immune deposits in arthrosic joints, crystal arthropathy, and the significance of the round femoral head in the arched acetabulum. Unfortunately those who would like to know what the experts thought about all this will be disappointed, as none of the discussion is reported.

J. BALL

Local Injection Therapy. EULAR Monograph No. 4. By A. St. J. Dixon and J. Graber. Pp. 175. No price given. EULAR Publishers: Basle. 1981.

This is the fourth of the EULAR Monograph Series which sets out (and achieves) to give a comprehensive review of local injection techniques in the field of rheumatology. Unlike the authors of most monographs on this subject these give a thumb-nail sketch of each condition before the technique of injection is described. There are copious line drawings, x-rays, and colour photographs; the text is clear and concise, and almost every conceivable use of local injection therapy is described.

I can thoroughly recommend this book to those who are not familiar with the wider scope of local injection therapy. Two questions remain: must this useful form of treatment go the way of so many other facets of medicine and become LIT? And (p. 147) did the trousers of one of the authors eventually fall down?

A. C. BOYLE

Major Problems in Internal Medicine. Vol. 21. **The Vacuities.** By T. R. Cupps and A. S. Fauci. Pp. 211. £20.75. W. B. Saunders: Philadelphia. 1981.

Classification of the various type of illness characterised by primary inflammation of blood vessels remains unsatisfactory and is still largely based on numerous descriptions of more or less well-defined clinical entities which have been published during the past century. One of the first of these,

the periarteritis nodosa of Kussmaul and Maier in 1866, is still recognised today as classical polyarteritis. Temporal arteritis and Takayasu's disease were described during the late years of the last century and the early years of this. Further attempts at definition included Wegener's granulomatosis in 1936, and the descriptions by Zeek in 1948 of hypersensitivity vasculitis and by Chung and Strauss in 1951 of allergic angiitis. More recent clinical developments have included the recognition of the types of vasculitis which can be found in association with inflammatory connective tissue disorders and malignant disease.

The interrelationships between these and other entities remain uncertain and their underlying causes for the most part quite obscure, except perhaps for the parts played by drugs and injections of foreign protein. However, the phenomena of the Arthus reaction and serum sickness have been followed by a vast amount of experimental work on the possible ways in which immune complexes can produce vascular damage and granulomatous reactions. The association between hepatitis B antigenaemia and polyarteritis nodosa is now well established but may be less common than originally thought.

The authors have been studying the clinical spectrum of vasculitis at the National Institutes of Health, Bethesda, over the past 15 years. They have done well to condense the results of their extensive experience and scholarship into a relatively short monograph (172 pages of text) in the series 'Major Problems in Internal Medicine.' As such, it cannot be considered a detailed reference work for this large and complex subject; the rheumatologist in particular will obtain scant information on the vasculitic syndromes which accompany rheumatoid arthritis and systemic lupus erythematosus from the short paragraphs allotted to these conditions, while vasculitis in association with scleroderma and dermatomyositis is mentioned but not described. However, the book is directed specifically at general practising physicians, who will find it useful and readable, its 778 references allowing further exploration into the field.

J. T. SCOTT