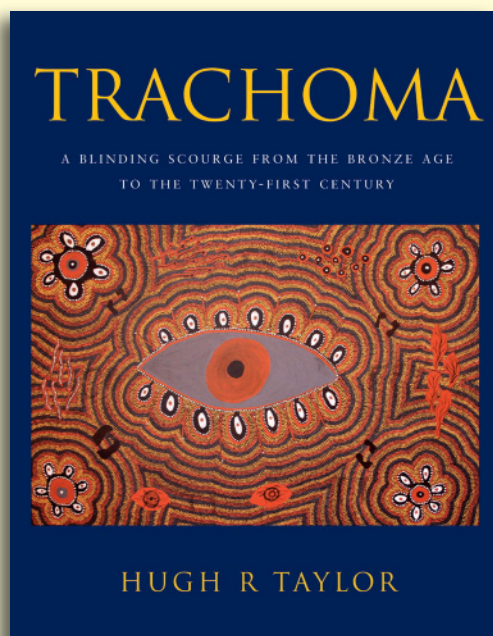




Full colour with 304 pages

TRACHOMA

A BLINDING SCOURGE FROM THE BRONZE
AGE TO THE TWENTY-FIRST CENTURY

Hugh Taylor presents a fascinating and comprehensive review of trachoma, from ancient times through to the present. He includes predictions and recommendations for its elimination. Trachoma has been targeted by the World Health Organization (WHO) for elimination by 2020 and currently affects 84 million children in 56 countries and blinds 1.5 million adults. This seminal and highly readable work will be invaluable for anyone who is interested in trachoma, but will also appeal to those interested in the interface of public health and development, the history of medicine or health care development.

CHAPTER HEADINGS

- 1 Trachoma is an ancient disease and a weapon of mass destruction
- 2 Trachoma development, institutions and the 20th century
- 3 Clinical diagnosis
- 4 Laboratory diagnosis
- 5 Biology of chlamydia
- 6 The epidemiology of trachoma and reinfection
- 7 Pathogenesis
- 8 Trachoma vaccine development
- 9 Trachoma control and the SAFE Strategy
- 10 Will trachoma disappear before we eliminate it?

Professor Hugh Taylor has spent much of his remarkable career at the center of the trachoma research revolution.... This authoritative and richly illustrated text, the first full explication on trachoma's origins, consequences and control in decades, is destined to be a classic in the field.

ALFRED SOMMER – BALTIMORE

It is a fascinating account and will be of interest to ophthalmologists, public health and infectious diseases specialists, and all those interested in the history of medicine and the control of infectious diseases.

DAVID MABEY – LONDON

This book is the most comprehensive review of trachoma ... and will become a classic for all scientists and clinicians in helping achieve WHO's plans for trachoma elimination by 2020.

THOMAS QUINN – BALTIMORE

This book sheds light on the past, present and future of trachoma control. Professor Taylor has been involved in the front line of trachoma control, and represents a perfect blend of basic researcher and public health officer, ideally placed to successfully deliver the fascinating story of trachoma across decades and countries.

SILVIO MARIOTTI – GENEVA

Trachoma, and the efforts to control it, make a terrific tale. Hugh Taylor is just the person to tell it ... and is probably the most influential expert in the field. The book is a comprehensive tour de force ... What's more, it reads well ...

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BOOK REVIEWS

TRACHOMA: A BLINDING SCOURGE FROM THE BRONZE AGE TO THE TWENTY-FIRST CENTURY

By Hugh R. Taylor. 282 pp., illustrated. East Melbourne, Australia, Centre for Eye Research Australia/Haddington Press, 2008. \$112. ISBN 978-0-957695-9-1.

PERHAPS IN A TRIBUTE TO THE IMPORTANCE of stories to the aboriginal peoples of Australia, Hugh Taylor has organized his book as an interwoven storyscape, and a vivid one at that. Born in Melbourne, Taylor served as an ophthalmologist in the Australian National Trachoma and Eye Health Program (NTEHP) in the 1970s. During his time with the program, he cared for his first aboriginal patients with trachoma and was introduced to the health disparities that are too often borne by members of indigenous populations. Over the decades that followed, Taylor went on to become an internationally recognized authority on trachoma who has made important contributions as an advocate as well as in research, clinical care, and control programs. This book has grown out of his life's work.

Taylor begins *Trachoma* by placing the disease in historical context. Although it is difficult to distinguish among the various causes of the diseases that were historically classified as ophthalmia, Taylor describes how a range of ancient records, including Egyptian papyri, Chinese historical records, and Indian and Greek medical tracts, show that trachoma has blinded humans since antiquity, an assertion that is perhaps even more strongly supported by the ultimate historical record — the genome of *Chlamydia trachomatis*, whose 900 open reading frames make it one of the most parsimonious bacteria to infect humans (salmonella contains over 4000 open reading frames). Such a focused genetic repertoire in *C. trachomatis* strongly suggests a long and particularly intimate relationship between the disfiguring intracellular pathogen and humans.

After the historical introduction, Taylor proceeds with a series of chapters, each of which tells more focused stories in several topic areas, including clinical manifestations, epidemiology, immunopathogenesis, diagnosis, treatment, and control programs. Each chapter is a wonderful resource, not only as a summary of current knowledge, but also as a historical record of how we got to where we are today. For instance, the chapter on laboratory diagnosis summarizes which diagnostic assays are currently available (with critical or illustrative references), tells how these assays were developed, and describes their individual strengths and weaknesses. Similarly, the chapter on the role, importance, and shortcomings of trachoma control programs is an instructive review of the science, policy, and history that have given rise to the current global efforts to control and possibly eliminate trachoma through initiatives that are based on the SAFE strategy (Surgery for trichiasis, Antibiotic therapy, Facial cleanliness, and Environmental change).

Each chapter is concise, well written, well edited, and readable and contains wonderful photographs and reproductions of important landmarks, or particularly instructive tables and figures from the primary literature, all presented in an accessible manner. The book reflects Taylor's strengths in clinical care and immunopathology, as well as his grasp of the implications of field studies and control programs. The review of the biology of the *C. trachomatis* organism is cursory, but the fact that a single author wrote the book allows for a unified and immensely readable story that is peppered with personal perspectives and anecdotes. The result is a well-presented, authoritative, and comprehensive testament that nonexperts can easily understand. Written with the scope and expertise of an authority who has spent decades working on trachoma in the clinic, laboratory, field, classroom, and committee room, *Trachoma* will be a wonderful resource for a wide range of clinicians, researchers, public health officials, and policymakers.

The book ends with a status report on blinding trachoma in the indigenous population of Australia, the group that Taylor first studied decades ago. Despite impressive advances in the understanding of the pathogenesis of trachoma and the development of effective antibiotic treatment, rapid diagnostic tests, and control programs such as SAFE, it is sobering that trachoma still occurs

in the indigenous population of Australia. The complex nature of this age-old scourge reminds us that despite all the advances of the past century, we cannot yet take our eyes off the prize.

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SALIVARY GLAND DISORDERS

Edited by Eugene N. Myers and Robert L. Ferris. 517 pp., illustrated. Berlin, Springer, 2007. \$209. ISBN 978-3-540-47060-0.

SALIVARY GLANDS SEEM TO BE AN ENIGMA to most practitioners despite the ease of examination and the frequency of salivary gland disorders. Patients most commonly seek medical attention when the parotid or submandibular glands become enlarged or painful. There is often confusion about whether the swelling is in a lymph node or a salivary gland. Rarely is a differential diagnosis entertained, but a referral to an otolaryngologist will often follow, with the hope that appropriate care will be provided. Care is not always appropriate, however, since even these specialists consider common entities before the more unusual inflammatory and neoplastic conditions. Even in a busy head-and-neck practice, such conditions are infrequent. The literature to date that can assist in the care of patients with these less common conditions can most often be found in general otolaryngology texts or journals and not in a single source. This book, edited by Eugene Myers and Robert Ferris, fills the void.

Salivary Gland Disorders spans the entire array of conditions that can affect salivary tissues. The contributors are international experts. Each chapter begins with a list headed "Core Features" that introduces the highlights of the chapter. "Take Home Messages" at the end of each chapter provide summaries of the critical points. Many chapters also include a list called "Complications to Avoid," an additional summary of potential risks. There are numerous illustrations in color, as well as many high-quality radiographs. It is apparent that references were not limited, and a number of chapters are extensively annotated, such as chapter 3, "Pathology of Salivary Gland Disease," which includes 630 citations.

The book is not divided into topics, but instead flows from one subject to another. The early chapters

cover traditional subjects such as anatomy, imaging, and pathology. In later chapters, diseases — both benign and malignant — are discussed. Discussion of neoplastic disorders takes up nearly half the book, and this seems to reflect both the complexity of the treatment for these disorders and the main interests of the editors. These chapters are detailed in text and illustrations, making them valuable for head and neck oncologists.

The important message the practitioner should take from this book is that salivary gland conditions are varied, and the treatment can require the expertise of a number of specialists. *Salivary Gland Disorders* will be most valuable to these specialists, and particularly to otolaryngologists, who will definitely benefit from the thorough exposition. This well-written book serves as a single source for the current medical knowledge in this area.

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CYSTIC FIBROSIS

Third edition. Edited by Margaret Hodson, Duncan Geddes, and Andrew Bush. 503 pp., illustrated. London, Hodder Arnold, 2007. \$198.50. ISBN 978-0-340-90758-0.

CYSTIC FIBROSIS IS ONE OF THE MOST COMMON inherited diseases in populations of European descent. The median life expectancy of patients with cystic fibrosis is on the rise and has changed dramatically, within a period of three decades, from approximately 10 years to approximately 38 years. This favorable result has been achieved through research; through the development of adequate medications, especially enteric-coated pancreatic enzymes; through the use of prophylactic medications; through treatment by multidisciplinary cystic fibrosis teams; and through early intervention for patients who have pulmonary exacerbations. The total number of patients with cystic fibrosis worldwide is not known, but approximately 30,000 patients are listed in the cystic fibrosis registry in the United States.

The addition of editor Andrew Bush, an expert in pediatric respiratory medicine, to this edition of the book is a welcome change. The book deals with most aspects of cystic fibrosis, including basic science, diagnosis, clinical aspects, monitoring