Book reviews

THE PATHOLOGY OF EMPHYSEMA By Lynne Reid. (Pp. ix + 372; 172 figures. 70s.) London: Lloyd-Luke Ltd. 1967.

Emphysema is an elusive disease, ill understood, and difficult to recognize even at necropsy. Professor Lynne Reid is one of the foremost students of this condition and her many contributions are well known to those interested in chronic respiratory disease. In this monograph she has brought together the products of years of painstaking research. She defines emphysema as 'a condition of the lung characterized by increase beyond the normal in the size of air spaces distal to the terminal bronchioles, *i.e.*, the acinus'. She shows that this is not one entity but a whole group of different anatomical lesions with differing causes and differing clinical effects. She then classifies these as with or without airways obstruction, which can be reversible or irreversible and this in turn can be with or without recognizable bronchial disease. In this way she separates 11 types of emphysema which are each described in separate chapters. In these chapters she brings together her own detailed pathological observations, the radiological appearances, and the functional effects. It is an interesting sidelight on the advance in our knowledge that emphysema with chronic bronchitis forms only one of these chapters—only 10% of the whole monograph. The remaining chapters are devoted to the cardiovascular changes in emphysema, the correlation of radiographic and pathological changes, the pathogenesis, and the experimental production of emphysema. Two useful appendices are devoted to the methods of examining lungs whether surgically excised or from necropsy and on the normal microanatomy.

Dr. Reid summarizes the results of her own extensive studies and reviews the findings of others. Often illustrative cases are quoted and in rare types of emphysema personally studied cases are described in some detail and carefully correlated with functional and radiological studies. This book is a mine of information both of personal observation and of the literature. The illustrations include macroscopic specimens often magnified, radiographs, and some simple and very helpful line drawings. Photomicrographs are few.

Any pathologist who has to deal with lung disease will find this monograph invaluable and chest physicians and radiologists could study it with profit.

C. V. HARRISON

CARDIAC PATHOLOGY By Robert Lannigan. (Pp. vii + 385; illustrated. £5 16s.) London: Butterworths. 1966. Several books on cardiac pathology are available and the appearance of another makes comparisons inevitable. The most expensive of these is likely to be found only in libraries, but general pathologists will consider purchasing Lannigan's book for their own use.

The problems of compressing a large subject with a vast literature into a short book are well seen. The empha-

sis is morphological, with little attempt to relate structural changes with modern functional clinical cardiology. There is a praiseworthy attempt to be comprehensive, with contributed chapters on the physiological aspects of cardiac failure and childhood heart disease both of which would blend better with more careful editing. In covering the whole field of cardiac disease, some of the rarer aspects have been stressed, but more could be made of the growing points. Additional personal opinions and experiences of the author would improve the traditional morphological descriptions; more tables, graphs and charts, stating quantitative findings, would keep in step with the present trend in histopathology towards precise classification and incidence of structural changes.

First impressions are marred by numerous detailed defects; indiscriminate and inconstant use of words such as valvar and valvular, Aschoff body and nodule, embolus and embolism; lack of specific nomenclature in fungal diseases; some poor quality or needless macroscopic photographs and a few inadequate legends to figures. More important errors include descriptions of the aortic valve cusps as right, left, and anterior in the text and right, left, and posterior in the figures; photographs of a rhabdomyosarcoma are twice described as rhabdomyoma, although one is from a metastasis. Misprints are too frequent both in the text and in the references.

Despite these limitations there is much of value in this book. It is easy to read, and electron microscopy is a welcome addition to some chapters. The views expressed tend to be conservative, and the reader seeking established knowledge will be more satisfied than one looking for stimulation. The bibliography is adequate and there are useful appendices of heart weights and valve circumferences. In many ways this does fill the gap between Anderson and Gould and it would be a pity if it were prejudiced by minor errors in final preparation or by its high price.

R. A. B. DRURY

HISTOLOGICAL TYPING OF LUNG TUMOURS Edited by L. Kreyberg, A. A. Liewbow, and E. A. Uhlinger. (Pp. 28; 40 figures. £4.) Geneva: W.H.O. 1967.

Tumour statistics are feasible only if there is a standardized nomenclature for the different tumour types. W.H.O. is endeavouring to draw up such an agreed nomenclature and this volume is the first of a series. It consists of a list of the names followed by brief descriptions and colour photomicrographs. The reference centre was set up in 1958 under Professor Kreyberg and 17 centres throughout the world have collaborated. After agreement had been reached Professor Kreyberg, assisted by Professors Liebow and Uhlinger, drew up this monograph.

They divide lung tumours into 13 groups of which