Metastatic lobular carcinoma

Rubin and Tate report a case of metastatic lobular carcinoma diagnosed on a routine cholecystectomy specimen.¹ The low numbers of reported cases (this being the third) does not, however, reflect the real incidence of this condition as seen by pathologists who may view it as an interesting phenomenon, but no more. I can recount a case of lobular carcinoma metastatic to the gall bladder which exhibited patchy serosal disease, and partial replacement of the cystic node. This type of pathology, unlike that of the mucosa/muscularis, can easily be dismissed at low power microscopy as being only inflammatory cells, a catch that can work two ways.² In this case the cytology, Indian filing pattern, intracytoplasmic lumina, and "bull's eye" type mucin positivity with a combined alcian blue/periodic acid Schiff stain all strongly suggested lobular carcinoma. This was confirmed in a mastectomy specimen, which had unaffected axillary lymph nodes. Without the gall bladder metastases the tumour would have been thought to be confined to the breast. This raises the intriguing possibility that an abdominal biopsy specimen (staging laparotomy) should be performed, particularly if only local treatment to the breast is considered.

Surely the low reported necropsy incidence of malignant gall bladder disease by metastatic lobular carcinoma, particularly in the retrospective studies,³ reflects the infrequency with which this organ is taken for histological examination. I am sure that if we look harder we will find much more evidence for this type of spread.

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1 Rubin A, Tate JJ. Breast carcinoma metastatic to the gall bladder. *J Clin Pathol* 1989;42: 1223-4.

2 Underwood JCE, Parsons MA, Harris SC, Dundas SAC. Frozen section appearances simulating invasive lobular carcinoma in breast tissue adjacent to inflammatory lesions and biopsy sites. *Histopathology* 1988;13: 232-4.

3 Harris M, Howell A, Chrissohou M, Swindell RIC, Hudson M, Sellwood RA. A comparison of the metastatic pattern of infiltrating lobular carcinoma and infiltrating duct carcinoma of the breast. *Br J Cancer* 1984;50:23-30.

uveitis. There follows an account of the pathology of ocular structures, incorporating new chapters on the lens, retina, and optic nerve. There are also separate sections for the phakomatoses, lymphoid lesions, and congenital anomalies. Four appendices have been added, including a scheme for the examination of eye sections.

The passages which overlap with more general aspects of histopathology—for example, lymphoma pathology—are necessarily restricted. The chapters on intraocular pathology, however, which contain subsections on normal structure as well as extensive bibliographies, should prove useful to the pathologist and introduce some of the newer concepts in such progressive areas as retinal pathology and the glaucomas.

P HISCOTT

Diseases of the Arterial Wall. Ed J-P Camilleri, CL Berry, J-N₁ Fiessinger, J Bariety. (Pp 693; 333 Figs.; £216.50.) Springer. 1989. ISBN 3-540-17492-3.

Few topics are of such crucial importance in terms of human morbidity and mortality than disorders of the arterial system and in particular those affecting its luminal interface. The intense research activity generated by these disorders is reflected in this remarkably comprehensive book which incorporates a vast wealth of information, relating not only to clinical and pathological aspects of arterial disease, but also to the biology of the arterial system. Despite the intense concentration of data the text is generally lucid and translation does not appear to have produced any serious idiomatic problems. There are also many useful diagrams, tables, and illustrations. For pathologists the sections devoted to atherosclerosis, aneurysm formation, diabetes mellitus, and the vasculitic syndromes (especially those affecting the lung) are of particular interest. Even so, one suspects that this book will become required reading for anyone contemplating research into arterial diseases, and will also be invaluable for both clinicians and pathologists who have to deal with the formidable challenge which these conditions represent.

FD LEE

used in bladder pathology including immunohistochemistry and flow cytometry which I found useful in understanding some of the more obscure aspects of this organ.

I had the opportunity to show the book to my clinical colleagues with special interest in urology and they found it very useful and easy to understand.

This is an excellent well illustrated book and is strongly recommended for the general histopathologist.

SI BAITHUN

TNM Atlas. Illustrated Guide to the TNM/pTNM-Classification of Malignant Tumours. 3rd ed. (Pp 343; soft cover DM 35.) UICC. Springer Verlag. 1989. ISBN 3-540-17721-3.

Based on the fourth edition of the International Union of Cancer (UICC) TNM classification of malignant tumours, published in 1987, this paperback (but, like similar volumes from this publisher, durably bound) is the third edition of the illustrated guide. Some 450 line drawings and anatomical schemata clarify staging of primary tumours, their spread through walls of viscera, and lymph node groups. All organ systems are included, with a separate section on paediatric tumours (equivalent to SIOP), and for gynaecological tumours the equivalent FIGO staging is tabulated. Definitions are also given for the relevant pT (pathological) staging, but the stage groupings provided in the original classification are not included. The book serves as an almost pocket sized and inexpensive reference to TNM staging, particularly for histopathologists who work with radiotherapists and medical oncologists, and for clinicians in those and related specialties whose perception of information is facilitated by graphic as well as verbal presentation.

C FISHER

Campylobacter pylori and Gastro-duodenal Disease. Ed BJ Rathbone, RV Heatley. (Pp 290; £45.) Blackwells. 1989. ISBN 0-632-01778-3.

The authors and editors are to be commended for their speed in producing this important and attractive book. It covers *C pylori* and gastro-duodenal disease up to the end of 1988, virtually comprehensively, with good layout, editing, and electronmicrographs. There are chapters on a wide range of topics opened up by the discovery of this fascinating organism: bacteriology, pathogenesis and epidemiology, diagnostic techniques, histopathology, associations with various clinical syndromes, and treatment. The organism is set in context with chapters on normal flora and other "spiral" organisms found in human and animal stomachs.

There are no facile assumptions about the relation of the organism to gastro-duodenal disease but definitions in chapter 19 could helpfully be given earlier.

This book will provide a compendium of reviews and references for those already experienced in the field. General readers, both clinicians and pathologists, who wish to keep up to date will find it readable and interesting.

BOOK REVIEWS

Greer's Ocular Pathology. 4th ed. David R Lucas. (Pp 339; £67.50.) Blackwells. 1989. ISBN 0-632-01513-6.

This edition of *Greer's Ocular Pathology* is a major revision and expansion of a work chiefly intended for, and extensively used by, trainee ophthalmologists. Readers will appreciate the many additional illustrations, clearer headings, and updated text.

The first four chapters concern inflammatory and immunological responses as they pertain to the eye, including a section on

Pathology of the Urinary Bladder. Ed Robert H Young. Contemporary Issues in Surgical Pathology. Vol 13. (Pp 413; 311 illustrations; £60.) Churchill Livingstone. 1989. ISBN 0-443-08603-6.

This book, part of the series of "Contemporary Issues in Surgical Pathology", gives the pathologist a comprehensive overview of the full range of aspects of urinary bladder pathology. In the first chapter non-neoplastic lesions are reviewed, followed by three chapters on premalignant and malignant tumours. In separate chapters rare primary and secondary epithelial and mesenchymal tumours are discussed.

I enjoyed the chapter on cytology of the urinary bladder, particularly the correlation with histopathology. Furthermore, chapter 8 deals comprehensively with new techniques

In an essentially interdisciplinary field the cost of this desirable book could be shared between endoscopists and pathologists.

ANNE C MADDOCKS

A Colour Atlas of Forensic Dentistry. DK Whittaker, DG McDonald. (Pp 134; £35.) Wolfe Medical Publications Ltd. ISBN 0 7234 0961 7.

This is one in the series of the Wolfe Medical Atlases covering in particular the highly specialised field of forensic dentistry written by two of the leading proponents in this area.

The general style is similar to others in the series, with colour photographs accompanied by a short text. The photographs are of exceptionally high quality but sometimes add little if anything to the text.

This book suffers from two main drawbacks: the first is the absence of a bibliography; the second is that it alternates from being highly technical to appearing to have been written for the layman.

Notwithstanding this and other minor criticisms (such as including lip prints, the relevance of which has never been shown useful in open court), it does fulfil the role in being an introduction to forensic dentistry. Serious students in this field should, however, look elsewhere.

DA ROUSE

Prostate Biopsy Interpretation. Biopsy Interpretation Series. Jonathan I Epstein. (Pp 270; \$86.50.) Raven Press. 1989. ISBN 0-88167-548-2

This volume in the biopsy series comprises 277 black and white illustrations and approximately 80 pages of text devoted to the interpretation of surgical prostatic pathology. Subjects covered include the normal and hyperplastic gland, inflammatory conditions, adenocarcinoma, atypical hyperplasia, and the non-acinar neoplasms.

The illustration and description of the various causes of granulomata are useful. In the chapters on adenocarcinoma the differential diagnostic problems posed by transurethral and biopsy specimens, grading, staging, and changes induced by treatment are excellent. Illustrations and relevant text are closely correlated and good use is made of low and high power photomicrographs, especially in the diagnosis of carcinoma—stimulating the diagnostic approach. Each chapter has an impressive up to date list of references but the older classics are not forgotten.

The author has a characteristic which I have rarely encountered. His book is intensely practical; one has the lasting feeling of being taught over a double headed microscope, a quality achieved while retaining a precise text in which every discussion point is evaluated in terms of numerical fact, and a conclusion reached. Finally, he clearly places pathology in a clinical setting. As Dr Epstein states, his interest in genitourinary pathology is partly the result of his work with the late Dr Joseph Eggleston and his close liaison with the Urological Department at Johns Hopkins where some 200 radical prostatectomies are

performed each year, but his will and ability to share his knowledge are surely his own.

Only minor changes or additions can be suggested. For those of us who use the TNM method of staging, a short paragraph on the American system understandably applied throughout this text would have been useful. In the photomicrographs, when illustrating low and high powers of the same field, occasionally the orientation has been transposed.

The publication of this book is opportune. Carcinoma of the prostate is the third leading cause of male cancer deaths and yet as urologists are well aware current treatment has little effect on mortality. Therefore, emphasis is being placed on early diagnosis by a combination of rectal ultrasound and biopsy and an increased awareness of small foci of adenocarcinoma in resection specimens. Rectal ultrasound is already available in several teaching centres and larger urology units, but it is rumoured that they are being rapidly supplied to many district hospitals. At the same time there is renewed urological interest in radical prostatectomy for low volume disease. In this environment an extra responsibility will be placed on pathologists interpreting biopsy and TURP specimens. Therefore this book is strongly recommended, not only to histopathologists in training but to those established in practice.

There are other text books and atlases of genitourinary pathology and some devoted entirely to the prostate, including a previous one from Raven Press, but this would be my choice when faced by a diagnostic problem.

M CONNIE PARKINSON

Molecular Biology of the Cell. 2nd ed. B. Alberts, D Bray, J Lewis, M Raff, K Roberts, JD Watson. (Pp 1218 + index; £26.50.) Garland Publishing Inc. 1989. ISBN 0-8240-3696-4 (paperback).

Cell and molecular biology have advanced at a staggering rate since the publication of the first edition of *The molecular biology of the cell* in 1983. Despite this the authors (and their numerous helpers) have only taken an extra 100 pages to convey the essentials of contemporary biology concisely and lucidly. It is a joy to read the text and study the clear illustrations, both of which have been extensively revised. The range of the book is staggering, mistakes are very rare and it is remarkably up to date including references from late 1988. There are three sections and 21 chapters. The first section, *Introduction to the cell*, covers the essentials of cellular biochemistry including a brief guide to the methods used for studying cells. It concludes with a lucid account of genetic mechanisms and an introduction to molecular biology. This is followed by a section entitled *Molecular organisation of cells*, which includes discussions of membranes, cytoplasmic organisation including an excellent chapter on the cytoskeleton, and the nucleus. Other chapters describe modern notions regarding cell signalling, control of growth and cell division, and a very good account of cell adhesion and extracellular matrix. Finally a section entitled *Cells to multicellular organisms* considers how cells interact with each other, taking development, differentiation, the immune system and the nervous system in

turn. For those who wish to understand the plants in their garden a little better there is a fascinating chapter on cellular organisation in plants. The final chapter turns to the cell biology of cancer. This book is magnificent. It is a must for any pathologist who wishes to remain conversant with modern biology, and at a mere £26.50 is an incredible bargain! Go and buy it!!

PA HALL

Myobacterial Skin Diseases. New Clinical Applications Dermatology. Ed M Harahap. (Pp 142; £30.00.) Kluwer Academic Publishers. 1989. ISBN 0 7462 0119 2.

The indefatigable Dr Julian Verbov has produced the final volume in his dermatological series of "New Clinical Applications". His aim was to publish up to the minute articles by leading experts on subjects of interest as quickly as possible and avoid the problem of multiauthor text books which are out of date by the time they are off the presses. This he has achieved. This volume covers all aspects of myobacterial skin diseases including tuberculosis, leprosy, and atypical mycobacteria (principally marinum, fortuitum, ulcerans, and chelonae). Inevitably there is a little repetition among authors but not enough to constitute a fault. There are some excellent reviews by Drs Convit, Harahap, Grange, McDougall, Tomecki, and Ulrich. The readership is clearly likely to be largely dermatological but this volume would constitute an excellent basic grammar for the pathologist in training. The price would put off some but any self respecting department should have accumulated enough funds to buy it.

AWP DU VIVIER

Microbiological Methods. 6th ed. CH Collins, Patricia M Lyne, JM Grange. (Pp 409; softcover £29.50.) Butterworths. 1989. ISBN 0-407-008853

To my surprise, I have not encountered this remarkable little book before. It is not comprehensive, nor does it claim to be, but it is crammed with information not readily found elsewhere. Its publication record—six editions in 25 years—is testament to its success and popularity. The authors acknowledge that they have "moulded" the material submitted by their contributors into their own "telegraphic style" which I find synoptic yet readable.

A better title would be "Bacteriological Methods" because virological techniques are not considered, although some space is devoted to mycology. Basic topics covered include laboratory safety, equipment, sterilisation, materials, media and methods, altogether in 140 pages. Collection and processing of specimens for clinical bacteriology is considered briefly (15 pages) and this is followed by an outline of antimicrobial sensitivity and assay tests in a chapter of similar length. The bacteriology of food, all types including dairy products, water, and the environment receives detailed treatment in 70 pages, and I found these chapters a useful compendium of what to do with an