Contact: Margaret Fullalove, ARC Epidemiology Research Unit, Stopford Building, University of Manchester, Oxford Road, Manchester M13 9PT, United Kingdom. Tel: +44 (0)161 275 5040. Fax: +44 (0)161 275 5043.

- 16–19 Apr OMERACT 3: Outcome Measures in Arthritis Clinical Trials, Cairns, Australia
Contact: Prof Peter Brooks, Department of Medicine, St Vincent's Hospital, Darlinghurst, Sydney, NSW 2010, Australia. Tel: 02 361 2352. Fax: 02 361 2794. e-Mail: P.Brooks@unsw.edu.au.
- 21–26 Apr 8th APLAR Congress of Rheumatology, Melbourne
Closing date for Abstracts: 1 November 1995
Contact: 8th Asia Pacific League Against Rheumatism Congress, PO Box 29, Parkville, 3052 Victoria, Australia. Tel: 613 387 9955. Fax: 613 387 3120
- 8–10 May BSR XIIIth AGM, Brighton
Contact: British Society for Rheumatology, Anne Mansfield, Deputy Executive Secretary, 3 St Andrew's Place, London NW1 4LB. Tel: 071 224 3739. Fax: 071 224 0156
- 15–18 May 1st Central European Congress of Rheumatology, Piešťany, Slovak Republic.
Contact: 1st Central European Congress of Rheumatology, Congress Secretariat, Research Institute of Rheumatic Diseases, Nábřežie Ivana Krasku 4, SK-921 01 Piešťany, Slovak Republic. Fax: +42 838 21192.
- 10–11 Oct 7th International Conference on Behçet's Disease, Tunis
Contact: Dr M Hamza, Professor of Rheumatology, BP 45, El Menzah 1014, Tunisia. Fax: 216 1 569 283
- 18–22 Oct American College of Rheumatology 60th AGM, Orlando
Contact: American College of Rheumatology, Ron F Olejko, Director, Conferences and Meetings, 60 Executive Park South, NE, Suite 150, Atlanta, Georgia 30329, USA. Tel: 404 633 3777. Fax: 404 633 1870

Book reviews

Autoimmune disease: focus on Sjögren's syndrome (UCL Molecular Pathology Series). Eds D A Isenberg, A C Horsfall. (Pp 240; £55.00, US\$99.00) Oxford: BIOS Scientific Publishers Ltd, 1994. ISBN 1-872748-23-6.

Sjögren's syndrome has been attracting much attention from clinicians and investigators because of its diverse clinical features other than keratoconjunctivitis sicca and xerostomia, and because of its unsolved immunological pathogenesis. Clinical aspects of Sjögren's syndrome range from simple oral and ophthalmological problems to difficult malignant diseases such as lymphomas. Although it is well known that secondary Sjögren's syndrome, which is associated with other connective tissue diseases, shows many types of organ damage related to the underlying diseases, primary Sjögren's syndrome also can involve almost all organs in the body. More than 50% of patients with primary Sjögren's syndrome have such extraglandular disorders, caused by lymphocytic infiltration, autoantibodies, or hypergammaglobulinaemia. In the past 10 years, there has been an explosion of knowledge about the pathogenesis of autoimmune diseases. As recent advances in the immunological field have been so rapid and diverse, it is

not easy for clinicians to understand and keep up with new findings on all aspects of Sjögren's syndrome.

This is the first comprehensive book on Sjögren's syndrome since the one edited by Prof Norman Talal *et al* in 1987, and stems from the meeting on 14 December 1993, at the Medical School at University College London. It provides timely information for clinicians and investigators on new developments in the study of Sjögren's syndrome, although naturally slanted towards recent advances in molecular biology.

The work is in 12 parts that encompass clinical spectrum, molecular pathology, cell adhesion, experimental models, autoantibodies, the anti-Ro/SS-A antibody, glycosylation abnormalities, T cell receptor usage, immunogenetics, viruses, autoimmunity and malignancy, and therapy. The individual chapter topics are well selected and written by experts in the areas discussed. The authors have achieved overviews of what are rapidly developing areas of study. Most chapters are attractively organised and it is interesting to read the well structured reviews and authors' own findings. Two chapters (2 and 11) by leading investigators deal with one of the most intriguing aspects of Sjögren's syndrome—the emergence of lymphoproliferative disorders—and seem likely to be especially stimulating to the readers. In chapter 2, evidence from rearrangement of the heavy chain gene of immunoglobulins was presented for monoclonal clones in salivary glands in patients with Sjögren's syndrome. The importance of this kind of approach for the analysis of the early lymphoproliferative events in Sjögren's syndrome was emphasised. In chapter 4, the description of animal models of Sjögren's syndrome is comprehensive and detailed. The authors compared animal models with human Sjögren's syndrome in every aspect from histological findings to modern cytokines. Although animal models may not be ideal for the study of all aspects of human diseases, they are, at least, important to clarify the early events of disordered mechanisms in Sjögren's syndrome. The Ro(SS-A) and La(SS-B) proteins may play an important part in the disease aetiology and the antibodies to these are also important in the diagnosis of Sjögren's syndrome. In chapter 5, the authors emphasised the role of these proteins as cell surface membrane antigens and from the viewpoint of molecular mimicry of viral proteins. One recent advance in the knowledge of autoimmune disorders has been the elucidation of T cell involvement based on molecular medicine in the pathogenesis of the autoimmune mechanism. In chapter 8, accumulation of specific $\alpha\beta$ T cells in the autoimmune sites in lip biopsy specimens was shown and discussed from the standpoint of the superantigen and antigen driven mechanism of autoimmune reaction. In chapter 9, the HLA class II molecules and their role in presenting putative autoantigens were presented in detail. These molecules are universally important to the understanding of the early events in all autoimmune reactions. The authors of chapter 10 present a stimulating hypothesis based on their own findings on the mechanism of perpetuation of autoimmune reaction in Sjögren's syndrome, namely a cycle between interferon gamma, retroviral antigens, HLA class II molecules, and cytoplasmic La in the epithelial cells, and infiltrates of CD4 lymphocytes. The concept of mucosa associated lymphoid tissue (MALT) lymphoma was established by the authors of chapter 11, who present exciting evidence that there exist certain antigen (*Helicobacter pylori*) driven malignant lymphomas, and that some monoclonal lymphoproliferation can be traced back 20 years earlier than systemic malignant lymphomas.

This book is important to the expansion of knowledge, not only of Sjögren's syndrome, but also of other autoimmune diseases. I can certainly recommend it to those who are interested in the clinical and basic research aspects of Sjögren's syndrome and other autoimmune diseases.

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