After a chapter on the history of sarcoidosis, the book is divided into 9 parts: epidemiology; immune responses; genetic factors; the role of infection; the development of other granulomas in the differential diagnosis; patient evaluation and pathology; specific organ involvement; treatment; and speculation about etiology and possible new treatments.

The historical section gives a fascinating insight into the early descriptions of the disease and the many famous clinicians who have been involved around the world. The chapters on epidemiology give a comprehensive overview of current knowledge and highlight the important geographical and ethnic variations of sarcoidosis in different areas. These chapters are appropriately referenced. The sections on granuloma formation are clearly and concisely written and will be understandable, I think, even to nonexperts. The important role of the pulmonary lymphatic system is emphasized. Other complex immunological factors are also reviewed in a clear and understandable way and well referenced, including references on the role of antigen presenting cells, cytokines, and chemokines. There is also an important chapter on the Kveim-Siltzbach skin test, which gives an important overview and detailed insight into this previously essential diagnostic test. Its development, preparation, standardization, and application are thoroughly reviewed. The histopathology of the resulting biopsy is set out in detail. Recent research and its possible future use in the understanding of granulomagenesis are reviewed. That the Kveim-Siltzbach skin test is now rarely used in day-to-day clinical practice, because newer diagnostic techniques have superseded it, is appropriately emphasized.

Part III covers the genetic aspects of sarcoidosis, which is an important subject, with major clinical and research implications. Modern methods of gene location and their role in understanding the etiology of sarcoidosis and its many variable patterns of presentation are extensively discussed and referenced. The search for potential pathogens (covered in Part IV) has always been at the heart of sarcoidosis research. As yet no single agent has been identified, but these chapters comprehensively set out our current knowledge. Part V covers the development of other granulomas, which are important in the differential diagnosis.

Part VI describes the clinical evaluation of patients with sarcoidosis. This is covered

in detail, with useful tables that will help clinicians faced with a possible new diagnosis. The diagnostic studies discussed include radiology (extensively referenced) and newer techniques, including bronchoalveolar lavage for diagnosis, prognosis, response to therapy, and research. The role of pulmonary function testing is concisely reviewed, including the assessment of abnormalities of the diffusing factor. No mention is made of the use of oxygen saturation for routine monitoring in the out-patient clinic and its further evaluation by simple exercise testing. The important subject of quality of life assessment is discussed in detail.

The pathological appearances of sarcoid granulomas are reviewed in depth. As throughout this book, the figures are excellent in content but not of high resolution. Color illustrations would have been useful. The section on specific organ involvement (Part VII) includes neurosarcoidosis, cardiac (with 171 references), ocular, hepatic, splenic, dermatologic, and osseous complications of the disease. Calcium metabolism and rarer forms of the illness, such as renal, genitourinary, breast, and blood, are also usefully discussed.

Part VIII includes a chapter on the widening armamentarium. This is followed by a discussion of the role of corticosteroids, which "remain the cornerstone of therapy," at least in the short-term, although, as in many other diseases, their long-term adverse effects preclude their use for disease-control in the majority of cases. As expected in a volume of this nature, this subject is comprehensively referenced. Lung transplantation is an option for patients with end-stage pulmonary disease when all other treatment options have been unsuccessful. It is useful to learn that the outcome for patients with sarcoidosis is just as good as for those with other less immunologically mediated or potentially infection-originated lung diseases.

Part IX covers the continuing search for the etiology of sarcoidosis, and in this section a broad spectrum of current thoughts and ideas are presented, along with appropriate references up to 2003. An interesting dichotomy of views appears in the table on page 775 regarding putative causes of sarcoidosis that should be eliminated from consideration, including *Propionibacterium acnes*, as opposed to the cogent discussion in Chapter 13 on the role of *P. acnes* as a cause of sarcoidosis. A final chapter on future directions in therapy completes the book, with references up to 2005.

Overall there is no doubt that this volume achieves its stated aims. It will be very helpful to respiratory therapists, generalists, and family physicians, and it provides a great deal of accumulated knowledge for related specialist physicians and scientists looking for the most up-to-date pool of knowledge in this most interesting and intriguing of diseases.

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The author of this review reports no conflict of

Bird Flu: Diagnosis & Treatment. Sudhir Dawra. Delhi: Biotech/Eastern Books. 2006.

Hard cover, illustrated, 200 pages, \$11.65.

This book is a combination of text and "annexures" that summarize the recommendations and guidelines of several global government agencies. The annexures, located between Chapters 3 and 4 are not clearly identified, but strongly emphasize a potential outbreak of avian flu in the author's country of origin, which I believe is India. The author, Sudhir Dawra, holds a bachelors degree in industrial relations and personnel management. He has authored numerous books on subjects related to management and information technology, and is an active member of the Labor Commission of India. His current research areas are human resource development, management information systems, and software en-

Approximately half of the book is composed of the fifteen annexures, which list information such as the composition of the National Influenza Pandemic Committee, National Contingency Plan for Avian Influenza, Kit for the Veterinary Officer, Guidelines for Cullers (persons responsible for eliminating large numbers of birds), a list of hospitals in India, and guidelines for use of personal protective equipment. The country of origin of the annexures is not disclosed.

In addition to the annexures, **Bird Flu: Diagnosis & Treatment** contains 7 chapters: Introduction; Bird Flu Viruses; Avian Influenza Virus; Influenza Virus A; Pandemic Influenza; Bird Flu: Transmission and Vaccines; and Bird Flu: Safety Measures

and Prevention. The subject matter is not presented in a logical fashion and contains numerous editorial errors that I found confusing. For instance, the preface describes a section titled "Beat The Flu" and says that it is "full of life-saving tips," but there is no such section in the book. Some passages and paragraphs are repeated in several places, such as on pages 3, 7, 12, 19, and 26. There are numerous typographical and grammatical errors throughout the book. Some of the clinical content is of questionable importance or validity. Chapter 6 states that, "During the SARS [severe acute respiratory syndrome] outbreak many people boiled vinegar 24 hours a day so acidic vapors were always present. I do not know how effective or harmful this was."

The book warns against overstating the risks and causing widespread panic about a worldwide pandemic, but it also urges the reader to balance that against government propaganda that downplays the risks. The author claims that in Australia, "Parents taking their sick child to a hospital will be sent home to care for the child themselves. All they will receive is a piece of paper instructing them on basic infection control procedures." Adult patients are advised that, "when the pandemic occurs you will most likely be told to stay at home and deal with it yourself." Treatment of avian flu is not discussed in depth, but there is the statement that, "Pop-

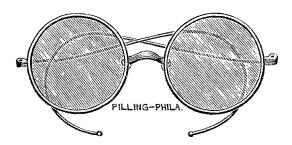
ular folk medicines are often proven effective more times than not." A bibliography is included, but there are no relevant references more recent than 1999.

The book has 159 pages plus a 32 page glossary with numerous definitions that are incongruent or out of context with the topic, such as "blood sugar," "Calvin-Benson cycle," the "eye," "melanoma," and "overdose."

This book is poorly written, poorly organized, and of limited use to health-care professionals and the general public.

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The author of this review reports no conflict of interest



Bronchoscopic Spectacles,
with large (44 mm) optically perfect planoperiscopic lenses
From George P Pilling & Son.
Pilling Eye, Ear, Nose, Throat and Bronchoscopic Instruments and Equipment
Philadelphia: The Company, 1932.
Courtesy Health Sciences Libranies, University of Washington