

Laboratory-Acquired Infections

Laboratory-Acquired Infections: History, Incidence, Causes and Prevention, by C. H. Collins, 277 pp. with illus, \$49.95, Woburn, Mass, Butterworths, 1983.

The subject of safety in the clinical laboratory, although a perennial concern, has recently received considerable renewed attention partly caused by the advent of an effective vaccine against hepatitis B virus (probably the most feared, if not the most common, laboratory-acquired infection) as well as, almost simultaneously, the appearance of the newly described acquired immunodeficiency syndrome. *Laboratory-Acquired Infections* by C. H. Collins, a senior technical officer of the British Public Health Laboratory Service and consultant to the World Health Organization, is an attempt to document the historical, technical, and prophylactic aspects of one particularly important facet of laboratory safety—the danger of inadvertent infection.

Laboratory-Acquired Infections is an updated and greatly expanded and rewritten version of Collins' previous short monograph, *The Prevention of Laboratory-Acquired Infection*, published in the mid-1970s by the British Public Health Laboratory Service. The book is a concise, yet well-documented and very thorough, accounting of the microbiological hazards of the clinical laboratory. The author begins with an historical perspective on the subject of acquired laboratory infection and proceeds with a practical discussion of various aspects of microbiological safety. Topics covered include modes of acquisition of laboratory-associated infection, techniques and instrumentation-equipment for minimizing exposure to infectious agents, laboratory design considerations, and laboratory safety education.

The book is well written and, for the most part, surprisingly readable. Collins is at his best when discussing laboratory infection control from the point of view of the learned scientist, and it is apparent that he draws on considerable practical experience when doing so. The author is less effective as a political observer. The book occasionally suffers from editorial digression concerning the various health authorities in the United Kingdom, but such departures are mercifully uncommon. American readers will be somewhat disappointed by the understandably British orientation of the author, but this seldom distracts from the main thrust of the text.

I would expect this book to be a useful reference work, albeit of limited scope, for pathologists, microbiologists, medical laboratory technologists, and hospital infection-control officers, as well as anyone involved in the design and/or construction of clinical laboratories. Excluding the few minor comments noted herein, my only criticism of this book is its cost; \$49.50 for a 277-page book with relatively few illustrations is an exorbitant sum, and one that is likely (justifiably) to discourage many potential buyers of this unique and well-written treatise.

C. MICHAEL WELDON-LINNE, MD
Illinois Masonic Medical Center
University of Illinois at Chicago
College of Medicine

Xenoglossy

Unlearned Language: New Studies in Xenoglossy, by Ian Stevenson, 223 pp, \$17.50, Charlottesville, University Press of Virginia, 1984.

The author of this book, Ian Stevenson, MD, is Carlson Professor of Psychiatry and director of the Division of Parapsychology, Department of Behavioral Medicine and Psychiatry at the University of Virginia School of Medicine, Charlottesville. He has obviously studied xenoglossy and related areas much more than this reviewer. When it comes to evaluating evidence for the survival of the spirit after death, the waters can

“to speak and understand a foreign language that was not learned normally”

become rather murky, but the author certainly has made heroic efforts in this direction.

Actually, the book consists of lengthy discussion and descriptions of two cases of responsive xenoglossy. The latter can be defined as the ability of a person to speak and understand a foreign language that was not learned normally.

The author has written a previous book about another case previously published.¹ He makes comparisons in the current volume among all three cases so the reader is at some disadvantage if he has not read the first one.

The first case in the present book is that of “Gretchen,” speaking through Dolores Jay (her real name), the wife of a Methodist minister and amateur hypnotist. Almost by accident, when the minister hypnotized his wife, she answered his question about her ailing back in German. Further hypnotic

experiments led to more German replies. Dr Stevenson knew German himself, but the Jays did not. There followed further experiments involving interviews by German linguistic experts and the making of tapes. It appeared that Gretchen had possibly lived in the latter part of the 1800s and probably died at age 16 years.

Checking the veracity of such phenomena requires painstaking effort. One must try to establish that there is no way earlier in life the person could have learned German through some type of exposure. One needs to ascertain that the person is not consciously or unconsciously withholding material that would explain the phenomenon. Here again, Dr Stevenson seems to have done a creditable job. It would seem highly unlikely that any type of hoax was perpetrated. Some of the material produced by Gretchen could not be verified and some was circumstantial but still highly suggestive.

The second case was somewhat different. An unmarried girl in her 20s living with her parents in Nagpur, India, developed some physical disorders and was hospitalized. While there, she practiced meditation and soon her behavior changed notably. She began speaking Bengali instead of her native tongue of Marathi. The patient's name was Uttara and the “new person” called herself “Sharada.” Each personality was unaware of the other's life. Sharada would take over for brief periods, on occasion for several weeks. One is initially tempted to think of a multiple personality, but, among other things, this would not explain the two languages.

As with the other case, linguistic experts, field trips, and historical review were all part of the study. Throughout the book, considerable attention is paid to the styles of the two unlearned languages with special focus on such things as dialect, proper and improper use of words, and content of material and its verifiability or lack thereof. Each case becomes a sort of detective story with the author using all available clues in an attempt to solve the mysteries. He would appear to be satisfied with the integrity of his informants and tends to lean toward reincarnation as the answer.

In the “General Discussion,” the author acknowledges that we have much to learn before we can really explain xenoglossy and urges cooperative efforts between parapsychologists and language scientists.

This book is interesting reading

and stimulates one's thinking about reincarnation, but some people will remain believers and some nonbelievers.

STUART M. FINCH, MD
Medical College of Georgia
Augusta

1. Stevenson I: *Xenoglossy: A Review and Report of a Case*. Charlottesville, University Press of Virginia, 1974.

Asthma

The Practical Management of Asthma, edited by Arthur Dawson and Ronald A. Simon, 260 pp, with illus, \$28.50, New York, Grune & Stratton Inc, 1984.

The Practical Management of Asthma, edited by Dawson and Simon, is a concise textbook designed to aid physicians in the daily treatment of bronchospastic disorders. Each of the chapters is written in an easily readable style, complete with clinical examples designed to illustrate specific issues in patient care. The references are up-to-date, and helpful suggestions for further reading are often provided.

The chapters on pharmacology and physiology are not overly technical but are instructional enough to provide a basis for rational treatment and drug use. The authors have provided specific guidelines for allergy and pulmonary function testing. Each of the appropriate drug therapies is discussed in detail with specific reference to clinical usefulness, dosage, potential problems, and even cost. The section on special problems in asthma, such as pregnancy, occupational asthma, and surgery, is excellent.

Throughout this book, an effort has been made to organize the charts and tables to enhance memory and facilitate easy reference. The final chapter presents some illustrative cases to help focus on key issues in treating patients with asthma, including those with severe relapses. I think this book would be highly recommended for all groups of physicians treating patients with asthma.

MARK J. ELLENBOGEN, MD
Mount Auburn Hospital
Cambridge, Mass

Aging

Risk Factors for Senility, edited by Henry Rothschild (Charles F. Chapman, coordinating ed), 249 pp, with illus, \$39.95, New York, Oxford University Press, 1984.

This book might have been better entitled "Risk Factors for Old Age" or "for Senescence" than "for Senility." Of the 17 chapters, only four specifically concern themselves with

senility, the common term used for chronic dementia. Since the book looks at risk factors for the whole aging process, rather than for just those concerned with dementia, it covers a broad field. Unfortunately, each subject is covered in a somewhat brief fashion.

The first four chapters deal with standard gerontological topics, such as a biology and the pathophysiology of aging. The chapter "Risk Factors for Senile Dementia," which best fits the title of the book, is limited to eight pages. The genetic studies on Alzheimer's disease, including studies on histocompatibility and Down's syndrome, are compressed into a one-page summary. A detailed and critical presentation and evaluation of the literature available in this area would have been useful. Conversely, the chapter on sociological risk factors by Erdman B. Palmore is a good summary of factors that affect mortality, morbidity, and mental illness in the elderly, and Palmore goes into detail about the effects of gender, socioeconomic factors, marital status, retirement, and relocation. The following chapter discusses the effects of lifestyle on mortality and morbidity.

The last half of the book deals with the effects of drugs on the elderly, cardiovascular changes, physical changes, metabolic and endocrine factors, and senescent sexual adjustment. The book concludes with a short chapter on risk factors and aging by Leonard Hayflick, describing his concept of cellular aging.

In summary, this book would have been more valuable if it had concerned itself in more detail with the subject of risk factors for senescence.

ALBERT A. FISK, MD
Geriatrics Institute
Mount Sinai Medical Center
Milwaukee

Immunodermatology

Current Perspectives in Immunodermatology, edited by Rona M. MacKie (*Contemporary Issues in Clinical Immunology and Allergy*, Edward J. Goetzel and A. B. Kay, eds), 289 pp, with illus, paper, \$35, New York, Churchill Livingstone, 1984.

Dr MacKie has assembled an eminent list of authorities for this issue (No. 2) of *Contemporary Issues in Clinical Immunology and Allergy*. The references are remarkably up-to-date for this form of publication, and the authors of the sections are selected from obvious leaders in the field.

This would be an extremely useful text for the bookshelf of the dermatologist, allergist, and generalist who has a particular interest in skin problems. For the generalist, several chapters provide an excellent preview

of the diseases with many of the up-to-date findings, because they are written by those individuals actively working in the field. The sections on atopic eczema, drug eruptions, urticaria, bacterial exotoxin disease (toxic shock syndrome), and cutaneous drug eruptions would have particular usefulness for the generalist. For the dermatologist, the chapters covering immunobullous diseases, photoimmunology, T-cell lymphomas, and connective-tissue disease are particular highlights and, again, up-to-date by leaders in the field.

All in all, this book would appeal to a broad audience. Its reasonable price would make it an important addition to the libraries of generalists, allergists, and dermatologists. It is to be recommended highly.

LARRY E. MILLIKAN, MD
Tulane University Medical School
New Orleans

Children

Children: A Handbook for Children's Doctors, edited by Peter Gray and Forrester Cockburn, 374 pp, with illus, \$58, London, Pitman Publishers; Baltimore, Urban & Schwarzenberg, 1984.

Webster's Ninth Collegiate Dictionary defines a "handbook" as "A concise reference book covering a particular subject." This book certainly meets that definition. There is some reference material here that I found hard to obtain elsewhere.

I had some trouble deciding exactly whom the book is intended for. Clearly it is intended primarily for British physicians. American physicians will have little trouble with such Britishisms as "nappy" for "diaper" and "dummy" for "pacifier." But much of the reference material is based entirely on British populations. This necessarily limits the usefulness of the book for the American reader. Still, some of the material is quite useful, especially the discussion of developmental progress.

The text is of uneven quality. In places it is very detailed; I learned a lot about the use of Bayes' theorem in genetic counseling. Bayes' theorem allows one to make the maximum use of probability, taking into account data such as the existence of normal siblings and other factors that affect the likelihood of having a child with a genetic disorder. This was a fascinating discussion, but I am not sure how useful it would be in counseling parents. However, in other places the text is very sketchy. The discussion of mucopolysaccharidoses is hardly more than a list of the diseases, with little information on distinguishing