has been set at a level which will enable many students to purchase their own copy: they will be getting good value for their money.

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Borna Disease. H. KOPROWSKI, W. I. LIPKIN, eds. Pp. 134. Berlin, Heidelberg: Springer-Verlag. 1995. DM 150.00; öS 1,170.00; sFR 144.00. ISBN 3-540-57388-7.

This slim volume (number 190 in the Current Topics in Microbiology and Immunology series) is a timely monograph on an emerging disease of increasing importance. Although Borna disease was first described more than 200 years ago as a fatal neurological disease of horses, it is only relatively recently that major progress has been made in our understanding of the disease itself and the virus that is the aetiological agent. Progress continues apace, and the confirmation that Borna Disease Virus is present in human patients with certain psychiatric diseases should lead to a further increase in research effort. This will inevitably mean that this monograph will rapidly become outdated. Indeed, apart from the recent work on human psychiatric disease, cloning and sequencing of the viral genome, and visualization of the virions by EM (which all get an honourable mention as Notes Added in Proof) progress has already overtaken the monograph with the identification of a Borna-specific glycoprotein, gp18. This is not a criticism of the monograph, just a fact of life in the fast lane of research: indeed everyone concerned with the production of the volume is to be congratulated for its immediacy.

The monograph is presented in seven chapters, the first covering molecular biology of the virus which, in view of the recent flood of new data and ongoing work, is doomed to early obsolescence. Nevertheless it is, like the rest of the book, well-written, well-edited and well-referenced. There follow chapters on natural and experimental infections in animals, and the recently described disease in ostriches. The next three chapters detail the neuropathology and pathogenesis, immunopathogenesis, and behavioural disturbances and pharmacology. The final chapter describes the evidence for the role of Borna Disease Virus in various clinical syndromes in man.

This monograph is ideal reference material for anybody already working in the field, and for those wishing to begin working in the field. It should also be of interest to virologists in general and to those interested in human central nervous system diseases. The monograph would have benefited from colour reproduction, particularly for some of the illustrations in the Neuropathology and Pathogenesis chapter, but this would have added to the already horrendous cost of this book. I will regularly be dipping into my complimentary copy.

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Guidelines for Standards in Laboratory Practice in Medical Microbiology, publication no. 3. S. MEHTAR, ed. Pp. 30. St Leonards on Sea, East Sussex: Association of Medical Microbiologists, 1994, £10.00.

Research, the subject of this journal, is about what it is right to do and audit about doing it right. Standards therefore evolve from research, are relevant to all readers, and are essential for audit. The Association of Medical Microbiologists are to be congratulated on trying to produce standards in the heartland of clinical microbiology. Anyone who writes gold-standards (or perhaps in the cash-strapped NHS it should be brass-standards) needs to be sure that they represent the best (or an acknowledged deviation from the best) rather than what is 'usually' done or what is personally acceptable to the authors. Every microbiology audit group should perhaps now audit their practise against these standards, and report if they consider the standards are wrong. Health care purchasers will not go far wrong now if they adopt the highlighted standards. I hope the standards will be provided on (two sides of) A4 as a check list that can be given to the purchaser.

This volume is slim and expensive at 30p/page. In marked contrast to the Standard Laboratory Procedures published by the American Society of Microbiology it does not concentrate on detailed technical methods, but reference to methods keep appearing. Methods should not be despised (or praised, just because they are molecular) – they are critical to accurate diagnosis and intervention. The initials PCR only appears once (under 2·5 standard 3 for Herpes simplex DNA in CSF) – a startling contrast with American publications. There are occasions where on the basis of research publications the standards are too low – total blood volumes for culture of < 10 ml are inadequate, or odd/ambiguous, e.g. the suggested reporting of 'pure' coliforms in cultures from the genital tract. There are other standards which may be high and many labs will not comply (e.g. availability of special media for culture of trichomonas). Sometimes the standards stray into political value judgements. The choice of what should be available in 'low tech' *vs.* 'specialist' virology laboratories is perhaps now inappropriate in terms of automated, validated, fully controlled technology which (at a price) could be safely made standard. The reliance on NEQAS as a methodology control is surely inappropriate since this is only scored relative to other participants and the authors make no mention of adequate internal quality assurance.

I think it would be helpful to take some of the UK specific elements out of the specimen related sections, e.g. notifiable diseases, and deal with these as a separate standard which might take a wider epidemiological rather than laboratory view, e.g. management of meningitis, community outbreaks, and diarrhoeal disease.

The authors have made a fine start. The work is timely, invaluable but incomplete – Section 6, it is said, will be provided as a supplement. My message is please do not bother – have the standards audited and republish the whole (sponsors please not). High, appropriate, standards of laboratory-based medical microbiology are essential to protecting the public from infection.

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Textbook of Diagnostic Microbiology. CONNIE R. MAHON, GEORGE MANUSELIS, JR. eds. Pp. 1134, 600 colour illustrations. Philadelphia, USA. W. B. Saunders & Co., 1995, £29.95. (Slide set £364+VAT; Lab. workbook, £14.95, also associated with the book.) ISBN 0-7216-34028-1.

This book is aimed at the medical microbiologist who is starting out on clinical practice in a hospital microbiology laboratory. The major concern of the book is the practice of clinical bacteriology, but mycology, parasitology and virology are also covered. The whole is set in the context of hospital microbiology in the USA.

There are many similar books with a similar title, so why choose this one? The book's major virtues are its practical approach: excellent colour illustrations and laboratory focus. The book is divided into three parts. Part one is an introduction to clinical microbiology. This includes a chapter on bacterial structure, physiology, metabolism, genetics and/or on host parasite interaction. For me the most valuable is chapter five which deals with those emergent technologies that may be of use in diagnosis, and includes valuable discussions on such topics as antigen detection, rapid methods and automation, the use of DNA probes and the diagnostic applications of polymerase chain reaction (PCR). This section closes with three chapters that provide an initial discussion of the handling, collection and examination of specimens.

Part two deals with the laboratory identification of significant isolates. Of the 14 chapters, 12 chapters are devoted to bacteria and one each to fungi, parasites and viruses. Perhaps surprisingly the methods used for bacterial identification concentrate on the traditional tests rather than on kit systems such as API. This traditional approach enhances the value of the text as a teaching took in that it encourages the student to derive an understanding of the identification procedures. This approach, coupled with the photographs of the test results, should result in the book being usable in parts of the world where resources are limited and there is not a long tradition of clinical microbiology.

The third and final part of the book deals with the laboratory diagnosis of infectious diseases. An organ by organ approach is adopted and the chapters conclude with case-studies that aid