The final 2 chapters cover a myriad of applications used in clinical microbiology and the diagnosis of infectious diseases. Even though presented as an overview, the >100 references in chapter 11 illustrate how vast and varied the application of real-time PCR, and the technological advances to support its use, have become in the past decade. This publication would be a good addition to any laboratory as an up-to-date resource for both the novice and the experienced researcher.

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Daniele Dionisio, an authority in parasitology, has assembled a new treatise, Textbook–Atlas of Intestinal Infections in AIDS, that directly addresses this topic. In 489 pages, the work includes much background, including a fascinating chapter by Esther Diane on the history of the discovery of intestinal parasites. The work and illustrations of parasitic life cycles by Dionisio and colleagues are illuminating for all students of infectious diseases.

Much of the book addresses particular agents and the diseases they cause. A particular strength is the numerous illustrations. Although varying in quality, they represent an enormous compendium of information about these common problems. The figures on microscopic and ultrastructural pathology are particularly strong.

This volume should be considered as a background text for the pathologist, gastroenterologist, or infectious disease specialist who concentrates on HIV infections. The illustrations and references provide readers access to materials not easily obtained. The sections on clinical management of particular conditions are relatively sparse, and healthcare workers with patients with active problems should consult with a more comprehensive text. In total, this textbook-atlas is a useful addition in the battle against HIV infections and its complications. The editor and multinational group of authors are to be congratulated on their scholarly work.

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Textbook–Atlas of Intestinal Infection in AIDS

Daniele Dionisio

Springer-Verlag, Italia, Milano, Italy
Pages: 489, Price: U.S. $149.00

Gastrointestinal tract infections are prominent in patients with AIDS. Infections may be caused by a variety of bacterial, fungal, viral, protozoal, and helminthic pathogens, and affect persons in both developing and industrialized countries. The problems are especially acute in resource-limited countries where little or no access to highly active antiretroviral therapy exists; the impact of illnesses associated with HIV is most pronounced in these countries.

Public Health Response to Biological and Chemical Weapons: WHO Guidance

World Health Organization
ISBN: 92-4-154615-8
Pages: 357; Price: U.S. $34.20

In this manual, the World Health Organization (WHO) updates its guidance for governments in preparing for a possible terrorist attack with biological or chemical weapons. The book has something for virtually everyone who may have an interest in this topic, from government officials to clinicians, including information about the history of biological and chemical warfare, applicable international treaties, procedures for requesting WHO technical consultation, fundamentals of public health emergency response, basics of infectious diseases, treatment of patients with specific infectious or toxic exposures, physical properties of various agents, the utility of reconnaissance satellites for detecting weapons development, the management of food and water safety programs, etc.

This ubiquity and ambitiousness underlie the manual’s limitations and strengths. At times the guidance is so general that is almost an inventory of truisms (e.g., “If it is found that the [emergency] control measures are not effective, they must be changed or modified.”); elsewhere, the manual is a detailed resource. Its utility for different users will depend on their backgrounds and information needs. The core chapter, Public Health Preparedness and Response, may disappoint those seeking more than general principles. Yet these principles merit articulation.

Descriptions of the sarin attack in Tokyo in 1995 and the anthrax attacks
in the United States in 2001 illustrate lessons from governments’ recent experiences with chemical and biological terrorism. Both episodes demonstrate that relatively small attacks can have a profound impact and expose weaknesses in public health systems. The anthrax case study lauds the success of laboratory preparations but does not sufficiently address three essential questions: Why did clinicians caring for the initial patients with cutaneous anthrax not establish and report the diagnosis sooner? Why did the Centers for Disease Control and Prevention not recognize earlier that anthrax spores could escape from sealed letters? Why did the federal government stumble initially in its efforts to communicate with the public? For each question, an assessment of systemic hurdles would benefit readers seeking to improve the functioning of the public health system.

The manual generally, but not consistently, avoids bureaucratic lingo. While clearly organized, the book lacks an index, complicating efforts to find information quickly. The appendices on chemical and biological agents offer concise, formatted summaries similar to those available through other resources, but ironically provide relatively little information about the agents’ potential as weapons.

This manual will find a home on bookshelves worldwide among government officials and others concerned about the threat of biological and chemical terrorism. For those in countries most in need of this guidance, its scope may be overwhelming. But the book’s underlying theme—that public health preparedness for biological or chemical terrorism depends on fundamental capacities to respond to more common health threats—is its most salient message, no matter where the user resides.

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