Matters arising

the video cassettes can be used to
record findings and procedures, in-
troduction of a video printer will
additionally produce instant polaroid
graphs which are useful both in
research and as a permanent record of
findings for case notes. These systems
are not necessarily expensive and the
advantages they provide make them an
important, if not essential, addition to
basic colposcopy.

Referring to accessory instruments,
I find that while the Kogans endo-
cervical speculum is useful in most
situations, it is of limited use if the
cervical os is small as either it cannot
be introduced in to the os or, having
been introduced, will cause bleeding
when retracted due to tearing of the
cervical os and thus obscuring the
view. In these situations I find the
Curihara endocervical speculum in-
valuable as an aid to visualising the
channel.

I wish to add to his list of learned
societies The Northern Genitourinary
Physicians Colposcopy Group (NGUPCG)
which was inaugurated in 1988 of which I am secretary, and not
withstanding its regional
reference, now has a wide membership
within the UK.

A B ALAWATTEGAMA
University Department of Genitourinary
Medicine, Royal Liverpool Hospital, Prescot Street, Liverpool L7 8XP, UK.

1 Hare M J. Choosing equipment for col-

Choosing equipment for colposcopy in genitourinary medicine

Mr M J Hare’s article on choosing
equipment for colposcopy in Genito-
urinary Medicine was an excellent con-
tribution to what will become a valu-
able series. I should like to add some
comments to item 2 in the article
regarding “The Colposcope”.

A video camera and television
monitor are invaluable additions to the
basic colposcope. They provide full
involvement of the patient in the
process of colposcopy, allowing a psy-
chologically invaluable imaging of her
disease, or lack thereof. As a teaching
aid for other staff they are an excellent
investment and cost need not be pro-
hibitive. A good system needs high
resolution and this is helped by not
having the monitor too large a size.
Clarity may be lost and exaggeration
of the cervix obtained with any bleed-
ning providing a negative image. (A
high resolution 14” screen provides
the best picture in my opinion.)

Visualisation allows the patient to
“divorce” herself from the process of
examination, biopsy and even loop or
treatment by showing there is no
pain. This aids maximal patient com-
pliance. For those patients not wishing
to observe procedures, a movable
trolley is preferable to the on/off
switch. This permits the assisting
nurse to continue her anticipation of
the operator’s requirements, and
Teaching can still be performed.
The clear advantages accrued when
performing loop diathermy or laser
treatment, or just colposcopy and
biopsy alone, with video facilities, lead
to the conclusion that this equipment
is a mandatory addition to basic col-
poscopy.
The article did not mention cervi-
cography. Such cameras are available
for less than £1000 and in busy
departments minor degrees of cervical
abnormality are often photographed
using basic colposcopic techniques by
nursing staff. This allows later ob-
servation of film thus obtained by an
experienced colposcopist, who can
decide which are worthy of more for-
mal colposcopy, and those which can
be returned to repeat cytology. 1

D A HICKS
Department of Genitourinary Medicine, Royal Hallamshire Hospital, Glossop Road, Sheffield S10 2JF, UK.

1 Singer A. New methods in diagnosis:
of any value? Modern trends in
Aetiology and Management of
CIN. Symposium R.C.O.G. 22nd

BOOK REVIEWS

Aids and the Lung. Edited by David
Mitchel and Ashley Woodcock. Lon-
0-7279-0289-X

This book brings together the con-
tributions on AIDS and the lung
previously published as separate
papers in Thorax and represents a
mine of useful information to all con-
cerned with caring for HIV patients.
Since respiratory infections are par-
icularly common in this patient
group, this book is of value to thoracic,
genitourinary and general physicians
alike.

The book is logically organised and
the first chapter is concerned with
infection control which is clearly of
paramount importance. I am sure that
the comprehensive infection control
procedures that are outlined are sens-
able, although I have doubts that the
average bronchoscopist will be easily
persuaded to use a visor and face mask
when bronchoscopy elderly ladies in
Scunthorpe. A particularly important
point that is stressed in this opening
chapter is the great effectiveness of
careful cleaning of bronchoscopes in
reducing the HIV contamination.
This is a simple and very important
message, as are the data on the remark-
able effectiveness of glutaraldehyde.
The chapter on non-invasive inves-
tigation is particularly well written.
Perhaps the most useful message of the
chapter is that the chest radiograph in
pneumocystis pneumonia is often
typical as are the clinical findings and
that when this is the case the sensi-
tivity of these clinical data ap-
proaches 87%, with a specificity of
90%. The third chapter deals with
making a definite diagnosis of pul-
monary problems and centres around
induced sputum and bronchoalveolar
lavage. Lavage is clearly an excellent
technique, whereas many centres con-
tinue to have problems with induced
sputum. It is likely that except in
centres with a very large work load,
lavage will be preferred to induced
sputum, which requires some obses-
sional attention to detail to yield good
results.

The chapter on treatment is full of
fascinating data, although occasionally
there are inconsistencies. In this chap-
ter the mortality from pneumocystis