

*Biopsy Interpretation of the Upper Aerodigestive Tract and Ear, 2nd edition (Biopsy Interpretation Series)*

Edward B. Stelow, Stacey E. Mills.  
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A fan of the *Biopsy Interpretation* series, I was pleased to review a new title, although without reviewing the first edition. As advertised, “recent advances in our understanding of aerodigestive tract pathology,” are presented in a user-friendly manner, incorporating selected and targeted use of ancillary techniques to help reach a diagnosis, although the reader is reminded to focus on the standard hematoxylin and eosin-stained material first and foremost. In fact, the entire chapter on hematopathology only has a single immunohistochemistry image, which is normally a field run amok by immunohistochemistry stains. Always forward thinking, and utilizing all resources available to reach a diagnosis, the book itself will be as helpful as any of the supporting ancillary studies.

Following the standardized 9 × 6 inch format of the *Biopsy Interpretation* series, this concise reference is easily handled without difficulty. You can easily flip through pages and compare diagnoses in the comfort of your home, during a bumpy plane flight, or in the cramped quarters of the frozen-section area. Axiomatic,

the format has a tight binding that will not fall apart from overuse. Whereas the printed photomicrographs are easy to interpret, the ability to “zoom” in and view on high power by means of the digital (e-Figures) images online makes them even more useful, especially if viewed through a tablet or iPad.

The book is arranged in a manner familiar to pathologists. The book begins with a brief review of normal anatomy and histology. Subsequent chapters are organized around lesions with related morphologic features. Intended for daily surgical pathology sign-out, only critical and salient findings needed to establish a diagnosis are given, foregoing the more detailed clinical descriptions, imaging findings, and treatment or prognostic attributes better presented in more comprehensive and “heavier” tomes. Still, snapshots of uncommon entities (*NUT* midline carcinoma; mammary analogue secretory carcinoma) are included. The tables provide a compact comparison between diagnoses or a place to catalogue findings in a convenient way. The authors emphasize objective findings when discussing nosological entities, providing insights into the inherent limitations of biopsies. Perhaps, however, it would be nice with this type of book to include personal approaches or biases to common diagnostic dilemmas. Nonetheless, a diverse range of neoplastic and non-neoplastic entities is covered at a level quite satisfactory for practicing pathologists to render diagnoses on daily head and neck biopsies. Kudos to the index: Finally, a book that lists where to find the entity without re-

direction or a “see also...,” both incredibly irritating discoveries in the usual index (although, oddly, Ewing sarcoma is not in the index but is covered in the book: pages 174 to 175).

Pathologists by nature are visual people, eager to see as many photographs and illustrations as possible. If there is a blemish in this series, it is the “single” 3.75 × 2.75 inch illustration. You could double the number of photographs (390 presently in the book) by simply using split-fields and expanding to the full 4.5 inches used by the surrounding text. As an example, figure 8.33 has the right half taken up by white space. Instead, a split field with Figure 8.34 would have allowed for 2 additional images of a sinonasal small cell carcinoma. It might also be nice to illustrate some of the new ancillary markers, such as FLI1 instead of CD99 for Ewing/primitive neuroectodermal tumor (Figure 8.21) and TLE1 instead of bcl-2 for synovial sarcoma (Figure 11.62), as these markers may not be as familiar to the audience.

This book would be a welcome addition to any pathology department providing services to otolaryngologists. Curiously absent a dedication, let me provide one: “Dedicated to all practicing pathologists who need to find an accurate answer—fast.”

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