

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

News

Third European Symposium on Gastrointestinal Motility

This meeting will be held from 16–18 June 1986. Closing date for abstracts is 8 March 1986. Further details from Prof G Vantrappen, University Hospital, St Rafael-Gathuisberg, Herestraat 49, 3000 Leuven, Belgium.

Emergency in Gastroenterology

A symposium dealing with recent developments in this field will be held from 30 April to 2 May 1986 at Klinikum rechts der Isar, Munich, FRG. Details from PD Dr med G E Vogel, Ismaningerstrasse 22, D-8000 Munich 80, FRG.

FASEB Summer Research Conference

To be held from 20–25 July 1986 in Vail, Colorado, USA, on physiology and pathology of the splanchnic circulations. Details from the FASEB, Splanchnic Circulation Conference, 9650 Rockville Pike, Bethesda, Maryland 20814, USA.

Corrections

Correction

In line 6 of the BSG abstract on toddler diarrhoea by Guerre, 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 . . .'