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Want more? Advanced embedding details, examples and help! Einige Word-Funktionen K'nnen in Google Docs nicht angezeigt werden und werden bei nderungen entferntDetails anzeigenLetzte Anderungen Anzeigen 182 Book reviews LO and Price MF); Gastrointestinal candidiasis (Boliva R and Bodey GP); Endocarditis, called Candida (Reyes MP and Lerner AM); Candida Endothalmit (Edwards J.J.); Comnov candidiasis (Rosen T); Chronic mucous candidiasis (Cleary TG); Candida Infection Treatment (Utz JP and Drouhet E). A comprehensive index adds to the value of the book. Chapters where appropriate are illustrated with black, white and color photographs. Each chapter is followed by 25 to 125 well-chosen, well-known links. A sturdy related book is printed with a large, easily legible type on paper stocks of precise quality. The text is almost free of typographical errors. In fact, there were several errors. Most egregious was the statement in the Candida Infection Mycology section that an antibiotic containing an environment that suppresses both bacterial and fungal contamination allows the detection of slow-growing fungi such as *Cryptococcus neoformans*. Not only does this pathogenic yeast not grow slowly, but its growth is completely inhibited by cycloheximid. Although these issues are discussed or included in the text, species such as *Candida guilliermondii* and *C. stellatoidea* are not included in the index. Editors should be commended for choosing and using the word candidiasis, throughout the text, as a name for infections caused by the pathogenic candida species *Candida*. In the section Laboratory diagnostics of candidiasis Kozinn and Tashjian to promote candidosis are based on an erroneous premise. Suffix-iasis does not necessarily or consistently denote a parasitic rather than mycotic infection, whose names usually end -osis. It is enough to recall such well-known parasitic diseases as coccidiosis, echinococcosis and trichinosis to see the prudence of their argument. Etymologically speaking, any version is correct. The choice between the two names depends on personal preferences and established use, not on scientific grounds. The nomenclature transition from moniliasis to candidosis is more consistent and harmonious than the abrupt transition to candidosis. Candidiasis editors and their authors have written a timely and authoritative book on the complex disease of global importance. The book is unreservedly recommended to anyone who deals with a medical problem presented by the pathogenic candida species. LIBERO AJELLO, Ph.D. Director, Division of Myotic Diseases Center for Infectious Diseases Centers for Disease Control of Atlanta, GA Martha E. Kern, Medical Mycology. Self-affirming text, 1985, 1-XXVII, 239 pages, Philadelphia, F.A. Co., \$24.95. Unusual among the publications currently available, which relate to human pathogenic fungi, is this guide related to paper. It is designed for a self-taking course on laboratory diagnosis of diseases caused by actinomycetes and fungi, after the introductory chapter on How to use this text, The book is organized in the form of seven modules: 1-main mycology, 2-laboratory procedures for fungal culture and insulation, 3--common fungal contaminants, 4---Superic and dermatophytic mushrooms, 5-yeast, 6---Organisms that cause subcutaneous micosis, and 7-organisms that cause systemic mycoses. These seven modules are followed by the A--Answers for Study Questions and Final Exams; Appendix B--Common Synonyms; Appendix C.--Glossaries; group of color plates (75) and index. A diligent and highly motivated student will find this guide to highly informative Book Reviews 1113 and useful in studying the basic procedures used to isolate and identify actinomycetes and fungi that can cause human disease. A liberal number of sketches and black-and-white and color photographs will improve the learning process. The book covers in detail the laboratory aspects of medical beology. The focus is on the rough and microspic features of pathogens and, if necessary, their diagnostic physiological properties. The diagnostic histological features of myco are infringed. Very useful immunological procedures, available for the diagnosis of mycoetes and for the detection and detection of fungal elements in tissues and for the rapid detection of fungal isolates, super-quiet are considered. Curiously, in the yeast section (Module 5) only a fleeting reference is made to widely used and heaving commercial kits that accelerate the study of yeast of medical significance and make their identification possible in the smallest hospital laboratories. The book is printed on a high-quality glossy broth with a very legible type. The paper cover will probably not withstand the hard use that this book will be subjected to. It should also be noted that in widespread publication of this kind there is a tendency to over-simplify complex subjects and present personal points of view. For example, penicillosis is defined as one not only caused by the unspecified species of the genus *Penicillium*, but also by members of the genus *Paecilomyces* and *Scopulariopsis*. Few, if any, medical myologists would adopt this peculiar definition. The term dermatophine is also incorrectly defined. Dermatophytes (literally skin plants) are not genera *Microsporum*, *Epidermophyton*, and *Trichofyton*. This very specific term is limited to highly specialized geophilic, zoophilic and anthropophilic species of these three genera that cause disease. Most geophilic these are these are not pathogenic and therefore not dermatophytes. The item used for aerobic actinomycetes is also controversial. The author puts *Actinomadura madurae* and *A. pelletieri* in the genus *Nocardia* and persists in using *Madurella mycetomi* instead of its actual designation --M, mycetomatis. Throughout the book, the terms of genus and kind are used as etiological agents of the disease. It should be noted that diseases are caused by species of organisms, not by childbirth. With these caveats to the user, this self-taking guide should prove to be very helpful to anyone who wants to enter the complex but useful field of laboratory diagnosis of actinomycic and mycotic diseases. LIBERO AJELLO, Ph.D. Director, Division of Myotic Diseases Center for Infectious Diseases of the Centers for Disease Control of Atlanta, GA Medical Mycology deals with these infections in humans and animals as a result of pathogenic fungi. As a separate discipline, concepts, methods, diagnosis and treatment of human fungal diseases are specific. Incorporating very up-to-date information on this area of vital interest to research and clinical microbiologists, Fundamental Medical Mychology balances clinical and laboratory knowledge to provide clinical laboratory scientists, medical students, interns, residents and fellows with in-depth coverage of each fungal disease and its etiological agents, both laboratory and clinical. Richly illustrated throughout, the book includes numerous presentations of the event. The book does an excellent job in addressing the latest advances in medical beology, which include the identification of new pathogens, new antifungal drugs and strategies for their use: Progress in molecular diagnostics; and actual knowledge about protecting the host from fungi, especially opportunistic pathogens. (New Infectious Diseases, August 2012) This text represents 10 years of the first book for students and clinicians interested in medical microbiology of fungi. The scope of this new book is well balanced between the medical and microbiological knowledge of the main human-pathogenic fungi. (International Clinical Laboratory, December 19, 2011) atlas of medical mycology free download. color atlas of medical mycology free download. textbook of medical mycology pdf free download. oxford textbook of medical mycology pdf free download. fundamental medical mycology pdf free download. medical mycology books free download pdf

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