Intramammary lymph nodes

We read with interest the paper by Jadusingsh¹ on intramammary lymph nodes and would like to report our experience with such a case.

A 35 year old woman presented with a non-tender lump in the upper outer quadrant of the left breast. On examination she had enlarged axillary lymph nodes as well as the palpable breast lesion, although this was clinically and mammographically benign. Fine needle aspiration of the breast lump led to an erroneous diagnosis of malignancy; carcinoma, possibly medullary, and lymphoma being the suggested differential diagnoses. Despite focal bloodstaining of the smears, the cytological picture appeared to be predominantly that of a mixture of small lymphoid cells and large atypical cells. The large cells were interpreted as malignant and the small cell as a benign lymphoid infiltrate. The lump was surgically excised together with removal of axillary lymph nodes. It measured 1.3 cm in diameter and the largest axillary lymph node was 2.5 × 1.8 × 1 cm. Histologically the breast lesion was an intramammary lymph node showing follicular hyperplasia but no evidence of lymphoma or carcinoma. The axillary nodes showed follicular hyperplasia and prominent sinus histiocytosis. On later review of the cytological material, the population in places was seen to be that of mixed population of lymphoid cells.

This case illustrates the need to be aware of these nodes and the possible changes exhibited by them. It is essential to bear in mind their existence, particularly when the cytological, clinical, and mammographic features of a breast lesion do not agree.

M BALSITIS
R ALLIBONE

Department of Pathology (Histopathology),
University Hospital, Queens Medical Centre,
Nottingham, NG7 2UH

1 Jadusingsh I H. Intramammary lymph nodes.
J Clin Pathol 1992;45:1023-6.

Farmer jesty and the discovery of vaccination

I very much enjoyed Dr Lakhani's excellent article on Edward Jenner.¹ There was, however, one pertinent detail which might have been included. Jenner was not the first practitioner of vaccination. Instead, that distinction perhaps belongs to a West Country farmer called Benjamin Jesty who successfully inoculated his family with cowpox virus, protecting them from a devastating local outbreak of smallpox. Jenner's later additional contribution was to challenge vaccinated subjects with variola virus, although his work was far from scientifically rigorous.²

My source of information about Jesty is the Jenner Museum in Jenner's old house, The Chantry, in the Gloucestershire village of Berkeley. The house was purchased by the British Trust for Immunology and is open to the public throughout the summer.

DC KILPATRICK
Principal Immunologist Cellular Immunology
Laboratory 2 Forrest Road Edinburgh EH1 2QN

1 Lakhani S. Early clinical pathologists: Edward Jenner (1743-1823). *J Clin Pathol* 1992;45: 756-8.

2 Silverstein A.M. *A history of immunology*. San Diego: Academic Press Inc., 1989.

Book reviews

The titles reviewed here are available from the BMJ Bookshop, PO Box 295, London WC1H 9TE. Prices include postage in the UK and for members of the British Forces Overseas, but overseas customers should add £2 per item for postage and packing. Payment can be made by cheque in sterling drawn on a UK bank, or by credit card (MasterCard, VISA, or American Express) stating card number, expiry date, and your full name.

Microbiology Accreditation and Quality Assessment Schemes in the UK: Measuring up to the Standards. Ed C Roberts, MC Kelsey. (Price £3.50.) Association of Medical Microbiologists. 1992.

Accreditation, quality assurance, control and assessment are here to stay and microbiologists need to acquaint themselves with current practice and information. The Association of Medical Microbiologists' monograph on *Measuring up to Standards* is a compilation by 10 groups of workers intimately involved in accreditation and quality assessment schemes. The editors state that the document is "not an exclusive nor an exhaustive account of such schemes". It is, however, a publication which will become a must for all laboratories. It is put together in a logical format. The clear headings and easy reading render this somewhat less than inspiring but important subject readily accessible to all those of us who urgently need it.

HELEN HOLZEL

Laboratory Medicine. Test Selection and Interpretation. Ed JH Howanitz, PJ Howanitz. (Pp 966; £49.) Churchill Livingstone. 1991. ISBN 0-443-08576-5.

This book describes the various laboratory tests requested by the clinician in hospital and the interpretation of the results of these tests. It encompasses most of the major branches of pathology including chemistry, haematology, microbiology/immunology and blood transfusion.

A very attractive feature of this book is that all the analytes are referred to as "tests" as requested by the clinician and are discussed as such and not as part of a wider subject whereby the analyte's merits tend to be diluted and lost to the reader. Each section within each chapter is organised into a set format which includes background information and definition of the test, specimen requirements such as collection and storage procedures, technical difficulties, artefacts, interferences and limitations of the test and the interpretation of the results. It contains high quality plates and the tables and figures are excellent throughout. The inclusion of paediatric reference ranges is particularly admirable. The book is very easy to read and any information required is readily found. I was very impressed by how up to date the book is.

This book should benefit most people involved in laboratory medicine including

medical staff as well as laboratory officers. It should prove to be particularly useful for medical students and junior hospital doctors where interpretation of test results—the strongest point in the book is easily obtainable. In the UK, however, students of higher professional laboratory qualifications such as the MRCPPath, may require more specialised information.

There are a few weak points. The relative lack of technological details of tests, laboratory management issues, and quality assurance entails that MLSOs and clinical scientists would have to look elsewhere for such necessary information. There are a rather high number of typographical errors. There is, moreover, a serious error in table 7-1 whereby insulinoma/nesidioblastosis should have been included at the top of the list of causes of fasting hypoglycaemia and not only in the list for reactive hypoglycaemia. Certain aspects of the book could be improved: the omission of a test that practically nobody does nowadays: the tolbutamide tolerance test for the diagnosis of insulinoma; the inclusion of a test that most of us do frequently: the glucagon stimulation test for growth hormone and ACTH functional reserve; the inclusion of contraindications to the insulin tolerance test; the rewriting of plasma catecholamines section; and a note or two on SHBG as a test on its own.

On the whole, I find this book to be a very valuable addition to libraries in most hospital laboratories and wards. It should prove useful to a wide range of the health-care staff including medical students, junior doctors, laboratory technologists and clinical scientists.

S MEDBAK

Colour Aids. General Pathology. IAR More, IL Brown. (Pp 130; soft cover £7.95.) Churchill Livingstone. 1992. ISBN 0-443-04057-5

This volume of *Colour Aids* follows the general style of the series—that of an illustrated, concise text. It is well written, extremely readable, and despite its brevity, covers the main general pathological processes. The illustrations have been well chosen to include appropriate electron micrographs, diagrams, graphs, photographs of gross specimens and photomicrographs of haematoxylin and eosin sections as well as relevant immunohistochemical and "special" stains.

In one or two places a higher magnification would have more clearly shown the process, for example, the polymorphs in figure 27 and the eosinophils in figure 28 demand the eye of faith. As I suspect that many students just flick through the pages to remind themselves of facts which they need to remember, a judicious arrow on some of the illustrations a little more detail in the legends would have helped. Finding the explanation for the figure is difficult in one or two places because the illustrations are not mentioned in the text, and in places the figures and text do not coincide. This is a minor problem, however, as the text and illustrations are for the most part closely linked.

Students are overwhelmed by list of books which are recommended to them. I hesitate, therefore, to add one more to the list. Yet I think that the authors have produced an excellent short text and I shall be