PostScript

BOOK REVIEWS

Comprehensive care for people with epilepsy. Current problems in epilepsy, volume 16

Edited by Margarete Pfäfflin, Robert T Fraser, Rupprecht Thorbecke, Ulrich Specht, and Peter Wolf (Pp 375, £60.00). Published by John Libbey, London, 2001. ISBN 0-86196-610-4

Epilepsy is beyond question a condition with unique psychosocial consequences for which any package of care needs to acknowledge the wider effects of the condition rather than simply addressing the clinical issues. Advocating programmes of comprehensive care for epilepsy is therefore rather like advocating motherhood and apple pie. One is rather doubtful that reading this book gets one much further than this statement.

The book is the product of a number of presentations at the 10th Bethel Cleveland Symposium held in Bielefeld in 1999.

After some discussions of the need for comprehensive care, there is a large number of chapters that try to define what the definition might comprise. There is no obvious consensus. There are considerable contributions on a variety of alternative therapies including psychotherapeutic and cognitive behaviour therapies. Many chapters acknowledge the difficulties of quantifying the outcomes of these interventions. Other chapters simply suggest that trying to measure outcomes is meaningless! There is then an interesting methodological section about potential tools for measuring outcomes of comprehensive programmes, but little or nothing in the way of hard data is produced. Finally, at the end of the book (chapter 36) one stumbles across a paper from Bielefeld that includes in the title "results from a controlled, prospective study". At last, this cynical evidence based reviewer thought that he had found a nugget of hard data, only to be left completely uncertain as to whether the three groups in this study were selected by randomisation or by other means!

Who would be helped by reading this book? It would be totally unrewarding for anyone who didn't have a specialist interest in epilepsy, yet anyone with a specialist interest in epilepsy would be aware of many of the issues raised in the book and be able to read work by the contributors in rather more satisfactory peer reviewed format elsewhere. For a young researcher coming to the field for the first time, it may provide a useful general overview. The second subheading in the preface asks why this volume has been considered necessary. I am not sure that the question has been answered.

David Chadwick

Molecular neuropharmacology, a foundation for clinical neuroscience

Edited by Eric J Nestler, Steven E Hyman, and Robert C Malenka (Pp 503, £36.99). Published by McGraw-Hill, New York, 2001. ISBN 0-8385-6379-1

For clinicians and students of clinical neuroscience, the pace at which information regarding the subject has accelerated has been phenomenal. Moving from one dopamine receptor to five or from one serotonin receptor to now over a dozen, how does the interested student keep up to date? Further: how can the complexities of molecular neurobiology be understood? How do they interlink with neurones, neurotransmitters, and receptors? How can the gap between such basic neuroscience knowledge and clinical practise be bridged? In such a world we all seek help.

This book, which is a compendium of basic neuroscience from neuropharmacology to neuronal activity, from neurotransmitters to neuroreceptors, and from the neuroscience underpinnings of clinical problems to the clinical syndromes themselves, covers much from movement to motivation and pain to psychosis. It is outstanding because of its clarity of exposition but also its wealth of tables and diagrams.

For those who find neuroanatomical concepts difficult to follow, for those who like clear and well laid out cartoons to illuminate the text, and for those who like to integrate basic science with the clinical, the book is an elegant example of what can be achieved.

For those who lecture and need appropriate graphic material to illustrate their presentations, the book will be particularly valuable. There is a nice conformity to the lay out of the figures and diagrams throughout the text, and considerable clarity is brought to the overall design.

The price of the book makes it very good value for anybody wishing to have a text that addresses an integrative approach to neuropharmacology and neuropsychiatry in their library.

Michael Trimble

Handbook of transcranial stimulation

Edited by A Pascal-Leone, N J Davie, J Rothwell, E M Wasserman, and B K Puri (Pp 406, £110.00). Published by Arnold Publishers, London, 2002. ISBN 0-340-72009-3

This multiauthored book, with contributions from 60 authors, comprises five parts: basic principals, methods, clinical application, cognitive functions, and psychiatric application. Each apparently was assembled by one of the five editors. Most chapters read very well as might be expected from the roster of the contributors, who are internationally recognised in the respective fields.

Parts 1 and 2, which I like best, describe the physical principles and basic physiology underlying this unique electrodiagnostic technique. Part 3, though entitled "clinical applications", specifically deals with neurological disorders, leaving the remaining clinical applications for the subsequent part 4, cognitive function, and part 5, psychiatric application. The format of writing varies from one section to the next. For example, all parts start with an introduction except for part 4, giving the impression of an inadvertent omission.

As is often the case with a multiauthored text, the book presents varied articles written independently by different authors without close ties from one chapter to the next. In part 2, methods, for example, chapter 8 deals with the effect of repetitive stimulation on genetic expression in rat brain, which has very little to do with chapter 7, which relates to peripheral nerve and spinal cord stimulation, or chapter 9, which describes central conduction time. In fact, it is somewhat misleading to arrange chapters 6 through 12 under methods. The various experimental designs assembled under this heading do not necessarily describe methods for conducting the test.

Part 3, clinical application, flows much better in this regard because of its inherent nature. But even here, some chapters, such as 22 and 23, deal with specific disorders and others, such as 17 and 18, discuss anatomical regions. Still others, such as 25 and 26, describe certain activities such as breathing and swallowing. The same applies to part 4, cognitive function, which addresses such diverse areas as language and eye movement.

Thus, the book can best be described as a compilation of various aspects of transcranial magnetic stimulation, which are arbitrarily subdivided into five loosely related categories. Each chapter is excellent on its own merit, although, reading cover to cover, one may not appreciate a logical sequence of flow to acquire an overall concept of transmagnetic stimulation. Despite this limitation, readers can gain useful knowledge and updated information on specific topics by perusing appropriate chapters.

In summary, the book provides the most comprehensive coverage of transcranial magnetic stimulation now available. I recommend it to anyone interested in this technique as a tool in clinical investigation. Readers will find it most useful as a quick reference for some specific subject matter of interest, which they can retrieve without the need for reviewing all the preceding chapters. I welcome the timely arrival of this authoritative handbook, which, by bringing together basic physiology and clinical application, will further facilitate the use of transcranial magnetic stimulation.

Jun Kimura

Pain in peripheral nerve diseases

Edited by C Sommer (Pp 202, US$170.50). Published by Karger, Basel, 2001. ISBN 3-8055-7268-9

Despite having a subspeciality interest in peripheral nerve disease, often I am perplexed by patients with neuropathic pain. Yet pain is a leading symptom of neuropathy, and the ability to manage it is essential to the compleat neurologist. So I was delighted to have the opportunity to improve my own understanding of neuropathic pain from this volume edited by Claudia Sommer. Her experience in linking clinical and experimental aspects of pain is a welcome thread running throughout this volume.

We are reminded that so much of our knowledge of neuropathic pain phenomena derives from American Civil War nerve injuries studied so carefully by Weir-Mitchell. Pain pathways are dealt with pragmatically in standard anatomical and physiological terms. Gate control theory is not even listed in the index, allowing simple thought about the self evident modulation of pain transmission and

perception. Cytokines receive welcome attention; if tumour necrosis factor is not a fundamental cause of pain, it may mediate the nerve injury resulting in a pain state.

The various terms used to describe painful phenomena are covered succinctly, and pain rating scales are introduced. The chapter on mononeuropathies lacks extensive coverage of the newly introduced terms 'CRPS I and II' (complex regional pain syndrome). Many use these terms now to replace reflex sympathetic dystrophy and causalgia because of uncertainties about the part played by the autonomic nervous system in generating the former of these two chronic pain states. Those polyneuropathies responsible for neuropathic pain, and conversely analgesia, are covered extensively and will be of particular value to non-neurologists who manage pain. Hereditary motor and sensory neuropathy uncommonly causes pain and merits less attention. More attention could have been given to the awful burning foot syndrome that can occur in nutritional neuropathies or to the vexatious question of differentiating pain due to the neuropathy of HIV from that caused by antiviral drugs. Morphometric differences underlying the hereditary sensory and autonomic neuropathies provide an interesting perspective on the anatomical transmission of pain and would have merited more systematic coverage.

Neurologists should read Sommer's excellent chapter on the treatment of neuropathic pain. The useful information about the number you need to treat so as to relieve pain satisfactorily in one patient endorses our use of anticonvulsant drugs, sodium channel blockers, tricyclic antidepressants, and dextromethorphan. Mexiletine, gabapentin, and lamotrigine are useful in resistant states. Dr Sommer's personal experience shows through strongly in this chapter, which culminates in a useful algorithm. This will be a useful book for pain clinicians and in libraries, despite a swingeing price for only 202 pages.

Michael Donaghy

Brain tumors: an encyclopedic approach, 2nd edn

Edited by Andrew H Kaye and Edward Laws Jr (Pp 1052, £175). Published by Harcourt Publishers Ltd, London, 2001. ISBN 0-4430-4261

This is the second edition of the highly acclaimed textbook on tumours of the central nervous system written by a constellation of mainly North American and Australian neuroclinicians. In the five years between editions there have been many advances in molecular and genetic understanding of brain tumours, results from experimental and clinical trials, and major innovations in the technology used in operative neurosurgery. Unfortunately, as many of the contributing authors point out, the prognosis for many intracranial tumours remains bleak. Critical analysis of many papers shows continuing uncertainty as to the best management of many tumours. There remains, however, the seductive hope that genetic analysis of tumours may assist in more logical management in the future.

The strength of this textbook is its logical and multidisciplinary approach to intracranial tumours. Tumour biology, diagnosis, and therapy are comprehensively recounted. This does cause some repetition of detail but it is not too intrusive. Each of the chapters in the first section on basic principles builds a foundation for reading of the second section that comprises separate analysis of each of the main intracranial tumours by World Health Organization subtype. Indeed, it is in the areas of molecular and cellular tumour biology that the explosion in knowledge has occurred. The sections on neurogenetics, molecular biology, immunology, and gene therapy will contribute hugely to continuing professional development in established neuroclinicians as well as those in training. It is also a source from which to direct further reading. Most chapters describing treatment are prudently critical of previous studies that have not been randomised controlled trials and relate the many ongoing dilemmas and difficulties in the clinical management of many tumour types.

Refreshingly, most of the chapters are free of dogma and dictactes about brain tumours. The reader perceives that neuro-oncology is coming of age as a scientific discipline, that it has a particular dynamism and momentum, and that the contents of many sections of this edition will require substantial revision by the time a further edition is published in some years. This dynamism is particularly apparent in the basic principles section and contrasts with the relative lack of progress in terms of translating scientific advances into more effective treatments. Hopefully, by the time the next edition is due many of the therapeutic difficulties now facing neuroclinicians in their day to day work will have evidence based solutions. The editors are to be congratulated for transforming their continuing enthusiasm in neuro-oncology into a stimulating, and well written and illustrated encyclopaedia. I can only add to the many accolades that reviewers for other journals have already bestowed upon this edition.

Ian Whittle

The year in neurology 2001

Edited by Massimo Feliciani, Thomas Warner, Niall Quinn, Anette Schrag, Matthew Walker, Simon Lovestone, and John Zajicek (Pp 320, £49.50). Published by Clinical Publishing Services, Oxford, 2001. ISBN 0-953-7339-55

This book succinctly reviews a selection of papers published during 1999 and 2000 on cervical dystonia, Parkinson's disease, epilepsy, Alzheimer's disease, and multiple sclerosis. A respected authority comments on each one. The editors plan to rotate other topics in future years and wish to help clinicians keep abreast of developments outside of their special field, with the emphasis on conditions that are likely to be seen in general neurology clinics.

This is a well tried format that is familiar from the long lived Mosby *Yearbook of neurology & neurosurgery*, *Current opinion in neurology*, *Journal watch neurology*, and various publications produced and distributed with support from the pharmaceutical industry. Do we need another? When I obtained the current Mosby *Yearbook* (2000) from the BMA library for purposes of comparison, I was astounded to note that I was the first reader of that copy. However, I can report that *The year in neurology* is informative, the selection is thoughtful, and the commentaries are pertinent and instructive.

Reviewing this book in January 2002, I would have preferred to be reading summaries of papers from 2001 although, to be fair, most are of 2000 vintage and not 1999. Its journal club structure needs to be contemporary and some of the articles are now a little dated. A cheaper paperback version would be welcome. An electronic form may allow more rapid turnover. Nevertheless, most neurologists dipping into it would find plenty of interest therein and certainly emerge more knowledgeable.

Peter Newman

Adams and Victor's manual of neurology, 7th edn

By M Victor and A H Ropper (Pp 547, US$39.95). Published by McGraw-Hill Companies, New York, 2002. ISBN 0-07-137351-9

Nearly 20 years ago I used books to learn my neurology in three stages. First was an introductory reading of the late Bryan Matthews' *Practical neurology*, then a couple of years' strap-hanging on the tube to learn the facts by reading the second edition of Adams and Victor's large *Principles of neurology*, then back to Matthews for a dose of intuition. When I picked up this little manual of neurology nearly two decades later, I immediately recognised the distinctive descendant of my *Principles of neurology*. The chapter organisation, diagrams, and writing style have changed little over these years.

Principles of neurology was a wonderful book. So is the manual merely a pruned facsimile? It is based on the same two major parts. The first chapters on cardinal manifestations of disease are good and clinically insightful. But perhaps in this era they should start with the symptoms rather than with a long diatribe on the anatomy and physiology. The headache chapter contains clear accounts of tension headache and migraine, but there is no introduction about how to tell the two apart and how to differentiate them from more sinister headaches. The major pathological categories of neurological disease are organised predictably and reliably, as one expects from such authoritative authors; Raymond Adams has stepped down for this, the seventh edition. Some of the chapters are let down by old and gauntly reproduced computed tomograms. Why is it that publishers seem to find it difficult to reproduce brain imaging well? Alan Ropper's touch as an expert neuromuscular physician shows through strongly in the chapters on nerve and muscle disease. The summary chapters on psychiatric disorders will be reassuringly understandable to neurologists but may lack sufficient discussion to court psychiatrists.

Should small textbooks have a different philosophy from large ones? This is a condensed version of a large textbook and reproduces the same approach. In reality, despite being pocket sized, it is quite long at nearly 550 pages. It is for the junior trainee in neurology who is learning to trade in facts and who will be reassured by its presence in pocket or briefcase. "Last minuters" may use it for their Board exams. But I wouldn't recommend it for medical students because it is not the starting point from which to gain the intuition or perspective about those few neurological problems that constitute the majority of neurology.

Michael Donaghy

Uncommon psychiatric syndromes, 4th edn

Edited by M David Enoch and Hadrian N Ball (Pp 260, £25.00). Published by Arnold Publishers, London, 2001. ISBN 0-340-76388-4

This is the fourth edition of a book first published in 1967, which at that time was what

can only be referred to as a classic. Then, David Enoch's coauthor was the late Bill Trethowan, whose own descriptive thrills formed an essential part of the original text.

The syndromes described here, of Capgras, De Clerambault, Othello, Ganser, Munchausen, Gilles de la Tourette, Cotard, and Ekbom, and additional disorders such as the Couvade syndrome and possession states, resemble those contained in the original text. Psychiatry, a discipline that tends in comparison with neurology to have a dearth of eponymous syndromes, was considerably enriched by that text, as was the repertoire of any examiner for the MRCPsych.

The text has a common layout for each syndrome, with a historical background (always the most interesting) and case reports followed by epidemiology, clinical features, aetiology, and psychopathology. Some of the syndromes (if reference to the dating of the literature is noted) have attracted little clinical or research attention over time. However, there has been considerable publicity surrounding the De Clerambault's syndrome and its related stalking, and the Munchausen syndrome with its by proxy variant.

Of all the syndromes, the Gilles de la Tourette syndrome has been the most extensively investigated from a neuroscience point of view, and some of the more up to date literature is included here.

Buried within the text are other interesting descriptions. These include the rarely discussed gaslight phenomenon, the Poltergeist phenomenon, and multiple folie syndromes from a deux to plusiers.

This well established book in the psychiatric cannon is fun to read, but should be on the shelves of all psychiatrists and related mental health workers who enjoy the variety of clinical practice that psychiatry embraces. This reviewer makes a plea for the Gastaut-Geschwind syndrome to be included in any future editions.

Michael Trimble

Cognitive deficits in brain disorders

Edited by John E Harrison and Adrian M Owen (Pp 370, £39.95). Published by Martin Dunitz, London, 2002. ISBN 1-85317-921-3

Conceived by its editors over a beer in the Cambridge Arms pub, this multiauthored volume aims to be a definitive textbook on the cognitive correlates of neurological disease. The chapters cover the entire spectrum of neuropsychological symptoms, some themed according to anatomical loci, others concentrating on particular disorders. Some of the chapters are outstanding in their clarity and insight; the majority are solid, scholarly affairs, while even the poorer chapters give food for thought.

I have to admit that I found the editors' opening contribution to fall into the last category. Harrison and Owen's chapter comes across as overly pessimistic and lacking in enthusiasm towards the project of relating brain structure to function. After all, without attempts to relate symptoms to neurological damage, how can we be sure that the neuroimagers' illuminated brains have any basis in reality?

The other contributions come from institutions as far afield as the United States and Australia, although the majority are from academics based in the United Kingdom. In fact, many owners of the lovely "mug shots" on the opening pages have their offices within staggering distance of the Cambridge Arms. As such, there is a danger that the book is biased towards a particular methodological perspective. Yet it is a Cambridge academic who provides the most original contribution in the entire volume.

James Russell's chapter is a critique of theories relating to autism. While some of the preceding chapters simply describe performance profiles on neuropsychological test batteries, Russell thinks more carefully about his topic, considering exactly what features "autistic tests" have in common. He argues for a rejection of the idea that autistic patients have abnormal "theory of mind". In its place Russell proposes a pragmatic-cognitive account, in which self monitoring and control functions are emphasised rather than representational states.

For example, it has been suggested that the failure of autistic children to engage in make believe games reflects an inability to conceptualise "imaginary play". Russell points out that the concept of pretend play is unlikely to be relevant to its development. More important is an ability to generalise associations between perceptual cues and behaviour. A toddler who is pretending that a banana is a telephone does not conceptualise the banana as a "pretend phone". As far as the child's brain is concerned the banana *is* a phone. But autistic children are unable to process objects in this way. Their behaviour is bound by narrow categorisations and interpretations of the world.

Parts of this book made me feel that neuropsychology may be suffering from a similar problem. There is a tendency to classify tasks according to the cognitive modules they purport to test, rather than examining the relative demands they place on neural control systems. Perhaps only when armed with a better understanding of how brains really work will neuropsychologists make more progress in relating structure to function.

Timothy Hodgson

Headache and migraine in childhood and adolescence

Edited by Vincenzo Guidetti, George Russell, Matti Sillanpää, and Paul Winner (Pp 487, £75.00). Published by Martin Dunitz, London, 2002. ISBN 1-85317-810-1

Most patients with migraine report that their headaches started at least in adolescence, and often before puberty; indeed, migraine is particularly common in young boys, and the prevalence in girls exceeds that in boys only after puberty. Many of these children and their parents seek medical advice, and headache in all its forms constitutes a significant proportion of the workload of general paediatricians, as well as more specialised paediatric neurological or headache clinics.

Four distinguished experts, from Italy, Scotland, Finland, and the United States, have edited this heavyweight textbook on paediatric headache—according to the back cover "aimed at neurologists . . .but also of great use to paediatricians". I feel that much of the book covers ground discussed better in the multiplicity of books designed for adult neurologists, though some sections, most notably the discussion of headache as a symptom of structural diseases, are very sound. Much is discussed from a somewhat psychoanalytical viewpoint, which is perhaps a reflection of the fact that 28 of the 43 authors are Italian.

As an adult neurologist I found little of value in the text, as much is covered more succinctly in other books, and relatively little seemed to be devoted specifically to the problems of children. I found the page layout difficult; there often appeared to be consecutive pages of print unrelieved by even a heading, let alone a table or an illustration of some kind.

I see this as a useful book for departmental libraries, and yet I look forward to reading a smaller book about headache written by paediatricians assuming knowledge of the current adult texts.

Richard Peatfield

Handbook of transcranial stimulation: Edited by A Pascal-Leone, N J Davie, J Rothwell, E M Wasserman, and B K Puri (Pp 406, £110.00). Published by Arnold Publishers, London, 2002. ISBN 0-340-72009-3

Jun Kimura

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Notes