

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 chlamydicidal 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

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

**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