the same fashion in response to different opioid medications? Unfortunately, I and my colleagues were unable to convince reviewers of other journals of that important fact. Perhaps our observations, belatedly conveyed here in the form of a letter, will lend support to the careful study of Dowlatshahi et al. I wonder how many other research drawers contain 'dead' yet viable data?

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Books

Precancerous lesions of the gastrointestinal tract. Edited by B C Mason and J R Jass. (Pp. 174; illustrated; £22.50.) London: Bailliere Tindal, 1985. Pathologists are often amused when, having presented a paper, they are congratulated on the beautiful pictures with the scientific content forgotten. I am in danger of doing the same with this book. The colour photomicrographs are of the highest standard and the transparencies, which can be bought separately, will be even better. If pathology is not to be regarded as simply pattern recognition, the text of an atlas is important. In a short space the essential points are covered but perhaps in the interest of brevity, misleading and inaccurate statements have crept in. The difficult subjects of severe dysplasia, in situ and intramucosal carcinoma are not well tackled. In the gastric section we are told that a distinction between severe dysplasia and intramucosal carcinoma has important treatment implications yet it appears that severe dysplasia amounting to in situ carcinoma is almost always associated with invasive carcinoma. Again in the colorectal area severe dysplasia without invasion of the muscularis mucosa is regarded as in situ carcinoma when any form of invasion eliminates an in situ lesion. It is stated that no lymphatics are present in the colorectal mucosa when they are known to occur around the crypts. These cannot be regarded as major faults and may help in an important function—the promotion of discussion.

When another edition is contemplated a section on cytology would indicate the value of correlating cytological and histological appearances. This book will be useful to pathologists and clinicians and is good value.

D J POLLOCK

Corrections

Correction
In line 6 of the BSG abstract on toddler diarrhoea by Guerro, Brown and McNeish (Gut, October 1985, T.22) the words 'mouth to caecum transit' should read 'mouth to anus transit'.

Correction
In the paper entitled 'Effect of warfarin on cell kinetics . . . (Gut 1985; 26: 807–15) Figures a and b on p. 812 have been reversed in error.

In the leading article by J B Elder (Gut December 1985) p. 1280, second paragraph, line two should read '(2000 mg/kg/day) lasting from 875–903 days with plasma blood concentrations . . .'