were higher with the conventional Schilling test than with the Dicopac (p < 0.001 by paired t test; t = 5.0 with 12 degrees of freedom). This difference in ratio could be ascribed to the 58Co excretion being higher in the Dicopac method than in the conventional Schilling test, the respective means being 4.3 and 1.9% (p < 0.001 by paired t test). There was no difference in 57Co excretion in the Dicopac and conventional Schilling method, the respective means being 8.5 and 9.5% (p > 0.05 by paired t test).

The most likely explanation for this phenomenon is that the 57Co Cn-Cbl attached to intrinsic factor exchanges in the patient's gut with the free 58Co Cn-Cbl when both capsules are given together in the Dicopac method; Knudsen and Hippe consider that the dissociation constant for the Cn-Cbl intrinsic factor complex is low enough for such a reaction to occur.

The Radiochemical Centre draw attention to discrepancies between the Dicopac and the Schilling test in their instructions which state "typically, for cases of pernicious anaemia, the cobalt-58 value will be slightly higher than the excretion in the first part of the Schilling test." However, our results show that the 58Co excretions in the Dicopac method are often considerably higher than the 57Co excretions in the first part of the Schilling test. This large discrepancy effectively invalidated the Dicopac technique in our pernicious anaemia patients since it brought their 57Co:58 Co ratios unacceptably close to those which are regarded as normal.

We wish to thank Mrs L Warne for typing this paper.

References

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**Book reviews**

**Cutaneous Aspects of Internal Disease**


The ability to diagnose systemic disease on the basis of cutaneous changes poses a continual challenge to both internists and dermatologists. Since Irwin Braverman wrote his classic monograph on this subject our understanding of disease processes has been magnified by spectacular advances particularly in the field of immunopathology, and this has helped to clarify the relationship between internal diseases and the cutaneous manifestations. In this recent addition to the literature Jeffrey Callen has marshalled an impressive array of dermatological experts who deal individually with the pathogenesis, clinical features, and treatment of multi-systemic diseases. With large numbers of contributors there is always the risk of repetition but the author was clearly aware of this problem and the result is a comprehensive and authoritative text which can be used as a standard reference book by any practicing physician. For the dermatologist the information contained in this volume is obligatory reading but the book is clinically orientated and contains detailed pathology.

**Atlas of Kidney Biopsies**


This comprehensive atlas of renal biopsy pathology has been published in the same basic format as the AFIP tumour fascicles but is rather longer—covering some 300 pages. The book is pleasant to handle and it contains a large number of black and white illustrations of light and electron microscopy. In addition there are occasional pages of immunofluorescent pictures in colour. Anyone new to the subject would gain the impression that the light microscopy was unimportant and that electron microscopy was required for an accurate diagnosis in every case. In fact almost all cases can be accurately diagnosed by light microscopy provided one strives to attain high technical standards of slide preparation.

Personally liked the layout of the book consisting as it does of a series of illustrative case histories. The danger of course that the reader may find...
difficult to sort out the important features from the mass of data available. The summaries at the beginning of each section however do present the principal features of each major type of lesion.

I was disturbed to see that the authors use the term mesangio-proliferative glomerulonephritis to refer to mesangio-capillary glomerulonephritis on page 106. This could lead to awfu confusion since the term mesangial proliferative glomerulonephritis is usually reserved for mesangial proliferation only without capillary wall abnormality. The authors also use terms such as diffuse and focal rather loosely and sometimes totally incorrectly as on page 163 where mesangial deposits in lupus nephritis are referred to as "focal"!

Overall this book contains a wealth of material with a high proportion of good electron micrographs. The cost is remarkably low in relation to its size and content. Apart from the reservations I have mentioned in relation to loose and inaccurate terminology I can recommend this atlas as a valuable source of information on renal biopsy pathology.

DR TURNER


The message of this book is to encourage pathologists to reconsider the ideas of the kind of breast lesion which could form the basis from which some carcinomas develop. This team from Malmö, Sweden, present their analysis of the pathological findings of over 500 breast cancers detected during 1976-1978, 118 of them during the course of mammographic screening of a randomised population of women aged 45-69. They draw attention to the similarity of structural and histological pattern between tubular cancers and a sclerosing process involving parenchyma that is generally considered benign. Arguments are presented to support progression of the scars into cancers, and the cancers into less differentiated forms with time.

Since the sclerosing and obliterator connective tissue changes of breast have not received much attention in the British literature (and are subject to a wide range of terminologies) this work should encourage us to reconsider their significance. It is probable that those involved in early detection programmes have the best opportunity to assess the relationships that are being proposed. Nevertheless it would be an advantage for a wider group of pathologists to have the opportunity to examine this work for it is likely that with the increasing use of mammography, greater familiarity with the appearances discussed in this book will be of value.

The presentation is in the usual format of Scandinavian monographs. There are over 150 black and white photomicrographs which unfortunately are not always of the best quality but are generally satisfactory to support the text. The section on relationships between mammographic changes and pathology show clearly the benefits to be gained from close collaboration in evaluating breast lesions. Though not the easiest of books to digest it deserves credit for taking a different approach than the conventional one on premalignant lesions of the breast.

TJ ANDERSON


This stimulating account of the purpose and nature of the work of the surgical histopathologist is set out in nine self-contained chapters. Historical notes add interest and there are excellent sections on sampling error, the use of stains, and the interpretation of histological appearances, the latter being accomplished in 23 pages. At no point does brevity result in irrelevance and there are useful tables in this chapter and also in the chapter on electron microscopy. The coverage of borderline lesions and pseudomalignancy will prove useful as will the chapter on quantitative methods. The illustrations are good with a few exceptions—namely, Figs. 3.2, 4.4, and 4.5 would be greatly improved by employing a higher magnification: the contrast in Fig 3.9 should be enhanced. Line drawings are excellent and the typography almost faultless.

No trainee histopathologist can afford to be without this book. Senior pathologists will be much refreshed by reading it.

J BURSTON


Pathology Annual is now a well established series and volume 15, part 2, further is a tribute to the success which the series editors have enjoyed in being able to attract distinguished contributors. There is much in this volume of interest to both the general and the research-oriented histopathologist. There is a good account of the recent advances in the methods for studying the mineral pneumoconiosis (Vallyathan et al.), and also a comprehensive and quite outstanding review of coal workers' pneumoconiosis (Green and Laqueur). The clinical and pathological aspects of onchocerciasis (Gibson et al.) are comprehensively covered in a lengthy well-written and well-illustrated article. The emerging role of electronmicroscopy as a diagnostic aid is emphasised with a chapter on its role in oncology (Mackay and Silva) and in human breast lesions (Ahmed). Of these Ahmed's chapter is outstanding and emphasises the splendid contributions which he has made to our understanding of breast pathology. Tumour pathology is well covered with chapters on renal cell tumours (Bannayan and Lamm)—the illustrations here lack crispness, on synovial sarcoma (Evans)—a good review, and on functioning adrenocortical tumours (Sasano et al.)—these have also been well reviewed in other texts. A chapter on pathology, inference and carcinogenesis (Burch), essentially theoretical and which critically examines orthodox views makes compelling reading and is mentally stimulating. However the author overstates his case and when the iconoclast extends his activities to the destruction of the temple he runs the real danger of losing credibility.

RM MACSWEEEN


Selected papers from the 13th Congress of the World Federation of Haemophilia held in Tel-Aviv in 1979 form the basis of this volume. The main areas covered are the important growth points of the molecular structure of factor IX, inhibitors of factors VII and IX, hepatitis, arthritis and drugs in bleeding patients.

As with most symposium issues the book is unbalanced but this defect is compensated for by the excellent quality of the chapters. In particular the section on joint disease and joint replacement is timely and the papers on drugs in haemophilia deal with an ever increasing clinical problem. This is one of the most informative books on its subject in recent years and is a must for all physicians who have to deal with these patients.

CD FORBES