

Book Review

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Tibor Tot. *Colorectal Tumors: Atlas of Large Section Histopathology*. Thieme Medical Publishers; 2005. 152 pages, 293 illustrations. Hardcover, \$139.95 US.

Histopathology continues to play an important role in the diagnosis and staging of colorectal carcinoma. This atlas by Tibor Tot, titled *Colorectal Tumors: Atlas of Large Section Histopathology*, describes and illustrates large-section histopathology for colorectal tumors and benign lesions, and it provides multiple images that correlate with endoscopic, radiologic, and operative findings. This book differs from other similar publications available because it presents the pathology of the colon in large histologic sections representative of the entire resected specimen.

This method of grossing and preparing full-size sections from colorectal specimens has the advantage of showing the entire lesion, and it also defines its relationship to the surrounding tissues. This method also provides more accurate evaluations of the size of the lesion, its multifocality, and the circumferential surgical resection margin.

Several illustrations are included that depict large histologic sections of a variety of resected colonic lesions including adenomas, carcinomas, lymphomas, gastrointestinal stromal tumors, inflammatory bowel diseases (ulcerative colitis and Crohn's disease), and diverticulitis. These images help to identify tumors, guide diagnosis, and establish staging according to TNM criteria. For each case, the author provides a case history, macroscopic and microscopic description of the lesion, staging, and follow-up. Unique schematic guides for the interpretation of the morphologic details in the large sections are also included and, where necessary, additional clues for the interpretation of the lesion (practical points) are given. The book ends with a chapter describing in detail the technical steps for the preparation of large histological sections. This chapter is clear and well illustrated, and it shows how the preparation of the large sections is a cumbersome, difficult, time-consuming process that requires specialized instrumentation and well-trained personnel.

While the "large-section histopathology technique" is of definitive educational value and may provide optimal clinical-pathological correlations (ie, with endoscopic and radiologic findings), I have reservations about incorporating this technique as an acceptable method for the routine evaluation of resected colorectal specimens. The implementation of this technique may significantly

affect the turnaround time for the generation of "Final Surgical Pathology" reports. It is clear that the fixation time and the processing time for this type of specimens are prolonged. In addition, modification of preexisting laboratory instrumentation and/or acquisition of new instrumentation, as well as specialized training of the laboratory technicians, will be required for this methodology to be effective.

A comparison of the "large-section histopathology technique" with the conventional technique for the evaluation of resected colorectal lesion is not provided. Therefore, there is no clear justification to adopt a more expensive and a more time-consuming new technique. Nevertheless, this atlas may be beneficial to pathologists, radiologists, surgeons, and oncologists as an educational tool, as a reference guide to illustrate the importance of clinical pathologic correlation, or as a resource to illustrate the heterogeneity of colonic lesions. The price of the atlas is reasonable.