Fire metaphor itself. The victims in Kuwait and Southern and Northern Iraq were military personnel whereas autoimmune disease generally affects cells and tissues which are not part of the immune system. However, “Cold War” metaphor, while a more accurate description, would not have made such a racy book title.

**Friendly Fire** is written for the general reader and provides an engaging overview of the breadth of tissues and responses involved while giving an economical overview of the immune system itself. It is peppered with anecdotes relating to systemic lupus erythematosus (SLE) which are major interests of the authors and are often entertaining. In this context it is a pity to see controversies within the research community dealt with as if there were unanimity. The authors present rheumatoid arthritis as a prototypical autoimmune disease although they will be aware of a strong current of opinion which refutes the evidence for this. On p 37 ankylosing spondylitis (AS) is described as “not a true autoimmune disease” yet it features in a figure on multiple cases of autoimmune diseases in a single family. To continue the military analogy, this seems to be a further confirmation that there are important genetic components of autoimmune conditions (p 31). Indeed, this book includes the boldest declaration for the suppressor T cell in its purest form which I’ve seen in a long while.

**Why should clinically orientated geneticists be interested in a book about autoimmune disease? Apart from the fact that around 5% of us will suffer from at least one autoimmune disease in our lifetime, the majority of these diseases have an inherited component. The development of almost every autoimmune condition is influenced by alleles at loci within the major histocompatibility complex or HLA system. However, we still have no clear understanding of the role of this gene system in the induction of such diseases other than a vague notion of thresholds being exceeded and balances upset. **Friendly Fire** ends with a chapter on potential therapies. These include several which have probably been mentioned for completeness rather than as serious candidates. However, the general reader will be interested to hear that there is real hope for the future as more immune system targets become identified and are experimentally manipulated. I was grateful to the authors for pointing out that it was Peter Parham who first elaborated the military metaphor. Perhaps he should be the one to arbitrate on whether metaphors represent heavy armour and whether cytokines are like biological or chemical warfare.

**JERRY LANCbury**


As genetic knowledge increases and becomes more widely applied so it becomes more important for the adopted person to have information about his or her genetic parents and family history. Where this is unavailable he or she may feel particularly vulnerable when starting their own family and request “genetic testing” in general, a request difficult to discuss in a vacuum. Reasons for this anxiety will become clearer after reading this book.

It is multidisciplinary with contributions from clinicians, social workers, and a lawyer all involved in British Adoption Societies. It covers medical and laboratory geneticians and research psychologists. The only omission is the genetic history of the person herself but a chapter of illustrative case studies and other case reports and quotes to some extent fill this gap.

The early sections outline medical aspects and stress the importance of obtaining adequate details of the birth parents’ family history, although inevitably this may prove difficult. A number of chapters describe relevant genetic disorders with special emphasis on neurological, developmental, cardiac, and psychiatric disorders, and malignant disease. Inevitably repetition occurs as neurofibromatosis comes under several of these headings.

The middle section describes the “new genet**ics**” and its clinical applications, including a chapter on the Human Genome Project. More detail is supplied than most readers will require but these chapters do make plain the rapidly changing backgrounds to which modern adoption practice has to adapt.

Throughout the book the exceedingly sensitive ethical issues weave and interweave. Confidentiality issues and the sometimes conflicting interests of the birth parents, the adopting parents, and, most importantly, of the child himself or herself raise tensions often unresolvable.

Chapters on the genetics testing of children and on the psychological impact of genetic testing of any type illustrate how little factual information is available in these areas. There is a clear need for careful evaluation and scientific study so that guidelines for those involved in face to face encounter with both parents and adoptees can be based on real information rather than anecdotage.

Readers of this journal will know most of the genetics contained in this book but will benefit from reading it as their eyes will be opened as they read developments and genetics on adults adopted many years ago and on those currently concerned with the proceedings. It can be recommended as essential reading for all those professionally involved with the adoption process.

**A CAROLINE BERRY**


This is an extensive book about FAP and associated disorders by an expert in this field. The book inevitably has a surgical bias, but in some senses this makes it even more applicable to a clinical genetics readership. It contains strong chapters on introduction, history and registry, pathology, endoscopy, screening including CHRPE identification, and various surgical options. The St Mark’s experience with FAP is such that they of all places are best placed to offer surgical guidelines on the management of this condition. Inevitably there will be a slight bias in their ascertainment with more severely affected cases and families being referred. Nonetheless, their recommendations are broadly applicable, particularly to FAP itself.

There are, nonetheless, areas in which some readers might arbitrate and put forward for various aspects of screening in FAP and other polyposis conditions. For example, while the experience of St Mark’s with screening of the upper GI tract for duodenal polyps and cancer is undeniable, they are yet to show a benefit for this form of screening, and in some senses this should be treated in the same way as screening in other cancer settings, such as that of the ovary with ovarian