

Book reviews

Equipment for the Disabled: Home Management. Eds. G. M. Cochrane, E. R. Wilshere. Pp. 58. £3.00. Nuffield Orthopaedic Centre: Oxford. 1981.

This soft-backed section of *Home Management* is remarkably good value for £3.00. The layout remains the same as in previous editions, and both the pictures and the text are clear and well laid out. The only illustration I found difficult was that of international textile care labelling, which was so small that those with poor eyesight would have difficulty in reading it.

This series of booklets should be in every rheumatology department. Physicians would not be wasting their time if they read the general introduction to each section when looking up a particular problem. The series is a mine of practical and useful information.

M. A. CHAMBERLAIN

Rheumatoid Arthritis: discussions in patient management. Ed. D. A. Gordon. Pp. 200. \$18.50. Medical Examination Publishing Co.: New York. 1981.

For the general practitioner or physician who wants an easily readable update on the management of rheumatoid arthritis this is an ideal volume. Throughout the book there is a refreshing problem-orientated approach to treatment, and I particularly liked the emphasis placed on the advantages of having a 'therapeutic team' within a rheumatic diseases unit.

The first 2 chapters on general assessment and management give a clear and logical approach to treatment as well as stressing the importance of remembering the psychological impact on the patient. There are several chapters on medical treatment which put forward a sensible approach to the use of antirheumatic drugs, although I do not personally agree that aspirin should still be regarded as the cornerstone of the basic treatment for rheumatoid arthritis. The chapter on orthopaedic management provides a realistic and critical summary of the surgical procedures currently available.

The book has been written by a group of rheumatologists from Toronto, and this perhaps explains the rather frequent repetitions in the text which otherwise would have been surprising in such a short book. There are also some rather odd discrepancies. For example, the recommended dosage schedule for pencillamine varies considerably in 2 separate chapters. These are only minor points and do not detract from the overall merits of the book, which should certainly find shelf space in most medical libraries.

MICHAEL WEBLEY

Histodiagnosis and Clinical Correlation of Rheumatoid and Other Synovitis. By Arnold Soren. Pp. 180. £24.00. Harper and Row: London. 1978.

That this excellent monograph should only now have come to review in the *Annals* reflects the slowness with which its importance to all students of synovial disease has come to be acknowledged in this country. *Histodiagnosis* has been widely reviewed in West Germany, Austria, and the United States. The advantage to the reviewer of this unfortunate delay is that it permits the book to be seen in the light of the 2 papers published by Soren and his colleagues^{1,2} recently. The papers embody the computer-monitored study described by Soren in the foreword to his monograph. It is essential that they be consulted before the full significance of the present work can be grasped.

The monograph reports the systematic retrospective study of 393 synovial specimens obtained during a 15-year span from 364 patients investigated in 3 of the hospitals within the care of the Rheumatic Diseases Study Group, New York University Medical Centre. 249 specimens were obtained from the knee joint, 81 from the hip; 197 of the 393 synovial samples were from patients with the clinical diagnosis of rheumatoid arthritis or its variants.

The principles adopted by the author in this most careful, classical, systematic investigation were to define 39 histopathological features that could be recorded on a simple 4-point scale. The analysis also took account of the phase and activity of certain synovial features. The first half of the volume represents a detailed, fully illustrated description of the 39 criteria. In each instance the number of examples of each histological feature among the 393 specimens is tabulated numerically, graded, and cross-tabulated in relation to other, relevant characteristics. Ten disease entities are defined and the frequency of each histological detail tabulated for each disease. Examples of disorders such as tuberculosis, sarcoidosis, and gout, in which, as the author says, the synovial lesions are 'generally regarded as histopathologically specific', are not included.

In the second half of the monograph each of the 10 disease entities is considered in detail and again fully and very clearly illustrated. Within each disease category the number of cases with each of the 39 histopathological features is tabulated, set against the duration of disease, and documented with other features such as the sedimentation rate and the clinical severity of joint disease.

The result of this painstaking investigation by light microscopy is to give for the first time a remarkably full picture of the classical histological abnormalities that may occur in a selected population of patients with rheumatic diseases coming to biopsy. There are limitations: the retrospective nature of the study has compelled the author to omit the use of thin plastic section techniques, of electron microscopy