Book reviews

Pathology of Rheumatic Diseases. By H. G. FASSBENDER, translated by G. LOEWI. 1975. Pp. 353, 444 figs. Springer, Berlin, Heidelberg, New York. (DM. 104)

'His book', writes Joseph Lee Hollander in the foreword to H. G. Fassbender's *Pathology of Rheumatic Diseases*, 'will be a much used addition to my library on arthritis.' Many rheumatologists and pathologists will share this view, and be glad to possess these handsomely produced results of 25 years' experience and careful study. Most of the space is occupied by 444 black and white illustrations, many of the photomicrographs being very fine (such as those showing palisading surrounding necrotic vessels) or unusual (such as the appearance of synovial histology after several hundred intra-articular injections).

Despite its comprehensive title, the book is nevertheless rather selective, limiting itself to accounts of rheumatic fever, rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, gout, chondrocalcinosis, osteoarthritis, and nonarticular rheumatism (with very short sections on the components of connective tissue, pathological reactions, and experimental arthritis). It is therefore in no way a general reference work and does not deal, for example, with the various forms of infective arthritis, Reiter's disease, disc degeneration, and spondylosis, or the inflammatory disorders of connective tissue such as lupus erythematosus. Moreover, Professor Fassbender, probably very wisely, confines himself to his morphological studies. His tool is the light microscope, and to a lesser extent the electron microscope. Although he does not hesitate to theorize about the relation of pathological findings to immunological events, no attempt is made to explore current concepts of immunopathology in any depth. Again, while accepting the usually-held view that the articular surface in rheumatoid arthritis is eroded by enzymatic activity originating from synovial tissue cells, he does not discuss this any further in histochemical terms.

The text, though relatively short, makes stimulating reading. The author emphasizes the distinctive features and pathogenesis of the various necrotic lesions occurring in rheumatoid arthritis and their independence from other types of inflammatory reaction found in that disease. He also maintains—but gives no further details or references—that there is an association between the proliferation of local connective tissue cells in rheumatoid synovium ('mesenchymoid transformation') and disease activity as indicated clinically and serologically; while infiltration with lymphocytes and plasma cells appears to be associated more with remission, an observation in line with those of Ken Muirden.

A number of very small errors will require correction in future editions. For example, constrictive pericarditis has been described in association with rheumatoid arthritis, and it is unlikely that A. V. Cornil wrote a paper entitled 'Still's disease' in 1864.

Professor Fassbender's approach is essentially historical, the frequent references to his former teacher and collaborator, Fritz Klinge, being especially a nice balance of respectful admiration and cautious criticism. Unlike

most writers in this country and the USA, he takes his references widely from European and other sources.

For the opportunity of reading the work of this distinguished German pathologist we must thank our own Gerald Loewi, whose skilful translation is both readable and clear, sometimes with quite felicitous phrases, as when the author graciously concedes that his own expression 'streptococcal granulomatosis' has not quite caught on, and so 'we will abandon terminological perfectionism in favour of the consensus term *rheumatic fever*'; or 'spinal ankylosis has been able to play the role of a fossil in the history of medicine'. Occasionally the words flow slightly less freely, owing no doubt to Dr. Loewi's punctilious care in interpreting the original. As Dr. Helen Waddell once wrote: 'A man cannot say "I will translate", any more than he can say "I will compose poetry"'. In this minor art, also, the wind blows where it lists.'

J. T. SCOTT

The Musculoskeletal System. By L. SOKOLOFF and J. H. BLAND. 1975. Pp. xiv + 161, illustrated, tabs. Williams and Wilkins, Baltimore (US\$12.50)

This slender volume is the fourth in the series 'Structure and Function in Disease' monographs, previous volumes dealing with the kidney, nervous system, and endocrine glands. Their object is 'to offer an integrated presentation of structure and function to all students of disease,' but it is directed principally to medical students and junior staff. The musculoskeletal system is particularly suitable for presentation of the interplay between structure and function and the authors make the most of the opportunities it affords.

The first chapter deals with the normal aspects of the connective tissues both as mechanical and living systems and immediately introduces one of the extremely valuable features of the book, namely the use of quantitative data not easily found elsewhere. For example, elastin stretches 20 to 30% before it tears, collagen only 1%; sugars form 4 to 10% of reticulin but only 0.5% of collagen. References, however, although given at the end of each chapter, are selected and not directly referred to in the body of the text. This is a pity, as one would like to know who established that in bone 'approximately 100 acres of crystallite surface, a small fraction of the total, are exposed to the circulating body fluids'.

The next three chapters deal briefly but adequately with bone, joints, and skeletal muscle, and again provide quantitative information of particular interest. For example, during squatting the pressure on the femoral patellar surface reaches 1000 pounds in a man weighing 150 lbs; and the estimated blood flow in human bone is 1400 ml/min. On the nonquantitative side good simple accounts are given of the chemical changes underlying muscular contraction, the structure of the neuromuscular junction, and the basis of electromyography.

Musculoskeletal disease is dealt with in an unusual but informative manner under the following headings:

painful muscle; weak muscle; disturbed skeletal growth; osteopenias; hyperostoses. Joint diseases are classified as due to infection, e.g. gonorrhoea, or as noninfectious and finally as noninflammatory, which for no clear reason is taken to include gout and pseudogout. Finally a short but useful chapter on backache completes the clinical section and five tables usefully summarize the laboratory data most frequently required in clinical practice.

As an introduction to rheumatology this book can be warmly recommended. It is clearly written, well illustrated, and contains the distilled experience of two leading rheumatologists embracing both the clinical and laboratory aspects of the subject.

L. E. GLYNN

An Introduction to Clinical Rheumatology. Edited by MICHAEL MASON and H. L. F. CURREY. 2nd ed., 1976. Pp. viii × 379, illustrated. Pitman Medical, Tunbridge Wells. (£7.00).

The first edition of this textbook was published in 1970 (reviewed in the *Annals* in January 1971) when there was a great dearth of short texts for undergraduates. Five years has seen a marked change in the situation but the demand for this text from the London Hospital is so great that a second edition, preserving the same format, with only relatively minor changes has proved necessary. The book is read by postgraduates as much as undergraduates, outside the United Kingdom more than in it. Editorial policy has taken note of this.

A clear, concise chapter on the applied anatomy of joints by Dr. B. Vernon-Roberts now opens the book, and there are cross references to it in the text. Many clinicians hold joint clinics with interested orthopaedic

surgeons, and junior staff should find the chapter by M. A. R. Freeman on operative surgery and that by B. A. Roper on bacterial infection most useful. It is helpful to have a short review of the psychiatric and psychological aspects of disease even though space is at a premium in a compact textbook. Selected references to review articles, editorials, and major articles are helpful. Rightly, as there are now several good primers of immunology, no attempt has been made to cover the immunological field. Nevertheless, mention has been made of the recent relevant findings in tissue typing and immunological research.

The book is masterly, balanced, and useful for undergraduates, membership candidates, and general medical readers, among others. Diseases are clearly documented and treatment succinctly presented. It might be argued that there is insufficient space to expand on clinical presentations and functional problems of disease in an undergraduate textbook, yet it can be helpful to the newcomer to the speciality to be given some idea of the pattern of joint involvement, the functional effects of this, that those with (say) osteoarthritis of the carpometacarpal joint of the thumb have difficulty in screwing, turning taps, door knobs, and such. Further, the physician prescribing physiotherapy in joint disease should be conversant with the range of treatments available and their specific values and should not leave all decisions to remedial staff. It is symptomatic of our sad ignorance of low back pain that while it makes up a large part of any clinician's practice, present knowledge can be accommodated on 7 pages of the text.

These criticisms are minor and are of current practice as much as of this excellent text. The second edition will undoubtedly prove as successful as its predecessor.

M. ANNE CHAMBERLAIN

Notes

New HLA Nomenclature

Under the auspices of the World Health Organization and the International Union of Immunological Societies, a nomenclature committee met in July 1975 and established for each histocompatibility antigen an alpha-numeric system of letters and numbers that includes a letter designation for the locus, followed by a number unique for each antigen.

Readers are referred to *Transplant Proc.*, 1976, 8, 109 (WHO-IUIS terminology committee nomenclature for factors of the HL-A system), or *Bull. World Health Organ.*, 1975, 52, 261 (Nomenclature for factors of the HLA system). A short explanatory leading article appears in the *New England Journal of Medicine*, 1976, 294, 1005.

Acknowledgment of manuscripts

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