
I read this book on the day after BBC radio had treated us to the famous 1938 broadcast of "The War of the Worlds", which had created such panic across America. It depicted a terrifying scenario of capsules arriving from outer space which discharged machinery to destroy life as we know it. Imagine how I felt as I read through this book's chapter titles: the medical director's role in quality assurance; the quality assurance chairperson's role; risk management; and dealing with the inspection. It seemed such an alien world. Was British pathology to be taken over in this way, devoting its time to "economic grand rounds" (chapter 7).

Joking aside, this book is an eye-opener. As British pathologists come to terms with the beginnings of formalised audit, it is fascinating to read about the present standards required of North American laboratories. The book is concerned principally with surgical pathology, cytology, and necropsies, although general points apply to all pathology disciplines. Many chapters are inappropriate for the British market but the three central chapters on methodology and QA (totalling 59 pages) would be valuable to QA organis- ers, to give them an idea of the breadth of the subject. The main message was a useful one; "An audit is not designed to be statistically significant and scientifically accurate but rather one designed to let you know if it has any problems". This book might help you with your latest problem—namely, audit itself.

SADILLY


This is the ninth book in a series of Guides to Clinical Aspiration Biopsy under the aegis of series editor, Titde S Kline. There are seven contributors to the book but most of the chapters are written by Professor Silverman.

The aim of the book is summed up in the first few lines of the preface: "while FNA biopsy has been used primarily for the diagnosis of neoplasia, it is becoming increasingly apparent that many nonneoplastic mass lesions are sampled. Until recently, the main emphasis in the literature and practice has been on the aspiration biopsy cytologic diagnosis of benign and malignant neoplasms. This is ironic since the technique of aspiration biopsy cytology was originally used to obtain samples for the diagnosis of infectious diseases". (1904 Greig and Gray for the diagnosis of sleeping sickness in aspires from lymph nodes). The book is well written, well illustrated, and is easy to read. The chapter on the role of the clinical microbiology laboratory is particularly informative, especially culture protocols and what to think of when there is only a small amount of material to culture. On the negative side is the fact that many of the same organisms appear in the separate chapters of different body sites. The fine needle aspiration diagnosis of inflammation and the cause of the inflammation is certainly going to be required more frequently especially where infections are common or laboratory facilities are less than ideal and infectious agents can easily be identified by fine needle aspiration cytology.

DH MELCHER


This is the second edition of the popular lower gut pathology volume in the Contem- porary Issues in Pathology series. The 11 contributors present a galaxy of gastrointestinal pathological stars from North America. The subject matter of each chapter and the authors are unchanged from the first edition but, as the preface so rightly says, so much has changed in the intervening eight years in all 11 subjects covered that each chapter has had to be extensively rewritten and updated. All the chapters make for excellent reading and useful reference most include cited references up to 1989. Most important advances in lower gut pathology are covered, although it does seem a shame that two areas of such current interest, the lower gut in AIDS and inflammatory bowel syndrome, are not covered to any large extent. Among the noteworthy contributions are those on the differential diagnosis of inflammatory bowel disease (IBD) by Rodger Haggit and dysplasia in IBD by Robert Riddell. With regard to the latter, there must be some question marks against too rigid categorisation especially in view of the relatively poor agreement among experienced pathologists in interobserver studies of dysplasia in ulcerative colitis.

The title of this book perplexed me first time around and does so again—why does the colon come before the small bowel in North America and where have the appendix, caecum, and rectum gone?! The bizarre ordering is somewhat recapitulated in the chapter order. Most books would start with the pathology of the small bowel passing through the appendix, colon, and rectum and finishing up at the rear end. Many of the photomicrographs would not win awards and their reproduction is generally rather poor. All these mutterings apart, I feel the book makes for an excellent reference source for lower gut pathology and should be read by all practising histopathologists. It is not expensive and I recommend it.

NA SHEPHERD


The aim of this book is to summarise the current position of basic research in a broad clinicopathological perspective. The main author is a clinical neuropathologist and there are contributions from many experts on their relative areas of interest.

The first chapter provides a brief historical review, following this there are two main parts, each with several chapters. The first part deals with the characterisation of the transmissible spongiform encephalopathies including the physico-chemical and biological properties of the agent, genetics, neuropathology, neuropathology, immunology, and a review of the theories on the nature of the transmissible agent. The second part deals with clinical and related issues and includes sections on epidemiology, clinical manifestations, clinical neurophysiology, neuroimaging, clinical laboratory findings, treatment, ethical and legal considerations, and finally the book concludes with a brief overview and an assessment of future directions. A great deal of the information is derived from experimental research, but the book succeeds in presenting these data within a clinical context and bridges the gap between the molecular biologist and clinician; it will be a particularly useful reference monograph for the latter.

On the whole, the book avoids excessive specialisation and presents the material in an unbiased way, although all current theories are speculative and the rapidly accumulating molecular biological data results in increasingly complex theories that have now extended beyond those relevant to any previously described micro-organism, often without substantiating the data.

The book is produced on matt paper and contains relevant illustrations; in general the illustrations have not reproduced well. Each chapter is followed by a list of references. Like many American books it relies heavily on abbreviations which can be frustrating when reading the less familiar chapters.

This book is a useful summary of this fascinating group of diseases and it succeeds in its aim in presenting the results of basic research in a clinicopathological perspective. Research in this field is so fast-moving that the story has moved forwards a little since the book was published, but this is nevertheless a very readable summary of the position up to 1991 and I recommend it to all with an interest in this group of diseases.

WR TIMPERLEY


The book makes light reading of a complex and difficult area of pathology and this is largely to the credit of the editors who have put together such distinguished contributors to add yet another to the already successful series on Current Problems in Tumour Path-ology. It complements the classic textbook on soft tissue tumours by Enzinger and Weiss and should rightly take its place alongside it on the shelves.

The layout of the book, together with good black and white photomicrographs, make infinitely more accessible the chapters on sarcomas and leiomyosarcomas. The references are up to date, which is unusual and therefore a great tribute to the