The effect of parasitic infections on the central nervous system and the eye is analysed in this interesting and instructive book. The format of the chapters is rather unorthodox in that, after an introductory section on the epidemiology and life cycle of the parasite under discussion, varying numbers of case reports are presented before other pathologic considerations, diagnosis, and treatment are considered. The result is an eminently readable book although some of the clinical histories are a bit long and list vast numbers of negative investigations. The latter, however, serves to emphasise the importance of thinking of parasitic infections in patients with unusual neurological symptoms.

The illustrations attain a high standard. Magnifications are not given and would have been useful with at least some of the photomicrographs. Since the authors emphasise the importance of histological studies in finalising the diagnosis, a few higher power photomicrographs would have improved the book.

HUME ADAMS


The clinical application of monoclonal antibodies is already a vast topic and difficult to assimilate. The purpose of this book is to point out the potentials and problems of these exquisite instruments. A monoclonal antibody is rather like an ultra high power objective bringing a new power of discriminating perception but at a risk of losing one's way. Thus in the case of anti-HLA antibodies the monoclonals have tended to specify epitopes which may be common to more than one antigen rather than mimic the polyclonal specificities, but that may be because these are still mouse-made antibodies; and, as is explained here, the age of the more difficult human monoclonals is yet to come.

The applications described concern the antigens of blood cells, immunocytes of all sorts, malignant cells (including a chapter on the magic bullets of toxin-antibody conjugates), cells of the CNS, liver, placenta, virus and virus-induced cell antigens, bacterial and plasmoidal antigens, and a lot more besides. A section on practical aspects of production and purification, and appendices listing nearly 200 antibodies completes a book which is bound to be of immense help to clinical pathologists for some years to come.

HEM KAY

Pathophysiology of Shock, Anoxia, and Ischemia. Ed R Adams Cowley and Benjamin F Trump. (Pp 710; illustrated; $90.00.) Williams & Wilkins. 1982.

This monograph, running to 49 chapters, is subdivided into four sections—basic pathophysiology, shock and related phenomena, injury of the central nervous system, and vascular insufficiency. The book provides a considerable amount of information, and in particular the chapters on aspects of cellular injury and metabolic responses, on alterations in the microcirculation, and on various organs dysfunction in shock provide good reviews of the considerable increase in knowledge of these topics in the past decade. In addition to a sub-section on the current therapy of shock there are also chapters dealing with the treatment of acute renal failure, adult respiratory distress syndrome, head injury, spinal cord injury, and myocardial infarction. It is the attempt to cover such a very large amount of ground within one volume which is the major criticism to be levelled against this volume.

Much that is of general interest is included along with material which is of a highly specialised and sophisticated nature and the consequent risks of producing some superficial and sketchy accounts of certain topics have not been avoided. The monograph will be of considerable interest and value to those immediately involved in the management of intensive therapy units; the general reader will find it a useful book to refer to in the medical library.

RNM MACSWEEN


Despite its falling incidence in many countries gastric cancer continues to have an appalling prognosis. The Japanese experience suggests that detection at an early phase can effect improvement and this report of an International Workshop presents a varied and informative discussion of the diagnostic methods available and of the logistic and philosophical difficulties involved in deciding how and when these methods should be applied. While some pathologists may find the terminology confusing, especially in the absence of high power photomicrographs, the background data provided by dissertations on premalignant lesions and high risk groups should greatly assist those faced with investigating this formidable problem.

FD LEE


In a space of less than 500 pages this book sets out to cover processes subsumed in the term general pathology, and organ and systemic pathology. It is fairly lavishly illustrated with good sized figures, but this of course reduces the amount of letterpress.

I found it a rather frustrating book to read chiefly I believe because of the confines imposed on its author by the twin pressures of book length and the large number of areas of knowledge dealt with.

Professor Golden is clearly a most scholarly pathologist and teacher of great experience but this space limitation (whether self-imposed or not) simply does not allow him to cover many subjects to a sufficient depth for final year medical students in the United Kingdom.

N WOOLF


For anyone with a keen interest in the history of protein analysis in laboratory medicine this book fills a large gap. There is a full index, comprehensive list of references for the areas covered, and many excellent illustrations.

The book fulfils its task in describing the development of selected analytical methods and their applications in medicine. The early achievements and discoveries are better described than the more modern approaches. The original techniques are easy to follow but the more modern developments are dealt with in an comparatively unbalanced manner. It is difficult to write and easy to criticise a book of this type. There are some notable omissions in that there is no mention of gel filtration, ion exchange chromatography, isoelectric focusing, or the affinity methods.
However, this is a fascinating book about a fascinating subject. Sadly it may have limited appeal as many laboratory workers have little interest in the achievements of their predecessors.

PAMELA RICHES


Here we have an admitted re-vamping of a Symposium held in 1979 on the subject of what the Editor terms “apheresis” but is referred to as “cell separation and plasma exchange” on this side of the Atlantic. The book’s origins are betrayed by its format—a selection of essays by several contributors in widely varying style and content. The most useful factors are those concerning the collection and re-infusion of circulating cells such as granulocytes and platelets. Here the information is factual, reasonably up to date, and uncontroversial. This part of the book would serve as a verbose but practical guide for technicians in the blood transfusion service.

The rest of the book purports to be concerned with clinical indications. Here the book is much less satisfactory because what clinicians—and their financial backers—want to know is whether or not these procedures really help patients with various diseases. Unfortunately the book does not take us beyond the earlier, heady days of these techniques and there is no longer any place for a bald list of “clinical applications” of the kind listed on page 253. Again, the chapter on plasma exchange in myasthenia gravis cites only two papers as recent as 1980 and does not attempt to come to terms with the issue of controlled comparative trials. Most clinicians want to know about proven indications for plasma exchange and they will not be helped by this book. I cannot resist closing this account with the remedy given on page 106 for citrate reactions, namely “avoid using excessive citrate in the first place.”

AM DENMAN

Some new titles


Journal of Clinical Apheresis. Vol 1 No 1 1982. A quarterly journal. $70.00 United States; $81.00 Europe, the Middle East, Africa; $78.00 other countries. Alan R Liss Inc.


Corrections

In the paper by Evans and Taylor-Robinson1 in the October issue of 1982, under Material and methods: Antigen preparation, on page 1123, first column, line 7, the sentence should read: “The resulting pellet was resuspended in PBSA and layered on a 20% Urografin (Schering) gradient and centrifuged at 25 000 g for 2 h.”

In the second column on page 1123, the formula for establishing titres should read:

\[
\text{Intercept } Z = 2 + \frac{1}{B} (E - \sqrt{E^2 - 2B(Y^2 - D)})
\]

where 

\[
D = \frac{(S1 + S2 + S3)}{3}
\]

D1 is the denominator of first dilution.

Reference


In the paper by Alfa and Lee1 in the May issue of 1982, under Material and methods: Transport methods tested, on page 556, second column, line 8, the concentration of resazurin should read: 0·22 mg/ml.

Reference


Notices

8th Hormones and Cell Regulation Conference

This conference will be held in Ste-Odile, Nr Strasbourg, France, 26-30 September 1983. For further information, please write to: Dr JE Dumont, IRIBHN, Faculty of Medicine, University of Brussels, Campus C Erasme, 808 route de Lennik, B-1070 Brussels, Belgium.

Research Progress in Dementia

This meeting will be held at Charing Cross Hospital Medical School, University of London, 6-8 July 1983. For further information, please contact: Dr F Clifford Rogers, Department of Neurology, Charing Cross Hospital, Fulham Palace Road, London W6 8RF.

Gastrointestinal Pathology Club

The Gastrointestinal Pathology Club was founded in 1979 to unite persons with an interest in the morphological study of the GI tract and liver, to disseminate and increase knowledge about the pathology of these organs, and to encourage the development of gastrointestinal pathology as a subspecialty. The club currently meets once a year immediately preceding the annual meeting of the International Academy of Pathology (USA-Canadian Division) and presents a scientific program. For further information and an application form, please contact: Dr Gerald Abrams, Secretary-Treasurer, GI Pathology Club, Department of Pathology, University of Michigan Medical Center, 1335 East Catherine Street, Ann Arbor, Michigan 48109; USA.