

obtained with positive samples may be reduced to near reagent blank values in this way and false-negative results obtained. Careful mixing of the contents of the tube by gentle inversion two or three times after the addition of the CPC reagent and again immediately prior to reading the absorbance is essential to obtain consistent results.

This test can be used as the initial discriminatory procedure in the investigation of mucopolysaccharidoses and it is important that other users performing this test are made aware that the "insoluble" CPC—precipitable mucopolysaccharide can redissolve if not handled carefully.

This could also be a source of error in the quantitative hexuronic acid method<sup>1</sup> for estimating mucopolysaccharides, which also has an initial CPC precipitation step.

P LOWDON

Department of Clinical Biochemistry,  
Royal Victoria Infirmary,  
Newcastle upon Tyne.

#### Reference

<sup>1</sup> Pennock CA. A review and selection of simple laboratory methods used for the study of glycosaminoglycan excretion and the diagnosis of the mucopolysaccharidoses. *J Clin Pathol* 1976;**29**:111.

## Book reviews

**The Year Book of Pathology and Clinical Pathology.** 1982. Ed Kenneth M Brinkhous. (Pp 475; illustrated; £34.) Year Book Medical Publishers Inc. 1982.

The Year Books are designed as a compact and efficient means of "keeping up with the literature". Over 250 articles are summarised with the additional comments of the editor putting them into perspective. The aim of the book is admirable and the product is fun to browse through, especially before the final MRC Path examination. Sadly, the price is prohibitive for a readable pocket book with built-in obsolescence. For anyone with an annual book-buying urge, the Recent Advances series gives more lasting value. A dip into the library or departmental copy of this Year Book is, however, both enjoyable and informative and may add a little gloss before that crucial viva.

S KNOWLES

**Principles and Practice of Disinfection, Preservation and Sterilization.** (Pp 653; illustrated; £32.) Blackwell Scientific Publications. 1982.

The editors are to be congratulated on the production of a book which is broad in concept, successful in execution, and brings together expertise from many areas.

In Part I "Disinfection" there are two excellent chapters on the use of disinfectants and antiseptics in hospitals in addition to a great deal of other useful information. Attention is paid to the principles involved so that the rational development of good practice is possible. The second part "Preservation" contains sections on the use of preservatives in food and in pharmaceuticals. However, for many of us heat sterilisation is still of paramount importance. It would have been useful if this topic could have been considered in more detail and particularly if more of the outstanding problems that are proving difficult today could have been covered. Nevertheless, a great deal of valuable information is included on a variety of sterilising procedures.

There is evidence throughout of an effective editorial policy and the bibliography is extensive and useful.

E MARY COOKE

**Laboratory Investigation of Rubella.** Public Health Laboratory Service Monograph Series No. 16. Ed JR Pattison. (Pp 81; illustrated; paperback £4.) HMSO. 1982.

This long monograph is a clearly presented account of the current laboratory techniques for the diagnosis and screening of rubella.

Following a brief historical introduction chapters are devoted to the methods of rubella virus isolation; detection of IgG by haemagglutination inhibition, radial haemolysis, complement fixation, immunofluorescence, RIA and ELISA; detection of IgM and appendices containing recipes for various reagents and media.

The principles and recommended procedures for each test are described in detail sufficient to form the basis of laboratory method sheets. There are also valuable discussions on the clinical significance of each test and some guidelines for their reporting.

This monograph is thoroughly recommended for all clinical microbiology laboratories whether already providing a diagnostic service or only contemplating routine rubella screening.

DV SEAL

## Some new titles

**Host Factors in Human Carcinogenesis.** IARC Scientific Publications no 39. (Pp 581; illustrated; Sw fr 100.) World Health Organisation. 1982.

## Corrections

In the paper by Jeffrey *et al*<sup>1</sup> in the January 1983 issue, on page 56, first column, lines 23–26, there is a typographical error. This was due to a machine error on the main typesetter. The sentence should read: "Most authors agree that metastases are very uncommon in patients with primary melanomas less than 0.76 mm, provided that tumours showing extensive areas of regression are excluded."

#### Reference

<sup>1</sup>Jeffrey I, Royston P, Sowter C, *et al*. Prognostic value of tumour thickness in cutaneous malignant melanoma. *J Clin Pathol* 1983;**36**:51–6.

In the paper by Mehtar and Afshar<sup>1</sup> in the January 1983 issue, on page 97, Table 1, *H aphrophilus* should read *H paraphrophilus*.

#### Reference

<sup>1</sup>Mehtar S, Afshar SA. Biotyping of Haemophilus using API 10S—an epidemiological tool? *J Clin Pathol* 1983;**36**:96–9.

## Notice

**Symposia in Basic Science in Gastroenterology**

The Fifth Symposium in this series entitled "Gastrointestinal secretion—mechanisms and disorders" organised by the Royal Postgraduate Medical School (RPMS) in collaboration with the Medical Department of Glaxo Group Research, will be held at the RPMS, London on 19 April 1983. The organisers are JM Polak, RB Bloom, NA Wright, AG Butler.

Subjects include:

Pharmacology of acid secretion  
Alkaline and mucous secretion  
Secretion of the alimentary tract  
Bile secretion  
Mechanisms of pancreatic secretion  
Diseases of the pancreas  
Ion transport and small intestinal secretion  
Small intestinal secretion in disease

Invited speakers include:

JH Baron (UK) M Case (UK)  
A Garner (UK) EP di Magno (US)  
MJ Berridge (UK) LA Turnberg (UK)  
JL Boyer (US) VS Chadwick (UK)

The cost including lunch, tea and coffee will be £10. For information, please write to: Dr AG Butler, Glaxo Group Research Ltd, Ware, Herts, SG12 0DJ.