present data already published. There are, however, useful reviews; for example, there are helpful chapters by Wisniewski and colleagues, one on hypotheses of aetiology, and another on the nature of neurofibrillary tangles; by Constantinidis on Pick's dementia; and a section on neurotransmitter metabolism is generally comprehensive and authoritative.

Part II is divided likewise into sections, covering clinical aspects, diagnostic methods, epidemiology, therapeutic aspects and patient care. Inevitably the contents are rather overshadowed by the disappointing results of drug treatment. Several chapters usefully address the problems of definition; this, and the section on cholinergic drugs in memory, were in this reviewer's opinion, the most useful components of Part II.

Overall this is not a very satisfactory publication, although it is elegantly produced and its breadth of coverage provides an overview which would make it useful in a departmental library, although the price will prejudice most individuals and many libraries against deciding to purchase it, particularly when there are more up-to-date and succinct presentations of a similar range of information.

P NIGEL LEIGH

Neuropsychological Rehabilitation after Brain Injury. By George P Prigatano and Others. (Pp 183; \$24.50.) Baltimore: The John Hopkins University Press, 1986.

This is an important contribution to the hitherto neglected area of neuro-rehabilitation. While there are still very few practitioners in neurorehabilitation in Britain, this is not true of the United States where this area of rehabilitation is a growth industry. Unfortunately, research into process and outcome has not matched the growth in service delivery, but Prigatano's book represents a very welcome exception to this trend. The book gives a conceptual basis to rehabilitation by describing the common sequelae of acute brain injury, and describing simple means of intervention. The book then describes in detail the rehabilitation programme at Presbyterian Hospital, Oklahoma City, which has been Prigatano's. The unusual feature of this programme has been the extent to which Prigatano and his colleagues have attempted to measure patient deficits and outcome, and to document the impact of intervention. Indeed a paper by them on this topic has already appeared in this journal. This book is required reading

for any practitioner involved in rehabilitation of the acutely brained injured. It is absolutely fundamental reading for all neurosurgeons, particularly those who still believe that recovery stops very early after injury, and does so at a very low level of functioning. Congratulations to Prigatano and his team.

DN BROOKS

Secretory Tumors of the Pituitary Gland (*Progress in Endocrine Research & Therapy Vol 1*). Editors: Peter McL Black, Nicholas T Zervas, E Chester Ridgway and Joseph B Martin. (Pp 416; \$80.00.) New York: Raven Press, 1984.

Amongst the plethora of recent text books on the pituitary gland, this volume is one of the best. There are five sections: those on prolactin, growth hormone and ACTH secreting tumours are comprehensive and well written and the fourth section on glycoprotein hormones is particularly valuable because of the new information which is reviewed concerning tumours secreting these hormones. Recent research into tumours which are apparently functionless is reviewed critically in relation to LH and FSH secretion. Although this appears to be a biochemical finding frequently present *in vitro* but without clinical correlation, it is clear that attention has now turned to the possibility that functionless tumours will acquire endocrine significance.

The fifth section in the book is devoted to pathological and surgical considerations and includes a useful review of the results of an international survey of pituitary tumours treated by transphenoidal hypophysectomy. Reference is made to the satisfactory results in terms of improved vision following the treatment of macroadenomas, though it is not yet clear at what price the advantage of transphenoidal surgery is bought in terms of late recurrence.

Finally the book contains chapters in three sections on the genetic regulation of hormone synthesis summarising recent advances derived from molecular biology. These advances already have clinical significance, for example in our understanding of the action of dopamine on prolactin secreting tumours.

This book can be recommended because it includes new information as well as excellent reviews of accepted clinical practice.

NF LAWTON

Extra-Intracranial Vascular Anastomoses Microsurgery at the Edge of the Tentorium (*Advances in Neurosurgery Vol 13*). Edited H Dietz, M Brock, M Klinger. (Pp 350; £39.50.) Berlin: Springer-Verlag, 1985.

This volume is a collection of 53 papers presented at the 35th annual meeting of the German Society of Neurosurgery in Hannover in June 1984. The first 170 pages are devoted to aspects of extra-intracranial vascular anastomoses. Whilst these papers are a tribute to neurosurgical industry and ingenuity, the recently published co-operative study has, for the moment, dampened enthusiasm for this procedure in the relief of occlusive cerebrovascular disease. This situation is likely to persist until it can be shown that there is a group of patients with diminished cerebrovascular reserve whose natural history can be improved with a bypass.

The 40 page section on microsurgery at the edge of the tentorium is of interest but is both superficial and marred by inadequate line diagrams of the anatomy. The final 130 pages are devoted to Professor Pia's lecture on primary and secondary hypothalamus and brain stem lesions together with miscellaneous papers, the best of which have already appeared in refereed journals. Like most conference proceedings, this book is not worthy of purchase.

J PICKARD

Recent Developments in Parkinson's Disease Edited by Stanley Fahn, C David Marsden, Peter Jenner and Paul Teychenne (Pp 397; \$82.50.) New York: Raven Press, 1985.

In October 1984, when most of us were facing the hardships of a British winter earning a humble neurological crust, the contributors to this well produced volume were enduring the doubtless equal (if somewhat different) adversities of a sponsored workshop in Bermuda. The proceedings contain a great deal of the latest scientific research of a very high order from the best laboratories and departments in the USA, Great Britain and Europe.

The main sections cover: anatomy, biochemistry and pathology, imaging of dopamine receptors, MPTP-induced Parkinsonism, pharmacology and long term treatment, use of bromocriptine, and the use of other dopamine agonists.

There is an enormous amount of up to date basic science encompassed between these covers. Elegantly illustrated PET scans using fluorodesoxyglucose show storage

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dopamine is trapped in the normal striatum, and is diminished (particularly in the putamen) in Parkinsonian patients. Langston and others expand the MPTP story. The toxicity of its metabolic breakdown products MPP⁺ is emphasised with the possibility of preventing the onset or retarding the progress of the disease by early and continued use of MAO type B inhibitors. Marsden *et al* show that intravenous dopamine agonists reverse "off periods" indicating that they are due to inadequate stimulation of DA receptors; but prolonged infusions are of limited application in practice and are attended by increasing dyskinesia and waning responses. Rinne claims that the early combination of low dose bromocriptine and levodopa inhibits the development of fluctuations, especially dyskinesia.

These are but samples of a mass of new and interesting data. This is in no sense a textbook, nor is it an easy read for the bedside or armchair. It is a first class compilation of the latest developments in this continually evolving field of endeavour and the editors are congratulated on providing so much expert opinion, so many new facts and references in one volume. It will be invaluable for scientists pursuing the many enigmas of this fascinating disease.

JMS PEARCE

Dementia: A Clinical Approach. Edited by JMS Pearce. (Pp 165; £15.00.) Oxford: Blackwell Scientific, 1985.

Over the last decade the study of the dementias has moved from a position of relative neglect to one of major research investment, and with this there has been a sudden increase in the number of publications. It is against these that any new book must be judged. A major advantage of this one is that it is essentially a single author monograph. Excellent chapters on neuropathology, neurochemistry and neuropsychology have been provided by other authors, but they blend well with the overall style. The main criticism is that one is left with the impression that the clinical chapters have been inadequately revised from the author's earlier book. Thus in the discussions on Pick's disease, Creutzfeldt-Jakob disease and dementia pugilistica reference is made to the demonstration of cerebral atrophy on air encephalography and yet, as the author states later, this investigation has no place in the modern investigation of the demented patient. The discussion of Alzheimer's disease and senile

dementia under separate headings with the reversible causes of dementia dealt with in a separate chapter of differential diagnoses, create the same impression. For the most part, however, this book provides a fair overview of the neurologist's approach to dementia.

M ROSSOR

Post-Traumatic Stress Disorder and the War Veteran Patient (*Brunner/Mazel Psycho-social Stress Series Vol 5*). Edited by William E Kelly (With a Foreword by Lawrence C Kolb). (Pp 320; \$41.00.) New York: Brunner/Mazel. Outside North America: Raven Press, New York, 1985.

The term post-traumatic stress disorder is likely to be unfamiliar to many British physicians. On this side of the Atlantic, post-traumatic neurosis has a long and respectable history, although many who see the condition tend to relate it to the medico-legal setting, and confusing epithets such as compensation neurosis, accident neurosis, and post-concussional syndrome are used interchangeably. Post-traumatic stress disorder (PTSD) has been clearly defined by the DSM III and this long established condition has undergone a rejuvenation with regards to the interest in it. In particular this has stemmed from the experience of the Americans in relationship to both the Korean and the Vietnam wars, and the recognition that many people involved in such conflicts develop later consequences of this in terms of the development of psychopathology.

The idea that soldiers may develop post-traumatic neurosis is not new, although recognition of disability in these settings is actually hard won. The first chapter of this book outlines the view of US Congress to the returning Vietnam veterans who suffered later disability. It has finally become accepted that returning veterans may suffer from PTSD and with it has flowed a limited amount of US Government support and money. Further, the full backing of the American Psychiatric Association is clear with the recognition of PTSD as a definable disorder with specific inclusion criteria given in the DSM III.

The majority of chapters, as may be expected, relate directly to the Vietnam war outlining not only the severity of incidents to which soldiers were exposed, but also the pattern of responses which develop, often leading on the full-blown syndrome. As might be expected in a book such as this,

many of the chapters are peppered with anecdotes as opposed to scientific data, and while a number of authors emphasise the treatment aspects of the condition, there is little in the way of methodological evaluation of the programmes outlined. One persistent theme is the development of PTSD in people not necessarily injured, for example in those having to handle severe casualties, such as the nurses. Such observations help reinforce the point that post-traumatic conditions such as these are not the sole prerogative of those subject to head injury, and raises the issue of the relationship between these conditions in the war setting and those in a civilian setting; for example the subsequent morbidity of helpers at civilian disasters, or of innocent observers of human mayhem and catastrophe.

This book is unlikely to be of great interest to British readers, but is of great relevance to many in the United States for whom PTSD and its relationship to war veterans is becoming a full-time occupation. At the least it may encourage further research in this area, and hopefully it will allow greater awareness of the severe suffering of many patients who, usually through no fault of their own, become a victim of post-traumatic neurosis.

M TRIMBLE

Clinical Neurophysiology in Parkinsonism (*Restorative Neurology Vol 2.*) Edited by PJ Delwaide and A Agnoli (Pp 192; \$50.00.) Amsterdam: Elsevier Science Publishers, 1985.

Up until twenty five years ago, a period of neurophysiological research or at least a firm basis in neurophysiological concepts was essential for any young man hoping to make his name as a clinical neurologist. Although a firm grounding in this discipline remains as important as ever in understanding how the nervous system works and how it may become disordered in disease the newer scientific disciplines of neurochemistry, neuroimmunology, experimental psychology and molecular biology have stolen much of its thunder in recent years. As a result many of the new wave of clinical neurologists have only a smattering of Sherringtonian concepts locked away as an atrophying conditioned reflex. At the same time a group of determined motor physiologists have sprung up who by means of ever more sophisticated gadgetry are slowly illuminating more hidden and complex aspects