Book reviews

book is to form one of a series, as its subtitle might suggest. The aim of the book is to "acquaint the wide audience of neuroscientists with the current status of knowledge of the morphology of the diseased myelinated axon under selected conditions". The emphasis is on electron microscopy.

There are 16 chapters, the majority concerned with experimental work. The editors have given authors "ample freedom to organize and present the fruits of [their] personal studies". The book starts well with an excellent description by Rosenbluth, of axolemmal structure as observed in freeze-fractured preparations of myelinated fibres from normal nerves, from several mutants with abnormalities of central or peripheral myelin and from demyelinated nerves. Mouse mutants are also the subject of three further chapters. Comprehensive accounts are given of wobbler (Mitsumoto and Bradley), an animal with lower motor neuron disease, and twitcher (Scaravilli), a mouse with globoid cell leucodystrophy. The chapter on the dystrophic mouse (Nakamura and Okada) is less complete, lacking clinical details and reference to the more recent studies of the basal lamina deficiency. Mutants with abnormalities of CNS myelin are also included by Nagara and Suzuki in a chapter on radial components of central myelin. Three chapters deal with demyelination and remyelination in the CNS. Ludwin describes clearly his studies on cuprizone-induced lesions; Raine and Traugott give a comprehensive and superbly illustrated account of EAE, which includes much relatively recent work, and is prefaced by a survey of the pathology of multiple sclerosis. JHM virus-induced demyelination is well reviewed by Erlich and Fleming. Saida has surveyed myelin antigens and immune-mediated demyelination in the PNS. These nine chapters are the best and likely to be the most useful. Those remaining include case studies in dysglobulinaemic neuropathy and in membranous lipodystrophy (Nasu disease). An experimental electron microscope study of CNS changes induced by disulfiram is based on immersion fixed material. Another experimental study of encephalopathy due to thiamine deficiency does not include more recent findings on serotonergic neurons which might be relevant to its pathogenesis. (It is surprising in a publication of this quality to find computer-printed graphs.) The "fruits of their personal studies" have largely dictated the authors' choice of topics for the chapter on the pathology of the peripheral myelinated axon. Likewise, almost a half of the chapter on diabetic neuropathy is devoted to the authors' studies on basement

membrane changes. The recognition of artefact is important, particularly in electron microscopy, but the restricted topic of post-mortem change in peripheral myelinated fibres is inappropriate for this publication.

This is a volume of assorted topics whose chapters vary as widely in quality as any "proceedings of a meeting". Nearly a half of the chapters have no references later than 1982, probably reflecting an over-long gestation period for publication. It was perhaps unwise of the editors to encourage description of the contributors' own studies rather than to concentrate on pure review articles, since this has in some cases led to an unduly biased approach. Of far more value is the type of well balanced review article to be found, for example, in *Recent Advances in Neuropathology* (a third volume must surely be due).

Even were this book to fill all the scientific requirements, its extremely high price is likely to prove the ultimate deterrent.

JEAN M JACOBS

Handbook of Studies on Schizophrenia. Part 1: Epidemiology, Aetiology and Clinical Features. Part 2: Management and Research. Edited by GD Burrows, TR Norman, G Rubinstein. (Part 1 Pp 260; \$72.25. Part 2 Pp 328; \$92.50.) Amsterdam: Elsevier Science Publishers, 1986.

These two volumes provide the most comprehensive contemporary account of schizophrenia that I know of. The editors are psychiatrists from the University of Melbourne, Australia, but the 63 contributors are from around the world, mostly from North America. The first volume is mainly concerned with causal issues, the second with treatment. The book is well balanced and all major topics are covered. My main criticism concerns the price. It is traditional amongst academic reviewers to complain about book prices, but £120 for the two volumes is really excessive. One wonders if the marketing director of Elsevier is living on a different planet. Is it worth buying, even at this price? I think so, because of its comprehensive coverage, its up-to-date contributions and the quality of each chapter.

It is never easy to review a multi-author book because there is no single thesis that one can evaluate. Each contributor states his own position, emphasises some point or reports a selective series of experiments. I think that the editors might have grouped

the contributions more intelligently so that diagnostic, causal and prognostic considerations, for example, could be formally assessed. The time has come, in my view, for authors to stick their necks out and not hide behind multi-factorial models of cause and multi-professional packages of treatment. Jasper damned a contemporary book of psychiatry with the faint praise that it was "too perfect, not a single mistake". Some of the contributions to this book and the overall impression attract a similar comment. Either schizophrenia is a brain disease or not? If it is a brain disease what parts of the brain are affected? If it effects the frontal lobes or the right hemisphere or the corpus callosum, for example, then the chapters on epileptic psychosis and puerperal psychosis are either redundant or should be placed in proper perspective. If schizophrenia is a brain disease then social factors are not equal in importance. These questions are crucial to an understanding of schizophrenia and if I were editor of such a handbook I would organise the contributions so as to provide answers to these questions.

Krapelin and Bleuler still tower above all subsequent writers on schizophrenia precisely because they attempted a single formulation of the condition. Since then we have been fact-gathering only. However, if one wants to know the facts about schizophrenia, this is the book to turn to.

J CUTTING

The Pineal Gland During Development From Fetus to Adult. Edited by Derek Gupta, Russell J Reiter. (Pp 274; £40.00.) Beckenham: Croom Helm Ltd, 1986.

The claims made at the start of this book, that the most dramatic advance in neuroendocrinology of the decade has been the recognition of the importance of the pineal gland and its secreted substances, and that the pineal has now a central place in neuroendocrinology, still do not apply to man. There has however been a very considerable increase in knowledge about the human as well as animal pineal, human melatonin rhythms, and the innervation by the pineal of the surrounding brain. This book, mainly by continental authors, is a laudable attempt to summarise modern knowledge of pineal anatomy and function.

There are four main themes. These are pineal development, maturation, sexual differentiation, and ageing. The emphasis is

more on histology, histochemistry, and the relationship of pineal to other hormones, than on how the light message affects the ovary and testis. The book starts with nine chapters about the development of pinealocytes and photoreceptors, followed by six chapters on the development of melatonin rhythms and their menstrual relationship. Next comes reproduction, and finally old age, in which, perhaps surprisingly, the pineal may remain active.

The problem remains to relate all this to clinical medicine, and as yet no link has been clearly established between the pineal gland and either neurological maturation in children or affective disorders in adults, although some of the authors would have us believe this. The investigation of magnetic field variation on the human pineal has parallels with the earlier Salpêtrière experiments in hypnotism. However, the relationship between pineal tumours and precocious puberty in children is discussed well.

The book is not typeset and has no index, surely essential for even the most evanescent record of a conference proceedings to be of real value. However there are many well-produced illustrations, and long reference lists. The book is not in the same class as the recent Ciba Foundation Symposium *Photoperiodism, melatonin and the pineal*. For pinealologists only.

DAVID PARKES

A Clinician's View of Neuromuscular Diseases, 2nd ed. By Michael H Brooke. (Pp 388; £38.00.) London: Williams & Wilkins, 1986.

This is the second edition of this popular account of muscle diseases. In the preface to the first edition the author said "My own prejudices ... are here displayed for all to see" and he might have added that that is the major advantage of any personal book if the prejudices shed light and its downfall if they cause tedium. In this case I greatly enjoyed reading it from cover to cover. Apart from anything else it was a pleasure to read in some detail about how an acknowledged expert actually manages patients even when the disease is untreatable.

The book starts with a discussion of symptoms and signs and contains a particularly useful section on what the observation of simple functional acts (rising from the floor, walking etc) actually indicates about the strength of various muscle groups. A sur-

prising omission is mention of paradoxical abdominal movements as evidence of diaphragm weakness supported by measurement of supine and erect vital capacity. The importance of recording and grading functional abilities is well emphasised.

There follow chapters on diseases of motor neurons (neuropathies are not included in this book), diseases of the neuromuscular junction and then the main muscle diseases categorised as dystrophies, myotonia, inflammatory myopathy, metabolic disease, abnormal muscle activity and congenital (more or less) muscle diseases (sic). In each chapter there is an up to date and remarkably comprehensive account of the present state of knowledge in each disease which is well referenced up to 1985. Sometimes these accounts lacked complete clarity (notably on myasthenia gravis) but most were excellent. The clinical descriptions are enhanced by the clinical photographs and the muscle biopsy findings are well illustrated but not exhaustively (or exhaustingly). The chapter on dystrophies has a particularly good section on management but stops somewhat abruptly without any discussion of the issue of ventilatory support. There is a clear and sufficiently detailed section on exercise and muscle metabolism to allow some sense to be made of the bewildering number of enzyme defects in energy metabolism now described. Acquired muscle disease is somewhat sketchily covered doubtless reflecting the difference between a true "muscle specialist" and a "general neurologist with an interest"; hence there is no discussion on the differential diagnosis of all those weak patients with general medical disorders who seem to be rather commoner than a new case of dystrophy in the UK (no mention of steroid myopathy, osteomalacic myopathy or carcinomatous neuromyopathy and half a page on alcohol).

This book is well presented and easy to read even if the number of spelling mistakes is almost at irritation threshold. Nevertheless it can be highly recommended as a book to have personally, rather than in a distant library, if one is dealing with clinical muscle problems.

CM WILES

Stereotactic Techniques in Clinical Neurosurgery. By Andries Bosch. (Pp 278; DM 125.00.) Vienna: Springer-Verlag, 1986.

This small volume distils the recent advances, which have come in the last five

years, in stereotactic technique in a manageable space, so that not only traditional neurosurgeons who may not have been trained in stereotaxis, but also medical neurologists, may understand the benefit which may flow now from the use of such methods. There are 14 chapters, which address all the relevant current aspects of stereotaxis, as well as providing a historical perspective. The most commonly used commercially available stereotactic apparatus is described. The practice of classical stereotaxis, based largely on ventriculography, as well as the modern methods based on CT scanning is lucidly described. Effectively this book may be used as a text book by the trainee neurosurgeon requiring skill in stereotaxis. The author reviews the literature concerning the indications and results of stereotaxis for functional purposes, for example movement disorders and the treatment of pain, as well as the indications in tumour surgery. He also presents his personal view and experience in these fields. The text is sometimes idiosyncratic in its use of English and didactic in its instruction. However, it has condensed an enormous amount of information into a small and easily readable volume. As a text book it must be compared with much larger volumes which often cover the field and present information in a more turgid way. The book is printed on excellent paper with good illustrations and an excellent bibliography. It should be on the library shelf of every department of neurosurgery and of that minority of neurosurgeons who chose to take an interest in stereotaxis. It should also be read by other neurosurgeons and by medical neurologists. It can be recommended as an up-to-date and authoritative account of the state of the art.

DGT THOMAS

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Further information, may be obtained from The Secretariat, P.O.B. 50006, Tel-Aviv 61500, Israel