Book review

The Antiphospholipid Syndrome II: Autoimmune Thrombosis

Edited by R.A. Asherson, R. Cervera, J.C. Piette, and Y. Shoenfeld
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The Antiphospholipid Syndrome II: Autoimmune Thrombosis is an intelligently conceived and most enjoyable book dealing with all of the important issues concerning APS. The contributions of the many authoritative experts have been arranged in four sections covering the history and epidemiology, the immunology and pathophysiology, the clinical features, and the management and prognosis of APS. Every chapter includes a comprehensive list of references so that the reader can explore specific issues in greater depth.

The first section describes the history and focuses on the prevalence of both primary and secondary APS through a review of the literature. The antiphospholipid syndrome (APS) is defined as a clinical disorder with recurrent arterial and venous thrombotic events, pregnancy morbidity and/or thrombocytopenia in the presence of the lupus anticoagulant and/or a positive antiphospholipid test. Interest in the disease has been increasing in the last ten years among scientists due to some of its peculiar features. APS is a complex, mysterious, and not uncommon disorder that is of multidisciplinary concern. Indeed, antiphospholipid antibodies (APA) are found in a variety of clinical situations, such as the hypercoagulable state, thrombocytopenia, fetal loss, dementia, stroke, ocular symptoms,Addison's disease, skin rashes and, recently, accelerated atherosclerosis. However, one major difficulty in studying APA is that no one really understands yet the underlying pathogenic mechanism that leads to the clinical syndrome.

In the second section of the book lupus anticoagulants and antibodies to cardiolipin, to other phospholipids (phosphatidylserine, phosphatidylinositol, phosphatidylglicerol, phosphatidic acid), as well as to β2glycoprotein-I, prothrombin and annexin, are thoroughly discussed, including their clinical and laboratory significance. Although the detection of both anticardiolipin antibodies by ELISA and lupus anticoagulants remain the assays of first choice for the diagnosis of APS, the development of newer tests to detect anti-β2glycoprotein-I, negatively charged phospholipids, prothrombin and annexin are under extensive evaluation on the basis of their pathophysiological role. What is the significance of β2-glycoprotein-I dimerization? Is it the trigger for an increased risk for thrombo-embolic complications? What is the role of the annexin V anticoagulant shield on the phospholipid surface? These and many other questions are discussed.

Moreover, the effects of APA on endothelial cells, endothelial cell interactions with leukocytes and platelets, the role of cytokine and adhesion molecules, tissue factor and protein C pathways, as well as the immunogenetics of APS are examined in the second section of the book.

The third section is devoted to a complete discussion of the signs and symptoms of APS from neurological manifestations to cardiac, pulmonary, renal, abdominal, fetal and obstetric, ophthalmic, otological, dermatologic, endocrine, hematological, osteo-articular, and other clinical manifestations of the disease.

In the last section the management and prognosis of APS are discussed. All current, novel and future therapies are reviewed. Moreover, various unresolved issues such as lifetime anticoagulation, use of the proper form of anticoagulant, timing of the intervention, immunosuppression or plasmapheresis in catastrophic APS, hormone replacement in women, as well as many other practical problems are thoroughly covered in this book.

Drs Asherson, Cervera, Piette and Shoenfeld are well known experts in the field of autoimmunity and have already published many important articles on APA. As the editors of this book they have sought to cover all aspects of APS, and have created a handy, practical manual on the complex features of this heterogeneous syndrome.

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