

Clinics in Haematology. Vol. 12, no. 3, October 1983. Bone Marrow Transplantation, David G. Nathan (Guest Editor). Pp.xii + 227, illustrated. W.B. Saunders, London, Philadelphia, Toronto, 1983. £11.75.

For the growing number of bone marrow transplant centres and for doctors wishing to understand better what lies in store for the patients they refer, a review of modern bone marrow transplantation is most timely. In the foreword it was decided to use the clinical experience of 4 transplant centres, Baltimore, Boston, Hammersmith and Seattle, and presumably most of the writing was completed during 1982 as there are very few 1983 references. While they had hoped for the benefit of as broad an experience as possible, it is the opinion of this referee that several chapters frequently suffer from a one-sided view point and do not reflect the state of the art as it is today. While it is interesting to have a mainly American view of bone marrow transplantation, it is sad that many of the major advances which have been made in Europe remain unsung or are dismissed in a few lines. Even in the 28 pages on the history of the subject, it takes aplastic anaemia first, and gives the first twin transplant success to Americans in 1961 when, in fact, it occurred in Cambridge in 1957. On p. 622, Thomas is given plaudits for successful allogeneic transplants as if he was first when, indeed, the real breakthrough enabled by tissue typing and mixed lymphocyte cultures had been made 4 years previously by Bob Good's team who are dismissed in half a line on p. 628. It does not give the first successful haplotype transplant (Westminster, 1972), nor the first successful transplant from an unrelated donor (Westminster, 1973). Of the 214 references, 36 are from the author's team. While they have made important contributions to the subject, I find the history somewhat out of balance with little or no reference to some of my own heroes, with 11 for Thomas, E.D. and only 3 for Van Bekkum.

In contrast, the 2nd chapter by Yunis, Awdeh, Raum and Alper, is the best short review of the MHC in human bone marrow transplantation that I have ever read. The 3rd chapter is on experiments in mice with, alas, no mention of similar human work from the team of Van Rood in Europe. A competent review of the emergence of the implanted stem cells then follows, but omits many new growth factors, and failed to explain or include, how syngeneic foetal and liver transplants mismatched for all four A and B loci have provided satisfactory replacement of immunity in children studied by Touraine's group in France. Nevertheless, Figure 5 on p. 711 with dual recognition in a single receptor molecule correctly guessed what has been found by Tada. Chapter 5, taking leukaemia

and aplastic anaemia together and even stealing the thunder of Chapter 6 by including chronic myelogenous leukaemia, seemed inadequate to me in this day and age. It would have been better to have one good chapter dealing with all the problems of aplasia and another one dealing with acute leukaemia. Chapter 6 from Hammersmith on chronic granulocytic leukaemia honestly reports the problems of transplantation in the accelerated or blastic phase. They would love to have included their recent successes from transplanting in the chronic phase, as they predicted on p. 748. Their gloomy conclusion in this book has now been superceded. Chapter 7 by Rapoport, Smith, Parkman & Rosen flies high the Boston flag by first detailing their own 1978 complete corrections of Wiskott-Aldrich Syndrome and of neutrophil actin dysfunction in 1977. In these they demonstrated the need for displacement and the reader would think this was invented in Boston. On p. 764 they misquote the Westminster paper, which in fact achieved 12% engraftment in 1973. They then write, 'this case demonstrates, once again, the need...' for displacement. In all honesty, the Westminster report first demonstrated the need to 'make room' in a marrow already occupied by genetically abnormal stem cells, and outlined their initial practice of doing it by selective irradiation of the pelvis. The doubtful picture for thalassaemia on p. 766 has now been superceded. While Boston have, indeed, made useful contributions to osteopetrosis, no mention is made of the earlier Polish work. Chapter 8 on graft-versus-host disease, I did not find helpful, its treatments out-of-date and inexperience with Cyclosporin-A clearly showing. By 1982, European work showed that the way ahead was to pretreat the donor marrow with antibodies to remove competent lymphocytes and these advances in preventing GVH are covered in a good Chapter 10 by Jerome Ritz. Chapter 9 also gave an excellent summary of the infectious problems with bone marrow transplantation.

This slim volume contains a mine of information and has to be read by those who wish to consider themselves well informed in this field. Alas, events can overtake what was thought to be the best practice at the time, and indeed, for aplastic anaemia, CGL, genetic diseases, prevention and treatment of GVH, there have been major improvements during the past years, especially in Europe, and these have not been covered.

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