

# Oncologic imaging

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*Oncologic Imaging* is organised into 17 chapters and has 11 contributors, two of whom are the main contributors. The goal of the authors is to provide information relevant to imaging that radiologists and clinicians who deal with malignant disease would find useful. The number of pages (392) means that the book cannot be very comprehensive; however, the major malignant diseases that affect the adult brain, head and neck, thorax, abdomen, pelvis, and musculo-skeletal system are covered.

There are separate sections on melanoma, acquired immunodeficiency syndrome-related malignancies, bone marrow transplantation, interventional radiology, and the newer modalities in cancer imaging. Each chapter begins with a brief epidemiology of the disease and is followed by the relevant imaging issues, including the commonly used staging system. The problem of cancer screening is also addressed in appropriate sections.

Although there are detailed discussions on some topics, such as imaging of ovarian and prostate cancer, the description of the imaging findings on many malignant diseases are quite brief, perhaps due to insufficient space. For example, in the section on computed tomography (CT) of cholangiocarcinoma, there is no mention of delayed and persistent contrast enhancement in the tumour, which is a helpful sign in reaching the diagnosis.

The text is generally well referenced, but some of the references are not from the recent literature. An obvious example is the mention of the tumour-node-metastasis (TNM) classification of nasopharyngeal carcinoma: the authors refer to the third edition (1988) of the classification system of the American Joint Committee on Cancer while in clinical practice, the fifth edition (1997) is currently being used. Some statements in the text also appear to be outdated or contentious, such as the statement that angiography is still useful for the selection of a biopsy site and the assessment of the response of osteosarcoma to chemotherapy; these techniques are now not usually used, as magnetic resonance imaging is commonly used instead.

Although recent advances in oncological imaging are generally lacking, a chapter on newer modalities concentrates on radioimmunoscinigraphy and positron emission tomography. Spiral CT is very useful in present day radiological practice, but the method is only mentioned in the imaging of lung cancer to improve detection of small nodules. The text would have been more informative if new developments, such as the use of contrast-enhanced helical CT to image hepatocellular carcinoma or tissue-specific magnetic resonance agents to detect hepatobiliary tumour, had been included in appropriate sections.

Of the 350 illustrations shown, there is room for improvement in the quality of many of the images. Some have been taken using early-generation equipment, and some of the plain X-rays appear too dark for details to be seen. For example, except for the smooth erosion of the bony cortex in Figure 11-3, the presence of a soft tissue mass is not obvious. In addition, there are a substantial number of inaccuracies in the illustrations, such as Figure 12A-2D, which is a proton density image (SE 3000/20) that is described as "a mostly T2W image". More careful proofreading could also avoid errors such as the transposed labelling of Figures 11-1 and 11-2.\*

At a cost of HK\$950, the book is relatively expensive. However, this compact volume should be useful for those who need a quick reference on imaging of the major malignant diseases. For radiologists who normally require high-quality illustrations, more detail, and up-to-date references, the book may not be the best choice.

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\* A detailed list of errors was supplied with this book review and can be obtained by contacting the Managing Editor