Edited by JS Meyer H Lechner M Reivich and EO Ott. (Pp 311; £76.50.) Amsterdam: Elsevier Biomedical Press BV, 1983.

This book contains the Bertha Memorial Lecture and fifty-three papers selected for presentation at the 11th World Federation of Neurology Meeting held in Salzburg in September 1982. The papers are divided into five sections covering Regulation of Cerebral Blood Flow and Risk Factors, Neuroimaging Techniques, Critical Evaluation of Therapeutic Approaches, Cerebral Perfusion and Metabolism in Relation to Function, and Migraine.

In the Bertha Memorial Lecture Sokoloff outlines the principles behind the 2-deoxy-D-glucose method of studying glucose metabolism and illustrates the impressive results obtained by autoradiography in studying the close coupling between local functional activity and local glucose metabolism. For example, in the rat, the rates of glucose utilisation in the primary projection areas of the retina are directly proportional to the logarithm of the intensity of retinal illumination. The deoxy-glucose method can now be applied to man using positron emission tomography (PET) though the resolution is lower than that obtained by autoradiography. Using this method WD Heiss et al have shown reduced cerebral metabolism distant to the site of infarction and suggest that in part this is due to deafferentation. Other papers emphasise the ability of PET to demonstrate the dynamic changes in blood flow and regional metabolism occurring after acute infarction.

Nearly one fifth of the papers are concerned with the measurement of cerebral blood flow (CBF). The normal decline with age is enhanced in subjects with risk factors for cerebro-vascular disease and the “hyperfrontal” distribution declines with age and in patients with Parkinson’s disease. In rhesus monkeys autoregulation in the vertebral arterial system is less efficient than in the carotid system, which may be of beneficial effect in protecting against hypotension (M Tomita et al).

In the neuroimaging section it is perhaps surprising that there is only one paper on nuclear magnetic resonance imaging. Various digital subtraction angiography (DSA) and Doppler techniques in the study of carotid disease are discussed in three papers, but only in one are they compared with conventional angiography. DSA fails to identify lesions in a small proportion of cases, whereas Doppler studies tend to overestimate the presence of disease.

Whether aspirin is of benefit to patients who have sustained a TIA is still unclear. The French “AICLA” study provides evidence that aspirin may be of benefit in preventing re-infarction in patients with minor completed strokes. Other papers discuss circulating platelet aggregates in patients with vascular disease and others concentrate on the inhibition of platelet aggregation by low and high dose aspirin therapy and by other drugs.

Sjaastad et al provide an interesting review of chronic paroxysmal hemicrania and compare the autonomic disturbances that further identify it as a separate entity to cluster headache. The relationship between changes in CBF during a classical migraine attack and the spreading depression of Leao is discussed.

This book is worth browsing through, though the price is against adding it to one’s own bookshelf. Although many of the papers are short and lacking in detail, and much of the data have been published elsewhere, in some cases since the conference, the wide range of topics covered is likely to include something of interest for all.


This is a most important publication on head injuries; it contains the experience, results and conclusions of the Glasgow team presented as one might expect in an eminently logical and readable fashion. The title should be taken in its widest context as it covers more than medical inpatient treatment. The first chapters are devoted to epidemiology, pathology and patho-physiology; the text of these chapters is simple and comprehensive. The following chapters are concerned with the clinical investigation, assessment and treatment of head injured patients with particular reference to the Glasgow experience with international comparisons. These chapters are particularly eloquent and aspects of the “aggressive” treatment of head injuries such as intracranial pressure monitoring, ventilation, steroids and barbiturates are objectively discussed. The illustrations and diagrams are in black and white and, surely, the next edition will be improved by the introduction of fourth generation CT Scans and perhaps also NMR and PET images. Chapter 9 is concerned with the management of acute injuries and this should be compulsory...
reading in every casualty department. The
final chapters are concerned with the prog-
osis and neurological and psychiatric sequelae in the widest possible social con-
text. The final chapter is particularly important as the authors assess the overall
care of head injuries internationally and suggest that we could do better in the
United Kingdom. This book forms the
solid basis for managing head injuries; it,
like the Glasgow Coma Scale, should be
read and applied by neurosurgeons, trauma
specialists, medical students and nurses.

CHARLES DAVIS

Intradiscal Therapy: Chymopapain or Col-
lagenase. By Mark D Brown. (Pp 173:
£44.00). Oxford: Blackwell Scientific Pub-
llications, 1983.

Intradiscal enzyme therapy for lumbar disc
disease has a controversial history over the
past 20 years but chymopapain has recently
been re-licensed in the USA so this is a
timely review of both that history and the
current status. As one would expect from
Mark Brown this is a clearly written, com-
prehensive and balanced presentation of
the present state of intradiscal therapy.
Despite the author’s limited personal series of
chymopapain he is one of the few
surgeons who also have experience of using
collagenase and this in fact frees him to
provide an independent, unbiased view. As
a convinced user of chymopapain I
approached this book feeling it would be of
interest only to a few highly specialised
practitioners but I finished it feeling that all
doctors concerned with the management of
low back disorders should be aware of its
contents. I can only support Mark Brown’s
conclusion that intradiscal therapy is now a
proven dramatic breakthrough in the treat-
ment of disc prolapse and this is the
best presently available book to read.

GORDON WADDELL

Psychiatry Revision: Aids for Postgraduate
Trainees. By Dorcas Bird, Jonathan Bird
and Glynn Harrison. (Pp 352; £6.00.)

This book is a response to the examinations
used to test the suitability of candidates for
membership of the Royal College of
Psychiatrists and for higher training for
consultant status in the NHS. It pitilessly
reveals the inadequacy of the examinations
in assessing professional competence in a
field which is not purely technical and
which requires the development of skill
and judgement. Nevertheless, the hurdles
have been set up, and the authors have set
out to help the runners get over them. How
well have they succeeded?

Possibly the most useful part of the book
for the examinee will be Section Two—
“Hints on taking psychiatric examina-
tions.” This section gives general advice on
the various types of multiple choice ques-
tion and how they must be tackled; on writ-
ing essays giving the old and sound
advice—read the questions carefully and
answer it and nothing else; on the clinical
examination—what is expected and how it
is done; and on the structure of and
approach to the oral examination.

Then follow three large sections with
many examples on multiple choice ques-
tions, case history questions, and essay
questions. Of the three, the first is probably
the most valuable as it demonstrates the
ways in which Multiple Choice Questions
may be constructed; the second contains
some useful material; and the third shows
why essay questions are so difficult to
mark.

Many candidates will find this book use-
ful in their revision; all three major sec-
tions cover the field broadly and bring
together information which candidates will
find helpful. As far as it goes the book is
well done, but if this book accurately
reflects the desired end point of psychiatric
training, it is an indictment of that proce-
dure. How right the College has been to
emphasise the importance of the process of
training and of close supervision in clinical
work; only in this context can books of this
kind be seen in their proper place, in assist-
ing the hapless candidate negotiate the
course.

RHS MINDHAM

A Time to Speak. By Valerie Eaton
Griffith, Patricia Oetliker and Prue Oswin.
Foreword by Prof Bernard Isaacs MD,
FRCP. (Pp 82; £3.00.) London: The
Chest, Heart and Stroke Association,
1983.

It has now become more generally
accepted that volunteers have a role to play
in the management of the aphasic patient.
It is apparent that there is little information
that is suitable for the interested lay person
who wishes to know more about the speech
and language disorders that follow stroke.
Therefore, this book is timely and will be
welcomed not only by volunteer organisa-
tors but by speech therapists who work closely
with volunteers. The style of the book has
been carefully considered and would
appeal to the least academic reader. It
demonstrates how, with a little imagination
and interest, one can expand and stimulate
language activities with this grossly handi-
capped population. Furthermore, it would
encourage even the most timorous volun-
teer to take a positive attitude and be
confident with regard to what they can
achieve.

The main reservation is that it does not
give clear enough information about the
nature of the speech and language disor-
ders following stroke and their associated
problems. It is regretted that the volunteer
will have to look elsewhere for this infor-
mation which would make the interpreta-
tion of the reactions of patients to different
materials so much more meaningful. Addi-
tionally, the methods of selecting suitable
materials for particular patients is covered
too briefly.

The work of the authors is testimony to
their sincerity and interest. It is unfortu-
nate that the interaction between speech
therapy and volunteers is not discussed
more fully in the book. In fact, speech
therapy is barely mentioned and it is felt
that some lay people may not realise the
role that professional help may have.

The authors are to be congratulated for
offering such fresh, dynamic impetus into
this area and one hopes that the next ed-
tion will expand on more of the technical
aspects which will increase understanding
and co-operation between the lay and
professional careers in this field.

PM ENDERBY, R LANGTON HEWER
Management of Head Injuries

Charles Davis

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http://jnnp.bmj.com/content/47/2/223.3.citation

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