

### Contraction band necrosis

I read with interest the article by Hopster *et al.*<sup>1</sup> Actually it was a recent editorial in the *Lancet* by Virmani *et al.*<sup>2</sup> that drew my attention to the paper by Hopster *et al.*

In both articles there was an accompanying figure showing contraction bands with myocytes. According to the legend to the fig 1 of the paper by Hopster *et al.*, the transverse contraction bands were "most pronounced in the upper half of the figure". Unfortunately, the figure was printed upside down, as the contraction bands were most pronounced in the lower half of the printed figure. For non-cardiovascular pathologists like me who are not familiar with contraction bands, this printing error created confusion. Of course, the best way would be to use arrows to indicate what the authors were referring to.

T O CHENG

Professor of Medicine,  
Department of Medicine,  
The George Washington University,  
2150 Pennsylvania Ave., N.W.,  
Washington, DC 20037, USA

- Hopster DJ, Milroy CM, Burns J, Roberts NB. Necropsy study of the association between sudden cardiac death, cardiac isoenzymes and contraction band necrosis. *J Clin Pathol* 1996;49:403-6.
- Virmani R, Farb A, Burke A. Contraction-band necrosis: a new use for an old friend. *Lancet* 1996;347:1710-11.

## Book reviews

**Suspicious Death Scenes Investigation.** Vanezis P, Busuttill A, eds. (Pp 193; £45.00.) Arnold. 1996. ISBN 0 340 558636.

The Sherlockism, "You see, but you do not observe", is softened at a crime scene by the realisation that (unless one was the perpetrator of the crime) it is remarkably difficult to determine prospectively the importance of material found there. It seems wise to cover every angle, however oblique. It is hardly surprising that a book about death scene investigation will be repetitive and, if it is not to be enormous, must refer to more detailed works on specific types of scene.

In contrast with this repetition, some areas are somewhat perfunctorily covered: health and safety are of fundamental importance and everyday relevance, methods of locating human remains are sadly topical, while the future—in the shape of virtual reality reconstruction of a scene—is tantalising but, as the authors wisely indicate, perhaps dangerously attractive. Some expansion of these areas and judicious excision of internal repetition would have enhanced the appeal of what is an easily assimilable primer.

S LEADBEATTER

**Atlas of Forensic Pathology.** Jones NL. (Pp 216; £85.00.) Igaku-Shoin. 1996. ISBN 0 89640 315 7.

The aim of this book is admirable. The advice is very good. Sadly, it fails to achieve the aims, largely because of the quality of the photographs, and some of the descriptions of the illustrations do not clearly indicate what is intended. Figures 2.6, 2.7b and 2.8 clearly illustrate this failure. In Fig 2.6 we read that "a canvas of the adjacent building provided

the identity of the victim". How could it do so? We are not told. Figure 2.7b does not show anything more than a seemingly out of focus jumble of legs and what looks like debris. The tip of the knife in Fig. 2.8 is missing, having been cut off by the photographer. This is a very important part of the weapon, because the penetration and the nature of the wound depend to some degree upon it. Much of the diagnosis in forensic medicine and pathology depends upon the accurate interpretation of what may be only subtle appearances, thus it is imperative that these are accurately recorded. The absence of any form of scale in most of the photographs and the use of black and white makes the illustrations of questionable value. As it says in Fig. 3.48, "photographs using a ruler and a colour scale should be taken". There are other criticisms which could be levelled, but to do so would only create the impression that there is nothing of value here and that would not be true. The concept is good, as is the advice. The check lists for the investigations of various types of death are most helpful. The variety and range of cases cited is commendably diverse, covering a wide spectrum of forensic practice. What is needed to make it a good book is an improvement in the quality of the illustrations. In its present form, I cannot recommend it and that saddens me, as a good book of this type would be of great value to pathologists when faced with a forensic problem.

IAN R HILL

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

### Diagnosis and Management of Pre-malignant Lesions of the Prostate

Tuesday February 11 1997

A one day joint meeting of the Sections of Pathology and Urology, Royal Society of Medicine, London. The subsequent Urology Section evening meeting includes a guest lecture by Professor David Bostwick.

Daytime meeting: 5 CME credits.

Registration fee: Non-Fellows £100; Fellows £80; Trainees £60.

For programmes and registration forms, please contact: Miss Jenny Stubbs, Academic Administrator, Royal Society of Medicine, 1 Wimpole Street, London W1M 8AE.

### Cytopathology for Histopathologists

February 3-7 1997

This is an intensive course in basic cytopathology suitable for all candidates preparing for the MRCPATH and Diploma in Cytopathology examinations, as well as established histopathologists requiring revision. It is organised by the Department of Cellular Pathology, Northwick Park Hospital (Dr Eamon Leen). The programme will consist of lectures, microscopy sessions and discussions. Topics will include cytopathology of the cervix, urine, respiratory tract, serous effusions, and fine needle aspiration of breast, lymph nodes, salivary glands, and other sites. In addition, keynote lectures will be given by Dr Amanda Herbert (Overview of cervical cytology screening) and Professor Sebastian Lucus/Dr Nick Francis (Cytology of infectious disease). The course is limited to 30 participants. Royal College of Pathologists' approval for 29 CME credits is envisaged (as per 1996). The course fee is £350.00, which includes lunch, refreshments and a course dinner.

For further information, please contact: Dr Eamon Leen, Department of Cellular Pathology, Northwick Park Hospital, Harrow HA1 3UJ. (Tel: 0181 869 3312; fax: 0181 864 1933.)

### 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.)

### 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.)