and their disease processes based on evaluation of disease signs and symptoms. As with many infectious disease syndromes, a zoonotic infection often debuts as a nonspecific febrile illness, and a discussion of a common approach to the patient who presents with a nonspecific febrile illness could potentially help clinicians identify specific disease processes in a cost-efficient and time-efficient manner. The current book format requires that the reader already have some basic knowledge of the specific disease-causing agent(s) and the differential diagnoses for the disease syndrome.

There are some minor inaccuracies in a number of the subchapters throughout the book. For example, we know now that 1 of the 3 hunters in Northern Wisconsin who allegedly died of Creutzfeldt-Jakob disease actually died of Pick disease, which has not been related to prion disease. Chloramphenicol is no longer recommended for treatment of human ehrlichial or anaplasma infections, given the lack of demonstrated in vitro effect and clinical failure in vivo resulting in fatal outcomes for several children. The mortality rate for patients with human anaplasmosis was initially estimated to be as high as 15%. More recent information indicates that the rate is 1% or lower. The impact of these and other inaccuracies on the reading experience as a whole, however, is minor.

Abbreviations are frequently used throughout the text, and a short glossary of commonly used laboratory terms can be found in the introductory pages. An expanded glossary that also includes the specific disease names and their abbreviations (such as Japanese encephalitis [JE], St. Louis encephalitis [SLE], human monocytic ehrlichiosis [HME], and others) would have enhanced and expedited the reading experience.

Each of the subchapters concludes with a representative reference bibliography. In addition, the preface refers readers who want more extensive information about specific diseases to a number of excellent standard textbook sources. However, there was no reference to the most recent editions of Cook and Zumla’s Manson’s Tropical Diseases [1] and Cohen and Powderly’s Infectious Diseases [2]. It should also be mentioned that the Centers for Disease Control and Prevention (CDC; Atlanta, GA) maintains continually updated websites (http://www.cdc.gov/health/default.htm) for most of the zoonoses that are included in this book.

Despite some of the shortcomings mentioned, the book contains a wealth of information and serves as a valuable quick-reference source about infectious agents that cause diseases in humans and animals. The text reads very well, and the information in each subchapter and in the index is comprehensive, detailed, and well organized. I found Appendix E, which lists zoonoses connected with specific animals, to be a particularly helpful quick reference. There are relatively few color photograph illustrations, but those that are present are of excellent quality. This book should be especially valuable to veterinarians, physicians, public health officials, epidemiologists, and microbiologists, as well as physician extenders (clinical nurse practitioners or physician assistants) who are still in training or are in the early stages of their professional careers. However, the depth of the information in each section is not extensive enough to satisfy the reader who seeks comprehensive information about specific zoonotic agents or wants to gain cutting-edge information about new or reemerging zoonoses.

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References

Manual of Clinical Microbiology, 8th Edition
Edited by Patrick R. Murray, Ellen Jo Baron, James H. Jorgensen, Michael A. Pfaller, and Robert H. Yolken

Every field of endeavor has one resource that is universally acclaimed among practitioners as its “bible.” For clinical microbiologists, it is the Manual of Clinical Microbiology (MCM). Some 30 years after the first edition appeared, the MCM is now in its eighth edition, in 2 volumes and 141 chapters spanning all areas of this expanding field. If there is one word that can be used to describe the MCM, it is, most assuredly, “encyclopedic.”

From the introductory chapters discussing laboratory management, design, and information systems to the chapters discussing identification algorithms and media preparation and the extensive and authoritative chapters reviewing the microbiologic and clinical laboratory features of all medically important infectious agents, the MCM offers a single, comprehensive reference source for the clinical-microbiology laboratory. Volume 1 includes sections I and II, which, in part, review general clinical microbiology topics as well as discuss the principles of infection control and the detection of potential bioterrorism agents. Section III is a review of technologies and instrumentation, and sections IV and V extensively discuss bacteriology and antibiotic susceptibility testing. Volume 2 comprises sections VI–IX, which discuss virology, mycology and parasitology.

Although it is unlikely that one will actually read the entire work, I found the chapters on my areas of special interest to be well written and up-to-date, complete with many color photographs and a broad list of references. Within the sections, each chapter is crafted as a mini-review and
provides the reader with an in-depth analysis of the chapter’s topic. Among the many aspects of the MCM that I particularly appreciate are the extensive literature reviews and the detailed descriptions of laboratory test methods, especially the molecular techniques. I will undoubtedly turn to the MCM as a resource whenever a topic is to be investigated, whether for technical or scholarly purposes. Indeed, if I were asked to recommend a single reference to place in a clinical microbiology laboratory, it would be the MCM.

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New Books Received


