

erences (to North-American and European authors!). The newest aspects and techniques are discussed, but one should bear in mind the correct attitude outlined in the foreword by Melvin R. Cohen: "The two chief indications for laparoscopy are (1) diagnosis of obscure pelvic disease, and (2) tubal sterilization. Even the experienced laparoscopist should not tackle a procedure that is better treated by laparotomy".

Gynecologists should peruse this textbook in order to gain an extensive knowledge on the potencies and hazards of laparoscopy.

G. Oelsner, Tel Aviv

Endocrine Pathophysiology: A Patient-Oriented Approach

J.W. Hershman

Lea & Febiger, Philadelphia, 1977

(358 pp.)

US \$ 16.00

This book is written for medical students with a basic knowledge of endocrine physiology and biochemistry. The authors of the different chapters are all from the University of California, Los Angeles, School of Medicine, U.S.A.

Of the various chapters, those on sexual differentiation, female reproductive disorders and male reproductive abnormalities are of special interest for the gynecologist. Because they cover only 60 pages of a total of 350, the book is not recommended to those specially interested in reproductive endocrinology.

All the chapters are clear, and practice-oriented. They all close with some case reports about the presented material; the answers to the questions are compiled at the end of the book. In the chapter on ovarian function, however, no attention is paid to the relation between prolactin, prostaglandins and the menstrual cycle.

The book offers a good survey of basic clinical endocrinology, but gives no detailed information for those interested in special subjects of endocrinology.

L.A. Schellekens, Heerlen

Animal Tumors of the Female Reproductive Tract, Spontaneous and Experimental

E. Cotchin and J. Marchant

Springer-Verlag, Berlin—New York, 1977

(70 pp., 45 photos)

DM 28.—; US \$ 12.40

The authors discuss the incidence of spontaneous ovarian tumors in laboratory animals and, in a different part, the same question for the uterus. Besides that, several methods are exposed for inducing tumors in mice: animal models for tumors in ovary and uterus. After fetectomy some investigators were able to produce choriocarcinoma, complete with pulmonary metastases. Pieces of human tumors can be transplanted to laboratory animals: nude mice, immunosuppressed animals and the hamster cheek-pouch. This may be of use in predicting the effectivity in treating human malignant diseases. In another chapter spontaneous tumors, as observed in domestic animals, in wild animals (in zoos), and even in birds, are presented.

The chapters conclude with a comprehensive bibliography, which makes this book useful to experimental laboratories and investigators. Attention should be drawn to the advances in the studies of animal neoplasms, established by veterinary schools, abattoir surveys and so on.

J.W. Barents, Utrecht

Multiple Primary Malignant Neoplasms

Series: Recent Results in Cancer Research

B.S. Schoenberg

Springer-Verlag, Berlin—New York, 1977

(173 pp., 139 Tables)

DM 48.—; US \$ 21.20

The importance of tumor registration is beyond discussion. In this case it allows to compare the observed and the expected number of subsequent primary malignancies. This can be applied to a person-year approach in a special geographic region with a stable population (± 2 million) during 30 yr (Connecticut, U.S.A.). The procedure covers the overall survival data — related to sex and age. The person-year observation means the exposure to the risk of developing a new primary cancer (malignancy). In this respect the survival time for 5 persons during 1 yr is comparable

to the survival of 1 person during a 5-yr period.

The survival intervals were chosen in 3 categories: A: up to 12 mth; B: up to 5 yr; C: exceeding the 5-yr period. Since the probability of developing a subsequent primary (with preferably a different histology) is small, its statistical significance can be tested by the Poisson's distribution. Unfortunately the author was not aware of current statistical methods for estimating the expected number of simultaneously diagnosed multiple cancers. It occurred in about 1% of all the diagnosed primaries. As far as I can understand, this view neglects the multifocal genesis of some kinds of tumors. Besides which, metastatic disease can be mistaken (in non-simultaneously diagnosed) for an independent second cancer (breast, stomach, colon and ovary are well-known).

Nevertheless, some associated tumors are of interest to gynecologists. It remains to be explained to what extent a cancer in the second breast is metastatic from the first one or is the new result of the same provoking agent (hormonal excess). The same question arises as to the related endometrial cancers.

In contrast to the expected numbers, some sites of primary cancers show an increased incidence of second malignancy at any other site (e.g. endometrium, ovary, breast). Age-adjusted incidence data for various ethnic groups within the Israeli population reveals a correlation between cancer of the colon and ovary. Besides that, a kind of familial susceptibility is evident.

Above all, we have to be alert to the genesis of new cancers induced by our treatment. Some chemotherapeutics have an oncogenic side-effect (cyclophosphamide and carcinoma of the bladder). In the same way the irradiation of the squamous cell carcinoma of the uterine cervix is related to adenocarcinoma of the rectum.

This book (173 pp.) gives, in 139 tables, a lot of already known and new data.

J.W. Barents, Utrecht

Ultrasonography in Obstetrics and Gynecology

John C. Hobbins and Fred Winsberg
Williams & Wilkins, Baltimore, Md., 1977
(173 pp.)
US \$ 23.00

This book, written by an obstetrician and a radiologist, records their findings in examinations of the obstetri-

cal and gynecological patient. Since the radiologist has a thorough knowledge of all kinds of imagery and the obstetrician is trained to apply basic physiology to information obtained from ultrasonic examination, they hoped that each could benefit from the knowledge of the other. The result of this cooperation shows that they obviously succeeded in doing so.

After a short chapter, in which the several ways of scanning and subjects such as 'real time' and 'grey-scale' are dealt with, matters such as early pregnancy and estimation of gestational age, the placenta, late pregnancy, abnormal growth and development, amniocentesis and ultrasound in gynecology are dealt with.

All chapters are illustrated with ample grey-scale pictures, most of them with an explicatory drawing with text. In an appendix, curves are given for uterine volume, placental volume, crown-rump length, abdominal circumference vs. fetal weight, and fetal urine production. Each investigator, however, will have to discover if these curves are applicable to his own group of patients.

This book can be recommended to everybody who is interested in the application of ultrasonic examination in obstetrics and gynecology.

A.L. Troostwijk, Zwolle

Atlas des Maladies Chromosomiques

J. De Grouchy and C. Turleau
Expansion Scientifique, Paris, 1977
(356 pp., 525 Figs.)
Fr. 262.-

This book presents an excellent review of the tremendous progress in human cytogenetics during the past few years. A comprehensive introduction is made to the different banding techniques which are currently applied in this clinical research area. A clear description and discussion is made of the well-established, clinically recognizable chromosomal syndromes which are due to numerical and structural anomalies of autosomes or sex chromosomes. Even more attention has been paid to the delineation of 'newer' clinical syndromes, caused by partial monosomies or partial trisomies of different autosomes. For each chromosome a review is made of the different structural anomalies known to date.

The illustrations are of excellent quality and may