## **Book review**

## Interstitial Lung Diseases: a State of the Art Series

Dario Oliviari, ed. Basel: Karger, 2005, IV + 84pp., \$34.75. ISBN 38055 7959 4

This monograph represents reprints of the Thematic Review Series previously published in the journal Respiration between 2004 and 2005, thus constituting a special edition of that journal. The aim of this series in Respiration is stated 'as giving clinicians an update on the major tools available to them to distinguish different forms of interstitial lung disease and to allow clinicians to differentiate between well-known interstitial lung diseases and the so-called rare "or orphan" diseases'. To meet these aims the articles reflect a multidisciplinary approach to the investigation and diagnosis of interstitial lung diseases and constitute a useful update for clinicians, pathologists and radiologists whose special interests would not have included accessing respiratory publications. Although it has been submitted to Histopathology for review, the selection of articles is rather light on histopathology and this will limit its interest to general and respiratory histopathologists alike.

The first paper concentrates on diagnostic imaging of diffuse infiltrative disease of the lung and is a most useful and comprehensive review of HRCT in this field. This section would be particularly useful for pathologists who do not have access to regular MDT meetings in which to view chest HRCTs. For non-radiologists, some arrowheads on the images would have been helpful.

The next section reviews diagnostic invasive procedures in diffuse infiltrative lung diseases and seems to reflect an interesting pathological practice by these Italian authors. They describe numerous conditions in which a diagnosis is feasible on the basis of lavage findings alone in immunocompetent patients, including acute on chronic eosinophilic pneumonias, diffuse alveolar damage, Langerhans cell histiocytosis and low-grade B-cell lymphoma, MALT type. They also describe the diagnosis of bronchoalveolar cell carcin-

oma as being feasible on the basis of lavage findings, which would not satisfy WHO classification criteria. Unfortunately for histopathologists, this section is marred by the paucity of either cytological or histological photomicrographs. It could be misleading for clinicians, who may have their expectations unrealistically raised for the diagnostic role of cytology in interstitial lung diseases.

The section on pulmonary function testing in interstitial lung disease is concise and useful and is followed by a section on interstitial lung disease induced by drugs and radiation by Philippe Camus et al. of the useful website http://www.pneumotox.com; which provides updated information on drug-induced respiratory disease. This section alone commends this monograph to a practising pulmonary histopathologist as it is an excellent account of drug-induced lung disease, which can be so easily overlooked by clinicians and pathologists alike. It contains radiological images but, sadly, no histopathology. A section on rare infiltrative lung diseases extends beyond the remit of what we might commonly term interstitial lung disease. The final section considers unusual presentations of sarcoidosis, concentrating entirely on extrapulmonary presentation, which does not sit well with the interstitial lung disease theme.

The English translation is rather idiosyncratic and, together with the numerous typographical errors, becomes distracting. Particularly irritating for pathologists is the use of E and E instead of H&E! One strength of the monograph is to emphasize the need for multidisciplinary involvement in the diagnosis of interstitial lung diseases, although even with this caveat the list of diagnoses made on lavage obviating the need for biopsy is worrying. I therefore doubt that the intention of updating clinicians on the diagnostic tools available for differentiation of interstitial lung disease is fulfilled, as the various uses of bronchoscopy, bronchoalveolar lavage, open lung biopsy and endobronchial ultrasound would be considered controversial in many units.

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