dr. Thurston is to be congratulated on the balance of legal and medical information provided. This, together with the clarity of style, makes it particularly valuable for senior and junior persons who lack either legal or medical qualifications.

The chapter on accidental death is timely in view of the number of fatal accidents on the road or in industry, and the section on industrial diseases most useful. Some basic pathology is adequately dealt with under post-mortem examination, though it is hoped that in future editions of the work a little more space will be devoted to the pathological effects of coronary thrombosis. In many instances a present coronary thrombosis is accompanied by scarring, indicative of previous similar thromboses.

Dr. Thurston's work is certain to be well received and will be a valuable asset to those engaged in forensic work, and comes appropriately at a time when forensic pathology is being recognized as an important specialized branch of the parent subject.

G. J. CUNNINGHAM.

Corrections

In the paper by I. G. Graber and S. Sevitt (*J. clin. Path.*, 12, 25) there are two errors. (1) On page 27, the footnote to Table II, after fraction of filtered sodium excreted, read "A=normal or decreased from admission. B=early increase with fall to normal or decreased values. *Anuria after 24 hours." (2) In the legend to Fig. 8, for "on the right" read "on the left" and for "on the left" read "on the right."

In the paper by E. J. King and K. A. Jegatheesan (*J. clin. Path.*, 12, 85), under the heading "Reagents," the second paragraph should read as follows:

Substrate (0.01 M-Disodium Phenyl Phosphate).—For the substrate, dissolve 2.18 g. disodium phenyl phosphate in 1 litre of freshly boiled and cooled distilled water and preserve with a few drops of chloroform in the refrigerator.