The only published analytical data from the Bath group describe a method which measures either free penicillamine and penicillin disulphide or total D-penicillamine after treatment with dithiothreitol. It is not clear from their recent report how the method has been modified in order to quantify mixed disulphides accurately. Previous work with direct determination of the mixed disulphides on amino acid analysers has shown that the major plasma metabolite is cysteine penicillamine disulphide, a result inconsistent with data derived from reference 4. We have also been unable to reduce penicillamine disulphide reproducibly using dithiothreitol, which may be due to difficulties either with the reduction or the artefactual chromatography. We have recently reviewed the various approaches to thiol analysis and do not consider that the method so far described by the Bath group provides a true description of the complex metabolism of D-penicillamine in plasma. To our knowledge only one published study approaches that ideal.

Department of Medicine, St Bartholomew’s Hospital Medical College, West Smithfield, London EC1A 7BE

References


Book reviews


This edition maintains the format of previous volumes in presenting reviews of current fields of interest in inflammation. Two chapters that are particularly well written and presented are those by Segal on superoxide generation, cytochrome b555, and chronic granulomatous disease, and the other by Flower outlining the experiments that led to the demonstration that steroids inhibit arachidonic acid oxidation products by inducing the release of a protein (Macrophin) with antiphospholipase activity; a theme that is later continued by a review of the effects of non-steroidal anti-inflammatory drugs on arachidonic acid metabolism. Of topical interest is the article by Dinarello on the induction of acute phase reactants by interleukin-1, while the chapter dealing with sex steroids and autoimmunity is predominantly concerned with SLE and animal models of this disease.

Two chapters dealing with methylation reactions and lipid alterations in platelet activation and another on neutrophil interactions with oral bacteria as a pathogenic mechanism in peridontal diseases will probably not generate an enthusiastic response from rheumatologists. The failure to define the frequently used term, clathrin, in the chapter on the ultrastructural aspects of phagocytosis is annoying, and the omission of the title of the last chapter on IgE-mediated release of inflammatory mediators from human basophils and mast cells in vitro and in vivo from the main contents’ page may be missed by the casual reader.

Overall, the book serves a useful role in supplying condensed reviews of specific developments in inflammation research which otherwise would only be obtainable by a tiresome search of the overpopulated scientific journals.

K A Brown


Between the large reference works on myology and the specialist monographs on investigative techniques and on individual disorders of the muscle and neuromuscular junction there is a lack of a good up to date introductory text for the clinician. This short book by the Director of the EMG Laboratory at the National Naval Medical Centre, Bethesda, aims to meet this need and, in this, it is largely successful.

The first and second chapters are devoted to a description of the symptoms and signs of muscle and neuromuscular disease and diagnostic investigations respectively, and the remaining nine chapters cover the spectrum of muscle disease in a workmanlike and readable fashion. In general the description of investigative techniques is more comprehensive and critical than the sections devoted to natural history and management, and rheumatologists turning to the sections on polymyositis and steroid myopathy are unlikely to learn anything new. The main value of the book to them, however, will be to provide a useful reminder that there are many other diseases of muscle some very recently described, which may come their way from time to time. To the rheumatologist in training the book will serve as a reliable guide to the clinical assessment and investigation of muscle disease and an introduction to the literature, containing a good selection of recent (up to 1983) references.

John R. Sewell