Book reviews


This is a welcome addition to the Current topics in infection series. The editors are, respectively, professor of laboratory medicine and assistant clinical professor of laboratory medicine at the University of California, San Francisco. The stated goal of the book is to review in a complete and concise manner the current knowledge of Neisseria gonorrhoeae and how it causes disease. This is tackled in four parts.

Part I deals with the classification and biology of N gonorrhoeae. The first chapter on taxonomy, colony phenotypes, and disease is short (five pages) and includes a rather confusing table on the terminology of N gonorrhoeae colony morphology. Such detail at this stage of the book will be of little value to the average reader. Much of the material in this chapter could have been readily incorporated into other areas of the book. Chapter 2 gives a concise summary of the gonococcal cell envelope and forms a useful background to later chapters dealing with pathogenesis and immune response. Chapter 3 on gonococcal physiology and metabolism is contributed by Stephen Morse. This is an excellent chapter, rich in detail but written in a way that enables the reader to relate the physiology and metabolism of the gonococcus to factors such as growth, identification, and pathogenesis, which are so important to rational approaches to the control of infection. Janne Cannon gives a useful synopsis of methods of genetic exchange and genetic loci in relation to surface structure, antibiotic resistance, and pathogenicity. The final chapter in this section builds on the earlier chapters and reviews current knowledge of the pathogenesis and immunology of gonococcal infection. It is surprising that in 20 pages packed with 179 references no mention is made of "infectious units". Consideration of factors of asymptomatic as opposed to asymptomatic infection was another neglected area.

Part II covers the clinical manifestations, with separate chapters devoted to uncomplicated infection, salpingitis, disseminated infection, and infections in children. In the chapter on salpingitis there are some first class scanning electron micrographs showing the interaction between gonococci and fallopian tube tissue. The United States Public Health Service recommendations for treatment are outlined and discussed in the individual chapters, rather than having a separate chapter devoted to treatment. The World Health Organisation (WHO) recommendations are mentioned in passing, with a statement that they were not available for publication when the chapter was written. (I obtained a copy of the WHO's Current treatments in the control of sexually transmitted diseases in 1983.) Under the heading of gonococcal ophthalmia, "ophthalmia" occurs three times before "ophthalmitis" is reverted to. In discussing pharyngeal infection it is stated that "In England, Noble and coworkers reported an incidence of 1-3% for pharyngeal infection in clinic patients." Noble and coworkers in fact reported from Lexington, Kentucky, United States of America. Overall this section has a much stronger leaning towards practice in the United States of America than in England. Two examples are provided by the greater emphasis on epidemiological treatment and the decreased emphasis on the need for culture from men with positive smears.

Part III is concerned with the clinical laboratory and gonococcal infection, and in three chapters covers laboratory methods, typing, and serological diagnosis. The methods section is disappointing and could have been more up to date. No mention is made of monoclonal antibodies, and the increasingly important area of antigen detection is dealt with in only six lines. The misuse of sugar "fermentation" is perpetuated (as members of the genus Neisseria metabolise sugars oxidatively, terms such as sugar degradation or utilisation are more appropriate). Problems of vancomycin sensitive gonococci are discussed, yet lincomycin is not considered as an alternative selective agent.

The chapter on typing contributed by Joan Knapp is brief but gives a good overview of the various methods available. The many Swedish studies on serological classification, however, deserved greater coverage. A short addendum makes reference to the use of monoclonal antibodies for classifying gonococci into serovariants (serovars). The chapter on serological diagnosis provides a clear summary of the problems associated with setting end points to define a positive test to diagnose gonococcal infection.

In six short chapters, Part IV covers epidemiology, public health, and health care and control. The chapter on epidemiology gives a broad outline of the global situation and sets the scene for the subsequent chapters. The topics, such as prevention and control, organisation of sexually transmitted diseases (STD) clinics, clinical practice, and education remind us of many of the very real social and logistical problems associated with gonococcal infection. These chapters, which are considered mainly from the American viewpoint, make interesting reading and should help the reader to perceive more clearly the relevant problems of diagnosis and control in relation to their own locality. The penultimate chapter identifies current problems and pinpoint potential fruitful research areas, and the final chapter reviews progress on the development of a gonococcal vaccine: the most recent reference cited in this chapter was published in 1982.

The overall impression is of a concise book that is easy to read. The breadth of coverage makes this book of value to all health care staff concerned with gonococcal infection. Some chapters are more valuable than others, but selective reading is possible as each chapter is designed to stand on its own.

H Young


Management in a medical sense implies diagnosis and treatment, and the title of this cassette lecture therefore contains a tautology; this is a poor omen. In fact, this short lecture on the acquired immune deficiency syndrome (AIDS) contains little of practical use about diagnosis, and in four or five playings of the tape I have yet to find any mention of treatment. Though the cassette contains little suggested by the title, it is at least an interesting historical guide to AIDS, but the story fails to reach full contemporary status.

This cassette covers the history of AIDS, from its recognition in 1981 (misquoted in the cassette as 1978) to the introduction of screening by the blood transfusion service in October 1985. Though the etiological agent of AIDS is fully accepted worldwide as being human T lymphotrophic virus type III or lymphadenopathy virus (HTLV-III/LAV), Dr Brettele accords this new virus only the status of a possible contender for the role of causative agent, and in fact ranks it third after the "wrath of God" and "antigenic overload caused by multiple venereal diseases in promiscuous homosexual men". The discus-
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Sion of this virus is cursory in the extreme, and the comments about antibody testing for HTLV-III/LAV being directly analogous to hepatitis B serology could easily misinform.

The clinical component of this cassette is superficial: the description of Kaposi's sarcoma states only that the lesions are often "multiple and non-descript". The section on presenting symptoms muddles symptoms caused by the virus itself with those secondary to opportunistic infection. This is an important error, as failure to differentiate presenting signs and symptoms may lead to a dangerous delay in diagnosis.

Throughout this cassette there are unpleasant references to homosexual men, implying that their sexual behaviour is aberrant and has resulted in the development of AIDS. The author contrasts this with the "unlucky" haemophiliacs and heterosexuals, who are victims of chance alone. I can find no sympathy for this attitude.

There are too many inaccuracies and distortions in this cassette to mention in this review. I can only summarise by suggesting that a further edition of this cassette/lecture, which actually addresses to the title, would be of value to general practitioners.

Jonathan Weber


It goes without saying that in the past there have been books concerned with just about all aspects of sexually transmitted diseases. None, however, matches this for its depth and breadth of coverage. The editors are to be congratulated on bringing together 103 other contributors who have provided 81 chapters on every possible aspect of the subject, culminating in a textbook that, quite frankly, was sorely needed. The book begins with an historical approach and continues with the behavioural and epidemiological aspects of sexually transmitted diseases, the normal structure and physiology of the male and female urogenital tracts, followed by sexually transmitted diseases and aetiological agents (34 chapters). Then comes the approach to common clinical syndromes and to special clinical problems in reproduction and perinatology, laboratory diagnosis, pharmacology, control strategies, and finally an appendix of treatment guidelines. Inevitably in a book of this kind there is some duplication of the subject matter but if this is a weakness it can be tolerated because each chapter is detailed, self-contained, and well referenced. Furthermore, the index of 41 pages in three columns enables easy access to the required information. The book is massive in every sense but should not be considered as one for libraries and departments only. Every individual seriously involved in some aspect of the sexually transmitted diseases should have a copy. At current prices the book is a bargain, more so because it contains 105 colour plates on eleven pages. Like all textbooks, however, it will become outdated. Hopefully the editors will have sufficient energy to induce the contributors to keep it abreast of the field.

David Taylor-Robinson


This is a book of algorithms intended for the evaluation of either symptoms (such as urinary incontinence), clinical signs (such as renal mass), or clinical settings (such as acute renal failure). In the midst of topics on general urological problems are a number of sections appertaining to genitourinary medicine, including algorithms on urethritis, epididymitis, and certain specific sexually transmissible infections. These sections were unfortunately written by authors clearly lacking experience in the management of these conditions. This is demonstrated both by errors of fact but also, more tellingly, by an obvious lack of appreciation of certain basic principles. No mention is made of the importance of a properly taken sexual history, so that in the section on epididymitis the various aspects are divided according to age, whereas the real differentiating factor is recent sexual activity. Thus the algorithm suggests that patients under 20 years of age are not at risk for infection with Chlamydia trachomatis, but rather, should undergo scrotal exploration for suspected testicular torsion. An appreciable proportion of teenagers are sexually active, and therefore the possibility of infection with C trachomatis and other sexually transmissible organisms must be considered.

Other basic principles receive inadequate emphasis. For example, in the section on urethritis, the author writes "(the diagnosis of gonorrhoea) can be confirmed by appropriate culture," instead of must be confirmed by appropriate culture. In the treatment of herpes "topical steroids are contra-indicated". A glaring omission, again in the section on urethritis, is the failure to mention the necessity for contact tracing. In the section on syphilis, a single dose of benzathine penicillin is proposed as adequate treatment for latent syphilis. The author also erroneously states that serological tests for syphilis will become negative after treatment. Failure to appreciate that continuing serological positivity is the norm may result in unnecessary repetition of treatment. Bearing in mind the inadequate treatment schedule advocated, however, this may be not such a bad thing!

Writing an algorithm on prostatitis is a thankless task in that there is little consensus on either the diagnosis or the management of this condition. That said, I must take exception to yet another author advocating prostatic massage as part of treatment. No one would suggest that massage should be used as an adjunct in the treatment of urethral or epididymo-orchitis, so why should the prostate gland be subjected to this unpleasant and degrading practice? Similarly, I cannot accept that radical transurethral resection is an appropriate treatment of chronic prostatitis in particular as many of these patients are young and may hope to father children in the future.

As to the rest of the book, there is coverage of a wide range of surgical and medical urology, most of which I would not presume to criticise. I was a little surprised that there was no algorithm on urinary tract infection in men. I would have included this subject before a section on Cushing's syndrome, in which incidentally, there is a very poor explanation of how functional tests differentiate between the various causes of this syndrome.

In summary, I cannot recommend this book for anyone seeking information on the management of conditions related to genitourinary medicine.

G Scott


There has been continuous development, particularly in the methods of investigations, diagnosis, treatment, and management of urological patients. Some of the advances have been so fast that many feel they have fallen behind. The book represents an up to date experience and opinions and recommendations for the investigation and treatment of urological patients. The advice regarding the practical aspects is good and covers the topics systematically. The reproduced radiographs are generally good with a few exceptions.