

disease-focused chapters. I question the categorizing of lymphocytic interstitial pneumonia and pulmonary lymphoid hyperplasia under the infection heading of the chapter on AIDS. These 2 topics better fit under their own subheading of lymphoproliferative disorders. I also found the organization of the chapter on lymphoma difficult to follow, with various imaging modalities appearing under multiple subject headings.

The book's soft cover and small profile make it easy to slip into a briefcase or bookshelf. The typeface and 2-column layout are pleasing to the eye, making it easy to read in most lighting situations, including a darkened radiology reading room. In addition to an index at the end of the book, each chapter has a table of contents, with individual subtopics delineated by numbers and a bold-face section title, a feature that allows for quick, focused reading. References are included at the end of each chapter, are plentiful in number and up to date, reflecting the thoroughness and scientific value of the facts presented in the text.

The only shortcoming of the physical appearance of the text is that references in the body of the chapter are printed as the author name(s) in capital letters and year, which disrupts the flow and appearance of the text. I find that the more common style of numbering references in the text and including a numbered reference list at the end of the chapter makes for a smoother read. A few typographical errors are scattered throughout the book, none of which interferes with the conveyance of information.

In summary, **Pediatric Chest Imaging: Chest Imaging in Infants and Children** is a thorough review of current cross-sectional techniques employed in imaging the pediatric chest, and it provides in-depth coverage of individual diseases for the practicing radiologist. The text is well written and numerous high-quality images are provided. Moreover, this book can serve as an appropriate reference for pediatricians, pulmonologists, surgeons, and others who treat children suffering diseases of the chest.

Jeffrey P Kanne MD

Department of Radiology
University of Washington
Seattle, Washington

Diseases of the Lung: Radiologic and Pathologic Correlations. Nestor L Müller MD PhD, Richard S Fraser MD CM, Kyung Soo Lee MD PhD, and Takeshi Johkoh MD PhD. Philadelphia: Lippincott Williams & Wilkins. 2003. Hard cover, illustrated, 387 pages, \$145.

This book is superb. The first author, Dr Müller, speaks publicly in a crisp, clear, and succinct manner, and in this book he and his colleagues present radiologic and pathologic diseases of the lung in a similar manner. **Diseases of the Lung: Radiologic and Pathologic Correlations** examines the common pathology and radiology findings of many pulmonary diseases. The chapters focus on a wide variety of topics, including infection, interstitial pneumonia, congenital abnormalities, emphysema, drug-induced lung disease, and others.

The intended readership includes "residents, fellows, and practitioners in radiology, pathology, thoracic surgery, and respiratory medicine." However, the book is a great reference for nurses, respiratory therapists, and technicians who want to further their knowledge of respiratory diseases. In our institution many of the respiratory therapists do daily radiology rounds. This book offers classic radiologic findings seen in many pulmonary diseases. The pathologic correlations are probably less useful for nurses and respiratory therapists, as their exposure to pathology specimens and slides is limited.

The brief disease descriptions that accompany the images are accurate, clear, and succinct. The chapters are well organized and the chapter topics are well selected. The majority of the book is dedicated to beautiful pictures of pathology specimens (both gross and microscopic), chest radiographs, and high-resolution computed tomography images. The references are recent and from diverse sources.

My criticisms of this book are few. One is that some of the figures are not on the same page as their related text, and one can easily be fooled into thinking that the text near a given figure describes that figure. One example of this is in Chapter 4, "Lymphoproliferative Disorders and Leukemia": follicular bronchiolitis is discussed on page 98, but the associated figure is on page 100.

Though the vast majority of images, both pathologic and radiologic, are excellent, a few poor-quality and lesser-quality images were included. Examples are Figure 20.31,

which shows aspiration bronchiolitis, Figure 18.7, which shows mosaic perfusion in pulmonary arterial hypertension, and Figure 19.7, which shows Wegener granulomatosis.

This text is an excellent reference for physicians, nurses, and respiratory therapists. It is succinctly written and diseases are presented in a logical order. The various radiologic presentations of individual diseases are discussed, often in the order of which presentation is most common. The index is well done, so that topics of interest are easily found. I strongly recommend **Diseases of the Lung: Radiologic and Pathologic Correlations** to anyone who wants a reference for common radiologic and pathologic presentations of pulmonary disease.

Wendi Norris MD

Division of Pulmonary
and Critical Care Medicine
Harborview Medical Center
University of Washington
Seattle, Washington

Color Atlas of Pulmonary Cytopathology. Sudha R Kini MD. New York: Springer-Verlag. 2002. Hard cover, illustrated, 301 pages, \$199.

Sudha Kini deserves to be loudly applauded for her **Color Atlas of Pulmonary Cytopathology**. This single-author work encompasses the vast majority of situations in which diagnostic cytology of the respiratory tract has a clinical role and includes numerous benign and malignant entities, encompassing diverse scenarios, and involving patients of all ages, including neonates and young children—a group commonly ignored by many writers. This text-atlas clearly fills a void for those who need an extensive and authoritative source on pulmonary cytopathology, as no such text has been published in at least a decade. This book may very well appeal to pulmonary physicians who have a keen interest in the morphologies associated with disease processes, but the major audience will be practicing pathologists, pathology house officers, practicing cytotechnologists, and cytotechnology students.

The text is extremely well organized and each chapter is well written overall. The author provides clinical, radiographic, gross pathologic, and histologic attributes of many disease entities before venturing into the cytologic criteria of a given disease. For the most part these criteria are clearly delineated,

accurate, and not presented in a verbose manner. Only rarely did the author fail to include what I believe are important cytomorphologic clues. For example, on page 49 she did not mention the nuclear molding (physical compression) in the multinucleated squamous cells of a herpes simplex viral infection. She also does not describe well the classic "ground glass" pattern of the chromatin in herpetically infected cells, although she does mention it in a subsequent table.

On the other hand, some redundancy did creep in. This was most noticeable in her description of the cytologic patterns of presentation of conventional adenocarcinoma (page 92), bronchoalveolar carcinoma (page 95), squamous cell carcinoma (page 84), and carcinoid tumors (page 105), in which it basically states that all of these neoplasm specimens include "single cells, aggregates, and syncytial tissue fragments." In other words most epithelial malignancies occur in smears as relatively cellular samples, with both intact single malignant cells and small to large, flat, and 3-dimensional cohesive masses. Perhaps this is unavoidable, but still, to the knowing reader, it was annoying; why provide data if it is not going to help us distinguish such tumors?

Another example of redundancy can be found on page 167, in the discussion of idiopathic pulmonary hemosiderosis. In one paragraph—and only a few sentences apart—the author tells us twice that patients may suffer "respiratory distress."

I agree with most of Dr Kini's text and find it quite detailed and encompassing. However, there are a few minor areas that I dispute. For example, on page 41 she states that mitotic figures are not seen in acute respiratory distress syndrome. I disagree, because they certainly can be present. I also disagree that carcinoid tumors may closely resemble bronchoalveolar carcinomas and that small cell carcinomas may closely resemble adenocarcinomas (both statements on page 99).

I believe the author attempted to be clinically useful at the onset of Chapter 4, in separating benign noninfectious (basically proliferative) conditions, which overall is excellent, but the splitting from a pathology viewpoint is somewhat artificial. They are all basically conditions in which reparative atypia and degenerative changes can be present within epithelial cells.

A very positive aspect of this book is that scattered throughout the text are a number of well constructed and highly informative tables. These often summarize data presented in the text as well as add new

information. I believe that workers in cytopathology may, with some frequency, pull the book off the shelf and refer to the tables rather than the text. One of my favorites was Table 4–7, in which Dr Kini outlines the differential diagnosis of cytology samples containing foamy histiocytes.

On page 96 there is a reference to Table 7–5 (to distinguish conventional adenocarcinomas from bronchoalveolar carcinomas); the reference should be to Table 7–6.

In my opinion the greatest strength of this book (more valuable than her good text and tables) are the illustrations, which are numerous and lavish. Most are crisply detailed and successfully depict what they set out to demonstrate. Although there are some histologic and ultrastructural pictures, most of the photomicrographs are Papanicolaou-stained cytologic specimens of all types. There is a relative dearth of Romanowsky-stained preparations, which is unfortunate in that many pathologists rely on that stain, at least in part, for fine-needle aspiration biopsies. However, Romanowsky stains are not part of Dr Kini's routine working repertoire.

A major weakness of this book, on the other hand, and no fault of Dr Kini's, is that all of the illustrations are at the end of the text, rather than intermingled with the text, which would have made the book far more pleasing and easy to use. Frankly, it is a pain to flip 50 or more pages back and forth while marching through this tome. For that major distraction I guess we can blame the publisher.

Perhaps the single most important chapter for the readers of *RESPIRATORY CARE* is Chapter 2, "Respiratory Specimen Types for Cytologic Diagnoses Specimen Procurement, Collection Methods, Specimen Submission, Cytopreparation, and Staining," which informs readers of the need for expeditious, gentle handling of specimens and the difficulty in preparing specimens to provide excellent cytomorphologic detail. When such specimens are available for review, good interpretations generally follow, which allows pathologists to render accurate diagnoses simply on routine cytologic material. Thus, as stated by Dr Kini in the Introduction, diagnosticians would rely much less heavily on ancillary diagnostic procedures, which is no small matter in this era of cost containment.

Kim R Geisinger MD
Pathology Department
Wake Forest University
School of Medicine
Winston-Salem, North Carolina

Disease Markers in Exhaled Breath. Nándor Marczin MD PhD, Sergei A Kharitonov MD PhD, Sir Magdi H Yacoub MB BCH, Peter J Barnes MD DSc, editors. (*Lung Biology in Health and Disease*, volume 170, Claude Lenfant, executive editor.) New York: Marcel Dekker. 2003. Hard cover, illustrated, 534 pages, \$195.

Disease Markers in Exhaled Breath summarizes exciting recent developments that may lead to novel noninvasive methods to monitor disease activity by analysis of exhaled breath. Most of the book is dedicated to nitric oxide (NO) biology and physiology, but carbon monoxide and other volatile organic compounds, such as ethane, are also discussed. The editors bring a wealth of experience in NO research to this volume. I suspect this book is unlikely to be read from cover to cover, but, rather, individuals will choose sections pertinent or interesting to them. The individual chapters are written by researchers in those subjects and, like many multi-author books, the quality of the writing varies.

The book is divided into 3 parts. Part One, "Physiological Aspects of Disease Markers in Exhaled Gases," consists of 7 chapters, which address the measurement, physiology, and molecular and cellular sources of these markers.

Chapter 1 provides an overview of NO as a biological mediator. This chapter would be useful for researchers, but clinicians and respiratory therapists are less likely to be interested in its content. The description of NO synthase and the discussions of inhibitors and the role of arginases are excellent. Chapter 2 is a well-organized discussion of the physiology of NO and should be read by pulmonologists, critical care physicians, asthma specialists, cardiologists, and respiratory therapists. One gets the correct impression that these investigators are the pioneers in NO research. Tables 1 through 3 are excellent summaries of factors that affect exhaled endogenous NO and provide useful information for those who are interested but don't have the time to read the voluminous literature. This chapter also has a great discussion of the effects of stretch, mechanical forces, and ventilation on NO production. Chapter 3 discusses the molecular and cellular sources of exhaled NO and provides an in-depth discussion of NO physiology. Chapter 4 reviews the influence of ventilation and pulmonary blood flow on exhaled NO. This chapter is useful for the