why he has chosen particular papers. I am in agreement with most of his selection, which begin with the writings of Aretaeus the Cappadocian from the 1st century AD (rediscovered only in the 16th century). Aretaeus clearly recognised asthma as a disease entity and described exercise induced asthma and coughing as a common symptom of asthma, and understood that death might occur in an asthma attack. Then follows a surprisingly clear account of asthma from the 17th century Belgian physician Jean Baptiste van Helmont, who did much to liberate medical thought from the dogma of Galen, which held sway from the early Christian era. This is followed by the classic and well known accounts of Thomas Willis and John Floyer (who wrote the first book devoted to asthma). Other chapters include the 18th century observations of Ramazzini, described as the father of occupational asthma, on baker's asthma, Miller's description of fatal asthma, and Cullen's clinical description. The highlight of the book is the marvellous description of asthma by Henry Hyde Salter, which deserves to be read by everyone interested in asthma. There could hardly be a clearer and more articulate description of the symptoms of asthma. The 20th century contributions include Metzer's classic paper, which likens asthma to anaphylaxis and shifts the emphasis away from neural mechanisms towards mediators. Other papers include Tiffeneau's remarkable studies on bronchial challenge and bronchodilators. The most recent three papers were all published in 1967 and include Voorhorst's description of mites as the major house dust allergen, the Ishizakas' identification of reagin as IgE antibodies, and the paper by Lands *et al* on beta adrenoceptor subtypes (though I believe that Ahlquist's classic paper, which distinguished alpha and beta adrenoceptors in 1941, would have been a more appropriate classic to include). This is a splendid collection of papers, which deserve careful reading because so much of what we now consider as modern thinking has already been clearly expressed, albeit without the details made possible by modern technology. Dr Brewis is to be congratulated on this excellent compendium, which I can thoroughly recommend. It is also excellent value for money.—PJB

Introduction to Respiratory Medicine. Meir H Kryger. (Pp 402; £19.95.) New York: Churchill Livingstone, 1990. ISBN 0-4435-08695-8.

This book, based on the undergraduate teaching course of the University of Manitoba, aims to provide a self contained introduction to respiratory medicine for students and junior doctors. The chapters are well written by recognised experts and move logically from physiological principles to pathophysiological adaptations and alterations due to disease. Of the 18 chapters, seven deal with basic concepts of pulmonary physiology and the remainder with clinical conditions, including a section on symptoms and clinical signs. The text is clear and straightforward and avoids prejudice, with good use of tables and diagrams, often taken from original publications. Where appropriate, questions are raised in areas where understanding of disease mechanisms

exists and further research is needed. Common respiratory conditions are well covered with good chapters on airflow obstruction, pulmonary restriction, lung cancer, and respiratory infections. The three chapters on respiratory failure are excellent reviews of pathophysiology, but will be too detailed for the average undergraduate. There is a useful chapter on paediatric lung disease, which is rarely covered in texts aimed at physicians concerned with adult disease. The pathophysiological approach of this book ought to appeal to medical students and junior doctors. It should be particularly useful for those sitting the first part of the MRCP; part 2 candidates will need to know more about the treatment of pulmonary disease than is covered, though this is not a great disadvantage as treatment strategies in North America often differ from those in Europe. This is one of the best introductory textbooks of respiratory medicine that I have read, and the authors and editor are to be commended for the content and clarity of presentation. Teachers, trainees, and students should find it a useful addition to their libraries.—SE

Pulmonary Blood Vessels in Lung Disease. J Widimsky, J Herget. (Pp 150; £56.30.) Basel: Karger, 1990. ISBN 3-8055-5155-X.

Aficionados of the pulmonary circulation will know that once every five years clinicians, physiologists, pathologists, biochemists, and others gather in Prague to discuss the latest research in their field at one of the renowned pulmonary circulation symposia. For a few days little groups of lung enthusiasts throng the banks of the Vltava deep in earnest conversation or gather at the sessions to engage in the cut and thrust of the discussions following the papers. No book can replace actual participation in this quintennial pilgrimage to the Czech capital, but the organisers take care to see that highlights of the meeting are published as proceedings to be available to those unfortunate enough not to have been able to attend. This volume records 16 of the papers read at the fifth symposium in 1989. Atmosphere is lost by not including some of the discussions following the presentations. Eleven of the papers are grouped as a mini symposium on the pathophysiology of the pulmonary vascular wall and the remaining five deal with clinical problems of pulmonary hypertension. The quality of the papers is high, as one would anticipate from leading authorities—predominantly from Czechoslovakia and the United States with smaller contributions from Western Europe. Subjects range from deposition of arterial collagens in pulmonary hypertension and the putative role of growth factors derived from the circulation to impaired prostacyclin synthesis of endothelial cells derived from pulmonary arteries of calves with pulmonary hypertension. The volume is slim, comprising only 150 pages, so that at £56 it is not cheap. These symposia on the pulmonary circulation reflect great credit on Czechoslovak medicine and especially on Professors Widimsky and Herget, who have initiated meetings of such quality and maintained their high standard.—DH

NOTICE

Mediastinal tumours: Pandora's box

A two day symposium on mediastinal tumours will be held at the National Heart and Lung Institute in association with the Royal Brompton and National Heart Hospital, London, on 3 and 4 December 1990. It is designed for radiologists, respiratory physicians, surgeons, oncologists, and pathologists, but should be of interest to others concerned with thoracic medicine. Topics will include thymomas, lymphomas, germ cell and neural endocrine and rarer connective tissue tumours. There will be an emphasis on imaging and treatment. Further details are available from the Postgraduate Education Centre, National Heart and Lung Institute, London SW3 6LY (telephone 071-351 8172 (24 hours), fax 071-376 3442).