The book contains 11 chapters reviewing the major lung diseases in which immunological mechanisms are important. The articles are followed by lists of suggested further reading rather than being fully referenced, which makes the book more suitable for the first time readers of pulmonary immunology rather than those with some understanding. The chapters vary greatly in the emphasis on immunology. The chapter on immunology of lung cancer, for instance, concisely reviews the work on tumour antigens and immunotherapy for lung cancer, confining itself to the immu-

nological features of lung cancer. Other chapters, such as the chapter on the therapeutic modulation of allergic and inflammatory events in bronchial asthma, gives an account of the drugs used for asthma with very little consideration of any immunological effects of these drugs. About half the chapters are written by authors from North America and about half by United Kingdom authors. There is substantial disagreement in terminology between different chapters and many terms are not defined. This makes the index of less use than it might be as it refers only to the names given in the text. I missed any account of the regulation of IgE production and any serious account of immunotherapy or of factors which might modify the expression of the atopic state. I particularly enjoyed the chapters on pulmonary eosinophilia (always a difficult one to write) and the clear review of immunology of lung cancer, perhaps because they are written by North American authors whose work I do not regularly read. There is much that is useful in this book, which would have benefited from much tighter technical and medical editing.—PSB

Pulmonary Circulation in Chronic Lung Diseases. J Widimsky, J Herget, J Mlczech. (Pp 192; SFr 138, US\$58, DM 165.) S Karger AG. 1985.

This monograph provides a record of the proceedings of an international symposium on the pulmonary circulation held in Prague in 1984. The contributions, clinical and experimental, are grouped under four headings: oxygen and pulmonary circulation, long term oxygen treatment, non-invasive diagnosis of pulmonary hypertension, and evolution of pulmonary hypertension. Hypoxic pulmonary vasoconstriction is important in health and disease, but its mechanism remains unknown. The section on oxygen and pulmonary circulation summarises current views on the mechanisms in conjunction with new concepts, such as the possible contribution of leukotrienes. Experimental evidence describing the changes in hypoxic pulmonary hypertension induced by drug therapy is followed by papers discussing the effect of high altitude hypoxia on the right ventricle, aetiological factors in hypoxic cor pulmonale, and the value of long term oxygen treatment in this disorder. Effective therapeutic intervention in hypoxic cor pulmonale would be enhanced by improved non-invasive diagnosis of pulmonary hypertension. The sensitivity and specificity of new methods based on echocardiography and isotope measurements are discussed. The prognostic value of both the presence and the degree of pulmonary hypertension in patients with chronic respiratory diseases is well documented. The final section is devoted to the evolution of pulmonary hypertension in long term studies of patients with chronic obstructive pulmonary disease and interstitial pulmonary fibrosis. This is a very useful, albeit specialised text. Each paper is complete in itself with carefully prepared figures and tables and an up to date list of key references—the latter invaluable for anyone with a research interest in this area.—RMC