Another well-written chapter is by W. D. and J. E. Edwards on pulmonary vasculature, particularly the description of plexogenic pulmonary arteriopathy. L. Reid has brought us up to date with research on mucus secretion in the lung.

The monograph should interest anyone concerned with teaching pulmonary pathology or wanting to learn about it.

BRIAN E. HEARD

Clinical Gastrointestinal Immunology. By H. C. Thomas and D. P. Jewell. (Pp. viii + 264; illustrated; £12.00.) Oxford: Blackwell Scientific Publications. 1979.

In the past 10-15 years both basic and applied immunology have produced an 'explosion' (as the authors state) not only in gastroenterology but in most of the clinical specialties; with the probable exception of nephrology, however, gastroenterology represents the specialty in which both basic and applied immunology have contributed most to our understanding. This is borne out by the number of texts which have now appeared and continue to appear dealing with various aspects of the immunology of the gastrointestinal tract and liver. The need for a further monograph such as the present one is in no doubt; it provides a most lucid and concise 'up-date' of current knowledge and with a judicious and careful critical approach in those areas where the evidence as yet remains equivocal.

The first three chapters provide a basic immunological background against which the subsequent chapters are set. One wonders whether the authors have not been a little patronising in assuming that their colleague gastroenterologists have not as yet become sufficiently familiar with the language and concepts of immunology; if they have not, then it is surely an indictment of our undergraduate and postgraduate medical education. If there is need to include a glossary in which, for example, gluten and reticuloendothelial system appears, are they justified in assuming a sufficient virological knowledge among their readers to be able to understand nucleocapsid, DNA polymerase, and others? Having said this, however, these three chapters represent an excellent precis of current knowledge, and for any gastroenterologist who has missed out on his immunology the book is worth purchase for this alone. The subsequent chapters deal with particular diseases, including intestinal and hepatic infections

(perhaps the least satisfying in its rather sketchy and brief handling of the topic), coeliac disease, chronic inflammatory bowel diseases, acute and chronic hepatitis, and others. There are some minor inconsistencies here and there, for example, in a balanced review of Crohn's disease and ulcerative colitis immune responsiveness in the former becomes immunological competence in the latter. The chapter on acute and chronic viral hepatitis is a masterpiece, in which the complexities of the host/viral interrelationships are clearly and skilfully outlined. The authors are to be congratulated on this excellent text, and it is a pleasure to commend it.

R. N. M. MACSWEEN

Post Mortem Procedures. (An Illustrated Textbook). By G. A. Gresham and A. F. Turner. (Pp. 160; illustrated; £8.00.) London: Wolfe Medical Publications Ltd. 1979.

Sex and violence pervade the media and intrude into this book. The first page advises us that sexual intercourse is a cause of sudden death, and the later chapters are full of high-quality gruesome photographs of the mutilated victims of violence. This type of presentation, with a tabloid-type format of numerous photographs (thankfully in monochrome) and a concise text in short, easily read sentences, may attract a mortuary technician with limited literary horizons.

To a hospital pathologist trying to raise the standards of his postmortem room the 60 pages on the technique of the postmortem examination are outstanding. The step-by-step illustrations of how to remove the organs are excellent, and most of them speak for themselves. Specialised techniques and mortuary administration are also described, and pathologists in training will benefit from a quick perusal of this book. It is well-printed on good paper, does not take long to read, and is not expensive. Recommended for the mortuary staff to read and to imitate. The pathologist who works with technicians who can reproduce these procedures is fortunate.

R. A. B. DRURY

Corrections

A new technique for Gram staining paraffin-embedded tissue by K. ENGBAEK, K. S. JOHANSEN, and M. E. JENSEN (*Journal of Clinical Pathology*, 1979, **32**, 187-190.)

On page 188, column 1, paragraph 2, line 7, under solution (C) should be added: 'Working Solution: stock solution 10 ml, distilled water 50 ml.'

Winter vomiting disease caused by calicivirus by W. D. CUBITT, D. A. MCSWIGGAN, and W. MOORE (*Journal of Clinical Pathology*, 1979, **32**, 786-793).

Results:

Buoyant density in CsCl

Feline calicivirus 1.36-1.42 g/cm⁻³

'Human' calicivirus 1.36-1.38 g/cm⁻³