Book reviews

Advances and Technical Standards in Neurosurgery Volume 9. Edited by H Krayenbuhl, J Brihaye, F Loew, V Logue, S Mingrino, B Pertuiset, L Symon, H Troupp, MG Yasargil. (Pp 177; DM 89.) Vienna, Springer-Verlag, 1982.

This book is the 9th in a series to be published under the auspices of the European Association of Neurosurgical Societies. The books are multi-author and have covered a wide variety of topics. The editors state in the preface that it is not intended to compete with publications of original scientific papers in other journals, rather their intention is to present a review of areas which have advanced in recent years. The book is divided into "advances", which is a review of progress in various aspects and "technical standards" in which an expert describes a surgical approach.

In this volume, topics include problems with surgical over-drainage of hydrocephalus, the intravascular occlusion of saccular aneurysms by means of detachable balloon catheters, and computed tomography. The technical standards cover the surgical approaches to the tentorial hiatus, management of chronic subdural haematomas and the treatment of subdural empyema.

The section on over drainage of hydrocephalus provides a good review of a difficult problem, well researched from current literature. In the chapter on intravascular occlusion of saccular aneurysm, there is a good account of manufacture and of the catheterisation technique. Two aspects are note worthy. First of all, the procedure has been performed under local anaesthesia and secondly, only two of all the patients have been treated during the first week after the bleed. Most of them have been treated towards the end of the first-month and this may have important implications with regard to the role of this technique in preventing early rebleeding. The chapters illustrating technical standards are of a high quality. That describing the approach to the tentorial hiatus is well illustrated and provided a detailed account of surgery in a difficult area. The treatment of chronic subdural haematomas is a good review for the young neurosurgeon on the treatment of an inadequately treated common condition. Subdural empyema is a relatively common condition which is described in great detail. The weakest chapter in the book is that on computed tomography.

The book would be useful in a depart-

mental or reference library but might not be so valuable in the individual collection unless all the volumes were available. One objection is the repetitious listing of the contents of chapters.

H ALAN CROCKARD

Pediatric Neurology for the House Officer (2nd ed.) By Howard L Weiner, Michael J Bresnan, Lawrence P Levitt. (Pp 227; £6.25.) London, Williams and Wilkins, 1982.

This book outlines in tabulated form a group of paediatric neurologists' approach to the house officer's role in paediatric neurology. Essentially it is a good book which summarises a very great deal of information which would be of practical value to a paediatric resident. There is no obvious competition for this book and there is a considerable need for it. Its strengths and limitations need to be known.

The account of the major paediatric presentation is comprehensive and the advice given is sensible and most common hazards are mentioned. The section on development and general developmental approach is rather thin without any discussion of the quality of a developmental stage; deprivation is not discussed as a cause of developmental problems. The Denver screening test is suggested as an assessment technique for children with problems for which it is not ideally fitted. Most paediatric neurologists in this country would wish their junior staff to be able to test vision and hearing in young children and no useful information is given on this subject. The absence of vision testing in children with raised intracranial pressure is a serious one. The section on epilepsy is good though practice in the UK would be different. Phenobarbitone is used as a first line drug for grand mal, the advice on withdrawal of drugs is very cautious and the management of febrile seizures is somewhat confused by the definitions. It would perhaps have been simpler to discuss the problems of diagnosis of pyogenic meningitis in a child who has recently had a seizure. The description of degenerative diseases is quite full but the methods of deciding if a disease is degenerative is not as helpfully discussed as it might be. Many people would be surprised at the massive drug armamentarium aimed at migraine in childhood. The authors attempt an outline of investigation and one has sympathy with the difficulty in a short book of giving advice on how to select investigations. The investigation of

mental retardation would have been a helpful additional section. The last section is a very useful one on neuroanatomy.

This book therefore is to be recommended as the best available short summary for paediatric neurology for residents despite some limitations.

BGR NEVILLE

Advances in Migraine Research and Therapy. Edited by F Clifford Rose. (Pp 248; \$48-98.) New York, Raven Press, 1982.

This book contains communications read at a conference held at Kyoto in 1981. Adult migraine in Japan and Nigeria is similar in presentation and response to treatment as in Europe and North America. Greek children and adolescents also do not differ from their contemporaries in the rest of Europe. But in Glasgow benign recurrent vertigo is confused with migraine; the teaching of Sir Charles Symonds that vertigo is associated with occipital headaches does not seem to have crossed the northern border of England.

Occasional papers required the finer scalpel of the editor. For example: "In repeated examinations of one patient in three separate migrainous episodes, headaches were classified as extracranial on four occasions, extracranial with an intracranial component on another occasion, and nonvascular in another four studies." Nevertheless I agree with the main finding of that paper that the dogma that migraine headache arises from extracranial vasodilatation is not supported. Even simple clinical observation of patients during attacks reveals pallor to be the predominant feature.

We read again from Denmark that there is brain malfunction during the headache phase, cerebral blood flow studies showing a pattern comparable with Leão's spreading depression where the vascular changes are secondary to neural inactivity.

Other interesting papers include a study from Australia attempting to simulate the effect of dry Middle Eastern desert winds by negative ion inhalation: in control subjects blood serotonin falls, not so in migraineurs where it may even be raised. In America 40-160 mg of propranolol has a 72% and in West London, pizotifen a 94% success rate in migraine prophylaxis. Does that mean the problem is solved?

There is Lichtenberg's dictum "doubt everything at least once—even that two and two makes four." Read in this vein, this book is worth a read.

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