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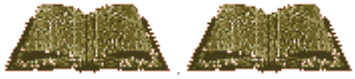
# Book Reviews: Technical Books Section



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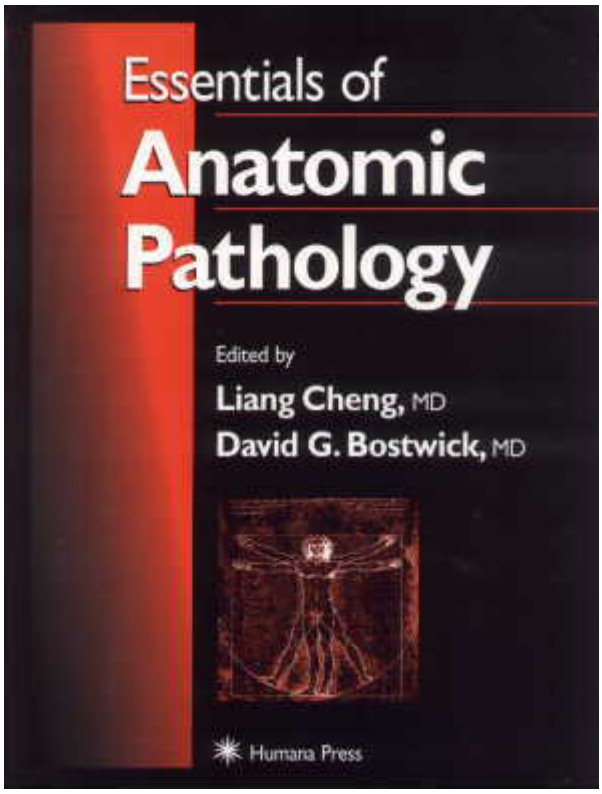
## A NEW BOOK ON ANATOMIC PATHOLOGY

Essentials of Anatomic Pathology, 1st Edition, *Edited by* Liang Cheng, MD and David G. Bostwick, MD. Paperback, 8.5" x 11"
Humana Press Inc., 999 Riverview Drive, Suite 208, Totowa, New Jersey 07512; 920 pages: ISBN: 1-58829-132-4 (Hardback); 1-58829-118-9 (Paperback): Published 2nd December 2001; Price: $125.00 (HB), $ 99.00 (PB)




Drawing on the expertise of an impressive line up of no less than 51 contributors, all North American, the authors Chang and Bostwick seemingly attempt the impossible but have nevertheless succeeded in producing a quick reference manual of Anatomic Pathology. This is no mean task!

As the title implies and the preface spells out, this book is only meant to be a quick reference work and not a major specialist work. However, to call it a "quick reference" work is to do an injustice as this conjures up an image of a standard medical students' type-carry-everywhere-pocket-reference book. This it is not! This book is a concisely written heavy-duty manual with a broad and extensive spectrum, covering all aspects of Anatomical Pathology and (surprisingly!) including Forensic Pathology (but then the Americans have always given due credit to Forensic Pathology unlike here in Britain!) The actual number of pages is difficult to calculate because of the chapter-based page numbering system but the size of the book is best imagined when described as a comfortably large-format chunky text.

The book is primarily aimed at pathologists in training. In this book the trainee would find a quick reference manual with comprehensive coverage of all aspects of Anatomical Pathology combined with a simple layout. To the trainee this therefore is an invaluable and indispensable aid for last minute panic induced study. Practising pathologists across the whole spectrum from Histopathologists through Forensic Pathologists to Microbiologists will find it useful when navigating unfamiliar or long-forgotten waters after years of sub-specialisation. Certainly, the reviewer will be using this book as a quick reference manual when writing out Medico-Legal and autopsy reports on not-so- straightforward Forensic Autopsies rather than spend time in a medical library or on Internet searches!

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In a way this book is timely. Pathology seems to get more complicated day by day especially in the eyes of those of us who specialised many decades ago. For example, there has been a veritable explosion of new tissue markers and what the editors describe as "innovative" immunohistochemical techniques. Whereas a mere twenty years or so ago (at least in Britain), only a handful of research orientated laboratories routinely employed any immunohistochemical methods, today one would find that every District General Hospital pathology laboratory is capable of running a battery of immuno-stains. One of the stated aims of this book is that these rapidly advancing diagnostic methods are concisely reviewed by a distinguished panel of experts their aim of course being to produce a readily accessible guide.

***"...In a way this book is timely. Pathology seems to get more complicated day by day especially in the eyes of those of us who specialised many decades ago. Twenty years ago very few pathologists routinely employed any immunohistochemical methods, but today every District General Hospital pathology laboratory is capable of running a battery of immuno-stains. These rapidly advancing diagnostic methods are concisely reviewed in this book..."***

The editors recommend the book for residents preparing for Anatomical Pathology Board Examinations, the American equivalent of The Royal College of Pathologists' examination here in Britain. The book fulfils this function admirably! On perusing the book this reviewer was drawn back nostalgically to his own days of examinations many years ago and wished that this book was around then! As to its recommended function as a reference manual for daily practice, its appeal is probably limited to trainees as the specialist is likely to have most of the information of this nature pertaining to his sub-speciality at his fingertips as well as having access to the more specialised textbooks covering specific organ systems or specific disease processes.

For instance as a Forensic Pathologist (but with an interest in Histopathology) this reviewer was immediately drawn to the Forensic Pathology section which initially proved to be a disappointment until he read the rest of the chapters especially the chapters on Molecular Diagnostic Pathology and Human Genetic Disorders. These latter sections are of course unfamiliar territory as far as this reviewer is concerned and no doubt that includes the vast majority of Forensic Pathologists. Needless to say that these sections considerably improved one's knowledge of Molecular Pathology and Human Genetics in a space of a few minutes!

On going back to the Forensic Pathology section a second time the reviewer read the section on Sudden Infant Death Syndrome in a highly critical manner quickly skimming past the familiar findings (or lack thereof!), the familiar culprits (maternal smoking, drugs), the supposed pathogenesis, the arguments and the obscure syndromes associated with SIDS. Then he came across what he was looking for: The possibility of homicide!

Still on matters forensic the inclusion of the Shaken Baby Syndrome was also most welcome as was the Neuroleptic Malignant Syndrome.

The reviewer was pleased to note the mention of Paradoxical Undressing in hypothermia, a phenomenon that comes as a total surprise to non-Forensic Pathologists. However, in the section on asphyxia there was disappointingly no mention of Restraint Asphyxia although Mechanical Asphyxia was mentioned (including asphyxia resulting from constriction by snakes!)

Moving away from Forensic Pathology the reviewer was attracted to the section on Gynaecological Pathology and Cytopathology having spent his trainee days reporting seemingly endless and seemingly similar appearing endometrial biopsies and cervical biopsies and seemingly monotonous cytological preparations! Again one wished that this book had been around twenty years ago!

**QUICK NOTES**

Some major highlights of *Essentials of Anatomic Pathology* at a glance:

- Concise review of all aspects of general pathology in a user-friendly format
- Organization by bodily organ facilititates accurate and rapid interpretation and diagnosis
- Goldmine of valuable and useful information needed in daily clinical practice
- Overview of anatomic pathology for pathologists-in-training and practicing pathologists
- A practical guide emphasizing differential diagnosis and diagnostic criteria

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The book is laid out in two parts and follows the traditional tried-and-tested pattern of pathology teaching: General Pathology followed by Systemic Pathology.

Part 1 covers General Anatomic Pathology and includes Molecular Pathology, Human Genetic Disorders, Basic Microbiology, Diagnostic Electron Microscopy, Forensic Pathology and Cytopathology. These sections lay the general "ground rules" of the practice of pathology and it is refreshing to note that Microbiology still finds a place in textbooks aimed at trainees in Anatomical Pathology as sadly, at least in Britain, the new generation of Anatomical Pathologists (Histopathologists) receive no training in Microbiology (or for that matter in Haematology or Chemical Pathology). It is also refreshing to find Forensic Pathology included in General Pathology.

The second part of the book follows the well-established and traditional organ system type classification but somewhat perversely starts off with the Lympho-reticular system instead of the more familiar Cardio-Vascular system. However, on second thoughts this seems to be a natural and logical transition from Cytopathology (Chapter 6) to Haematopathology.

What used to be described as Haematopathology is covered here in two chapters: Chapter 7 Lymph Node and Spleen and Chapter 8 Bone Marrow.

In Lympho-reticular pathology one is rewarded with old favourites such as Cat-Scratch Fever and relatively new entities such as MALT Lymphomas. Lymphomas were never a favourite with the reviewer who had to struggle through several different classifications during his formative period but the logical layout and the references to the antiquated Rappaport Classification was rather heart warming!

EXCERPTS

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One interesting feature of this book is exposition of information in easily assimilable points. Pathologists-in-training would find this format particularly useful. Some excerpts from page 5-18.

Shaken Baby Syndrome (SBS)

- Major cause of fatal child abuse deaths due to head injury
- Mortality rate = 20-25%
- Most children <1 year of age and almost all cases <2 years
- The major problem is diffuse axonal injury following stretching and tearing of axons during vigorous shaking
- Vigorous shaking is shaking that occurs 2-3 cycles per second

*Clinical*:

- Unconsciousness
- Coma
- Seizures
- Respiratory depression
- Bradycardia
- Xanthochromic spinal fluid
- Intracranial Hemorrhage
- Other injuries of child abuse are often present

*Autopsy*:

- Cerebral Edema
- Subdural and/or subarachnoid hemorrhages
- Retinal hemorrhages are seen in 75-90% of cases
- Evidence of head impact or skull fractures need not be present
- Detachment of retina may occur
- Neck injuries can be present

*Microscopic*:

- Diffuse axonal injury
- Cerebral Edema

*Associated Injuries*:

- Rib fractures can be present laterally or posteriorly just lateral to the spine, caused by squeezing the child's chest during shaking
- Victims of shaken baby syndrome with a prolonged survival interval develop:
    - Cerebral fluid collections
    - Cerebral atrophy
    - Cystic encephaolomalacia

- Cerebral infarcts due to hypoxic ischemic damage related to cerebral edema and intracranial hemorrhage

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Thereafter one is on reasonably familiar and logical ground: Dermatopathology followed by Neuropathology. Dermatopathology sets off in an entirely new direction. First the Epithelial Neoplasms followed by Dermatofibromas, vascular tumours and the Melanocytic lesions. Café au Lait spots, freckles, B-K moles, Spitz naevi and Malignant Melanoma are all there.

In the traditional texts Dermatopathology starts off with the so-called bullous skin diseases or inflammatory skin diseases. The skin disorders traditionally referred to as Inflammatory Skin Disorders, the Bullous Skin Disorders, the Vasculitides and other assorted entities such as Lichen Planus and Lupus Erythematosus now appear under the more logical and aetiologically-sound heading of Immunodermatopathology.

In the section on Neuropathology, once again one is on familiar ground in that the sections follow the usual logical and familiar sequence from the general reaction of the nervous system to injury, followed by neoplasms, through trauma, ischaemia, degenerative disorders, inflammations, paediatric neuropathology, toxic and metabolic disorders and finally ending with pituitary (suprasellar/sellar) disorders. In the latter group of disorders although Histiocytosis X was mentioned, the reviewer was very slightly disappointed (for nostalgic reasons!) not to find a reference to the rather exotic sounding all-time triple-barrelled favourite syndrome of medical students: Hand-Schuller-Christian Disease!

The logical follow-on to pituitary disorders is of course other Endocrine disorders, which is the next chapter. There is of course no repetition of Pituitary disorders.

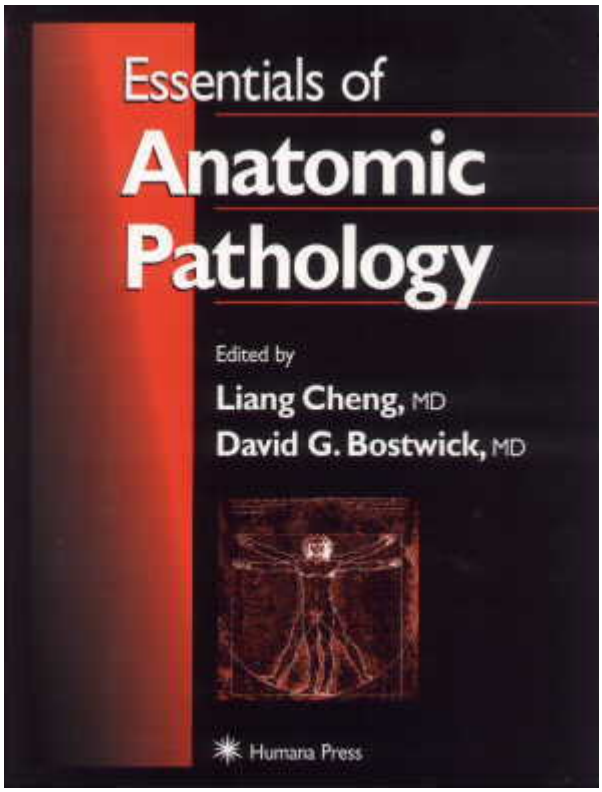
With Cardio-Vascular Pathology one is comfortably home and again on familiar grounds. Sticking to the time-tested formula the chapter opens with congenital heart disease including another medical student favourite: Fallot's Tetralogy! There then follows Ischaemic Heart Disease and then the rarities: Cardiac Neoplasms.

Angiopathology follows seamlessly and then onto Pulmonary Pathology. All good traditional stuff and traditional layout!

Of the remaining organ systems the chapter on Non-Neoplastic Diseases of the Kidney is one of the simplest and easiest accounts that this reviewer has ever read. One remembers the dark days of struggling with various differing accounts of glomerulonephritis finally ending up in a total muddle and fervently hoping that glomerulonephritis won't be a major feature at the examination!

The chapter on Breast Pathology is a work of art. Short and sweet! This is a quite remarkable achievement considering the recent rapid advances in the diagnosis and treatment of breast disease and the major breast screening programmes initiated in most countries and the resultant apparent complicated nomenclature. It was with a relief that the reviewer noted that the nomenclature of breast lesions appeared to have been standardised on both sides of the Atlantic! Many years ago confusion prevailed. Gynaecological Pathology precedes Renal Pathology and Gastro-Intestinal Pathology brings up the rear. This is a rather unconventional ending considering that Gastro-Intestinal Pathology took off following the discovery of Helicobacter and gastric biopsies now form a major part of the workload of the average General Histopathologists. Perhaps this is a geographical quirk and one hopes gastro-intestinal problems are not a major concern on

the other side of the Atlantic! But then the editors never say that the chapters were laid out in order of importance. This is a reference manual. Not a book where one starts off on page one! One is expected to thumb it, flip the pages and read what one wants to. Not follow a predetermined sequence! It is akin to consulting a dictionary. What does one make of this book? The Editors emphasise that this tome is not a substitute for those lavishly illustrated, comprehensive, multi-contributor, multi-volume, heavy-duty doorstop type book edited by a famous-name Professor! Clearly it is not and makes no pretensions whatsoever. In fact as far as illustrations go there is not a single illustration in this book (except on the cover!) There is not even a single undergraduate type line drawing anywhere in the text! In a book of this nature are illustrations a necessity? The answer is not. The snappy text registers in one's mind almost in the manner a good illustration will (and a bad illustration wont!)




***"...Priced at $99.00 for the paperback version the book is good value for money and should be affordable. Big departments of pathology with a number of trainees should invest in the hardback version. .."***

The layout of the book in itself acts as an index and there is therefore no index at the end of the book. There is a helpful Table of Contents at the start of each chapter. However, colour coding or some sort of a margin based coding system would have been helpful. Incidentally, the printing is entirely in black. Any form of colour printing whilst making the book visually attractive would have had the effect of pushing up the price. Nevertheless, if this book proves to be popular, and there is no reason why it shouldn't, one hopes that the second printing would make use of colour to emphasise text.

At the end of each chapter the authors provide a helpful list of suggested reading. This is a helpful inclusion. All the references appear up to date except where relatively ancient but landmark references have been quoted.

In spite of the large number of contributors with no doubt differing styles of writing, the editors have wielded their editorial hand in such a manner as to smooth out the style of writing. Different chapters merge seamlessly and are a delight to read. The lay out of each chapter conforms to a common predetermined style. No individual signature is detectable and for all intents and purposes appears to be a single author work. One can only imagine the logistical nightmare involved in editing and standardising a work of this magnitude.

Priced at $99.00 for the paperback version the book is good value for money and should be affordable. Big departments of pathology with a number of trainees should invest in the hardback version.



*-Gyan Fernando*
*Gyan Fernando carried out his first autopsy in his native Sri Lanka. In 1978 he moved to Britain and has worked across the whole length of Britain from London through Manchester to Scotland. He now lives in rural Devon.*

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