

was reviewed appeared as though it would not last the frequent usage for which it was intended.

In summary, the *Guide* can enthusiastically be recommended as a handbook for use when searching for the offending drug in a drug eruption, with the above-mentioned criticisms kept in mind.

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Dermatitis Herpetiformis: A Specific (Immunopathological?) Entity, by J. B. van der Meer, N. V. Drukkerij v.h. Batteljee & Terpstra, Leiden, 1972. (121 pp)

The study of immunologic phenomena in diseases that involve the skin has emerged as an area of interest among investigators from many disciplines. Although immunologic studies have been used by dermatologists for diagnostic purposes, recently such techniques have been used in an attempt to elucidate pathogenic mechanisms involving both the skin and the immune system. One group of skin disorders that has undergone extensive study comprises eruptions characterized by the presence of bullae—especially pemphigus, bullous pemphigoid, and dermatitis herpetiformis. The volume under review is a consideration of dermatitis herpetiformis, as well as bullous pemphigoid (called parapemphigus), with particular emphasis on the examination of skin biopsy specimens using both conventional methods and immunofluorescence techniques.

Patients with dermatitis herpetiformis have been selected by using criteria that include the clinical picture, histologic examination of skin biopsy specimens, and the favorable response to treatment with sulfonamides or sulfones. Each of these criteria has been examined in detail, confirming the fact that dermatitis herpetiformis is separable as a specific entity from other bullous disorders. Attention is rightly focused on the nature of the cellular infiltrate in the skin of these patients with bullous diseases, especially the presence of the polymorphonuclear leukocyte in dermatitis herpetiformis. The methods used for immunofluorescence techniques are published in de-

tail. Maneuvers for establishing specificity and potency of the antisera as well as for ascertaining the specificity of binding of various immunoglobulins to tissue specimens are recommended as a model for those employing these techniques in the study of skin biopsy specimens.

Although the antisera used to study the proteins of the complement system are said to be specific for C4 and conversion products of C3 (β_1A and α_2D), there are, unfortunately, no data regarding the deposition of these individual complement proteins in tissue; it is stated only that complement is present in skin specimens from patients with dermatitis herpetiformis. This distinction is of importance, owing to studies suggesting that proteins of the alternate pathway of activation of the complement system, in the absence of early complement components, are deposited in the skin of patients with dermatitis herpetiformis who have active skin lesions. The discussion concerning the question of the participation of immune complexes and the complement system in this disease is rightly regarded as a working hypothesis, inasmuch as there are no data to implicate immune complexes in dermatitis herpetiformis.

As a review of the historical aspects and the relationships among the bullous diseases, the present volume may be recommended for students of dermatitis herpetiformis, and should stimulate further investigation into the relative contribution of the complement system to tissue injury in bullous diseases involving the skin.

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Books Received

The following books have been received and will be reviewed in a subsequent issue:

Paracoccidioidomycosis, Proceedings of the First Pan American Symposium, PAHO Scientific Publication No. 254, 1972.

Dermatologie und Venerologie, by Aloys Greither. Springer-Verlag, Berlin, Heidelberg, and New York, 1972.