specimens unsuitable for vitamin B12 assay, since the ascorbate is said to destroy B12 present as hydroxy-cobalamin. The effect of ascorbate (5 to 10 mg.) on the preservation of L. casei activity was investigated by bleeding 30 normal subjects. The blood sample was divided into three portions. One aliquot was added to a tube with 5 to 10 mg. of dry ascorbate and the serum retained. Ascorbate, 5 to 10 mg., was added to the serum from the second aliquot. Serum from the third portion was retained without any addition. All the sera were stored at -20° C. and L. casei activity assayed periodically over the next six

months. The results (Fig. 3) confirm the observations of Waters and Mollin (1961) that ascorbate largely prevented the decline of *L. casei* activity in storage.

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It would be of interest to know whether the lower glyceride impurity in the triolein has any effect on the ¹³¹I triolein absorption test and this is being investigated using a purified ¹³¹I triolein for comparison.

We are grateful to Professor E. M. McGirr, Dr. J. H. Wright, Dr. J. Badenoch, and Dr. V. Lawrie for their advice and encouragement.

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ADDENDUM

Since this paper was written, analysis of a purified triolein (99% triglyceride) labelled with ¹³¹I at the Radiochemical Centre, Amersham, has revealed 16% lower glycerides and 4% oleic acid in the end product. This suggests that the mode of preparation (possibly heating to 60°C. to evaporate solvent) must contribute to the impurities of ¹³¹I triolein.

The January 1964 Issue

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204 Book reviews

the reader disagrees with some, he will benefit from considering the alternatives. This book is strongly recommended.

W. A. GILLESPIE

POISON DETECTION IN HUMAN ORGANS By Alan S. Curry. (Pp. xxi + 150; 17 tables; 7 text figures. \$6.75.) Springfield, Illinois: Charles C. Thomas. 1963.

This is a book for the hospital as well as for the forensic laboratory written by the Principal Scientific Officer of the Home Office Forensic Science Laboratory, Harrogate. Its emphasis is on the detection of poisons by the most rapid and simple methods available. Up to date and concise, it not only gives advice to the specialist toxicologist on the systematic chemical testing of each organ in a comprehensive analysis but it also provides just the kind of information most useful to the clinical pathologist faced with an urgent decision between poisoning and disease in the unconscious patient or at necropsy.

The introductory chapter, which includes advice on the collection, packing, and preservation of samples, is followed by a most useful chapter describing spot tests on blood and urine and other tests of value in the living patient, including the extraction of poisons soluble in organic solvents for which no simple spot tests are yet available. For a long time we have needed a battery of rapid tests for the detection of the commoner poisons in the living and at the difficult necropsy when, for example, there is no clinical or morphological evidence of poisoning and yet the degree of morbid change, e.g., coronary stenosis, leaves one in some doubt as to whether it is the true cause of death. Now, with the help of the spot tests described in this chapter, together with the one of rapid tests for barbiturates published recently (Curry, 1963; Wallenius, Zaar, and Lausing, 1963), any hospital laboratory should be able to diagnose the majority of cases of poisoning in a couple of hours. The analysis of the contents of the alimentary tract is described in detail in Chapter 3, most of which is equally applicable to the analysis of stomach washings from the living.

In a comprehensive post-mortem analysis, after carrying out the simple spot tests, the reader is advised to turn to the four tests on liver tissue described in the first part of chapter 4: in this way those common poisons for which there are as yet no simple spot tests can be most quickly detected. Tests on other organs and further analyses on blood and urine are then detailed.

There are occasional misprints; these are no doubt inevitable in a new book. Those in the last two urine spot tests in Table 6 on page 49 are worth mentioning. In the test for bromide, '50% fluorescein' should read: 'saturated alcoholic solution of sodium fluorescein'; and in the test for p-amino-phenol, 'add 2-3 drops 1% NaOH and alkaline α naphthol' should read: 'add 2-3 drops 1% NaNO₂ and 1 ml. of an approximately 1% solution of α -naphthol in 10% NaOH'.

My only real criticism is the price of so short a book. It seems most unfortunate that it was published in America and not here as a paper-back at a fraction of the cost, for it would be a valuable addition to the library of any hospital laboratory.

GREGOR GRANT

 Curry, A. S. (1963), Brit. med. J., 2, 1040.
 Wallenius, G., Zaar, B., and Lausing, E. (1963), Scand. J. clin. lab. Invest., 15, Sup. 69, 252. LABORATORY TESTS IN DIAGNOSIS AND INVESTIGATION OF ENDOCRINE FUNCTIONS Edited by Roberto Escamilla. (Pp. xiv + 514; 135 figures; 89 tables. 78s.) Oxford: Blackwell Scientific Publications. 1962.

This well-produced book is based upon a course of postgraduate lectures given at the University of California. Judged by the description of the posts held by the many contributors, it is based upon the experimental observations of a group of younger investigators who are actively engaged in the work they describe. This leads to a refreshingly direct text which is easily read and comprehended. They give an up-to-date account of the present state of knowledge of this branch of medicine, and they are clearly busily attempting to expand this knowledge.

There are seven sections—pituitary, thyroid, parathyroids, pancreatic islets, adrenals, testes, and ovaries. Each section is introduced by a pathologist, who outlines the tests that are currently available to the clinician for the diagnosis of disorders of that particular endocrine gland. These are followed by a number of lectures devoted to the measurement of one or more functions of that organ.

The introductory lectures will be of particular value to the clinician as they summarize, although somewhat sketchily in places, the very important part that the laboratory must play in the diagnosis of these not uncommon diseases; those on the parathyroid and the testis are particularly good.

The subsequent chapters contain a considerable amount of laboratory and clinical data derived largely from investigations on healthy and diseased human subjects. The laboratory methods employed vary from the simplest, such as the determination of plasma electrolytes, to those using specialized techniques only just beginning to find their way into the routine laboratory, e.g., gas chromatographic, immunological and radioactive tracer methods.

Each chapter is followed by a most useful list of references, many of them to papers giving practical details of the tests discussed. These lists alone make the book a compulsory addition to the library of routine laboratories where the investigation of endocrine disorders is carried out.

Some criticism can be levelled at the text since it is presented from transcripts of the lectures as delivered, rather than as articles written for the reader This does not, however, detract from their value, and any initial irritation should soon be overcome by the amount of clearly presented information.

This book can be recommended to all who are interested in this fascinating subject, be they clinician or clinical pathologist.

HAROLD MILLER

NOTICE TO CONTRIBUTORS

Would intending contributors please send all communications to the Editor, *JOURNAL OF CLINICAL PATH-OLOGY*, Dr. A. Gordon Signy, addressed to him at B.M.A. House, Tavistock Square, W.C.1.