Book reviews

Clinical Imaging of the Cerebello-Pontine Angle. By A Valavanis, O Schubiger, T P Naidich. (Pp 205; DM 198.) Berlin: Springer-Verlag, 1987.

During the last decade the speed of development of the newer medical imaging techniques has been so rapid that it is difficult for authors to produce books that reflect the current "state of the art". Professors Valavanis, Schubiger and Naidich have gone a long way to overcome this problem with their *Clinical Imaging of the Cerebello-Pontine Angle*.

The early part of the book is devoted to a historical overview followed by sections on the technique for the evaluation of the cerebellopontine angle, the normal anatomy and that of adjacent structures. The frequency with which the small structures such as the anterior inferior cerebellar artery and the petrosal veins are visualised are expressed as percentages and this will be of great value to the examination candidate sitting M.C.Q. papers.

The major portion of the book is devoted to computer tomography appearances of acoustic neuroma, showing in detail the features on high resolution CT assisted by intravenous enhancement for the large lesions with extension into the cerebellopontine cistern and gas CT cisternography for the mainly intrameatal tumour. "A gas-filled internal auditory canal, with well visualised neurovascular bundle and intracisternal portion of the seventh and eighth cranial nerves, safely excludes the presence of an acoustic neuroma", is sound advice, as is the following sentence "that non filling of the canal is not diagnostic of a mass within the canal".

Subsequent sections deal in turn with other types of lesion encountered in the cerebellopontine cistern and each condition is dealt with under four headings, *General Consideration*, *Conventional Radiology*, *Computer Tomography*, and *Differential Diagnosis*. Each section is clearly illustrated from the wealth of clinical material available to the authors.

The final twelve page section is devoted to magnetic resonance imaging. First the normal anatomy is discussed with the problems of visualisation of the neural bundle within the internal auditory canal unless surface coil high field partial saturation images are obtained. Many illustrations of acoustic

neuroma are to be found in this section which also show the changes in the adjacent cerebellum in the larger tumours. The prediction that "High field strength surface coil MRI will replace gas cisternography" is probably true, but it will be many years before that prediction comes true in Britain.

The standard of the book is extremely high and the quality of the illustrations produced by the Photography Department of the University of Zurich greatly enhances the text. The bibliography containing 641 references, up to the year 1985, provide the reader with ample guidance for further material about the subject. The book has earned itself a place on the library shelves of neuroradiology, neurosurgery, neurology and otology departments where it will prove a valuable reference work. My only criticism is a purely personal one, that I would have liked to have found a larger section devoted to magnetic resonance imaging.

J V OCCLESHAW

Impact of Functional Imaging in Neurology and Psychiatry (Current Problems in Neurology Vol 5). Edited by J Wade, S Knezevic, VA Maximilian, Z Mubrin and I Prohovnik. (Pp 208; £26.00.) London: John Libbey, 1987.

This book records the Proceedings of the 2nd International rCBF Workshop held in Yugoslavia in 1986. The clinical and scientific importance of in vivo measures of brain function cannot be overemphasised, and this book aims to outline the nature, technique, and limitations of functional imaging, and to do so in relation to important clinical problems. It is a mixture of accounts of techniques, and accounts of clinical problems. Four chapters are directly concerned with the imaging of regional cerebral blood flow, particularly using the increasingly important single photon emission computed tomography, and one chapter deals with positron emission tomography. The remaining chapters deal with a variety of conditions from a clinical functional or methodological standpoint, but do so in widely different ways. For instance, the chapter on Alzheimer's disease gives a broad and very useful summary of imaging in general in the condition, while the paediatric chapter is concerned particularly with measures of cerebral blood flow.

A book of conference proceedings is likely to be uneven in quality or style or coverage even with the most stringent of editing.

There is undoubtedly variability in style and depth/breadth of coverage in this book but overall quality is very high. Nevertheless, because of the variability, the book suffers a little from a lack of focus, but not one which seriously distracts from its value. It will certainly be of interest to any neurologist or neurosurgeon, and the more biologically orientated psychiatrist and psychologist will find it of great value. Clinical physicists and neuroradiologists will perhaps find some of the information to be rather basic, but for trainees in these disciplines it would be extremely valuable. It is recommended.

NEIL BROOKS

Acute, Chronic, and Terminal Care in Neurosurgery. Edited by Kalman Post, Joseph Jaffe, Peggy Reubens, Austin H Kutscher, Denise Hoffmeister, Karin M Murasko, Linda Farber Post. (Pp 194; \$34.50.) Illinois: Charles C Thomas, 1987.

This book is one of a series by the Foundation of Thanatology and is about death, disability and loss. These matters are never far from a neurosurgeon and this publication is written by a group of neurosurgeons, psychiatrists, radiological oncologists, nurses, social workers and a transplant coordinator. It covers the personal and professional experiences and reactions of these people when involved in dealing with severely disabled and dying patients and their relatives.

Among the major issues covered in the volume are Definitions of Death, Legal, Moral and Ethical Issues, Surgical, Medical, and Psychosocial Decision Making, Behaviour Roles and Relationships, Multidisciplinary Approaches to Care, Counselling, Disability, Loss, Suffering, and Rehabilitation, Education of Professionals, Grief and Bereavement, and Open Communication.

There are seven sections. The first of these is concerned with the neurosurgical aspects of care for patients suffering from brain tumour and myelomeningocele. The chapters emphasise the relationship of the patient and his physician to disease and the involvement of the family in the support and care of the patient through what is often a dismal and difficult period of declining health and which in many cases leads to death.

The second section is about the important aspect of educating junior members of staff to their role in the caring team. All too fre-

quently inexperienced and untrained junior medical and nursing staff are left to cope with extremely difficult problems involving distraught patients and relatives. More time should be spent during the period of clinical training to deal with these matters.

The emotional stress, for all concerned, in providing for the paediatric patient is covered in the third section with an excellent chapter by Dr Fred Epstein on the Paediatric Surgeon and the Terminally Ill Child. He comments that in dealing with the terminally ill child "we are concerned human beings who are sharing life's greatest sadness with a grieving family. We must remain sensitive and responsive and assure a familial environment that will finally provide a measure of peace, comfort and tranquillity".

Radiological oncologists treating neurosurgical patients contribute section four. They examine the reactions of many of their patients who for the first time realise that they have cancer when they learn that they are to be treated with radiation therapy. Such a patient, who was a teacher, quoted Mark Twain when faced with this situation "Let us endeavour to live, that when we come to die, even the undertaker will be sorry" but then went on to comment "When you're dying, let's endeavour to live maximally so that even oneself won't be sorry." The problems of the staff are also emphasised and the need for support and counselling in their day to day management.

Section five discusses Supportive Care Services with chapters by nurses and social workers. An Intensive Care Nurse writes on Work with the Dying, Comatose Patient with an illustrative care where there was loss of confidence with relatives due to lack of communication between relatives and the care team. It also emphasises the unreliability of memory when there is emotional involvement. The other chapters in this section analyse the emotional reactions of the Caring Team in response to death and chronic invalidism.

In the sixth section, which examines Biosocial-Ethical Concerns, Dr William Sweet in a chapter entitled "Can We Recommend Deliberate Termination of Support in the Permanent Vegetative State" discusses the problems and relates the cost of continuing care of a patient in a vegetative state to resources available in the community. There are also chapters on the transplant donor and rehabilitation of the neurologically impaired patient.

Section seven is a chapter on Neuropsychological Input in Patient Care which concludes that "there are many post-neurosurgical patients whose subtle but dis-

ruptive deficits may be overlooked".

This is an interesting collection of experiences and thoughts, often profound, from many professionals involved with the less spectacular but equally demanding aspects of neurosurgical practice. It sets out to attempt to improve the care of critically ill neurosurgical patients and their families and to make the Caring Team more sensitive to their needs. It does so very openly and sometimes with candour and shows how it is possible to identify with many of the problems discussed. It is a well produced book whose royalties will go to The Foundation of Thanatology. It is well worth reading by all concerned with neurosurgical patients.

ALEC E HOLMES

Cerebral Blood Flow. Edited by James H Wood. (Pp 792; £79.00.) Maidenhead: McGraw-Hill Book Co (UK) Ltd, 1987.

This is an extensive, multi-authorship book covering most aspects of cerebral blood flow including cerebrovascular anatomy, cerebrovascular physiology, methods of measurement (both clinical and experimental), imaging of the cerebral circulation, cerebrovascular pathophysiology and pharmacology, and the results of surgical intervention on cerebral blood flow.

The 42 chapters are well written and succinct. In spite of the large area covered, there are some surprising omissions. There is little mention of the link between cerebral blood flow and metabolism which surely deserved a full chapter. In the experimental methods section, only three methods (H_2 clearance, microspheres and autoradiography) are covered. Although these may well be three of the best methods for excluding extracranial contamination in the measured results of cerebral blood flow, an account of other techniques together with a review of the cerebrovascular anatomy of the commonly used experimental animals and the effect of anaesthesia on cerebral blood flow would have been of enormous benefit to would-be experimentalists.

However, on the whole this is a good and balanced book which gives an overall picture of developments in cerebral blood flow research up to 1985. The specialist research worker may find it of limited value, but it certainly deserves a place in the library of all clinical neurosurgical and neurological departments.

A MURRAY HARPER

Organic Psychiatry: The Psychological Consequences of Cerebral Disorder—2nd edition. By William Alwyn Lishman. (Pp 745; P/b £25.00; Cloth £45.00). Oxford: Blackwell Scientific, 1987.

Few authors have the satisfaction of producing a classic text, universally recognised as such, from the moment of publication. Such is the achievement of Professor Alwyn Lishman. The formula of *Organic Psychiatry* is simple and successful—consideration of the psychiatric manifestations of the whole range, both structural and physiological, of known cerebral disorder. The second edition follows nine years after the first and is the product of as much hard work as went into the first. Just under half of its 650 pages contain substantial updating of the subject material. Over 1000 new references are given. The chapter on dementia has been significantly revised. Movement disorders now rate their own chapter instead of being part of the chapter on miscellaneous disorders. Reference to virtually any neuropsychiatry disorder produces a balanced and authoritative account. As a bonus, the format of big print is easier to read.

Although innovative, *Organic Psychiatry* is firmly set in the historical tradition that has embraced both psychological and neurological conceptions of psychiatric disorder, which is divided into two main categories, psychogenic and cerebral disorder, as described in the late Sir Daniel Hill's foreword to the first edition. In this tradition, organic psychiatry is regarded as a relatively minor part of psychiatric disorder in general, that associated with known cerebral disorder. Professor Lishman deliberately eschews speculation on the contribution of cerebral disorder to the remaining "functional" psychiatric disorders. Every disorder described in the book, however, helps replace speculation by medical facts. The concept of functional psychiatric disorder will disappear but the facts in *Organic Psychiatry* will remain, and the cerebral disorder described is relevant to psychiatric disorder however precipitated. The author, with characteristic modesty, avoids the far reaching implications of his work. Balanced with a more extensive account of the contribution of psycho-social factors to psychiatric disorder, this book provides a framework for the general psychiatric text book of the future.

DCG ROGER