ques without immunocytochemistry; there are no photomicrographs and no index. *Lipid Histochemistry* includes a useful scheme for the identification of tissue lipids 32 technical methods, illustrations, references, and index.

In this golden age of immunohistology Introduction to Immunocytochemistry is strongly recommended. The basic facts about antibodies, the essential technical requirements and the theoretical bases of immunofluorescent and immunoenzyme methods are set out with very clear explanatory diagrams. The advantages and disadvantages, together with the nonspecific types of antibody binding and the necessary controls, are well described. The applications of immunocytochemistry for histopathological problems are only briefly considered and pathologists must continue to evolve their own operational policies. Everyone who spends an hour reading the text of this handbook before passing it on to the laboratory will not only be better informed and more able to interpret the results of these techniques, but may find that valuable time and expensive laboratory reagents can be saved.

RAB DRURY

Clinics in Obstetrics and Gynaecology. Vol 11, no. 1. Gynaecological Pathology: Advances, Perspectives and Problems. Guest ed H Fox. (Pp 293; £12·50.) WB Saunders. 1984.

The April issue of Clinics in Obstetrics and Gynaecology is devoted entirely to gynaecological pathology. Professor Fox divides the subject matter into Advances, for example in immunocytochemistry and morphometry; Perspectives or critical review articles on current topics such as vulval dystrophies, papillomavirus infection and dysfunctional uterine bleeding; and Problems which still await solutions.

In the last category the chapter on microinvasive carcinoma includes several contentious remarks about the measurement of these tumours and makes very interesting reading. Many of the chapters provide information on prognostic features and treatment of gynaecological conditions which would be helpful in constructing a histological report.

The result is a book similar to the excellent Recent Advances in Histopathology series but with the advantage of being confined to one important aspect of pathology. It should be of use to general as well as gynaecological histopathologists.

D LOW

Bone Marrow Biopsies Updated. New Prospects for Clinical Diagnostics. Bibliotheca Haematologica No 50. Vol eds B Frisch and R Bartl. (Pp 132; 48 figs & 48 tabs; DM117; US\$58.75.) S Karger. 1984.

This volume is based on papers presented at a satellite symposium devoted to bone marrow biopsies held during 1983 at the 7th Congress of the International Society of Haematology, European and African Division. The standard of presentation, including photomicrographs and diagrams, is excellent.

The introductory chapter outlines the techniques that can be applied to studying the routine bone marrow trephine biopsy. The subsequent chapters are divided into two sections, one dealing with bone marrow biopsies in myeloproliferative disorders and the other with lymphoproliferative disorders. The main emphasis is concentrated on the classification and prognosis of these diseases.

This short volume does not represent a comprehensive text. However, it brings together the ideas and results of the European workers interested in the bone marrow histology of haematological malignancies. This is a useful addition, for both haematologists and histopathologists, to the standard books on this subject.

J AMESS

Aids. A Basic Guide for Clinicians. Ed P Ebbesen, RJ Biggar and M Melbye. (Pp 313; £29.) Munksgaard. 1984.

This is an up to date multiauthor account of AIDS with a bibliography extending to 1984. It gives a good description of the epidemiology, risk factors, clinical and laboratory features, and pathology, although there is some reduplication. The role of human T cell leukaemia virus (HTLV) III is more firmly established than the cautious account here might suggest. The disease is less readily transmitted than serum hepatitis, and the high risk factors include multiple homosexual partners and receptive anal intercourse. The transmission through blood transfusion and factor VIII preparations makes it important that

blood from persons at risk should not be used. This requires some thought when blood is collected in factories where there is considerable pressure to donate. The diagnosis of frank AIDS with opportunistic infections and of the syndromes (which are occasionally prodromal) of lymphadenopathy and pyrexia of unknown origin is mainly clinical. The absolute lymphochyte and/or polymorph count is usu-2 ally depressed. The T helper T suppressor ratio is usually inverted but its value is. limited as this alteration occurs in 30% of US homosexuals and haemophiliacs, and^ω the ratio is not helpful in the managment of the worried healthy individual. The question whether mild immunodeficiency is ancountries ancountries. important predisposing factor in clinically w important HTLV III infection is still open. Overall this book is a good guide to the practising clinician and to the research worker.

GL ASHERSON -

The Direct Detection of Microorganisms in Clinical Samples. Ed JD Coonrod, LJ Kunz, and MJ Ferraro. (Pp 374; \$53.00.)

Academic Press, 1983.

Academic Press. 1983. first deals with direct visualisation of mic-2 ro-organisms; the second with the application of immunological techniques for the detection of soluble antigens; and the third with non-immunological methods for the3 detection of constituents and metabolites of bacteria. In Part I light microscopy of stained bacteria and fungi is described and also immunofluorescence of bacteria and For those unfamiliar with immunofluorescence this section provides a useful list of references. Part II is the backbone of the book and covers nearly 2003 pages. Several authors deal with coun-o terimmunoelectrophoresis and others with latex agglutination and coagglutination for the detection of soluble antigens in CSF, blood and other body fluids. There is little that is new in this field but the contribu-0 tions provide an adequate summary of the techniques. There is a certain amount of repetition and although very little attempto is made to evaluate the clinical usefulness of the techniques, there are discussions onsensitivity and specificity. The sections dealing with **ELISA** and radio-© immunoassay for the detection of microbial antigens are rather more informative. The chapter on the diagnosis of Legionellainfection is comprehensive and, after deal-o

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ing with conventional methods, gives an excellent account of the application of solid phase radioimmunoassay and ELISA for the detection of Legionella antigens. The techniques for the detection of Candida and Aspergillus antigens in clinical material are well reviewed. The book also includes an adequate review of the well worn methods available for the diagnosis of hepatitis B infection together with a short and not always accurate section on the diagnosis of non-A and non-B hepatitis. Viruses associated with gastro-enteritis are allowed a brief account of ELISA and radioimmunoassay techniques but nowhere in this book does the electron microscope get a mention, either under this heading or in the chapter on microscopy. The last part of the book has short discussions of the applications and short comings of the Limulus lysate assay and the use of the gas liquid chromatograph; it also includes mention of automated methods for routine urine examination.

This book suffers from multiple authors combined with a lack of overall editing. It will provide a useful introduction and source of references for those entirely unfamiliar with the techniques described, but the established laboratory worker is unlikely to find it particularly rewarding. Although it is claimed in the preface that the book is a critical review, that particular element seems largely to be absent.

DM JONES

Medical Laboratory Haematology. R Hall and RG Malia. (Pp 669; £37.50.) Butterworths. 1984.

Medical Laboratory Haematology, as the title implies, is intended for laboratory workers and not for clinicians. The emphasis is therefore on the physiology and pathophysiology of blood disorders rather than on the clinical and therapeutic aspects. Practical details are also given of the commonest investigations.

Somewhat surprisingly blood group serology is excluded but this may reflect the separation of transfusion in the special examinations of the IMLS. I imagine that the book is primarily intended for candidates of the Haematology Special Examination but there is still much that will be of use to medical staff in training. Each chapter is well referenced though there must have been some delay in publication since the articles cited seem to stop fairly abruptly in 1981 with only a handful from 1982.

It is a significant achievement for two authors to have produced such a large and detailed treatise and there can be no doubt that it will be widely used.

JM ENGLAND

Viral Heart Disease. Ed H-D Bolte. (Pp 248; DM 78; US \$29·10.) Springer. 1984.

This well produced book is the report of a workshop held in January 1983 at Munich. The 26 papers are grouped into 3 "chapters" entitled histopathology and virology, clinical virology and cellular immunology, and haemodynamics and therapeutic aspects. This grouping is, however, very arbitrary with, for example, papers on diagnostic histopathology appearing in the first and last chapters.

The book has two main themes, acute viral myocarditis and dilated cardiomyopathy. The relationship between these two is explored and the studies presented point to a possible progression from viral myocarditis to dilated cardiomyopathy. This is not thought to be a direct result of viral damage to myocytes but is associated with a depression of suppressor T cell function. The suggestion is made in one paper that this altered T cell activity may be related to certain HLA types. In this latter paper as in most of the others the number of cases studied is small so that the conclusions have to be tentative.

This book is to be recommended for those who are interested in the problems of biopsy diagnosis of myocarditis, in the serological investigation of myocarditic and congestive myopathic patients, and in the clinical distinction between these two conditions.

PGI STOVIN

Practical Haematology. 6th ed. Sir John V Dacie and SM Lewis. (Pp 453; £15.) Churchill Livingstone. 1984.

As in previous editions, the authors describe the laboratory procedures in haematology, currently used and taught at Hammersmith Hospital and the Royal Postgraduate Medical School in London. While the structure of the book has remained essentially the same as in the 5th edition, the text has been thoroughly revised and brought up to date. In particular, sections have been expanded on quality

assurance and standardisation, the application of cytochemistry to the differential diagnosis of leukaemias, and the investigation of haemostatic failure.

Although I would personally like to see some section of the book presented in greater depth, for example that on the preparation of blood components in a hospital blood bank, I must admit that the authors and their collaborators carefully selected for presentation in detail all the methods generally used. The methods of interest to a minority of laboratory haematologists are outlined in principle only.

The new edition of Practical Haematology is printed as a paperback, with two columns of text on a page. Bold headings, as well as an extensive index, help the reader to find easily the required information. The mew edition, increased in size and with improved appearance, is an invaluable of the property of the property haematologist.

B BROZOVIĆ

Antinuclear Antibodies. Contemporary Techniques and Clinical Application to Connective Tissue Diseases. Gale AMCCarty, Donald W Valencia, and Marville J Fritzler. (Pp 95; £25.) Oxford University Press. 1984.

This is a short monograph on anti-nuclear 3 antibodies. There have been many recent 3 advances in the study of nuclear antigens and auto-antibodies which react with them in connective tissue diseases, and clinicians and laboratory workers will need to be kept up to date on progress. The text covers the main areas of work in this field. This includes the types of antibodies which are currently recognised and the methods of \exists their detection. It gives details on both o indirect immunofluorescence and counter immunoelectrophoresis. In addition to the methodological aspects the book provides a brief clinical resumé of the conditions which give rise to anti-nuclear antibodies. I found this an easily readable book and the found this an extended there was lucid. Unfortunately there was lucid. Unfortunately there was areas where too much irrelevant technical Northern given; for example, detailed Northern microdescriptions of how fluorescent microscopes should be set up, or a list of the 9 diagnostic criteria for rheumatoid arthritis. It also misses out on a completely balanced approach. It did not describe all the of methods which can be used to detect these antibodies, neither does it allude to the dif-