Correction

In the article "Intracranial pressure in patients with the empty sella syndrome without benign intracranial hypertension" Kaye, Tress, Brownbill, King, *J Neurol Neurosurg Psychiatry* 1981;45:209-16 figure 10(d) was incorrect. The correct figure 10(d) is reproduced here.

Book reviews

Psychotropic Drugs. Plasma Concentration and Clinical Response. Edited by Graham D Burrows and Trevor R Norman. (Pp 544; SFr. 150.) New York: Marcel Dekker Inc, 1981.

Correlation of drug effect with plasma levels is of use in many disease states. One of the most difficult areas, however, is that of psychiatric illness. The variety of means of assessing or classifying mental illness, the poor understanding of underlying pathology and the changes in brain function that occur, explain why this area has not seen more widespread implementation of plasma level monitoring. The volume edited by Burroughs and Norman, however, is a significant contribution to the literature on this topic. It is a comprehensive volume dealing with many aspects of drug monitoring in the psychiatric field. The initial chapter by Lang on the mechanism of action of psychotropic drugs, provides an interesting introduction to the pharmacology of these compounds. Two interesting chapters follow, on methods for the measurement of psychotropic drugs—anti-depressants, antipsychotics and anti-anxiety agents—which deal comprehensively with all modern techniques. The chapter by Graham shows application of these techniques to the measurement of the pharmacokinetics of tricyclic anti-depressants. This is followed by an excellent chapter by Burroughs and Norman dealing with the relationship between plasma levels and clinical response in the anti-depressant field. The authors conclude that no consistent relationship exists between plasma levels and clinical response for tricyclic anti-depressants and that routine monitoring of plasma levels is not warranted. This contrasts with the measurement of serum lithium levels dealt with by Annitto and Gershon where only benefit is derived from determining correct therapeutic dosage and prevention in toxicity. Excellent chapters also follow on anti-psychotic agents, Curry dealing with chlorpromazine in considerable depth, Sakalus and Traficante reporting on fluphenazine, Crammer on thioridazine and Evans on butyrophenones. It must be said, however, that the overall conclusion from these in-depth appraisals is that little relationship exists between efficacy and plasma or blood antipsychotic levels. Sedvall and Grimm contribute on sampling CSF and

plasma as tools for obtaining biochemical and pharmacokinetic data in neuroleptic therapy. They suggest some relationship exists between chlorpromazine treatment and clinical effect, at least in the early phases of treatment. Fulton and others contribute extensively on the pharmacokinetic of benzodiazepines. Justifiably, diazepam is given pride of place but further sections deal with other individual benzodiazepine compounds. Sedatives and hypnotics are dealt with by Wade but again the conclusion is that plasma concentrations of hypnosedatives correlate poorly with their effects, both at dosages used clinically and in overdosage. Eadie demonstrates the value of anticonvulsant drug plasma levels but concludes that the patient's clinical state should always be the final criterion in management and that plasma anticonvulsant levels should be seen only as a means to an end. The book is admirably finished by an overview by Hollister who concludes that there is little doubt that monitoring plasma levels of lithium and of anticonvulsants has made such treatment both safer and more effective. However, he is less certain of the role of tricyclic antidepressant monitoring and argues that there is little to favour monitoring of plasma concentrations of antipsychotic drugs. Hollister concludes that anti-anxiety and hypnotic drugs, which generally have a large margin of safety and suitable clinical criteria of response, should not be monitored. I find this overall to be a remarkably good book that is thoroughly recommended. I found much of interest and much new information and the editors must be congratulated for the production of such a volume. I would imagine, however, that at 150 Swiss francs many potential customers will be frightened away.

PG JENNER

Prevention and Treatment of Depression. Thomas A Ban, René Gonzalez, Assen S Jablensky, Norman A Sartorius and Felix E Vartanian. (Pp 300; £19.50.) Baltimore, University Park Press. Distributor: MTP Press Ltd. Lancaster, 1981.

This is the proceedings of a conference on depression organised by WHO and held in Washington in June 1980. Despite its title its 31 chapters embrace most aspects of depressive illness—epidemiology, classification, symptomatology, the role of biological and psychological factors in aetiology, various forms of treatment and models of care delivery from various parts of the world. The proceedings of confer-

ences on depression are, of course, two a penny, for drug companies produce a seemingly endless supply of new antidepressants and each seems impelled to hold a conference to mark the event and to publish the papers as a book the following year. This volume has more to commend it than most of these. The contributors were drawn from no less than 19 countries in all parts of the world and so the contents, as befit a WHO publication, present a genuinely global view of the subject. There are well written chapters by authorities like Bunney, Klerman, Paykel and Weissman, but most are summaries of research or reviews that are published in more detail elsewhere. On the whole, therefore, the most interesting chapters to British readers are likely to be those from other parts of the world: Shinfuku's account of his research on involuntional melancholia in Japan, Binitie's description of the clinical presentation of depression in Africans and Bagadia's account of the use of ECT in India, for example. But it is a book for browsing through, not for studying. Several chapters contain nothing of any substance and anyone wanting to familiarise themselves with current understanding of depressive illnesses would do better to read Paykel's *Handbook of Affective Disorders*.

RE KENDELL

Demyelinating Diseases: Basic and Clinical Electrophysiology (Advances in Neurology, Volume 31). Edited by Stephen G Waxman and J Murdoch Ritchie. (Pp 544; \$81.60.) New York: Raven Press, 1981.

This volume contains 27 chapters, largely consisting of reviews of recent advances in basic scientific studies of demyelination. Although the title of the book suggests that the contents refer to naturally occurring demyelinating disease, the majority of the chapters relate to studies of experimental demyelination in sub-human species, and not to multiple sclerosis itself. Indeed, those reviews concerned with multiple sclerosis contain little that is new, although they do provide convenient sources of information on the use of evoked potential analysis in the diagnosis of the disease, and of the pathology of the disease. Nonetheless, it must be admitted that these aspects are covered in more detail elsewhere. The strength of the book lies in the chapters in which the electrophysiology of conduction in normal myelinated and demyelinated axons are reviewed, particularly in the

chapters by Rasminsky and by Sears and Bostock. The presumed clinical correlations of these studies of the factors influencing conduction in demyelinated and remyelinating axons are explored both by these authors and by others in associated chapters in which the implications of this new understanding of the pathophysiology of demyelination are explored. Regan has examined the possible psychophysical tests that might be used to delineate visual and hearing disorders in patients with multiple sclerosis in a chapter which nicely complements that by Halliday on visual evoked responses in demyelinating disease. There are several somewhat inconclusive chapters on neuroelectric blocking factors and other circulating toxic factors which may or may not be important in symptomatic multiple sclerosis and reviews of ionophores, the distribution of sodium and potassium channels in myelinated nerve fibres and the pharmacological properties of these channels in nerve membranes. Kimura contributes an interesting chapter on refractory period analysis in nerve conduction studies of patients with the disease. However, these contributions are largely of theoretical interest. The last part of the book is particularly valuable since it consists of a group of chapters on the trophic interactions of neurones and an outstanding contribution by Robertson on membrane structure with special emphasis on the ultrastructural anatomy of transmembrane channels.

Altogether, this is a most stimulating and timely volume which will be read with great profit by all those concerned with the care and investigation of patients with multiple sclerosis.

M SWASH

Clinical Applications of Evoked Potentials in Neurology (Advances in Neurology, Volume 32). Edited by Jean Courjon, Francois Mauguere and Michel Revol (Pp 595; \$80.24.) New York: Raven Press, 1981.

This is a useful and up-to-date book comprising 69 fairly short chapters (averaging eight pages) by many and various authors, each chapter with its own references. The editors and many of the authors are French, but the predominant style is American English. Technical and scientific aspects are covered, but the main emphasis is clinical as the title implies.

The chapters are grouped and sub-grouped according to subject, so that in the section on visual evoked potentials (VEPs) there are groups of chapters dealing with the VEP in optic nerve lesions, in chiasmic and retrochiasmic lesions, on clinical applications in "Neuropaediatrics", and on clinical applications in encephalopathies, dementia and hereditary degenerative disease. Brainstem auditory evoked potentials and somatosensory evoked potentials are then similarly fully dealt with, and finally there are 21 chapters on various aspects of the clinical application of evoked potentials in multiple sclerosis, a major neurophysiological growth industry of the last decade. Thus there are on occasion several successive chapters dealing with almost the same subject, as viewed from various neurological centres; for example the last six chapters which all attempt to assess the value of follow-up evoked potential studies and their correlation (or lack of it) with clinical progress in multiple sclerosis. This duplication is not entirely useless, as it offers the reader an insight into the range of opinion extant. Some significant technical and methodological differences, too, are evidently not yet resolved; for example, whether the reference site for cervical spinal evoked potentials should be on or away from the head and the worth of foveal VEPs or the blin-

reflex. Inevitably in a book of this sort the quality of different contributions does vary, but on the whole the standard is high. The book is well-produced, as befits its price and the series it joins.

DN RUSHTON

Essentials of the Neurologic Examination (2nd ed). By Elliott L Mancall. (Pp 220; \$13.75.) Philadelphia: FA Davis & Co, 1981.

Well-thumbed first editions of Alpers have been in the pocket of many American undergraduates on elective period at King's College Hospital. Their outstanding performance may have been at least partly due to reading this book. It is undoubtedly among the best of the many American aids to develop clinical skills. The book first describes the basic examination of the nervous system in thirty-four pages followed by a clear, accurate and dogmatic account of the interpretation of neurological symptoms and signs. This can be heavy going, as for example in the table of