Book reviews

Rheumatoid Arthritis and Related Conditions. Vol. 2. (Ed.) G. S. Panayi. Pp 196. £11.50. Churchill Livingstone: Edinburgh. 1978

This book is one of a series of annual research reviews which aim to provide an up-to-date source of research activity and a concise review of current thought in the fields they cover. It covers the literature quoted in *Index Medicus* from July 1976 to June 1977 inclusive. The publication date, in the second half of 1978, is perhaps a little later than is desirable if the series is to have maximum impact, but does mean that the book is more up to date than most.

Dr Panayi has been joined in the second edition by a number of colleagues who help him to avoid, in his own words, being 'drowned in a sea of reprints.' I counted 710 references, which means, after accounting for a certain amount of repetition and overlap, that 6 or 7 separate recent papers are being reviewed on every page. All this leads to difficult reading in some places, though many of the authors make a remarkably good job of turning their task into an easily digested account of current work. The chapter headings, about half on immunological and pathogenic aspects and half on clinical problems, reflect the amount of work going on in different areas. The more academic aspects are difficult for readers not engaged in active research but may help a clinician to understand what others are trying to do. The chapters on drug therapy, juvenile chronic arthritis, seronegative spondylarthritides and extra-articular manifestations will provide an up-to-date and comprehensive source of references on research work of more immediate relevance to practising clinicians.

The constraints set by a review of 1 year's work, with little space to expand on previous ideas, leaves the reader feeling himself to be immersed in an isolated pool of perhaps irrelevant data in places. The book is most successful when the authors express their own opinions and try to put the work in wider context. However, it is not meant to be read as a rheumatology text. What it does provide is a quick and easy means of access to current research for these actively involved in the field. As the series continues, and sequential editions appear on the bookshelf, its value will increase. I wish Dr Panayi success with future editions, and an even speedier publication deadline.

PAUL DIEPPE

Behcet's Disease. Excerpta Medica International Congress Series 467. Eds. N. Dilsen, M. Konice, and C. Ovül. Pp. 308. \$61.00. Excerpta Medica: Amsterdam. 1978.

This volume in the Excerpta Medica International Congress series is the Proceedings of an International Symposium on Behcet's Disease held in Istanbul in

September 1977, edited by the organisers. Fifty-seven separate articles are included, being the lectures and papers given during the symposium. The international nature of the symposium is revealed by the list of the 132 authors, the majority of whom were from Turkey or Japan, but with representation from Canada, France, Germany, Great Britain, Israel, Portugal, Tunisia, and the USA. The meeting was multidisciplinary, involving dermatologists, ophthalmologists, rheumatologists, oral pathologists, and immunologists.

Separate sessions on epidemiology, aetiology and pathology, clinical aspects, immunology, and treatment led to a comprehensive review of the current knowledge of this syndrome. The plethora of possible clinical manifestations are fully described, revealing again the apparent considerable variation in the incidence both of the syndrome itself and of its features in different parts of the world. The very large number of cases diagnosed in Japan and Turkey was again discussed. Gastrointestinal problems occur frequently in Japan but not in Turkey, the reverse being the case for pulmonary lesions. Familial incidence of the disease was reported from many centres. The evidence of immunological disturbances and a possible pathogenetic link with the possession of the HLA B5 antigen are described. Treatment with immunosuppressives, colchicine, and transfer factor were reported, with variable results, controlled trials not having been performed in either Japan or Turkey, where most cases are found.

The volume provides a good account of the state of knowledge of this unusual syndrome as presented in 1977, and certainly is a most useful reference work, especially since most of the contributors include a comprehensive bibliography.

COLIN G. BARNES

Immunodeficiency. World Health Organisation Technical Report Series No. 630. Pp. 80. Sw.fr. 7. WHO: Geneva. 1978.

This small booklet provides a rapid survey of immunodeficiency. However, it does not dispel the feeling of vagueness and of unsubstantiated statements which have confused this area for many years, and a more critical approach would have increased its value.

The booklet appears to be directed to practising clinicians, clinical pathologists, and research workers. Nevertheless, some important practical points are not made clearly or are incorrect. For instance, the important fact that patients with late-onset (common variable) hypogammaglobulinaemia usually respond well to 25–50 mg/kg per week of gammaglobulin, which should be continued for life, is not clearly stated. Moreover, the advice to treat with full doses of appropriate antibiotics after sensitivity testing of micro-organisms so as to select

narrow-spectrum drugs does not convey the fact that co-trimoxazole or amoxycillin are the drugs of choice in the treatment of most chest infections in patients with sex-linked or late-onset hypogammaglobulinaemia. The suggestion that pentamidine might be used in the prophylaxis of *Pneumocystis carinii* pneumonia is wrong. In fact, co-trimoxazole is the only drug suitable for prophylaxis and is the drug of choice for treatment.

The section on malignancy makes the important point that the raised incidence occurs mainly in patients with ataxia telangiectasia and Wiskott-Aldrich syndrome. British experience does not bear out the comment that 6-9% of patients with sex-linked hypogammaglobulinaemia develop tumours.

The old WHO term of 'common variable immunodeficiency' has now been changed to 'varied immunodeficiency.' The reviewer believes that most of the patients previously described under this heading should now be described under the term 'late-onset hypogammaglobulinaemia.' This refers to patients with hypogammaglobulinaemia of unknown aetiology affecting IgG and IgA and usually IgM, which starts after the first 2 years of life with a normal percentage of T cells by E rosetting.

Some of the conclusions are debatable. Gammaglobulin injections have been disappointing in the treatment of selective IgA deficiency. This removes much of the value in preparing gammaglobulin for injection which is free from IgA.

G. L. ASHERSON

Clinical Aspects of Neuroimmunology. By E. A. Neuwelt and W. Kemp Clarke. Pp. 277. Williams and Wilkins: Baltimore, Maryland. \$38.50. 1978.

The authors, who are from the department of neurosurgery of the University of Texas in Dallas, say in their preface that 'Since we are not currently aware of any other introductory text or reference book solely dealing with neuroimmunology, we hope this volume will be useful to its readers'. In fact 2 books entitled *Clinical Neuroimmunology* have been recently published in the United Kingdom. Interestingly enough all 3 are complementary, and surprisingly there is not much overlap. This particular one is selective. The largest chapter, of nearly 50 pages, as would be expected by the neurosurgical interest, is on tumour immunology. The book is well produced and should be read by serious students of the field.

F. CLIFFORD ROSE

Immunological Diseases. 3rd edn. Vols. 1 and 2. Ed. M. Samter. Pp. 778 and 770. \$35 per vol. Little, Brown: Mass, 1978.

This latest edition of *Immunological Diseases* comes in 2 volumes and is a comprehensive account of the theoretical and practical basis of clinical immunology. It is divided

into 5 sections, each edited by one of 4 distinguished workers in the field, the whole under the general editorship of Max Samter.

The 5 major sections are (i) basic immunology, (ii) nonatopic immunological disorders, (iii) atopic diseases, (iv) allergic reaction patterns in the skin, and (v) diseases with immunological features. This selection and presentation of clinical immunology is somewhat unusual, but then all large books on the subject are idiosyncratic in their approach owing to the basic difficulty of trying to fit clinical immunology into the existing organ-system-dominated perspective of medicine. While one may cavil at the ordering and segregation of chapters, most are models of clarity, with plentiful references and with well-drawn, appropriate figures and relevant tables—except for the few which surprisingly contain neither. Inevitably there is some repetition, but this seems unavoidable in a multi-author book of this size.

As with all such textbooks it starts with a sound account of basic immunology, in which is included not only the nature of the immune response, its control, and detection, but also the underlying mechanisms of some pathological responses. The chapters which explain antibody specificity, the regulation of antibody responses, and the major histocompatibility complex are particularly good; though the chapter on the detection and measurement of antigen-antibody reactions is less good than the section deserves, since it tries to be more complex and erudite than necessary. While it contains no reference to enzyme-linked antibody tests, it is surprising in these days of health and safety consciousness to see the P-K test described for use in man.

The second section is concerned with a mixture of diseases, including drug sensitivity, allogenic reactions, immunodeficiency, lymphoproliferative disorders, and the immunological aspects of infection. It contains much useful information not ordinarily found in immunological textbooks.

The third and fourth sections are both edited by Frank Austen and underline his particular interest in mediator pathology. The chapters on the allergic reaction patterns in the skin are particularly helpful to those trying to make sense of the varied clinical presentation of immunological problems. They should be compulsory reading for practising dermatologists.

The final section discusses a mixture of autoimmune diseases, including the so called 'connective tissue' diseases, haematological and endocrine diseases, and a variety of conditions with immunological features.

The fact that most of the clinical chapters contain only very short sections on treatment (with the notable exception of bronchial asthma) underlines the imbalance between theory and practice in clinical immunology today. It is regrettable that no attempt was made to draw the current attempts at therapeutic manipulations of the immune response into a single chapter, if only to analyse their shortcomings and provide authoritative guidance to clinicians looking for immunological straws. Nevertheless this is a very impressive book, which is highly recommended, and a 'must' for all departments with a serious interest in clinical immunology.

R. A. THOMPSON