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BOOK REVIEWS

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Genatlas. J Frézal, M-S Baule, T D Fougerolle. (Pp 1012.) Paris: John Libbey. 1991.

This book represents the fruit of many years work by Jean Frézal and his colleagues in assembling data on gene mapping. This second edition is produced in a much more attractive format than the first and contains a number of new tables, as well as being as up to date as anything can be in this rapidly moving field.

Inevitably the question arises whether a book such as this, based on a data collection system separate to that used by the Human Gene Mapping volumes and McKusick's *MIM*, fills a useful role. My conclusion, at least as far as the book is concerned, is that it does, and it is worth stressing why.

First, the HGM reports are extraordinarily unhelpful to the clinician or clinical geneticist, who has to decipher genetic disorders hidden among a forest of genes and markers, where even the disease name is dropped as soon as a gene product is available. It was in attempting to compile the clinical disorders report from this material two years ago that I became fully aware how inadequate these volumes were for anyone clinically orientated, and how useful the corresponding tables in *Genatlas* were by contrast. The tables in *MIM*, while useful, are not so complete from the mapping viewpoint, though the merging of the on line *MIM* and HGM databases has to some extent solved this problem.

Genatlas, unlike the HGM reports, has been conceived and produced by someone primarily interested in diseases. This is reflected in the way its tables are organised, including functionally related lists of antigens, hormones, and receptors, as well as a very detailed list of mapped genetic disorders, with extensive, often clinically relevant, references. Individual chromosomes are also dealt with fully, though I missed the visual companionship of actual chromosome maps that is such a feature of *MIM*.

Whether the database underlying *Genatlas* will be able to handle the ever increasing detail of the human genome remains to be seen. Meanwhile, Jean Frézal and his coworkers deserve the thanks of all those in the gene mapping field whose interests are mainly disease related, who should find it a useful source of both mapping information and references.

PETER S HARPER

Chromosome Anomalies and Prenatal Development: An Atlas. Oxford Monographs on Medical Genetics No 21. D Warburton, J Byrne, N Canki. (Pp 104; £65·00.) Oxford: Oxford University Press. 1991.

A good monograph should have as its basis long and extensive experience and painstaking study. This monograph is one of the best, based on a 12 year study in New York city of over 5000 spontaneous abortion specimens.

Although called an atlas (and only 100 pages long) there is great breadth and depth of subject matter as well as excellent illustrations. The first chapter describes the study and in the process provides a model for cytogenetic and morphological examination of spontaneous abortions. There are useful definitions of the various developmental types of abortion and descriptions and illustrations of the morphology of villi and their correlation with various karyotypic abnormalities. The subsequent chapters concern specific chromosome abnormalities or chromosome groups. They are all based on studies of large numbers and describe the range of manifestations from the appearance of villi to embryos arrested early in development to late second trimester fetuses.

The illustrations throughout are wonderful, mostly in colour and printed on good quality, slightly matt paper, which I imagine is the publisher's equivalent of non-reflective glass.

I can think of no criticisms, constructive or otherwise, and the only major omission is of an aspect of the subject whose importance was not recognised at the time of the study, that of mosaicism. While mosaic states are referred to in the various chapters, the recent work of Kalousek and others has shown that a dedicated chapter would be justified in a future edition.

This atlas strikes just the correct balance of text and illustrations. I would highly recommend it to embryologists, gynaecological and paediatric pathologists, cytogeneticists, and clinical geneticists involved in fetal dysmorphology; all could learn from, and make good use of, the wealth of experience recorded and illustrated here.

DIAN DONNAI

NOTICES

Health Professions in 1992: The European Challenge

This one day conference will be held on Tuesday 28 April 1992 at the Guildhall, London EC2P 2EJ. The fee is £75.00 (reduced fee available to members of the Royal Society of Health). For further information contact: Conference Department, The Royal Society of Health, 38A St George's Drive, London SW1V 4BH. Tel: 071–630 0121. Fax: 071–976 6847.

3rd International Workshop on Carcinoma in situ and Cancer of the Testis

This workshop will be held on 1–4 November 1992 in Copenhagen, Denmark. The scientific programme will include the following topics. (1) Pathogenesis and cytogenetics of germ cell cancer. (2) Hormones and growth factors in testicular neoplasia. (3) Carcinoma in situ: screening and management. (4) Identification and treatment of high risk groups. Deadline for submission of abstracts is 15 May 1992. For further information please contact: Workshop Secretariat, C/o Professor Niels E Skakkebæk, University Department of Growth and Reproduction, Section 5064, Rigshospitalet, 9 Blegdamsvej, DK-2100 Copenhagen, Denmark. Tel: +45 3545 5085. Fax: +45 3139 9054.

24th Annual March of Dimes Clinical Genetics Conference: Clinical and Molecular Cytogenetics of Developmental Disorders

This conference will be held on 12 to 15 July 1992 at Stanford University, Stanford, California. The conference will provide an overview of cytogenetics including topics such as microdeletion syndromes, new chromosomal syndromes, prenatal screening, genomic imprinting, in situ hybridisation, and new treatment modalities. The programme includes plenary sessions, optional primer session, ethics and counseling panel, and diagnostic session. Abstracts are due by 15 April 1992. For informational brochure, contact Professional Services Department, March of Dimes Birth Defects Foundation. Tel: (914) 438–7100.

Notice to contributors (general guidance)

The readership of *Journal of Medical Genetics* is world wide and covers a broad range of workers, including clinical geneticists, scientists in the different fields of medical genetics, clinicians in other specialities, and basic research workers in a variety of disciplines. It publishes original research on all areas of medical genetics, along with reviews, annotations, and editorials on important and topical subjects. It also acts as a forum for discussion, debate, and information exchange through its Letters to the Editor columns, conference reports, and notices. The editor is always grateful for suggestions or criticisms from readers and authors.

ORIGINAL PAPERS

These may be on any aspect of medical and human genetics and may involve clinical or laboratory based and theoretical genetic studies. Guidance on length can be obtained from studying the Journal. Shorter articles may be most appropriately submitted as *case or family reports*, not exceeding 1000 words, with no more than three figures, one table, and 10 references. *Short reports* should not exceed 500 words, with a single illustration. Contributions may also be submitted as *Hypotheses*, *Technical Reports*, *or Short Communications*. Accelerated publication of papers of particular importance will be considered.

REVIEWS

Short or longer reviews on all aspects of medical genetics are welcome, but should be discussed first with the Reviews Editor. Contributions on historical topics, or which could form part of specific series, are particularly acceptable.

ANNOTATIONS AND EDITORIALS

These are written or commissioned by the editors, but suggestions are welcome regarding possible topics and authors.

LETTERS

These are welcome on any relevant topic and will be published rapidly. Those relating to or responding to previously published items in the Journal will be shown to those authors, where appropriate. Although a paper submitted as an original report may sometimes be published in shortened form as a letter, it is preferable for initial submissions to be as a short report, unless directly related to a previous journal article.

CONFERENCE REPORTS

Reports from small to medium sized meetings, especially international workshops on specific topics, will be appreciated. Authors intending to submit conference reports should liaise with the Reviews Editor to avoid duplication.

SPECIAL ISSUES AND SUPPLEMENTS

These are published at intervals on topics of particular relevance. Enquiries are welcome from those organising workshops or symposia who may have material suitable for such an issue.

BOOK REVIEWS

The Journal aims to review as wide a range of relevant books as possible. Authors or others wishing to check if a book has been received may check with the Journal office. Computer programs and databases, official reports, and other material relevant to the field may all be appropriate for review. Enquiries about such items are welcome.

OBITUARIES

The Journal would like to be informed rapidly of the death of any senior or important person in the field of medical or human genetics, regardless of geographical location. In general, a brief notice would be published rapidly, with a longer obituary as appropriate. Since such deaths often occur many years after retirement, it will be appreciated if readers will contact the Reviews Editor so that appropriate arrangements can be made.

NOTICES

Notice of forthcoming meetings in different countries should be sent as far ahead as possible. Extensive descriptions should be placed as advertisements.

'CALLS FOR PATIENTS'

The Journal receives an increasing number of requests to publish notices of proposed studies involving patients or families with rare genetic disorders. In general such notices are appropriate only for major international collaborations; the proposer should ensure that such a notice does not conflict with existing studies or proposals.

ILLUSTRATIONS

High quality black and white photographs are preferred for most illustrations, particularly of patients. Colour illustrations can be accepted; however, authors are asked to pay part of the cost, so their desirability should be discussed in advance of submission. All identifiable photographs of patients must be accompanied by written permission for use.

Specific instructions to authors

Papers, which should be in triplicate and in the Vancouver style (*BMJ* 1988;**296**:401–5), should be sent to the Editor, *Journal of Medical Genetics*, BMA House, Tavistock Square, London WC1H 9JR and not to individual editors, with the exception of papers from the USA, which can be submitted to the North American Editor, Dr P M Conneally, Department of Medical Genetics, James Whitcomb Riley Hospital for Children RR129, Indiana University Medical Center, Indianapolis, Indiana 46223, USA. Submission of a paper will be held to imply that it contains original work which has not been previously published. It is the responsibility of the submitting author to ensure that all co-authors are agreeable for their names to appear on the manuscript. A FAX number should be provided. Permission to republish must be obtained from the Editor.

Where a patient(s) with a structural chromosome abnormality is described, the availability of a cell line(s) should be stated in the text together with its identifying number, cell bank, and, where appropriate, contact person.

All contributions should be accompanied by an abstract (preferably structured) giving the main results and conclusions. Typescripts should be at least double spaced with wide margins. One page proof will be sent to the author submitting the paper and alterations on the proof, apart from printer's errors, are not permitted. Reprints may be ordered when the proof is returned.

Figures should be kept to a minimum and should be numbered consecutively in Arabic numerals. Legends should be typed on a separate sheet.

Tables should not be included in the body of the text, but should be typed on separate pages and numbered with Arabic numerals. A legend should be provided.

References should conform precisely to the style current in this journal. Authors are responsible for the accuracy and completeness of their references as these will not be checked by the Editorial office.

NOTES ON NOMENCLATURE

Authors should refer to the following publications.

(1) Chromosomes: *ISCN 1985. An international system for human cytogenetic nomenclature*. Basel: Karger, 1985.

(2) Genes: Shows TB, *et al.* In: Human Gene Mapping 5 and 7. *Cytogenet Cell Genet* 1979;**25**:96–116, 1984;**37**:340–3.

(3) Loci: Conventional nomenclature should be used, with lower case lettering as appropriate (for example, Race RR, Sanger R. *Blood groups in man.* 6th ed. Oxford, London: Blackwell, 1975; and Giblett ER. *Genetic markers in human blood.* Oxford, London: Blackwell, 1969).

(4) Blood coagulation: International Committee of Haemostasis and Thrombosis (Graham JB, *et al*). A genetic nomenclature for human blood coagulation. *Thromb Haemostas* 1973;**30**:2–11.

(5) Enzymes: *Enzyme nomenclature: recommendations of the nomenclature committee of the International Union of Biochemistry*. New York: Academic Press, 1984.