
The author is clearly an expert in this particular field of pathology. His book is very readable and is profitably illustrated by both clinical and pathological photographs, but its title is somewhat misleading, because the author has included descriptions of benign melanotic tumours of the skin.

The book is composed of 12 chapters which deal in turn with pigmented naevi, their malignant potential, melanoma, spontaneous regression in these tumours, multiple primary cutaneous melanomata, their metastases, their prognostic features, their diagnosis by frozen section, the doubtful cases, the surgical approach, ocular melanoma, and problems concerning melanotic tumours in children. The problems of diagnosis of pigmented tumours are fully discussed.

There is an interesting account of Hutchinson's melanotic freckle, a lesion which may be difficult to differentiate from the well-known superficial spreading type of melanoma. The most important feature that distinguishes the two lesions is the presence of advanced solar degeneration of the skin in the former. Apart from the rare malignant blue naevus, the author recognises 3 main histogenetic patterns of development regardless of the presence or absence of a pre-existing naevus. He divides melanomas into 3 groups: invasive melanoma, with adjacent intraepidermal component of Hutchinson's melanotic freckle; invasive melanoma, with adjacent intraepidermal component of superficial spreading type; and invasive melanoma, without an intraepidermal component. The importance of recognising these 3 categories lies in the fact that each has a different prognosis, being worse when there is no evidence of an intraepithelial component. The author's classification is based on the work of Clark (1967), an international meeting of pathologists (1972), and on his own experience. In contrast to his classification of skin melanomata a recent meeting of pathologists at the World Health Organisation in Geneva reclassified tumours of the eye and its adnexa and divided melanomata of the skin of the eyelid into 4 recognisable histological types: melanoma arising in junctional or compound naevi, melanoma arising in blue naevi or cellular blue naevi, melanoma arising in intraepithelial melanosis, and melanoma of indeterminate nature.

The author has also discussed the relation between the prognosis of melanomata of the skin and the number of mitotic figures, the depth of tumour invasion, and the presence of a polypoidal structure. The prognosis is worse with increasing mitosis, depth of invasion, and when there is a polypoid pattern. On the other hand the presence of a continuous band of lymphocytes beneath the melanoma is usually an indication of spontaneous regression.

There is a short chapter on ocular melanomas, but it is impossible to cover this field adequately in a few pages. Some of the illustrations of choroidal melanomata are poor, and his assertion that the usual treatment of choice for conjunctival melanomata should be excision of the orbit will be severely criticised by ophthalmic surgeons who reserve this form of treatment for only a small percentage of cases, including those in which the melanoma has recurred and has invaded the orbit.

The author is to be congratulated on writing such an excellent treatise on melanotic tumours, and this book is highly recommended to all histopathologists.

Gwyn Morgan


The ophthalmic assistant, for whom this book is written, is the clinic or consulting room assistant who may have had no formal training but who needs a knowledge of anatomy, physiology, and optics as well as practical information on clinical methods, eye diseases, and medical and surgical treatment.

There are chapters on running the appointments office, spectacles, minor surgery, and hospital practice.