

numbers it is probably not significant. The study reported has shown a marked reduction in false positive reports in cases where sputum was cultured quantitatively and the criterion for infection considered to be more than 25 colonies of a given potential pathogen on the dilution plate.

We wish to thank Dr E. R. Pavillard, microbiologist, Royal Perth Hospital, for his encouragement, and helpful criticism of this paper.

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as there may be poor development of type-specific antigen on the cephalixin medium (N. W. Preston, personal communication).

Conclusions

A medium containing Oxoid charcoal agar (CM119) with 10% horse blood, 1% Difco proteose peptone no. 3, and 40 µg/ml of cephalixin has proved satisfactory for the isolation of *Bord. pertussis*. The isolation rate was as good on this medium as on the routine medium containing penicillin, but plates were easier to read due to the reduction in numbers of commensals. The cephalixin plates should be incubated for seven days at 36°C before being

reported as negative, since some strains of *Bord. parapertussis* may show variation in colony size with shorter periods of incubation.

We thank Mr R. W. Boyd of Glaxo Laboratories for the supply of cephalixin; Dr Hans Lautrop, Dr N. W. Preston, and Dr F. W. Sheffield for freeze-dried strains of *Bord. parapertussis*, and Dr E. C. Armstrong for the strain of *Bord. pertussis*.

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The July 1972 Issue

THE JULY 1972 ISSUE CONTAINS THE FOLLOWING PAPERS

Obituary A. G. Signy, Editor, *Journal of Clinical Pathology*, 1944-1972

Congenital dyserythropoietic anaemia with erythroblastic multinuclearity MALCOLM BRIGHT, JEREMY COBB, BYRON EVANS, AND T. E. PARRY

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Present day practice

Immunoglobulin and intrinsic factor antibody in the sera of patients with pernicious anaemia HING-YAN SHUM, ARTHUR M. STREETER, AND BARRY J. O'NEILL

Technical methods

Simultaneous staining of phospholipids, basic proteins, and glycogen on the same slide B. PRESENTEY AND K. PERK

Book reviews

Supplement: Problems Related to Fibrinolysis—Theoretical and Clinical

Copies are still available and may be obtained from the PUBLISHING MANAGER, BRITISH MEDICAL ASSOCIATION, TAVISTOCK SQUARE, LONDON, WC1H 9JR, price £1.05.

tables. £12.10.) Basel: S. Karger A.G. 1971.

The latest volume in this series provides a further collection of detailed, thoughtful reviews on some current immunological problems. The subjects dealt with are antigens common to microbes and mammalian cells, cellular immunology and the graft versus host reaction, antigen recognition by cell receptors, the cellular basis of immunological memory, immune facilitation and enhancement, and chronic hepatitis. Each has been written by an expert in the field and provides an invaluable guide and source of reference for professional immunologists whether they are working on the same subject or simply wish to know what is going on. For general pathologists and clinicians with an interest in immunology there is much useful basic information but they might find it tough going. Except in the hepatic section clinical implications are dealt with slightly or not at all.

A. A. GLYNN

Selecting a Computer System for the Clinical Laboratory By Marion J. Ball. (Pp. xi + 115. \$14.75.) Springfield, Illinois: Charles C. Thomas. 1971.

In this short book the author, who is Assistant Professor in the Department of Medical Physics at Temple University, Philadelphia, passes on in a very assimilable form knowledge that she acquired in the course of examining the problems involved in introducing a computer system in a pathology laboratory embracing clinical chemistry, haematology and blood transfusion work, and microbiology.

After a simple introduction to the necessary technical jargon the reader is exposed to the realities of the present-day situation regarding the advantages and disadvantages of laboratory computer systems, and to experts' views concerning identifiable needs for the future. The wide choice of methods and documents for data input is well illustrated along with alternative formats for computer-produced reports. The effectiveness of on-line data acquisition from laboratory instruments is also discussed together with various approaches to 'peak-picking'. A major section describes and illustrates nine laboratory computer systems which are available in the USA, and their features can be readily compared in a useful summary table. In a briefer chapter advice is given on how to evaluate laboratory

computer systems during an on-site visit. Topics dealt with superficially include the role of the independent computer consultant and the vital need for good laboratory management and full staff involvement. Among five appendices the one which is certain to be of wide interest is that which sets out a specification for a laboratory data processing system. Personal communications are cited throughout the text but a selection of over 200 references, including several in British journals, is given at the end of the book.

This book would equip a newcomer to the field with enough information to enable him to start to communicate with computer scientists and to appreciate why it is necessary to proceed cautiously. Its down-to-earth approach and easy style will make it a particularly attractive primer for the pathology trainee, but it can also be confidently recommended to the consultant pathologist and even to administrators who will have to make judgements on alternative solutions to the problems of laboratory data processing. The book is lavishly illustrated and produced to a high standard but unfortunately, like everything else to do with computers, relatively expensive.

F. V. FLYNN

Notice

Pathology Day Release Course

The British Postgraduate Medical Federation in association with its Specialist Institutes and the Association of Clinical Pathologists is offering an advanced course in pathology suitable for candidates for the Final M.R.C.Path. on a day release basis in each of the four specialties. This will be held fortnightly, mainly at the Middlesex Hospital Medical School, in haematology, histopathology, chemical pathology, and microbiology from September 1972 to May 1973.

The fee for each of the four courses will be £35 which junior hospital staff may reclaim from their employing authority when applying for study leave under the conditions set out in the terms and conditions of service for NHS staff and in HM 67(27) and HM 68(50).

Refreshments will be available on payment in the Refectory at the Middlesex Hospital Medical School.

Application to register for the course should be made, stating clearly which of the courses is desired. At the same time applicants are advised to make arrangements with their employing authority for study leave.

A cheque for £35, made payable to the British Postgraduate Medical Federation, should accompany each application and be forwarded to the British Postgraduate Medical Federation, 33 Millman Street, London, WC1N 3EJ.