Book reviews

It is the reviewers’ opinion that a double blind trial is necessary before establishing such a programme, even if the many contentious aspects of the methods and their interpretation are accepted. All clinicians, scientists and publishers have a moral duty to ensure that undue optimism or anxiety are not engendered by their publications and hypotheses.

AN DAVISON AND P RUDGE

Reference


The contribution of hereditary factors to the development of seizures has generated some of the most powerful mythology of epilepsy over the centuries. For this reason epileptic patients and their relatives are undoubtedly anxious to know the truth about the risks of passing on the disorder to their offspring. Some of the questions raised are difficult for the clinician because the subject is complex and has been inadequately researched. Further the data, much of which is conflicting, is not readily available. The authors of this slim volume have therefore provided a very useful service in summarising our meagre knowledge of the genetics of epilepsy. They rightly point out the problems of studying a disorder which is so difficult to define and classify, which can be symptomatic of so many other diseases of the nervous system, and which is further confused by incorporating EEG data, with all its inconsistencies and mysteries.

The book is divided into three principal sections; a discussion of the indirect evidence of inheritance of epilepsy, such as animal studies and hereditary diseases of chromosomal abnormalities associated with epilepsy; a review of the direct evidence of inheritance such as twin studies, clinical studies of probands and relatives, EEG studies; and a consideration of the influence of certain factors such as age and sex, and the significance of family history for prognosis. The book is essentially a summary of present knowledge emphasising clearly how little we know. Of the 117 pages over 50% are taken up with tables and references. However it also provides useful evidence for the clinician with which to dispose of many of the more exaggerated ideas of the influence of inheritance. One weakness is that it does not include photosensitive epilepsy, which will apparently be the subject of a separate volume. This is a pity as it provides some of the more solid evidence for the influence of hereditary factors and would have illuminated much of this text.

This book will be indispensable to those wishing to dip into the subject for the first time, and hopefully will be a stimulus to some to undertake more rigorous studies with modern methods.

E REYNOLDS


This book is written by an American orthopaedic surgeon with a very wide experience of cerebral palsy. Its strength therefore is that the pros and cons of surgical intervention are discussed by someone who has tried the major procedures and reviews both his own experience and that of other surgeons. Any orthopaedic surgeon, paediatrician or physiotherapist needing such a detailed discussion including descriptions of the surgical procedures will find this book an invaluable source of information. The author consistently attempts to keep the reader thinking in a dynamic fashion about motor problems and uses gait electromyography quite extensively in assessment. The reader is encouraged to think in a commonsense, goal orientated fashion. The author discusses upper limb surgery in detail but the reasons for varying enthusiasm for such procedures amongst orthopaedic surgeons are not.

The problems with the book are several but really inevitable in a single author book on such a complex subject. Spastic hemiplegia, diplegia and quadriplegia are really all that the author deals with and it is most people’s experience that the incidence of the first two varieties has fallen and that relatively speaking rigid extrapyramidal disease and ataxia have assumed a greater proportion of the work. In fact, all of the surgical manoeuvres required for managing patients who do not fit into the original classification are available but the picture given of the natural history of cerebral palsy is over simplified. The author’s belief in performing multiple procedures on occasions make one concerned whether all are critical to the operation’s success or that less experienced surgeons should follow this example. Whilst bracing is given the expected thorough treatment there is rather less critical analysis of special seating. In patients with total body involvement orthotics and physical therapeutic methods are dismissed as ineffective in the prevention of hip dislocation and yet seating emerges as a useful prophylaxis after surgery to a dislocating hip. It is in patients with total body involvement that the simple muscle imbalance theories of the origins of joint deformity fail to convince and that the wide variation of clinical problems make for difficulties in testing of all types of treatments. Perhaps some mention of the pre-operative and post-operative management of very severely mentally retarded patients would have been of interest. However, it is good to see that the author is prepared to be actively involved in the management of non-ambulant patients.

This book is therefore to be recommended as a most important source of information on the orthopaedic management of cerebral palsy.

B GR NEVILLE


This book is based on a symposium concerned with priorities in psychiatric research and organised by the Mental Health Foundation, held in September 1979. In most instances the speakers have expanded their originally rather brief scripts into more detailed reviews. The result is a series of chapters by experienced research workers who consider the present status and the possible future development of important areas of psychiatric research. The book is not, as are so many symposia publications, a collection of reports of already pub-
Orthopaedic management of Cerebral Palsy

BGR Neville

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