**Book reviews**

Dacie's fluid for red cell counting is not 32% sodium tricitrate and the normal values for the differential count in children are not given in absolute numbers but as percentages. The final chapter deals with automatic cell counters which, as stated in the preface, is limited to the advantages and disadvantages of the equipment available.

A useful book which is worth reading by all haematologists and MLSO's.

JW STEWART


These proceedings include the text of the John Henry Wilkinson Award Lecture ("Principles of Enzyme-Targeted Chemotherapy in Human Leukaemia" by George Weber), together with 28 short papers—all except three by European authors—arranged in five sections:

(i) evolution molecular biology and genetics;
(ii) enzyme release, distribution, and elimination;
(iii) enzymology of infection and inflammation;
(iv) limited proteolysis as a regulatory principle;
(v) diagnostic enzymology in man and animals.

There is little discussion of conventional clinical enzymology, but this is quite appropriate for an "advances" volume. Most of the essays are interesting and they offer a useful perspective of the wide ramifications of modern enzyme biochemistry. The volume is well presented, with clear text, good figures, selected references, and a subject index—but the cost is quite high. This reviewer would have preferred the material to be presented in fewer pages, with narrower margins, at a lower cost. It deserves to be read widely by medical pathologists and others with a nodding acquaintance with enzymology.

SS BROWN


Infection of a wide variety of medical devices is now well recognised and various types of cerebrospinal fluid shunt are no exception. Between three and 27 per cent become infected in the perioperative period, rates varying in different hospitals and among surgeons within hospitals. While some infections present within the first few months, many present late, particularly in the case of ventriculo-atrial shunts, where immune complex glomerulonephritis and arthritis may be the first manifestations. Lack of symptoms in early cases of infection and rejection of blood culture isolates by laboratory workers as "contaminants" contribute to late diagnosis.

Dr Bayston, an expert in the field, has succeeded in producing an inexpensive book which will prove invaluable to clinicians and microbiologist alike. He produces a state of the art account based on his own experiences and those from other publications, and illustrates some of the points he makes with succinct case histories. The aetiology of shunt colonisation and the diagnosis of infection, both clinical and within the laboratory, of ventriculo-peritoneal and ventriculo-atrial shunts are reviewed. There is also a chapter on the treatment of shunt infections which gives clearcut advice on their management. There is an excellent chapter which covers surveillance programmes and their contribution to early detection of infection, and the final chapter covers preventive aspects. Each chapter has a short summary, which acts as a useful aid-memoir to the overworked doctor, and the book has an extensive list of references.

This is a remarkable little book which no library should be without and which I recommend to every clinician and his or her laboratory colleagues involved in the management of patients with cerebrospinal fluid shunts.

RH GEORGE


Textbooks are usually targeted at a certain readership which allows the reviewer to place his or her views in context. Several recent texts on immunocytochemistry and diagnosis have been published in which this is difficult to do. I have had some of these on my shelf over the past year or so. They are rarely consulted by anyone (in contrast to certain well known histopathology texts which will within weeks of purchase from use). Once consulted they rarely provide assistance. The text by Colvin et al under review here is as good as if not better than many of its rivals. But who or what are they aimed at? There is insufficient detail for a laboratory manual or diagnostic guide. Pathologists in training and approaching examination don't seem to want to use them, preferring to consult journals.

The present book by Colvin et al is multiauthored with sections on basic mechanisms, analysis of tissues and diseases, and techniques. Particularly well done in my view are the chapters on immune deficiency, cytoskeletal proteins, and haematopathology. I enjoyed the chapter on tumour stroma principally because I was unaware of the thesis that 'tumours are wounds which don't heal' but I am not sure of its relevance in a book on diagnostic immunopathology.

So here is a book with masses of information and loads of references (as recent as 1988 in many chapters). Much work and arm twisting goes into these enterprises so I hope it is successful. I still wonder, though, who will actually buy it.

KC GATTER


For some strange reason livers seem to get more difficult to report with each year that passes and pathologists need all the help they can get to issue reports that are clinically helpful. The first edition of this text proved a useful addition to the bench books available, containing much useful advice and many important items of information not easily available elsewhere. The second edition has been expanded in some areas, trimmed in others, and has been refined in detail, new subject material being added. The black and white histological illustrations are generally helpful but occasional pictures look as if autolysed that they must come from necropsy rather than biopsy material. The text is orientated towards problem solving in the context of biopsies: only sometimes does it occupy space without clarifying a problem. It is a useful book and this edition is a significant improvement on the first, justifying the purchasing for the reporting room of any histopathology laboratory.

DR DAVIES