

Field of medicine: Hematology, oncology, immunology, transplantation medicine.

Format: Hardcover textbook.

Audience: Clinicians who deal with patients after allogeneic hematopoietic stem cell transplantation (HSCT) — hematologists, oncolo- gist, infectious medicine specialists, gastroenterologists, pulmologists, neurologists, dermatologists, dentists and maxillofacial surgeons, gynecologists, endocrinologists, physical medicine specialists, psychiatrists — but also basic researches involved in the field of al- lotransplantation medicine.

Purpose: To fill the gap in literature on chronic graft vs host disease (cGVHD) — a major frequent late complication of allogeneic HSCT, characterized by signs and symptoms of various autoimmune or immunologic disorders and asso- ciated with decreased survival. The book provides a reference that will be valid in many settings, including transplant clinics, oncology/hematology clinics, specialty clinics, and basic research laboratories.

Content: This textbook is divided in 4 sections. Each section consists of several chapters. The first section is entitled General Principles. It comprehensively explores historical aspects of cGVHD, and the historical aspects of development of hematopoietic transplantation medicine. This section also includes the immunobiology and pathophysiology of both acute and chronic GVHD, and animal models of cGVHD, which should be interesting to both clinicians and basic researchers. Further chapters in the first section cover incidence, trends, clinical manifestation, natural history, risk factors, and predictive models of cGVHD, ending with biomarkers in cGVHD.

The second section is entitled Clinical Management. It pro- vides chapters that will be an especially clinically relevant and helpful resource for physicians who treat cGVHD pa- tients, emphasizing the importance of recently developed National Institutes of Health consensus criteria for diagno- sis, grading, and staging of cGVHD and its differentiation from acute GVHD. This section also focuses on the phar- macology, pharmacokinetics, drug interactions, and tox- icity of commonly utilized immunosuppressive agents in the management of the cGVHD. Further chapters include prevention, front line treatment, and salvage therapy of cGVHD, evaluation of therapeutic response, and principles of supportive care in cGVHD.

The third section entitled Organ Site or System — Specif- ic Manifestations reveals the most up-to-date knowledge about huge diversity of different clinical manifestations of cGVHD in many different target organs, with contributions from many medical subspecialties. Therefore, it is obvious that it will be interesting to a wide variety of clinical spe- cialists. This part of the book includes cutaneous, oral, oc- cular, gynecological, neurological, pulmonary, gastrointes- tinal, and hepatic manifestation of cGVHD, including the specificity of treatment modalities in these different organs and systems. It also covers hematologic complications of cGVHD, infections, rehabilitation of cGVHD patients, endo- crine and metabolic effects of cGVHD, psychosocial issues, health-related quality of life, secondary malignancies, and other late effects in cGVHD.

The last, fourth section entitled Special Considerations in cGVHD, describes the design of clinical trials for testing the treatment for cGVHD, a very educational part for readers interested in design of clinical trials. In this section, the role of stem cell source in cGVHD is also described.
as well as cGVHD after reduced-intensity conditioning and donor leukocyte infusions. There are also chapters about specificity of pediatric cGVHD, principles of interdisciplinary practice in the care of cGVHD patients, patient advocacy, education, and psychosocial support. This section ends with a prediction of future development of prevention and treatment of cGVHD.

**Highlights and limitations:** By collecting at one place the present state of the art of cGVHD, this book provides a comprehensive, up-to-date, and clinically relevant resource for physicians who treat posttransplant patients with cGVHD, by using interdisciplinary management approach to this disease. The unique feature of this book is that most chapters have never been published in any similar form, filling the striking gap in cGVHD literature and also laying out the conceptual foundations for future research. Presenting details of known pathophysiological mechanisms that lead to the development of the cGVHD, this book also address some possible pathological pathways in cGVHD that require further investigation – which is also very interesting for basic scientists dealing with this topic. The editors, Drs Georgia B. Vogelsang and Steven Z. Pavletic, pioneers in the recognition of the multi-organ complexity of this disease, have included in writing of this book a refreshing variety of subspecialists. The book includes contributions from more than 70 leading authorities from different fields of medicine, which makes it the very first textbook dedicated to the cGVHD. It is easy to predict that it will have permanent place in medical history with strong impact to future understanding of the disease. Since this field of allogeneic HSCT research continues to be a very active area, a growing number of ongoing or recently published studies will soon lead to the necessity of updating some chapters and, hopefully, to the next edition of this excellent book.

**Related reading:** Readers interested in cGVHD unfortunately cannot find textbooks dedicated especially to this topic. However, for those who want additional reading, the book “Graft versus Host Disease,” 3rd edition, edited by James Ferrara, Kenneth Cooke, and H. Joachim Deeg (Taylor & Francis, Inc; 2004), although not very recently published, has a chapter dedicated to cGVHD and contains some in-depth data mostly about acute GVHD, but also about GVHD in general. In addition, there is the most recent 4th edition of the “Thomas Hematopoietic Cell Transplantation,” edited by Frederick R. Appelbaum, Stephen J. Forman, Robert S. Negrin, and Karl G. Blume (Wiley-Blackwell; 2009), the major textbook on transplantation medicine in hematology, where readers can find comprehensive information about the biology and practice of marrow, blood, or umbilical-cord hematopoietic stem cell transplantation, including a chapter about cGVHD.
Chronic graft-versus-host disease (cGVHD) is a leading cause of late morbidity and mortality following allogeneic stem cell transplantation. Current therapies, including corticosteroids and calcineurin inhibitors, are only effective in roughly 50% of cases; therefore, new treatment strategies are under investigation. What was previously felt to be a T cell disease has more recently been shown to involve activation of both T and B cells, as well as a number of cytokines. With a better understanding of its pathophysiology have come more expansive preclinical and clinical trials, many focused on