

reports as possible to allow accurate staging of tumours by clinicians. Thirdly, the need for this sort of information is growing as tumour cancer registries rightly become more demanding in terms of the information they require.

The task is eased because many word processor programs permit the insertion of a protocol for a standardised report, which means that only the specific details of an individual case need to be entered into the report. All that remains is to persuade pathologists that reports are not literary art forms but scientific descriptions which can with advantage be standardised and quantified.

The information which is required is being published widely in journals^{3,4} and texts.²

It is arguable whether protocols should be prepared by individuals or departments or by national or international professional bodies. There is much to be said for a uniform approach, so as to permit research on a wide scale and to aid the task of cancer registries.

Measurements made on a microscope slide are not commonly given (save for thickness of malignant melanoma) but to give a quantitative measurement of the distance to the surgical resection margin in cases of breast and skin cancer is useful and relatively simple, at least in the UK and Australia where calibrated mechanical stages are in general use.

To return to the article,¹ it represents an audit of a situation which prevailed six years ago. To move into the more modern world it is going to be essential to have regular internal and external forms of audit on procedures and on the accuracy and timeliness of reports as well as on the information contained therein. In this paper only two prognostic features of malignant melanoma out of the many which have been described have been audited.

As pathologists it would seem we all have a way to go. Roll on continuous professional education.

J J RIPPEY

West Australian Institute for Pathology and Medical Research,
Queen Elizabeth II Medical Centre,
Nedlands WA 6009,
Australia

- 1 Miller JM, Slater DN. Do histopathology reports of primary cutaneous melanoma contain enough essential information? *J Clin Pathol* 1996;49:202-4.
- 2 Rosai J. *Ackerman's surgical pathology*. 8th edn, Vol 2. St Louis: Mosby, 1996:2525-64.
- 3 Association of Directors of Anatomical and Surgical Pathology. Recommendations for the reporting of breast carcinoma. *Am J Clin Pathol* 1995;104:614-19.
- 4 Association of Directors of Anatomical and Surgical Pathology. Recommendations for the reporting of resected large intestinal carcinoma. *Hum Pathol* 1996;27:5-8.

Book reviews

Ackerman's Surgical Pathology. Vol I and II. 8th edn. Juan Rosai, ed. (Pp 2400; 2136 illustrations, 450 in colour; £229.00.) Times Mirror International Publishers Ltd. 1995. ISBN 0801670047.

The new eighth edition of *Ackerman's Surgical Pathology* weighs in at a hefty 18 lb 5½ oz

compared with the mere 14 lb 1½ oz of the now seven year old predecessor. The extra weight has not gone into flab. Much of the text has been expanded and there are many additional high quality illustrations, mainly in colour. The familiar strengths of the still (amazingly) largely single author work include a unity of style and a lucid text with a wealth of relevant clinical and epidemiological information. Sections on normal anatomy and histology have been greatly expanded and there is much more information on immunohistochemistry, cytogenetics and molecular pathology. This must now be the first place to turn to for concise information on the immunohistochemistry of tumours in everyday practice. There is much helpful detail on prognostic factors in tumours. It is difficult and perhaps churlish to find any fault with the new edition. There are some occasional quirks of balance: only one short paragraph on glandular neoplasia in-situ of the endocervix with many lesser entities treated in much more detail, but the work largely succeeds in being both concise and comprehensive. It is an American book and the American nomenclature is used in—for example, germ cell tumours of the testis, though here and elsewhere other classifications are outlined. Although the layout of the two volumes is very similar to that of the previous edition and some of the text is unchanged, this is a substantially better book and a must for all Pathology Departments. It is a false economy to stick to the old edition. My review copy lies solidly on my study desk at home. I consult it so often that I am loathe to move it from there.

G M KONDRATOWICZ

Malignant Effusions. Bedrossian CWM. (Pp 275; £156.00.) Igaku-Shoin Medical Publishers. 1994. ISBN 0-89640-196-0.

Do not be misled by the title of this excellent cytopathology text/atlas. The first 100 pages cover general aspects, clinicopathological correlations and non-malignant causes of effusions with a detailed account of the many guises of mesothelial cells in reactive processes and problems in interpretation. Inflammatory processes and infective diseases presenting with effusions are also discussed and these early chapters are just as interesting and informative as the remaining two thirds of the book, which focuses on malignant effusions. Differentiating mesothelial hyperplasia from carcinoma is one of the great challenges in the cytology of malignant effusions. This problem is addressed in a style that is extremely lucid and includes the judicious use of immunocytochemistry and other ancillary techniques which may be helpful in clinching the diagnosis. Malignant mesothelioma, the differential diagnosis of small, blue, round cell tumours and metastatic non-epithelial malignancies are detailed. In fact, any tumour that is likely to lead to an effusion gets a mention. The illustrations throughout the book are of a high standard and are in colour with black and white reproductions confined to electron microscopy. Each chapter is lavishly illustrated and individual cell details are crisp and easily identifiable. This book is a treasure trove of information, not only for beginners, but also for experienced cytopathologists. Read it and improve your skill in diagnosing malignant effusions.

RACHEL OOMMEN

Bioradicals Detected by ESR Spectroscopy. Ohya-Nishiguchi H, Packer L, eds. (Pp 352; DM 178.) Birkhauser Verlag AG. 1995. ISBN 3-7643-5077-6.

This book is a collection of papers from a conference on the application of electron spin resonance (ESR) spectroscopy to the detection of bioradicals (active oxygen radicals and transition metal ions), which was held in Japan in 1994. Following the introduction, there is a useful overview of the chemistry of oxygen radicals and three chapters which outline the physics and technological basis of ESR. There follows a section which describes the potential of ESR imaging and later chapters consider its application to the imaging of the rat brain. The technique of spin trapping the capture of radicals by stable molecules for future analysis is discussed at length. Two chapters outline the application of ESR to the study of bioradical metabolites in vivo and two are devoted to the application of probing active site structures of metalloproteins. The penultimate section considers antioxidants and foods, one chapter being devoted to vitamin E and its interactions in biological systems, while another describes research on antioxidant vitamin activities in micelles and liposomes. The theme of in vivo measurements is returned to in the concluding chapters, this section including an interesting review of the application of the technology to the investigation of drug delivery. The book is not primarily concerned with the biomedical effects of free radicals. It describes the technology of ESR in great detail and its application to the measurement of bioradicals. As such, it will be of interest to those who wish to learn more about the capabilities of this technique.

M F LAKER

The Estimation of the Time Since Death in the Early Postmortem Period. Claus Henssge, Bernard Knight, Thomas Krompecher, Burkhard Madea, Leonard Nokes. General editor: Bernard Knight. (Pp 262; £65.00.) Edward Arnold. 1995. ISBN 0 340 573 198.

Popular novels have perpetuated the myth to the non-forensic fraternity that time of death estimation is an exact science. It would certainly make our job a lot easier if it was! Unfortunately, this is far from the case, as some of us find from time to time to our embarrassment. One well-known pathologist was so disillusioned with the inaccuracy of time of death estimation, that when asked his opinion, he enquired as to the time when the deceased was last seen alive and when the body was discovered and took the midpoint between the two! Despite all the short comings of time of death estimation, it may well be an important issue in a criminal investigation. It is therefore incumbent on the pathologist to give some reasoned guidance, based on scientific principles and in the light of his/her experience. Bernard Knight's book is therefore long overdue. Many papers have been published on the subject, testimony to the difficulty encountered in solving the problem, but it is the first time in the English language literature that the collective knowledge on the subject has been brought together in one text. The contributors are all experts in different aspects of this area and have pooled their research findings and wide experience to assist the pathologist. It is both a scholarly, and at the same time, a practical approach to a difficult subject. The various

factors which affect the body after death and methodologies used to estimate time of death are discussed. It will come as no surprise that temperature based methods, which have been the most extensively investigated, occupy a substantial part of the book. There are also useful sections on what are essentially methods of secondary importance, such as muscle, eye and chemical changes. The final chapter on practical casework, bringing it all together, is very welcome. I found this book of considerable assistance. Although accuracy is not necessarily guaranteed, it at least counsels caution and a balanced and realistic approach to the problem, applicable to the circumstances of individual cases.

PETER VANEZIS

Gastrointestinal Cancers: Biology, Diagnosis and Therapy. Rustgi AK, ed. (Pp 683; £129.50.) Lippincott-Raven. 1995. ISBN 07817 02763.

With the ever increasing interest in gastrointestinal malignancy, a book devoted solely to this subject might well seem timely and appropriate. And indeed, some of it is, though in general I was disappointed. The book is divided into eight sections. In the first of these, the development and differentiation of the gastrointestinal tract are reviewed with emphasis on the role of growth factors and oncogenes. The following six sections deal with the clinical features, pathology and treatment of malignancies at different sites, including the pancreas and hepatobiliary tree. The final, and perhaps most interesting, section examines future prospects in gastrointestinal malignancy, particularly molecular diagnostics, gene therapy and immunotherapy. The pathology chapters are well written, but due to the scope of the book are inevitably short and concentrate on what I would call the clinical aspects of pathology rather than diagnostic features. The clinical chapters which form the bulk of the book are nicely presented but are too detailed to be of practical use to general pathologists. All of the sections are teeming with molecular biology, most of which is up to date, and so will appeal to pathologists with a penchant for such matters. It is difficult to know precisely who this book is aimed at. I feel it will be of most interest to gastroenterologists and oncologists who wish to gain a broad perspective of gastrointestinal cancer. Pathologists with an interest in gastrointestinal disease and molecular biologists working in the GI field may also find parts of it useful. For most general pathologists, however, this book offers no advantage over other well known texts of gastrointestinal pathology, and so represents poor value for money in these days of cost-consciousness.

PAOLA DOMIZIO

If you wish to order or require further information regarding the titles reviewed here, please write to or telephone the BMJ Bookshop, PO Box 295, London WC1H 9JR. Tel: 0171 383 6244; fax: 0171 383 6662. Books are supplied post-free in the UK and for BFPO 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 full name. (The price and availability are occasionally subject to revision by the Publishers.)

Notices

Lesson of the Month

The Journal would be interested to receive short reports (maximum 250 words) of lessons to be learnt, mistakes that have been avoided or committed, and fascinating phenomena that readers would find interesting. Half-tone illustrations are also welcomed.

These will be carried in the Journal as occasional fillers.

UMDS Dermatopathology Update

Friday February 21 1997

Venue: St Thomas's Hospital, London

Morning—Melanocytic Tumours Update
Speakers: RW Sagebiel, R Barnhill, M Cook, BM Maguire.

Afternoon—Pre-circulated slide seminar

For further information, please contact: Dr PH McKee, Department of Histopathology, St Thomas's Hospital Medical School, Lambeth Palace Road, London SE1 7EH. (Tel: 0171 928 9292 exn 2295; fax: 0171 922 8322.)

Royal College of Physicians of Edinburgh

Consensus Conference

on

Unrelated Donor Bone Marrow Transplantation

October 29 and 30 1996

Venue: Queen Mother Conference Centre, Royal College of Physicians The Conference will address the following issues, among others:

- The current status of blood or marrow transplants (BMT) from unrelated volunteer donors.
- The cost and the QALY; which patients will benefit most?
- Ethical care of the unrelated volunteer donor; how much can we expect?
- Alternative therapies; autografts and cytotoxic T cells.

For further information, please contact: Education, Audit and Research Department, Royal College of Physicians, 9 Queen Street, Edinburgh EH2 1JQ. (Tel: 0131 225 7324; fax: 0131 220 4393.)

Forthcoming Royal College of Pathologists Symposia

Cytopathology update:
Developments and controversies
in cervical and breast cancer screening
Friday 6 December 1996

Practical problems for a coroners
pathologist: Hope to cope
Thursday 30 January 1997

New aspects of micronutrients in disease
Wednesday 19 February 1997

Diet and cancer
Thursday 13 March 1997

The above meetings are open to members and non-members of the College. All meetings will be held at the Royal College of Pathologists, London.

Further details and application forms can be obtained from: Scientific Meetings Officer, RCPATH, 2 Carlton House Terrace, London SW1Y 5AF. (Tel: 0171 930 5862 ext 24/25.)

Postgraduate Course in Gynecologic and Obstetric Pathology

March 24–28 1997

The Departments of Pathology, Massachusetts General Hospital and Brigham and Women's Hospital, Harvard Medical School, will present a postgraduate course in Gynecologic and Obstetric Pathology under the direction of Drs RE Scully, RH Young, CP Crum, to be held at the Four Seasons Hotel, Boston.

This five day course is designed primarily for pathologists and pathology residents, but will also be of interest to gynaecologists with an interest in pathology. It will provide an in depth review of gynaecological and obstetric pathology with emphasis on morphologic diagnostic features and clinicopathological correlation. Special attention will be paid to recent advances and newly recognised entities. Instruction will be primarily by lecture but will also include discussion periods. A new feature of the course this year will be the opportunity to review glass slides of selected unusual cases in the laboratories of the Massachusetts General Hospital during the evenings. Each participant will receive a comprehensive course syllabus.

The course has Category 1 accreditation for approximately 36 hours CME credit by the American Medical Association. The fee for the course is \$795.00 (£530) (residents and fellows \$575.00 (£383)).

For further information, please contact: Department of Continuing Education, Harvard Medical School, 25 Shattuck Street, Boston, MA 02115, USA. (Tel: 617 432 1525; fax: 617 432 1562.)

Postgraduate Course

Current Concepts in Surgical Pathology

November 11–15 1996

The Department of Pathology, Massachusetts General Hospital, Harvard Medical School, will present a postgraduate course in Surgical Pathology under the direction of Drs NL Harris, RH Young and EJ Mark.

The course is designed for pathologists at resident and practitioner levels. It will provide in-depth review of diagnostic surgical pathology with emphasis on morphological features, newly recognised entities and new techniques, presented by the faculty of the Department of Pathology, Massachusetts General Hospital. Instruction will be primarily by lecture, but will also include discussion periods. Each participant will receive a comprehensive course syllabus.

The course has Category 1 accreditation for approximately 35 hours CME credit by the American Medical Association. The fee for the course is \$845.00 (£545.00) (residents and fellows \$650.00 (£419.00)).

For further information, please contact: Department of Continuing Medical Education, Harvard Medical School, 25 Schattuck Street, Boston, MA 02115, USA. (Tel: 617 432 1525.)

A Two-Day Conference

Preparing for the In Vitro Diagnostic Directive – An Update

October 23 and 24 1996

Venue: Hotel Palace, Brussels

This practical, two-day conference will provide up to the minute information on many of the important issues faced by today's manufacturers of in vitro diagnostic devices.

For further information, please contact: Sonja Lloyd, Associated Conference Manager, Advanstar Communications, Conference Division, Park West, Sealand Road, Chester CH1 4RN. (Tel: 01244 378 888; fax: 01244 370 011.)