Book reviews

Clinics in Rheumatic Diseases, Volume 3, No. 2. Immunogenetics and Rheumatic Disease. Edited by D. S. B. Inglis (Guest Editor: D. Brewerton), 1977. 381 pp, 42 tables, 12 figs. Saunders, Eastbourne (Price £8.25).

The discovery that some human leucocyte antigens (HLA) act as genetic markers for a number of rheumatic disorders has been described as perhaps the most significant advance in medicine during the last 25 years. Further study has shown that a wide range of diseases spanning almost the whole of medicine has been found to be involved in varying degrees with the HLA system. Despite the fact that knowledge of the association between immunogenetics and rheumatic disease is only five years old, information is accumulating rapidly and as the editor of this book (himself one of the team which made the first observations associating ankylosing spondylitis with HLA B27) states in his forward—'leading authorities have asked to review existing knowledge of the subject and to dwell on the many current problems and uncertainties'. This they have done in a widely ranging, detailed, and readable series of articles which manage to be as up to date as is possible in a book.

Excellent accounts are given of the major histocompatibility complex in man, immune responsiveness, and the relationship between rheumatic disease and the major histocompatibility complex. Although these sections will include much that is new to the average clinician they repay careful study.

Perhaps of most interest to the venereologist will be those sections dealing with ankylosing spondylitis, uveitis, Reiter's disease, and psoriatic arthropathy. In the section on ankylosing spondylitis intriguing information is given about the surprising findings obtained using HLA B27 detection as an 'epidemiological tool' in asymptomatic randomly selected populations. These preliminary findings showed a 20-30% prevalence of sacroiliitis and/or spondylitis which was equally apparent in both sexes. Previous studies had suggested prevalence figures of only 1-2% with a heavy male preponderance. A good account of the potential mechanisms of the association of B27 and spondylitis is given.

The section dealing with reactive arthritis, Reiter's disease, and psoriatic

arthropathy attempts to delineate the overlapping relationships between these conditions and reviews much interesting recent work. The distinction between 'reactive arthritis' and Reiter's disease is one which the experienced venereologist will find hard to understand (a point the authors accept). Study of the HLA systems and their association with these disorders has so far further established their inter-relationship but has done little to clarify it.

The problem of anterior uveitis, its clinical associations, epidemiology, immunology and investigation are well reviewed and there is a particularly useful bibliography.

In short, a valuable and readable book although perhaps rather expensive.

J. K. Oates

Gonorrhoea. Volume 9, Major Problems in Dermatology Series. R. S. Morton (Series Editor: A. Rook), 1977. Pp. 292, 24 tables, 56 figs. Saunders, Eastbourne (£12.00).

This beautifully produced monograph is the first comprehensive work on gonorrhoea to appear for many years. It thus bids to become a definitive reference on the subject, and in this role there can be no doubt of its success. It has been compiled with great thoroughness and accuracy, and the practical skill and long experience of the author are at all times apparent in the text. The historical chapter is the most detailed I have read, and provides a salutary reminder of the simplicity and potential effectiveness of treatment today. Laboratory aspects are condensed with expertise into a synopsis which embraces all, or almost all, important research work, most of which has appeared relatively recently. Unfortunately, local immunity receives only a single reference and one five-line paragraph (p. 52), which reflects neither the importance of the subject nor the amount of published work. Detailed histopathological descriptions appear in the chapters on gonorrhoea in both men and women, but without any attribution to the source. If it is Harkness, then the origin of much of his information is open to criticism on the grounds that it was not obtained from normal healthy young adults. The omission of an electron-micrograph of the gonococcus *in vivo* is unfortunate in the light of recent demon-

stration of morphological variations between this and the laboratory form of Novotny and others.

A few minor points also merit comment in an ambitious volume such as this. Peritonitis is surely more common in gonorrhoea than in NSU, rather than the reverse (p. 77). The description of the formation of cervical erosion (p. 106) is not in accord with currently accepted observations that stratified squamous epithelium is not actually replaced by columnar epithelium, but rather that the latter is exposed by hyperplasia and ectropion. In the chapter on prepubertal gonorrhoea, ophthalmia is illustrated by three pictures of chlamydial infection, two of which are colpophotographs, without real justification. Many would disagree that the urine test is normal within 72 hours of treatment of gonorrhoea in men (p. 149). The association between semen swallowing and hepatitis B antigen in the blood was subsequently shown to be false by the group who originally proposed it (p. 159). Transfer of infection by anal-rectal contact defies my imagination (also p. 159).

Dr Morton is again at his best in the chapter on control of gonorrhoea: the section on aims and methods is a masterpiece of condensation that could serve to guide everyone concerned with contact tracing. Both he and his contact tracing service are to be congratulated on examining no less than 78% of female contacts sought in 1976 (p. 247), a figure only dreamed of in London. This, and the monograph on gonorrhoea, bear witness to a distinguished career.

B. Evans

Nongonococcal Urethritis and Related Infections. Edited by D. Hobson and K. K. Holmes, 1977. Pp. 391. American Society for Microbiology, Washington DC (\$14.00).

Although it is not clear from the title, this is a report of the proceedings of a symposium held in the USA in April 1976. The first feature that strikes the reader is the large number of contributors and participants from the USA and Europe, and the variety of disciplines represented including genitourinary physicians, ophthalmologists, epidemiologists, pediatricians, veterinarians, and micro-biologists.

Some of these groups rarely, if ever, meet and to gather so many together is a remarkable achievement. This large, broad-based gathering of specialists also reflects the widespread interest in *Chlamydia* that has developed in the last few years.

Most of the contributions are of a high standard. At the end of each section is a useful summary of the original contributions and discussion. The subjects covered included the role of *Chlamydia trachomatis* and, less thoroughly explored, of *Ureaplasma urealyticum* in the aetiology of nongonococcal urethritis, and the diagnosis and treatment of this condition. Related genital infections, including epididymitis, prostatitis and pelvic infection, are also considered. A useful section to laboratory workers concerns the biology of *Chlamydia* and includes interesting studies of inoculation of experimental animals. Of more value to clinicians is a report from the Institute of Ophthalmology in London concerning antibiotic sensitivity. Rifampicin showed the greatest degree of activity against *C. trachomatis* sero type D, when tested in a cell culture system. Oxytetracycline, doxycycline, and aminocycline were next followed by erythromycin, spiramycin, and sulphamethoxazole. In another paper from Liverpool, it is shown that the effect of penicillin is complex, behaving as a chlamydiostatic rather than a chlamydiacidal agent. The laboratory methods for the diagnosis of *C. trachomatis* infections are considered in some detail and the final section is devoted to ureaplasmas.

One important contribution from Chicago concerns findings in neonates with *C. trachomatis*-positive conjunctivitis of *Chlamydia* in nasopharyngeal secretions. A small series is also reported in which a distinctive form of pneumonia was found. It is suggested that *C. trachomatis* infection commonly involves the lower respiratory tract. This form of pneumonia responded satisfactorily to treatment and apparently some cases recovered without any treatment. This is an important development in our knowledge of the clinical effects of *Chlamydia*.

A short review cannot do justice to this important book which contains 47 papers. It should be available to all those interested in the problems presented by nongonococcal urethritis, related infections, and *C. trachomatis*.

R. N. Thin

posium held 21-25 September 1976 in Vienna. 1977. Pp. 80. WHO, Copenhagen (price not quoted).

This report provides a useful summary of features of the British method of combating sexually transmitted diseases (STDs) and as such may be regarded as superfluous on the bookshelf of the genitourinary physician in the United Kingdom.

The importance of screening by general practitioners is emphasised, but the possession of the necessary equipment (for example darkfield microscope) is hardly likely to endear the process to many non-specialists, and the use of general screening campaigns for gonorrhoea is of dubious value in areas in which adequate STD clinics already exist or where there is a low level of STD in the community.

The authors come down heavily on the side of 'epidemiological treatment'—a term they consider 'less imprecise' (not unlike the diagnoses thus made) than 'rapid simultaneous treatment'. This is advocated for patients with an STD but not if they have non-specific urethritis (NSU), in which case, as some conference members said, syphilis or gonorrhoea might be masked. This is an interesting exception since most clinics are unable to diagnose non-specific genital infection in female partners of men with NSU due to lack of rapid cultural facilities for *Chlamydia* and *Mycoplasma*. The question of contact tracing in partners of those patients so treated 'simultaneously' is carefully avoided.

The report contains two useful, concise appendices on screening tests for STD and contact tracing. Page 25 was blank in the volume provided for review. The book is available on demand from the WHO Regional Office for Europe, Copenhagen.

P. D. Simmons

Gonorrhoea: Epidemiology and Pathogenesis. Proceedings of Symposium No. 2 held by the Federation of European Microbiological Societies on 15 and 16 November 1976. Edited by F. A. Skinner, P. D. Walker, and H. Smith, 1977. Pp. 255, 27 tables, 91 figs. Academic Press. London (£11.00)

This book records the proceedings of a symposium organised by the Society for Applied Bacteriology and the Society for General Microbiology on behalf of the Federation of European Microbiological Societies.

The subject is gonorrhoea. The research topics covered are wide; they include

the epidemiology and pathology of gonococcal infections, the problems of immunology, phagocytosis, and the attachment of gonococci to mucous surfaces. There is also a review of the treatment of gonorrhoea with antibiotics and the resistance of gonococci to them. These are all provided by experts in this field from Europe and America. All the papers are eminently readable and are enhanced by the summaries at the end of each one.

Gonorrhoea poses many problems and research has been launched in many directions. Although the answers to most questions have not been obtained, these papers record the direction of the investigations now in progress.

The symposium begins with a review of recent epidemiological studies in Sweden and draws attention to the importance of asymptomatic infection in male patients as well as in the female. The authors emphasise the increasing incidence of gonorrhoea in the pharynx and rectum and the recrudescence of gonococcal septicaemia in the last few years.

Diagnostic methods of culture and serology are then discussed. In recent times there has been an increasing interest in the use of serological methods in the detection of gonorrhoea. These methods are well reviewed and their value assessed.

Problems of typing and immunochemistry are reviewed next. The antigenic activity that can be ascribed to the major anatomical structures of the organism are defined and their complexity is discussed.

The interaction of gonococci with host cells and their resistance to phagocytosis are described and their significance revealed. *In vivo* and *in vitro* studies of gonococci are compared and contrasted. It is clear the gonococci grown *in vivo* are different morphologically, bacteriologically, and antigenically from gonococci grown *in vitro*. Efforts to bridge this gap are discussed.

The final chapters deal with treatment. One with the activity of trimethoprim and sulphamethoxazole against gonococci and the other with questions of resistance to antibiotics. The latter is of broad general interest.

This book is primarily of interest to the microbiologist but its wide coverage should make it worth reading for others interested in the developing aspects of sexually transmitted diseases.

H. S. K. Singha

The Surveillance and Control of Sexually Transmitted Diseases. Report of a sym-