A Clinical Atlas of 101 Common Skin Diseases with Histopathologic Correlation

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A Review by John T. McCarthy, MD

You will note above that all authors' names are printed in large capital letters, with the senior author in only slightly larger type. This is a tribute to the collegiality and respect that A. Bernard Ackerman, MD, has for his fellow masters of dermatologic teaching, coupled with his desire to produce the best possible atlas.

As Editor-in-Chief, I have never written a book review for *Cutis* for the simple reason that I didn't want to make enemies by refusing friends of *Cutis*, and I hadn't the patience for the many voluminous tomes submitted, many hardly worth the price, much less the effort expended in reading them.

Until now, there have been hundreds (if not thousands) of published books related to the skin. As a long-time collector of books on skin diseases, I can state, without any reservation whatsoever, that Ackerman *et al* have written a book that, in my opinion, serves as a reliable tool for accurate diagnosis of the majority of skin diseases. In addition, this book offers a myriad of differential diagnostic hints and therapeutic suggestions, presented in an indispensable, tabular fashion. No puffery, no needless duplication are evident in what I believe to be the definitive atlas of dermatology, filled with useful facts and incredibly beautiful photographs.

Some 2500 color photos, all selected by an expert on the particular entity, grace this 600-pluspage volume. Look up any reasonably common skin disease (and several not-so-common ones) and with a very high degree of probability, you will find the finest photograph you have ever seen of the particular disease. Many patients are grateful and reassured when shown a photo of their eruption. They know their choice of diagnostician was a good one. Curiously, when a patient knows his physician has made the correct diagnosis, treatment seems to be much more effective.

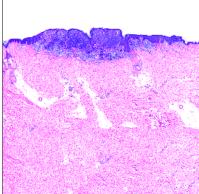
If you see patients with skin diseases, buy the book.

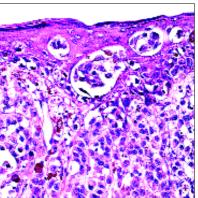
The next page and the two that follow are three of twenty-eight pages from the chapter devoted to melanoma in Ackerman's new *Atlas of 101 Common Skin Diseases*, published by Ardor Scribendi. To order this book, please contact Betsy Peare at Ardor Scribendi, tel. 212-889-6225, fax 212-889-8268, or www.ardorscribendi.com.

56 MELANOMA

DEFINITION A malignant neoplasm of melanocytes that, in the skin, begins as a macule and may become a patch or a papule. A flat lesion of melanoma tends to be asymmetrical, poorly circumscribed with a scalloped, jagged, or notched border, and variegate, mostly shades of brown. A patch may become a plaque or upon it may develop a papule, nodule, or tumor. A papule may develop into a nodule or tumor. The surface of an elevated lesion of melanoma tends to be uneven. When a melanoma is no longer flat, it has capability to metastasize and cause death.







56 + MELANOMA

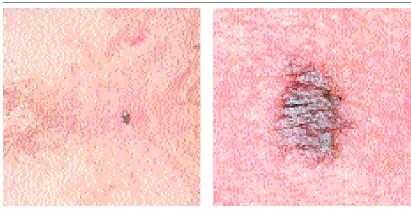


FIG. 56-I (A, B) Broad, asymmetrical, unevenly pigmented patch/plaque with a nodule and a notched border.



FIG. 56-2 (A, B) Asymmetrical plaque of relatively uniform size, except for a hypopigmented focus of regression.

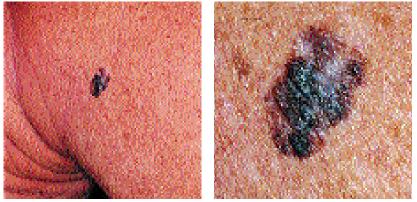


FIG. 56-3 (A, B) Asymmetrical macule with strikingly scalloped border. The scale is due, in part, to associated seborrheic dermatitis.

$56 \mid \text{melanoma}$



FIG. 56-4 (A, B) Asymmetrical papule with jagged outline.



FIG. 56-5 (A, B) Plaque whose border is crenulated and whose surface is uneven.

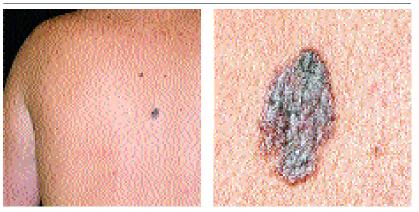


FIG. 56-6 (A, B) Asymmetrical macule with scalloped border.