scientific opinion without the whole machinery having to be reconstructed. For those of us currently involved in research using DSM-III, suddenly to be handed new tablets of stone out of a clear sky is rather depressing. Yet tablets of stone is what they are, if the impact of DSM-III is anything to go by. By the time this review appears, access to DSM-III-R will be mandatory to all those with an interest in psychiatric research. All medical school libraries should own a reference copy of the complete manual. I would steer individuals towards the pocket-sized ring-bound desk reference.

SW LEWIS


Professor Haines’ atlas is a large spiral bound paperback, intended mainly for undergraduate and postgraduate students. Three chapters cover the gross anatomy of the brain, including dissection of the interior, and unstained coronal and transverse sections, tilted in the CT plane. Chapter 5 begins an atlas of stained sections extending from the spinal chord, through the brain stem to the diencephalon and basal ganglia, and the book concludes with diagrams of the main nerve pathways.

Of the chapters added to this edition, the third, covering internal dissections of the brain, is essential if the atlas is to accompany practical classes. An enlargement of the central area of fig 3.6, showing the geniculate bodies would be an advantage. The figures in chapter 6, also new, are particularly clear and crisp, but the invitation to correlate horizontal and vertical sections of the diencephalon will appeal to few undergraduates. Chapter 8, in which magnetic resonance images have been added to a short CT and angiography atlas, is a timely reminder that these methods have been the most dramatic advance in applied neuroanatomy this century.

The atlas is accurate, comprehensive and modern. The spinothalamic tracts are grouped into one "anterolateral system" in the modern idiom. The corticospinal fibres are placed well back in the posterior limb of the internal capsule, as recent clinical research suggests, and terminate appropriately in laminae V-IX. The ventral spino-cerebellar tract takes origin, as Hongchia showed so elegantly, from the posterior part of the anterior grey column. The ventral garde will find the limbic lobe, the area postrema and the septal nuclei, and the post-graduate, the Edinger Westphal nucleus and the pretectal area of interest. Woolham’s importance work of the surgical significance of the paraventricular organs has not, however, ensured their inclusion.

There are some personal gripes. There are no simple diagrams of the whole brain to help students sort out its main parts on the first day. In the same way the morphological and functional anatomy of the cerebellum is entirely lost in a welter of controversial names and fissures. All atlases of this type would be so much more useful in the practical room if labelling was built up progressively, so that the earlier drawings identified the major divisions, and the later ones concentrated on the local topographical detail. The distribution of the cerebral vessels is comprehensively covered, but there are no dissections of the vessels themselves. The transverse temporal gyri are well shown in fig 3.1, but the striking differences of left and right are ignored—one of the few sites at which there is regular anatomical evidence of cortical asymmetry. Turning to the section atlas, only one half of each level is shown, the opposite half being a labelled tracing. This though a common practice is not successful, and destroys the natural symmetry of the level. In any event diagrams of the same side as the photograph would make finding structures infinitely easier. Students will find the outlines of some of the nuclei impossible to relate to the structures illustrated (for example, the nucleus ambigus in fig 5.8). This is exactly how faith is broken in the practical room, and could have been avoided by using sections in which the cell bodies are stained, as we do in class practicals in Glasgow. However, the sceptical or rebellious undergraduate, who, like some of his mentors, wonders how “tract” outlines are plotted where no tracts seem to exist, or how diagrams of “connections” are built up will find some consolation in the excellent and thoroughly modern bibliography.

The need for a good “traditional” neuroanatomical atlas, such as this, is unquestionable: the queues which form round labelled specimens in our own museum bear witness to this. The problem remains that neuroanatomy courses for medical students nowadays will rarely exceed 40 hours in total, and many are perfunctory or nonexistent. For the £19 which this atlas would cost, the average undergraduate could buy an excellent primer which would cover all his theory and include a summary atlas as well. Teachers, however, and especially those who have struggled with real brainstem sections, will find this an excellent and reliable supplement to an old Ranson, and superior to many other comparable atlases. Sydenham wrote of the brain that “no diligent contemplation of its structure will tell us how so coarse a substance……. shall subservre so noble an end”. In many ways this is still true, but read with insight, the thrill of modern neuroanatomy is here. And for the real neuroanatomist, leafing through Haines has all the fascination, charm and romance of leafing through an atlas of the world.

JOHN SHAW DUNN


This volume carries the abstracts of the papers read at the 37th Annual Meeting of the German Neurosurgical Society held in 1986. Three main topics were under discussion, namely regulation of cerebral blood flow and metabolism, neurosurgical treatment of epilepsy, and rehabilitation in neurosurgery.

The individual abstracts, unfortunately, are very variable. Some are too brief to be of any real value and others are simply a review of current approaches with no new information. Those papers in which some detail of methodology and results are given are of interest but even in these their brevity detracts from their real value.

I found the critical biography of Otfried Foerster by Professor Zulch of great interest and would recommend it to be read. Of the three topics under discussion the one on epilepsy is the most coherent and to those surgeons involved in this field worth reading. In particular the small series of patients evaluated with the PET scanner indicates a significant application of this technique in temporal lobe epilepsy. The article on the micro-anatomy of the anterior choroidal artery system is very useful if a selective amygdalo-hippocampectomy is to be recommended as the procedure of choice in a specific case.

The section on cerebral blood flow and metabolism covers a wide area with some papers of interest and some new obser-

The growing interest in migraine is reflected in the presence of 500 symposiasts present at the biennial meeting and in the accompanying mini-symposia and satellite meetings of the International Headache Society and World Federation of Neurology Migraine and Headache Research Group. The organisation and prompt publication of the proceedings do credit to the experienced editor Frank Rose.

The publication spans 278 pages and 41 papers. It is divided into five sections. The first three deal with migraine pathogenesis, vascular aspects and therapeutics; the fourth concentrates on cluster headache and the fifth with other types of "idiopathic headache." The contents inevitably vary in approach and value, ranging from a simple textbook type of survey of beta-blockers, through clinical trials of diclofenac, nasal dihydroergotamine to scientific studies of asymmetries of blood flow (Levine, Welch et al) and critical hypotheses of for example sensory connections of cephalic vessels (Moskowitz; Edvinsson et al). Platelet and basophil studies are described, peptides, dietary tyramine and wine are updated and fluid retention, menstrual and endocrine investigations are still unresolved enigmas.

Newer techniques of single photon emission tomography provide useful information non-invasively, and spectral analysis and topographic mapping (Schoenen, Jamer and Delwaide) show interesting unilateral EES changes even in common migraine. It is pleasing to learn how much more data are accumulating, but its very diversity confirms the neurologist's traditional view of migraine as a disorder of function with protean expression and multifactorial aetiologies. Thus, a unified explanation, or a series of identifiable mechanisms leading to rational treatment still evade us.

This book is packed with useful data. It is warmly recommended as a vital source of references for the migraine research worker. The clinician too, will be able to familiarise himself with all that's new in the migraine world.

JMS PEARCE


This is an excellent book and should be an essential requirement for any library of a neurosciences department, for although principally for surgeons in that there is a sizeable proportion of the book devoted to operative technique, there is information that would be invaluable to neurologists, neuropsychologists, neurophysiologists, neuro-radiologists and those involved with neurooncology.

From a surgical point of view the chapters on the operative approaches to the third ventricle and its surrounding anatomy are outstanding. The text, diagrams and photographs are all extremely clear and of good quality, and although there is inevitably some overlap, this is very much to the benefit of the reader. It is also of note that the difficulties and problems associated with the various approaches are given mention. Although the information in many of the
Regulation of Cerebral Blood Flow and Metabolism: Neurosurgical Treatment of Epilepsy: Rehabilitation in Neurosurgery. (Advances in Neurosurgery Vol 15.)

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