BOOK REVIEWS

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This is a well edited account of the proceedings of a symposium held in Sweden in 1990 and was planned to facilitate interaction between clinical and animal experimental research. The three editors in their preface sagely warn the readers of the “unfortunate risk” of clinical trials that do not have a solid experimental base and which are performed in a manner that does not permit stringent scientific evaluation of the results. These are indeed the salient problems encountered when attempting to review this book.

The basic and seminal premise of intracerebral transplantation in Parkinson’s disease is that when the malady is advanced and the majority of dopamine neurones has been lost, oral Levodopa is less efficiently converted to dopamine in the striatum and therefore to obtain benefit dopamine must be centrally generated or dopaminergic agonists must be used. Hence the notion of grafting a “dopamine pump” directly into a dopaminergic denervated striatum. While the notion is elegant, attractive, apparently rational, and certainly comprehensible to a simple clinician, from the presented information and the comments—particularly stemming from the lively discussion—the topic prickles with unresolved technical problems and the clinical results are far from satisfactory.

The Chapters come under four separate headings—Experimental Basis, Clinical Results, General Aspects of Intracerebral Transplantations in Movement Disorders, and Free Communication. In the first, the theoretical aspects and the advantages and limitations of primate models are critically presented. Clinicians however, I suspect, will find more useful the presentation of achieved clinical results. Experience from North America, United Kingdom, Spain, Cuba, Mexico and Sweden is presented and with the exception of the latter concerning four patients with idiopathic disease, the reader will encounter some difficulty in trying to deduce in realistic terms, what benefit if any has accrued. Prof. Stanley Fahn must have faithfully reflected the concern of the other clinicians present, when he noted that there were reports of 48 laboratory animals being implanted with foetal tissue mentioning a wide variety of tissue, means of implantation and target sites, and reports concerning a total of 94 humans who had received foetal tissue with a similar variety of techniques. Dr Fahn reasonably asks: “Everybody wants to know: what is the functional status of the patients? What are they doing now that they could not be before? Are men and women so happy as to lose pain, that they are able to hire themselves again to work in the house and do shopping and so on? We’ve not heard much about that.”

The whole field is clearly one of the greatest interest to drug and therapeutic potential but it is clear that there was considerable substance in the anxieties expressed by the editors in their preface. While making due allowance for enthusiasm and genuine concern to help badly disabled patients, it is no compliment to our profession that so many uncritical, poorly designed and inadequately studied surgical experiments have been based on the disabled, from whom such little useful constructive information can be derived. Perhaps this is the main conclusion that can be drawn from the contents of this volume: If we are going to make any genuine advances in therapy and not simply indulge our curiosities, we owe it to our patients to design experimental treatments as rigorously and as meticulously as we can converge.

GERALD STERN


This is a multi-author work, with 18 contributors, all from the USA. It is essentially a book of practical approach and does not attempt a detailed review of the basic mechanisms underlying headache. The style is charmingly chatty, and at times philosophical, but very readable. Well-detailed chapters covering history taking and physical examination are illustrated with case studies.

The chapter concerned with investigation of headache demonstrates major differences in practice across the Atlantic. I found the suggestion that all patients with a headache problem should undergo CT or MRI scanning as a baseline was quite different from my own and most other UK neurologists’ practice.

The chapter on migraine is both interesting and well balanced. I also liked the section on post-traumatic headaches which will be of value to anyone involved in medicolegal work. Tension-type headache is dealt with rather less well, with a poorly balanced discussion of underlying mechanisms. However, drug treatment and behavioural techniques are well covered.

Individual chapters are well supplied with literature references, and there is an extensive index. Illustrations are either line drawings or monochromatic photographs, neither of which are particularly effective. Despite these reservations, I enjoyed reading this book and would recommend it to doctors who find the management of headache easy or dull: it should help to make everyday practice more rewarding.

ROGER E CULL


This book starts with the statement that sleep disorders medicine has become a unique specialty. In North America yes, but not in the rest of the world. The American approach emphasises detailed sleep laboratory studies, as well as the system of international classification produced by the American Sleep Disorders Association and last reviewed in 1990 (this is outstandingly good). One of the most useful features of this book is a review of this classification as applied to children. This section will be a revelation to many adult neurologists who recognise only one, or at most two, sleep problems—drowsiness and sleep apnoea—although paediatricians will recognise many if not all of the over 100 variants of sleep problems described in children. It must be admitted however that some of these conditions, including alcoholism, fatal familial insomnia, and sleep-related painful erections do not occur or are extremely rare in childhood. And how should we view that doubtless common entity, the subswakefulness syndrome—is this merely the American equivalent of L.M.F., low moral fibre, or a condition that can be definitely diagnosed?

The book is a useful and practical working guide to both common and uncommon sleep disorders in children. Book sections cover a wide variety of topics including childhood behavioural disorders, problems with breathing and the bladder during sleep, co-sleeping, upper airway resistance syndromes and toilet training. Advice is direct and sensible, eg “night waking is undoubtedly a trigger for child abuse on some occasions, and the symptoms of difficulty settling and night waking should be taken seriously by the practitioner”. There is a simple description of polysomnography in children (B Bell), and a good account of parasomnias (A Golbin). I was a little disappointed to see, that despite many advances in classification and diagnosis, treatment of many sleep problems in children is unsatisfactory.

In summary, this book is a comprehensive manual of diagnosis and care of children with sleep problems. It is very well written, produced and illustrated as well as good value for money. There is a useful table of normal values. The book complements rather than replaces “Sleep and its disorders in children” (C Guilleminault ed Raven Press 1987). Those with the Raven book already on their shelves will also want—and need—the Sheldon-Spier-Levy book.

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Gerald Stern

*J Neurol Neurosurg Psychiatry* 1992 55: 862
doi: 10.1136/jnnp.55.9.862

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