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Microcirculation in organ transplantation

**Progress in applied microcirculation,
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Basel: Karger 1995. X, 126 pp., 26 figs,
9 tabs, (ISBN 3-8055-5849-X), hard cover,
DM 178.00.

In 1995 Messmer, Menger, and Land published the proceedings of the 12th Bodensee Symposium on Microcirculation, a symposium devoted to microcirculation in organ transplantation. The editors argue in their preface that they "pursue the hypothesis that chronic rejection might be initiated already at the time of reperfusion as a result of endothelial dysfunction, which is in turn initiated by interaction of granulocytes with the donor microvascular endothelium." The very last chapter in the book deals with this interesting concept. Land describes a study in which kidney graft recipients were treated at the time of grafting with recombinant human superoxide dismutase (rh-SOD) and reports that the treatment reduces the incidence of acute and chronic rejection. The prevention of oxygen free radical-mediated reperfusion injury by rh-SOD is said to reduce late rejection. Although this early study is far from ideal in set-up, it is certainly of interest since recent data by Terasaki et al. [1] support the suggestion that ischemia/reperfusion damage enhances graft rejection.

The book consists of four blocks of three chapters, and each block is followed by a summary and discussion of these chapters. Microcirculation, as studied by intravital microscopy, is the subject of only a minority of the papers. The scope of the book certainly goes beyond this facet. Interesting chapters are those by Paul and Kubes on the potential of adhesion molecule-directed therapies in organ transplantation. Post et al. show that intravital microscopy allows for the detection of substantial differences in liver microcirculation during early reperfusion between livers treated with different perfusion fluids. Three chapters are directed at arterioscle-

rosis: chronic allograft arteriosclerosis, gene expression in vascular disease and microvascular events in the development of arteriosclerosis, and the role of oxidized LDL-induced leukocyte/endothelial interaction.

This book provides an introduction to many interesting subjects relevant to the biology of (chronic) graft rejection. The meeting that formed the basis for the book was clearly a fruitful one, and the discussion pages clearly reflect the discussions held at the meeting.

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References

1. Terasaki PI, Cecka JM, Gjertson DW, Takemoto S (1995) High survival rates of kidney transplants from spousal and living unrelated donors. *N Engl J Med* 333: 333–336

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Cholangiography after orthotopic liver transplantation

Berlin – Heidelberg – New York – London
– Paris – Tokyo – Hongkong: Springer-
Verlag 1996. 103 pp., 67 figs. (ISBN 3-540-
60491-X), DM 98.00.

This book contains a concise compilation of the experience with cholangiography after orthotopic liver transplantation. It comes from an experienced center and is written by experts in the field.

The weak side of the book is its scientific quality. The classification of the complications and pathology is somewhat arbitrary. Reference lists are short and in some places key publications are missing. Here and there statements are made that need more support. Data on long-term effects of therapeutic actions are not always stated.

However, the contents provide a complete overview of biliary complications occurring after liver transplantation. The book is accentuated with many superb illustrations. The authors provide clear insight as to how the biliary complications can be visualized and treated with either ERCP or PTC(D), or both. Often very creative therapeutic solutions are presented. Therefore, this book is very suitable to have at hand in clinical practice as a useful guide for diagnosis and therapy of suspected biliary complications.

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