Therapeutic Strategies in Primary and Metastatic Liver Cancer. Recent Results in Cancer Research. Vol 100. Eds Ch Herfarth, P Schlag, P Hohenberger. (Pp 327; DM 178.) Springer. 1986. ISBN 3-540-16011-6.

This volume is the hundredth in the series *Recent Results in Cancer Research* which was initiated by the Swiss Cancer League in 1965. Successive publications have highlighted a large variety of topics in clinical oncology and the basic sciences relevant to it. This book is concerned with the treatment of primary and metastatic liver cancer which had long been regarded as beyond hope of cure. The major headings are tumour biology, diagnosis and staging, systemic and regional chemotherapy, surgical aspects, and radiotherapy. It is difficult to single out any particular contribution for special praise but the modern view of surgical live anatomy is particularly well described and serves as just one example of how much has changed even in our traditional concepts of gross morphology. This volume offers a comprehensive summary of advances made in this difficult field and it indicates likely avenues to follow. It is recommended to all who are interested in cancer and the liver whether they be surgeons, oncologists, or pathologists. The editors of the series must also be congratulated for their achievements over the past two decades.

PP ANTHONY

Automated Blood Counts and Differentials. A Practical Guide. JD Bessman. (Pp 150; hardcover £27.50; paperback £13.75.) The John Hopkins University Press. 1986. ISBN 0-8018-3171-7 (hardback); 0-8018-3173-3 (paperback).

This slim book brings together information previously available in journals and training manuals for the instruments concerned with automated haematology. The principles of operation of these machines are described briefly followed by detailed descriptions of the normal and common abnormalities of red cells, platelets, and white cells. These are well illustrated in black and white, microphotographs, and by line drawings of histograms. Most illustrations were obtained from a Coulter Counter S-Plus IV which make up the bulk of the text. There are several tables, but the one on morphophysiological classification of red cell disorders is too simplistic and relies on the

RDW, a parameter whose reliability varies from one instrument to another. At the end of the book there are appendices of self test cases, brief descriptions of six current instruments, a useful glossary of terms, and around two hundred references. For those who are unfamiliar with the new parameters and histograms, and especially users of Coulter Counter S-Plus IV this is an essential bench book.

NK SHINTON

Monoclonal Antibodies in Haematopathology. Sero Symposia Publication from Raven Press. Vol 26. Ed F Grignani. (Pp 320; \$61.50.) Raven Press. 1986. ISBN 0-88167-095-2.

This is a collection of short papers presented in a meeting two years ago. It contains interesting material on the application of monoclonal antibodies to the study of normal and malignant haemopoietic cells. Advances are fast in this field but most of the reports are still relevant today.

There are three main parts in this volume. The first part deals with monoclonal antibodies against myeloid antigens and their application to the diagnosis of acute leukaemias (ALL and AML) and of a number of haemopoietic cell lines (perhaps too many of these). It also includes elegant ultrastructural immuno-cytochemical studies by Breton-Gorius and her group on early megakaryocytic precursors. The section of B cell malignancies is well updated by an overview by Anderson *et al*. The second part has the initial series of papers on T cell depletion of bone marrow for transplantation and prevention of graft versus host disease. Such studies have advanced very rapidly in the past two years. The last part covers a number of reports on monoclonal antibodies used to characterise normal and pathological lymphoid cells in suspensions and in tissue sections. One report by Velardi and Grossi attracted my attention. These authors described a normal CD4(T4) positive lymphocyte subset which expresses NK markers (Leu7 or OKM1) and has morphology of large granular lymphocytes. Of interest is that rare lymphoid leukaemias with the same morphology and phenotype as those rare normal subsets have now been found. Several papers on the immunohistology of B and T cell lymphomas and leukaemias are probably the best value of this book.

A comprehensive subject index and a list of monoclonal antibodies referred to in the

text, with indication of their source, complete a good compact volume which may still have useful value for practising haematopathologists for a few more years.

D CATOVSKY

Pathology for the Primary FRCS. D Gardner, DEF Tweedle. (Pp 216; soft cover £11.95.) Edward Arnold. 1986. ISBN 0-7131-4497-1.

Any new textbook of pathology for surgeons studying for the Primary FRCS examination has to compete with the excellent standard works in current use. This paperback is a winner because it complements them. It has a clear and attractive style, and is laid out alphabetically as a glossary of terms and diseases; the inevitable separation of related conditions is cope with by cross referencing. Some of the entries are briefer than a pathologist might like, but this is nit picking.

Candidates for the primary examination should buy this book. I am sure that some of their examiners will.

D LOWE

Kidney Transplant Rejection. Diagnosis and Treatment. Eds G Melville Williams, J Burdick, K Solez. (Pp 536; \$95.50.) Marcel Dekker Inc. 1986. ISBN 0-8247-7496-5.

Cyclosporin nephrotoxicity or rejection. This question is a constant problem in the clinical management of renal transplant recipients. Help can undoubtedly be obtained from renal core biopsy, although the interpretation of changes purported to be due to the effects of toxicity has been controversial. A new volume devoted to renal transplant rejection is therefore timely. The editors have included a useful initial section on the "biology of the allograft response". The three chapters on "interleukins", "enhancement", and "the anti-idiotypic response" are particularly valuable in providing an update on effector mechanisms, cell cell interactions and the complex processes involved in activation and down regulation of the immune system.

Monoclonal antibodies have added a new dimension to the interpretation of biopsy

Book reviews

material. It is now possible to study the different populations of infiltrating cells using techniques such as fine needle aspiration biopsy. The contribution of monitoring with monoclonal antibodies is discussed in detail with colour plates illustrating histological and cytological appearances.

Finally the editors step beyond the confines indicated by their title with four chapters devoted to various aspects of cyclosporin immunosuppression. It is clear that the book has had a relatively brief gestation period and the editors have made strenuous efforts to include all the latest references by producing a "stop press" concluding chapter. *Kidney Transplant Rejection* can be strongly recommended to transplant specialists and anyone involved in the monitoring or diagnosis of rejection in patients receiving cyclosporin.

RFM WOOD

Immunodiagnosis of Parasitic Diseases. Vol 1. Helminthic Diseases. Eds KW Walls, PM Schantz. (Pp 301; \$49.000.) ISBN 0-12-733301-1.

This small but detailed book compresses a large amount of information about the diagnosis of important helminthic infections into the minimum space. As such it is a book to refer to rather than to read for pleasure. At times the text is so studded with references as to make the reading difficult. For research workers in the field of immunodiagnosis of helminthic infections I believe it will be a valuable source of information. For others, whether clinicians or laboratory diagnosticians, it is unlikely to be of much value.

The authors in their preface indicate that the expert contributors have produced recommendations for the selection and interpretation of immunodiagnostic methods and a critical review of published literature. The review of the literature is certainly extensive, but hardly critical, and the recommendations of each contributor, although informative, are brief and could usefully have been expanded to provide more help for the clinician. A further criticism is that the recommendations are often rather vague. This is always a problem when a book attempts to review all available methods, but good editing can usually produce a useful piece of clinical advice even if absolute scientific accuracy is lost. This book

could, I think, benefit from more severe editing. As it stands it is a useful collection of data to be held in libraries for the use of research workers in the relevant areas.

D PARRATT

Color Atlas of Clinical Hematology. BH Hyun, GL Gulati, JK Ashton. (Pp 272; £81.75.) Williams & Wilkins. 1986. ISBN 0-89640-110-3.

The first half of this book is not an atlas at all. It is a textbook of basic haematological methods together with short sections on normal haematopoiesis and the morphological abnormalities seen in various blood disorders. The second half has the pictures. It is difficult to see the point of the first section because by the time he consults an atlas the tyro haematologist is usually already sweating over a microscope and does not need a book to tell him how to get that far. Details of how to collect blood, how to make slides, how to stain them, and what sort of microscope to use are probably unnecessary. Nonetheless, there is a useful chapter on special staining which includes source references on techniques.

The photographs, when you get to them, are very good. There is a commendable amount of histology which many haematologists will find helpful. The authors have generally been successful in avoiding the two chief pitfalls of atlases; outdated or idiosyncratic terminology and atypical abnormal morphology which creeps in because of its fascination value. In other words the pictures are of what one might expect to see, and the cells and diseases are called what most people would currently call them.

Every haematology department needs such a book. For that reason most will already have one, and whether this example offers anything compellingly new or special is doubtful. On the other hand, for anyone looking for an atlas it can be recommended. It is at least equal to its rivals and has the advantages of fresh colours and up to date classification conventions.

JS LILLEYMAN

Notices

University of Manchester
Third bone, joint and connective tissue
pathology workshop
September 16-18 1987
at The University Hospital of
South Manchester, Withington

The Course is intended to provide a contemporary review of diagnostic techniques and problems, and a theoretical and practical review of the field of osteo-articular and connective tissue pathology. Morning sessions will comprise review lectures. Afternoons will be devoted to discussions of cases and techniques, based on precirculated slides.

A maximum of 40 participants can be accepted.

There will be a registration fee of £95.00. Accommodation, at additional cost will be available in a University Hall of Residence.

Enquiries should be addressed to: Professor DL Gardner, Department of Histopathology, University Hospital of South Manchester, Withington, Manchester M20 8LR.

Royal Postgraduate Medical School
(Hammersmith Hospital)

June 9-16 1987

Professor RE Scully MD, Professor of Pathology, Massachusetts General Hospital, Boston (Harvard Medical School), will be visiting professor to the histopathology department.

He will give a series of lectures and a slide seminar on gynaecology and testicular pathology.

Further details obtainable from: Dr Meg Lott, Histopathology Department, Hammersmith Hospital. Tel: 01-743 2030 ext. 2443.

ACP Locum Bureau

The Association of Clinical Pathologists runs a locum bureau for consultant pathologists.

Applicants with the MRC Path who would like to do locums and anyone requiring a locum should contact Dr David Melcher, Histopathology Department, Sussex County Hospital, Eastern Road, Brighton BN2 5BE.