exist between the single, barely visible, purely cartilaginous, loose body and the typical "bunch of grapes" appearance of grouped large cartilaginous loose bodies with calcified shells which may be so great as to block practically all joint movement. They prefer the term synovial osteochondrosis to osteochondromatosis—the latter term was coined at a time when it was thought that these bodies were benign neoplasms.

Their material is based on 59 patients (68 sites of loose-body formation) analysed according to age, sex, profession, possible previous trauma, etc.—although these factors do not seem to have much significance. The material includes forty knees, nineteen elbows, seven hips, and two shoulders. The *x* ray illustrations are excellent and the authors make a plea for tomography in the localization of the synovial osteochondroses (and, incidentally, illustrate some beautiful examples). The chapter on pathology is illustrated entirely by photographs of sections of loose bodies. Since part of the authors' thesis is that these bodies are derived from a synovial metaplasia, it is surprising that the early synovial changes have not been described and illustrated in detail and natural sequence. In describing the course of the condition, the authors note that the osteocartilaginous bodies may grow and eventually coalesce or, uncommonly, may disappear spontaneously. There are 304 references and an over-extensive discussion of treatment which can be summarized as the question: Does one take the loose bodies out?, and the answer: In general, yes, with limited synovectomy. A. ST. J. DIXON

Laboratory Diagnostic Procedures in the Rheumatic Diseases. Edited by ALAN S. COHEN. 1967. Pp. xi + 363. Little, Brown and Company, Boston. (\$14.00).

This handy book, written by eleven experts, presents accounts of various laboratory procedures currently used in the investigation of rheumatic diseases. There are chapters on synovial fluid and the diagnosis of amyloidosis by A. S. Cohen, the erythrocyte sedimentation rate and C-reactive protein by E. E. Fischel, rheumatoid factors by C. L. Christian and E. S. Cathcart, anti-nuclear antibodies by G. J. Friou, streptococcal antibodies by G. H. Stollerman, serum uric acid by J. E. Seegmiller, serum enzymes

by C. M. Pearson and N. C. Kar, histopathology by N. S. Cooper, and connective tissue metabolism by A. J. Bollet.

There is a commendable degree of uniformity in the treatment and presentation of each subject, which makes the book easier to read and use than might otherwise have been the case. All the chapters are up to date, though surprisingly there is no mention of either the British or International Reference Preparations of rheumatoid arthritis serum.

Alternative procedures are described in considerable detail, and the beginner should have no difficulty in following the directions for setting up the various methods or selecting the one best suited to his requirements. Each section has a bibliography and there is also an index.

In addition to the bare technical recipes there is much interesting background data, and information on the clinical significance of the tests. This book supplements present rheumatological texts, and can be recommended to clinicians as well as laboratory workers. J. BALL

Delayed Hypersensitivity: Specific Cell-mediated Immunity. 1967. *British Medical Bulletin*, Vol. 23, No. 1. Pp. 104. British Council, London. (40s.)

With the current interest in the immunological aspects of rheumatic disorders, many rheumatologists may feel the necessity to increase their knowledge of basic immunology, especially of its more dramatic recent advances. An excellent way to achieve this is to read the recent publications of the *British Medical Bulletin*, especially the January number devoted to delayed hypersensitivity.

The 26 contributors are, with few exceptions, all working in Great Britain and are noted for their contributions to immunology and to the innumerable problems of delayed hypersensitivity. The probable implication of this type of sensitization in almost every type of pathological reaction, inflammatory as well as neoplastic, is well illustrated by the diversity of the subjects covered in this issue of the *Bulletin*. It can be recommended without reservation to anyone interested in the scientific basis of medicine. L. E. GLYNN