Figure Glans penis protruding through defect in foreskin.

anatomical abnormality which had not been present on his last clinic attendance twelve months previously when treated for gonorrhoea. He denied trauma or attempted circumcision and accepted a surgical referral for definitive circumcision.

Many sub-preputial ulcers involving the coronal sulcus are seen in uncircumcised Zulu men and healing may follow a protracted course despite correct treatment. In this case serological testing for syphilis was negative and granuloma inguinale or chancroid were the most likely original infections. Tissue contraction during healing and trauma from subsequent intercourse probably accounted for the appearances found. The potential risk of HIV transmission to such patients might be reduced by making circumcision more readily available, thereby improving hygiene and facilitating speedier healing of ulcers.

This patient declined a test for HIV antibodies.

N O'FARRELL
King Edward VIII Hospital,
Congella,
Durban,
South Africa

BOOK REVIEWS

Opportunistic infections in patients with the acquired immunodeficiency syndrome. Edited by Gifford Leoung and John Mills. (US\$107.) New York: Marcel Dekker 1989.

I can think of no better recommendation for this book than the fact that since it arrived on my desk by courtesy of Genitourinary Medicine I have genuinely read it with interest and referred to it a number of times. Had I not been asked to review it I almost certainly would have ignored it – like everyone else tired of the plethora of such books published in the last few years. This one really does have some distinguishing attributes, however.

Its senior editor, John Mills, is the Professor of Medicine at the University of California and is also Chairman of the Opportunistic Infection Committee of the National AIDS Clinical Trials Group. He has managed to select as his contributors authors who are well known for being both clinicians with "hands on" experience as well as for performing original work in their field. There are few in the list of contributors who are not "household names".

The book is divided into four sections. The first, a general introduction, reviews (very) briefly the epidemiology, virology and immunology of HIV infection, including a chapter by Suzanne Crow on the clinical and laboratory features of "acute" HIV infection. The second section outlines the evaluation of certain clinical problems eg. neurological disease, skin and oral manifestations and the care of children with HIV infection. Important omissions here (although partly covered elsewhere) are respiratory and gastrointestinal symptoms. Similarly although the chapter on neurological disease in the Acquired Immunodeficiency Syndrome by Levy and Bredesen covers in some detail the investigation of "hard" neurological symptoms and signs, nowhere in the book are the psychological and psychiatric manifestations of opportunistic infection covered – a common problem in clinical practice.

The third section is the real strength of the book, where the major opportunistic infections seen in AIDS are grouped by aetiological agent. (It is interesting that *Pneumocystis carinii* is still included as a protozoa despite recent claims that phylogenetically it is actually a fungus). Some of the more unusual clinical problems are included here such as the endemic mycoses (*Histoplasma capsulatum*, *Blastomyces dermatitidis*, *Coccidioides immitis* and *Candida albicans*). Each chapter is not only a very complete review of the literature to the present time, well and clearly referenced, but provides sound clinical advice, indicating where more research needs to be done and in which areas this is progressing.

The fourth and last section of the book covers the optimal use of diagnostic laboratories for the evaluation of patients with AIDS, including a useful brief review of the various methods of detecting and confirming the presence of HIV itself.

Any physician who cares for AIDS patients, especially one who does not have the time to plough through the innumerable publications on the subject, will find this an accurate informative up-to-date reference book. Its only drawback, for those not fortunate enough to be asked to review it, is its cost (\$107). The text is, however, clearly and luxuriously printed on high quality paper with clear diagrams and both colour and black and white prints (some particularly good colour prints of the oral manifestations of HIV infection).

I would recommend that you reserve a copy at your nearest library!

SM FORSTER

Herpes simplex virus by Adrian Mindel. (Pp 164; DM 150) Heidelberg, Springer-Verlag. ISBN 3-540-19549-1

Dr Mindel states in the preface to this book that it is written from a clinical perspective and that consequently clinical sections dominate whilst those dealing with virology, immunology, epidemiology, pathology and pathogenesis are "relatively brief". The aim of the book he tells us, is to bring together all these various aspects of herpetic disease. In this he succeeds brilliantly.

The book is a model of readability and brevity (attributes not often possessed by medical authors) whilst

1 Maiti H, Haye KR. Mystery of the holey prepuce: delayed podophyllin skin damage? *Genitourin Med* 1989;65:201.