be the result of a variation in the denominator than in the numerator. In fact this should not be a great surprise, because the confidence limits for each of the proportions overlap considerably.

One possible alternative is log-linear modelling of the proportions using a package such as GLIM. This has the advantage of great flexibility in the choice of model that is tested. The resulting evidence for seasonality is even less convincing: a general sine and cosine model gives a χ^2 value of 4.476 (df = 2), $p = 0.1067$; a model testing for variation between the four seasons gives a χ^2 value of 0.19954 (df = 3), $p = 0.9777$; and lastly, testing autumn + winter against the rest of the year gives a χ^2 value of 3.32 (df = 1), $p = 0.0694$. Another possibility, if there were enough data for each month of the whole 10 year period, might be a formal time series analysis that could be directly related to temperature fluctuations. Unlike the application of Edwards' test or its ad hoc modification (which can both be performed with a pocket calculator), both of the latter approaches would require access to a suitable computer package or collaboration with someone who is able to do this work.

To me, this illustrates why we should be trying to integrate statistical teaching and thinking with pathology practice. While the best way to get a feel for statistical analysis is to have a go, only appropriate training will help the novice avoid many potential pitfalls. On the other hand, while statistics does have a mathematical basis, as an eminent statistician has noted,⁴ it is a science deeply rooted in real life. In the present context this means that it is the pathologist who ultimately ensures that the question posed makes medical sense.

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- 1 Green J, Edwards C. Seasonal variation in the necropsy incidence of massive pulmonary embolism. *J Clin Pathol* 1994;47:58-60.
- 2 Jones DR, Rushton L. Simultaneous inference in epidemiological studies. *Int J Epidemiol* 1982;11:276-82.
- 3 Edwards JH. The recognition and estimation of cyclic trends. *Ann Human Gen* 1961;25:83-7.
- 4 Box G. Scientific statistics. *Royal Statistical Society News* 1993;21:1-2.

Book reviews

If you wish to order, or require further information regarding the titles reviewed here, please write or telephone the BMJ Bookshop, PO Box 295, London WC1H 9TE. Tel: 071 383 6244. Fax: 071 383 6662. Books are supplied post free in the UK and for British Forces Posted Overseas addresses. Overseas customers should add 15% 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. (The price and availability are occasionally subject to revision by the Publishers.)

Systemic Pathology. 3rd ed Vol 11. **Liver, Biliary Tract and Exocrine Pancreas.** Ed DGD Wight. (Pp 736; 53 illustrations; £100.) Churchill Livingstone. 1993. ISBN 0-443-03098-7.

This concise, attractive volume is the eleventh in Symmers' wellknown series on systemic pathology and one of the best to date. As a textbook on the subject, it stands between biopsy interpretation/atlas type guides and encyclopaedic treatises, of both of which there are now quite a number; it conveniently fills the gap.

There are 14 chapters, 10 on the liver, gall bladder and biliary tract, and two on the exocrine pancreas. The title headings reflect broad groups of problems or diseases which are interrelated in some way, such as fat, alcohol, and iron or developmental and paediatric liver disease. The search for specific topics is aided by a useful index. The standard of writing is generally unfussy and clear; tables, diagrams, and illustrations—all in crisp black and white—are excellent and references are numerous up to 1990, but few thereafter. However, no major advance in concept or diagnostic utility has been overlooked. It would be invidious to rank the individual chapters in order of merit because they are all good, but Chapter 1 on development, anatomy, physiology, and patterns of injury, Chapter 5 on developmental and paediatric liver disease, and Chapter 6 on drugs and toxins are particularly helpful; Chapters 13 and 14 on the exocrine pancreas are outstanding. These are perhaps the topics where information in existing textbooks is either overabundant or sketchy, hence the usefulness of these particular chapters.

There is little to quibble about: ring granulomas are no longer considered to be specific for Q-fever, for example. It is also interesting to compare the combined length of Chapter 2 on acute and Chapter 4 on chronic hepatitis (39 pages) with that of Chapter 12 on liver transplantation (54 pages). This may be considered to be slightly out of balance, but it also reflects changes in the way in which and extent to which microscopic examination of the liver helps to solve problems in today's practice. All in all, this is a thoroughly good book; it is easy to use and it should answer the needs of all general histopathologists and their trainees in this difficult area.

PP ANTHONY

Torch Screening Reassessed. The Laboratory Investigation of Congenital, Perinatal and Neonatal infection. PHLS (Pp 122; paperback £7.95. 1993. ISBN 0-901144-35-5.

This is the second, revised edition of the book first published in 1990 which deals with congenital, perinatal, and neonatal infections. This version, produced by a PHLS working party, incorporates new recommendations, epidemiological information, and published data which have become available in the last few years and provides a comprehensive review of the epidemiology, symptoms, risk factors, laboratory diagnosis, and methods of prevention of congenital, perinatal, and neonatal infections.

There are sections on *Toxoplasma gondii*, rubella, cytomegalovirus, *Treponema pallidum*, HIV and parvovirus B19 congenital

infections. The perinatal and neonatal infection chapter includes sections on herpes simplex virus, varicella zoster virus, enteroviruses, hepatitis B virus, HTLV-1, cytomegalovirus, *Neisseria gonorrhoeae*, Group B streptococci, *Escherichia coli*, *Listeria monocytogenes*, and *Chlamydia trachomatis*.

The book emphasises the outmoded nature of the acronym "TORCH" and recommends that clinicians should request tests for specific infections based on epidemiological and symptomatic considerations. To facilitate this, the book contains a very useful series of flow charts, dealing with the investigation of babies with low birth weight, purpura, jaundice, microcephaly, and neonatal seizures, which highlight, among other things, which viruses, parasites, and bacteria should be sought in certain situations. The book also contains a section on methods of prenatal diagnosis.

This edition is much improved compared with the earlier version. It is clearly and concisely written, well produced, and has clear, useful figures and 170 references. It is an essential reference work which will appeal to microbiologists, gynaecologists, paediatricians, and epidemiologists.

TG WREGHITT

The Central Nervous System in AIDS. Neurology, Radiology, Pathology, Ophthalmology. Ed J Artigas, G Grosse, F Niedobitek. (Pp 237; hardback DM282.00.) Springer. 1993. ISBN 3-540-55839-X.

The major part of this book presents the results of the post mortem examinations of the central nervous system in the 180 patients with AIDS who died in the Auguste-Victoria Krankenhaus, Berlin, during the period 1986-1991. These findings are set in the context of the clinical and radiological changes found in the central nervous system in AIDS and draw on experience from other centres. There are five chapters. The first chapter sets the clinical background to the subject and is followed by a chapter which discusses the use of computed tomography and magnetic resonance imaging in demonstrating the various pathological lesions found in AIDS. The third chapter, written by the editors, constitutes over 50% of the main text. In it they describe the examination methods, discuss the pathogenesis of the disease, and present the pathology with frequent reference to the work of other centres. Where appropriate, results are given in simple tabular form. The final two chapters are written by authors based in France and North America and give a useful and brief account of the clinical and pathological changes found in the eye in AIDS. The book is extensively illustrated with clear, large scale black and white photographs. It will make a valuable addition to the library of any department offering a diagnostic service in AIDS and of the neuropathologist. To the clinician it is a salutary reminder of the benefit of achieving a 46% necropsy rate.

JE MCLAUGHLIN

Ophthalmic Pathology. PV Iyer, R Rowland. (Pp 212; 427 colour illustrations; £50.) Churchill Livingstone. 1993. ISBN 0-443-04240-3.

This is an annotated colour atlas, as opposed to a textbook, and is designed to

be a practical manual for the non-specialist surgical pathologist; a secondary aim is to serve interested ophthalmologists. However, it is on its stated primary objective that the book should be judged and it seems that there are three basic criteria on which to do so.

Firstly, is the range of entities covered appropriate? The layout follows a conventional anatomical basis and includes the eyelids and orbit in addition to peculiarly ocular structures. Few of the disorders that the average histopathologist serving an eye unit will encounter are missing.

Secondly, are the photomicrographs adequate for their purpose? Overall, most figures are of excellent quality and relevance. There are some exceptions, however, which possibly reflect limitations of available specimens, and some are too pale and lacking in basophilic staining.

Thirdly, is the accompanying text useful and accurate? In addition to the figure legends, succinct accounts are given of most of the conditions depicted and these are invariably apposite and reliable.

There are occasional errors, some of them amusing, for instance the reference to Charcot-laden crystals and the description of the calotte (or cap), that is conventionally removed from an eyeball to allow gross examination of the intraocular structures, as a culotte (or divided skirt!). However, with faults as trivial as those, this is a very useful book which will serve the intended readership well. Ophthalmologists preparing for their professional examinations would also benefit.

ALEC GARNER

Notices

The Royal Society of Medicine The Section of Pathology Error and liability in cytopathology and histopathology

Tuesday 7 June 1994:
4.30pm–9.00pm

Programme

Duty and Performance in Medical Screening and Clinical Consultation
Professor N J Wald, London
Liability of the Laboratory in Cytology Screening Programmes *Dr E McGoogan, Edinburgh*
Liability of the Public Health Departments in Screening Programmes
Professor N Day, Cambridge
Keeping Medicine up to the Mark
Miss Celia Hall, Medical Editor, The Independent
Error Detection and its Consequences in Histopathology *Professor I Lauder, Leicester*
Turning "Audit" into "Avoid it"
Dr G Roberts, Medical Defence Union
Self Regulation of Professional Standards
Dr D R Davies, Oxford

For further information and a registration form please contact Miss Claire Cheesman, Sections Officer, The Royal Society of Medicine, 1 Wimpole Street, London W1M 8AE

Royal Society of Health

Suicide in the 1990s

Date: Wednesday June 8, 1994.
Venue: Society of Chemical Industry (SCI), 14–15 Belgrave Square, London SW1.
Fee: £80 for Non-members, £50 for RSH members and Charities. £30 for retired RSH members and students; £70 per head for groups of three or more.

Management of Trust Hospitals

Date: Thursday, June 16, 1994.
Venue: The University of Leeds, Clinical Sciences Building, Leeds LS9 7TF.
Fee: £80 Non-members; £50 for RSH members and Charities. £30 for retired RSH members and students; £70 per head for groups of three or more.

All enquiries:

Iris Murphy, Conference Department, The Royal Society of Health, RSH House, 38A St George's Drive, London SW1V 4BH. Tel: 071 630 0121. Fax: 071-976 6847.

Lung Pathology. November 1–4 1994. London, UK: National Heart and Lung Institute.

For further information, contact: Professor B Corrin, Histopathology, Brompton Hospital, London SW3 6NP. Fax: 44-71-351-8435.

Jean Brihaye Scholarship

The European Association of Neurosurgical Societies (EANS) will award the first Jean Brihaye Scholarship on the occasion of the 10th European Congress of Neurosurgery in Berlin, May 7–12, 1995.

The scholarship amounts to ECU 12,000, and will be awarded to a European neurosurgeon under the age of 45 (on May 12, 1995) for an unpublished scientific work in the field of neurosciences related to neurosurgery. The manuscript must have a maximum of 20 double-spaced typewritten pages. One original and eight photocopies must be sent **before September 30, 1994** to: Professor Mario Brock, President of the E.A.N.S., Universitätsklinikum Steglitz, Abteilung für Neurochirurgie, Hindenburgdamm 30, 12200 Berlin.

Association of Clinical Pathologists National Scientific Meeting 20–21 October 1994

The Royal Borough of Kensington and Chelsea, The Town Hall, Hornton Street, London W8

There will be full two-day programmes for each of the major branches of pathology.

Histopathology—Dermatopathology including slide seminar.

Haematology—Interferon treatment: what the district general hospital haematologist needs to know: acute leukaemia-modern aids to diagnosis (including slide seminar): what's new with iron?

Microbiology—HIV: sexually transmitted diseases—an update: marketing and the microbiology laboratory: epidemiology—how to do it.

Chemical Pathology—current topics: joint meeting with Association of Clinical Biochemists on medical informatics now.

If you are not a member of the ACP and would like to receive details of the National Meeting please contact the Conference Secretariat, Association of Clinical Pathologists, 221 Preston Road, Brighton BN1 6SA, UK. Tel: +44 (0)273 561188. Fax: +44 (0)273 541227.

Association of Clinical Pathologists Trainee Membership

Trainee membership of the Association is available to medical practitioners who are in training in pathology. Trainee members are able to remain in this category until they achieve consultant or other career grade status (this includes staff grades). The annual subscription is £32.50 for those resident in the United Kingdom and Republic of Ireland and £75 for those overseas. The annual subscription may be claimed against tax.

Trainee members receive the *Journal of Clinical Pathology* each month. Other benefits are reduced registration fees to attend ACP scientific meetings, all the documents regularly sent to full members of the Association including *ACP News*, which has a regular column for trainees, and the twice yearly summary of pathology courses included in the ACP programme of postgraduate education. Trainee members have their own representative body, the 'Trainee Members' Group, which has a direct input to Council.

For Trainee Membership apply to: The Honorary Secretary, Association of Clinical Pathologists, 221 Preston Road, Brighton BN1 6SA. Tel: (0273) 561188. Fax: 0273 541227.