Book reviews

hygiene and sleep schedule, sleep restriction therapy, relaxation training, biofeedback, chronotherapy and psychotherapy have a place" (in the treatment of adolescent insomnia) amount to in real terms? What do the authors actually do? Is it surprising that a history of colic "significantly co-varies with the parents' judgment that night waking is a current problem (44) ($\chi^2 = 7.4$, $p = 0.007$)"? Diagnostic polysomnographic features are not common among adults with complaints of significant insomnia, and neither H reflex studies nor CSF measurement of amine metabolites, are clinically useful in the diagnosis of childhood narcolepsy and cataplexy. And what to make of the Isakower phenomenon, described as "a pre-sleep experience including blurred distinctions between parts of the body, tactile and vestibular sensation of fullness, turnings or pressings, and sounds of murmuring or visions of indistinct roundness"? Does the statement that somnambulistic children have significantly more inhibited aggression ($p = 0.05$) than non-somnambulists on Rorschach tests have any meaning? There is a lot more like this.

So this book is a strange mixture. It needs more paediatric input and more linkage with general medicine. However, it is a useful source of data about both normal and abnormal sleep in children.

JD PARKES

Brain Injury Rehabilitation: A Neurobehavioural Approach. By Roger LI Wood. (Pp 196; £17.95.) Beckenham: Croom Helm Ltd. 1987.

In this age of multi-authored texts it is refreshing to read one written by an individual. The psychosocial consequences of brain injury, which occurs most frequently in young adults, are often profound and lasting and it is an indictment of our society that so little provision has been made for this group of patients. As neuropsychologist at the Kensley Brain Injury Rehabilitation Unit, Dr Wood has contributed to the pioneering work in the management of severely brain damaged individuals with behavioural disturbances carried out there. This book is largely descriptive of that experience. The theories of causation of behavioural disturbances after brain injury and the terms used to define them are critically discussed, the case being made for a neurobehavioural rather than a traditional psychiatric approach. The treatment strategies for aggression, sexual disorders, unacceptable

habits and attentional problems are outlined with frequent case illustrations. The author argues cogently for the single case design method for the measurement of the efficacy of the interventions used. The nature of the complex disturbances after brain damage justifies this approach but some attention to the overall numbers, the failures as well as the successes and the longer term results of the treatment methods used would have been interesting. It would also have been useful to have the author's views on the applicability of the neurobehavioural approach in settings other than the specialised unit devoted to brain damage rehabilitation as the majority of such patients continue to be managed in surgical, psychiatric or general rehabilitation wards.

For its price the book is not particularly attractively produced. It will be of interest primarily to psychologists but should be read by other neuroscientists including nursing and remedial therapy professions involved in brain injury rehabilitation. Unlikely though it is, it would be pleasing to think that health care planners and community medicine specialists would read it as it would give them insight into the problems these patients exhibit and the cost in terms of human effort and facilities needed to help them.

BRIAN PENTLAND

Unconjugated Pterins in Neurobiology; Basic and Clinical Aspects. (*Topics in Neurochemistry & Neuropharmacology Vol 1*). Edited by Walter Lovenberg and Robert A Levine. (Pp 218; £30.00.) Basingstoke: Taylor & Francis. 1987.

This book is the first in a series on neurochemistry and neuropharmacology. The next three volumes are to discuss iron metabolism in the brain, depression and the neurochemistry of alcohol. Each book will be for a rather specialised audience and the current volume which is excellent will be read and bought by all those interested in pterins, as there has previously been a dearth of books on this subject, particularly one that combines both basic and clinical aspects. For clinicians perhaps only those with an interest in neurochemistry, particularly that of dementia, Parkinsonism and dystonia, will have any great interest here although paediatric neurologists seeing patients with phenylketonuria or its rarer variants will wish to read at least some of the chapters.

Unconjugated pterins were first discov-

ered a hundred years ago as a new pigment in butterfly wings. In 1963 tetrahydrobiopterin (BH_4) was discovered to be the naturally occurring essential cofactor for phenylalanine hydroxylase. Later studies demonstrated its key position in the regulation of the synthesis of serotonin and the catecholamines and led to the current interest in this substance. Subsequently rare forms of hyperphenylalaninaemia were discovered that are separate from classical phenylketonuria and are due to faults that led to under-availability of BH_4 . These include a deficiency of the enzyme crucial to salvaging the cofactor after it has been oxidised during hydroxylase activity and two forms where the synthesis of BH_4 is deficient. The biochemical and clinical consequences of these different forms of hyperphenylalaninaemia are discussed and are of importance as their current treatment is somewhat different and may become very different in the future. In neurological disease of adult life the role of BH_4 is somewhat more speculative but the data concerning its abnormalities in other diseases, particularly dementia, Parkinsonism, generalised dystonia, lead and aluminium poisoning, depression, ageing and oestrogen therapy are all discussed critically. The bulk of the book discusses the chemistry, regulation of biosynthesis and distribution of pterins and this will chiefly be of interest to neurochemists who I am sure would all speak very highly of the chapters, their authors, and the general readability of their contributions.

AC WILLIAMS

Current Therapy in Neurologic Disease 2nd ed. By Richard T Johnson. (Pp 367; £50.50.) Philadelphia: BC Decker Inc. UK distributors: Blackwell Scientific Publications. 1987.

The first edition of this book was published in 1985. The need for a second edition now, speaks well of its reception and also hints at changes in therapy during such a short interval. In reviewing the first edition, I warned that it was not a book to be used by initiates without supervision. This comment still pertains because the policy which makes each section so interesting (the expert contributor being advised to state his personal method of management) leads to contentious statements which could mislead the novice. The authors have been changed to provide new viewpoints and 17 new chapters added.

As in the first edition, coverage is remark-