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BOOK REVIEWS

Biopsy Interpretation of Lymph Nodes. Steven H. Swerdlow. New York, NY, Raven, 1991, 413 pages, \$88.

Biopsy Interpretation of Lymph Nodes was written by an author who is, by his own admission, a cynic and a skeptic, and Dr Steven Swerdlow is thus ideally suited to attack the topic of lymph node interpretation. I intend to give this text a glowing review because immediately after I read it, I felt compelled to write Dr Swerdlow a personal letter congratulating him on having achieved an excellent compilation on a difficult subject, one that he treated in a creative and even humorous way.

Although a number of authoritative, multi-authored books dedicated to lymph node pathology have been published, there are none that are as clearly written, easily readable, well organized, and practical as this single-authored volume. It contains an amazing amount of information for its size and, therefore, I disagree with Dr Swerdlow's statement in the preface that the book is merely an "introduction" to lymph node biopsy interpretation. Despite Dr Swerdlow's preference for the Lukes-Collins and Kiel classifications of non-Hodgkin's lymphomas, he does not impose his own prejudices on the readers, but rather points out the diversity of opinions that abound among hematopathologists about terminology and classification of lymphoproliferations.

The book is divided into nine chapters, each of which is followed by many relevant references, including citations as recent as 1991. The first chapter, which describes the multiparameter approach to interpretation of lymph nodes, is extremely valuable, especially for pathologists in training and for those surgical pathologists who are only marginally, or not at all, involved in lymph node pathology. It includes not only a discussion of the all-important processing and triaging of the fresh lymph node specimen, but also the rationale for immunophenotyping on paraffin and frozen sections as well as by flow cytometry and, in addition, the use of genotypic analysis when clonality cannot be demonstrated by immunophenotyping. Although these ancillary techniques are often helpful and sometimes absolutely necessary to arrive at the correct diagnosis, Dr Swerdlow admirably emphasizes that morphology remains the gold standard of diagnostic lymph node pathology. Appendices at the end of the book describe techniques for these various procedures.

Each of the succeeding chapters is organized into sections introducing and defining the entities discussed, followed by the histopathology, immunophenotyping, and adjunct studies that are helpful in the diagnosis and differential diagnosis. In addition, when applicable, the clinical course of the disorder is described. Ample numbers of black and white photomicrographs of good quality illustrate many of the disorders described, and eight color plates are included.

The second chapter reviews the common as well as many of the less frequently encountered benign lymphoid hyperplasias. The third through seventh chapters deal with "the approach to the diagnosis and classification of non-Hodgkin's lymphomas," B-cell lymphomas of small lymphocytes, lymphomas of follicular center cell origin, other B-cell lymphomas,

and lymphomas of T cells. The major classification schemes are briefly discussed, and here Dr Swerdlow's preference for the functional immunomorphologic classifications of Lukes/Collins and Kiel comes to the forefront. However, in the discussion of the various B- and T-cell lymphomas in chapters 4 through 7, the terminology of all major classifications is given and entities such as parafollicular/monocytoid B-cell lymphoma, centrocytic lymphoma (mantle cell lymphoma), Ki-1 anaplastic large cell lymphoma, and T-cell-rich B-cell lymphoma, all of which are not included in some classifications (ie, the Working Formulation), are presented. In chapter 8, the classifications, histopathology, immunophenotype, genotype, and natural history of Hodgkin's disease are detailed. In addition to the major subtypes of Hodgkin's disease, the syncytial variant and the cellular phase of nodular sclerosis and interfollicular Hodgkin's disease as well as their differential diagnoses are discussed. The histiocytic and nonlymphoid proliferations of lymph nodes comprise the final chapter.

I most heartily recommend this book to surgical pathologists, residents, hematopathology fellows, and even to hematopathologists, for whom this lightweight volume would be an ideal companion.—BERTRAM SCHNEIZER, MD, *Professor of Pathology, The University of Michigan Medical School, Ann Arbor, MI*

Diffuse Diseases of the Lung: A Team Approach. W.M. Thurlbeck, Roberta R. Miller, Nestor L. Muller, et al. Philadelphia, PA, Decker, 1991, 243 pages, \$82.

This concise monograph emphasizes clinical-radiologic-pathologic correlation in the diagnosis of diffuse diseases of the lung and is intended to facilitate communication between the various members of the health care team in arriving at a diagnosis. In addition to abundant illustrations of chest radiographs and histopathology, this book features computed tomography scans and gross pathology sections of lungs cut in planes corresponding to computed tomography scan images.

The first three chapters deal with background information of a pathologic, radiologic, and clinical nature on the normal structure and function of the lung, a general approach to the differential diagnosis of diffuse lung disease (abnormal structure and function), and general approaches to the lung biopsy. The traditional chronic interstitial lung diseases, including the interstitial pneumonias, collagen vascular diseases, sarcoidosis, the pneumoconioses, and others, are discussed. However, the specific entities covered encompass more than the traditional chronic interstitial lung diseases to include other diffuse processes, such as emphysema. Also covered are acute infiltrative lung diseases (mostly infections) in both immunocompromised and nonimmunocompromised patients, diffuse pulmonary hemorrhage, pulmonary vascular diseases, noninfectious angitis and granulomatosis, and selected tumors such as lymphoma that may present as a diffuse process. The number of specific entities discussed under each category is generally as complete as most larger texts on pulmonary disease. Although a multidisciplinary approach to diagnosis is taken, the reader will find that there is more emphasis on pathology for most entities.