patient with concomitant coronary and cerebral vascular disease".

Which gives rise to the puzzling bit: who is this book really aimed at? The detail of the reviews is rather heavy going for the average clinician for whom these topics are but a small part of their daily clinical work, yet the expert may well be familiar with much of the material discussed. On the other hand, the reviewers take a fairly sensible view of much of the material they discuss and rightly point out the methodological weaknesses of evidence where appropriate. Each chapter ends with a clear point-by-point summary. Inevitably, some of their conclusions are controversial, but in general the summaries err on the side of caution.

Unfortunately, in striving to take a balanced view, the authors, I think sometimes throw out the baby with the bathwater, when (p291) they conclude "it has not been shown that aspirin prevents stroke". Their endorsement of simultaneous carotid endarterectomy and coronary artery bypass surgery would also not be well received in the UK. Not everyone agrees that patients with acute suspected myocardial infarction must have onset of symptoms within 6 hours, and definite ECG changes to qualify for thrombolytic therapy. Even though the reference lists are thorough and up-to-date, there is a strong North American bias. It is also unfortunate that the very important Oxford overview analyses of the prospective epidemiological and randomized controlled data on blood pressure, stroke and coronary heart disease were not available until after this book was published.

I think the book's main difficulty is common to all reviews: how does one summarise a huge mass of sometimes conflicting data? Formal statistical overviews are very helpful under these circumstances, yet the authors tend to be dismissive of the technique; perhaps they would consider using overviews more in the second edition.

All in all, there is a lot of useful information in this book.

Anyone with a particular interest in the rather specialised field of combined cerebral and coronary disease should buy this book as a reference source. Other interested parties should get the librarian to get it for the hospital or departmental library.

PETER AG SANDERCOCK

Seizure Recognition and Treatment. By R LECHTENBERG. (Pp 204; Illustrated. Price: £29.95.) Edinburgh, Churchill Livingstone, 1990. ISBN 0-443-08701-6

The intention of the author of this book is to provide information for the physician who is not a neurologist and who is primarily responsible for the care of patients with epilepsy, to permit him to devise strategies for investigation and management, and to answer those questions which patients with epilepsy, and their families, often ask. Overall, within this framework, I think he succeeds.

For the neurologist there is little that is new, but he may find, as I did, that the chapters on Reproduction and Birth Defects and on Psychological Disturbances and Suicide are useful for drawing together and articulating information that is not always presented so clearly elsewhere. The author

practises in New York, and reflects medical custom in America, which does not always translate comfortably to Britain. For instance, he states: "... many adult neurologists would want a thorough examination of the CSF of a 30-year-old patient who had just had a first seizure." I doubt if a British neurologist would want to do this unless there was evidence of infection or systemic disease. And "when the patient has the first seizure of a lifetime, hospitalisation is prudent to watch for meningitis or other rapidly progressive neurologic problems".

This smacks of overkill, and at any rate is not possible (or desirable) in Thatcher's disintegrating Health Service. I question the usefulness of estimating calcium and magnesium levels on every adult patient with a fit, as is recommended: perhaps a subject for audit? The transatlantic language divide is evident in the use of the term "pseudoseizures", generally held in this country to be attacks like epilepsy of non-organic cause, but used in this book to include all those disorders which are included in the differential diagnosis of epilepsy. "Factitious seizures" equate to our pseudoseizures.

The initial chapters describe the various forms of epilepsy and the investigation of such patients, with brief accounts of the indications and limitations of various tests. Whether it is useful to describe evoked potential studies, digital subtraction angiography and positron emission tomography to a non-neurologist in this context is debatable. The chapters describing the clinical aspects of seizures and their cause are good, as are principles of treatment. The problems of children and adolescents are dealt with separately from those of adults, and the advice given is apposite. There is a short chapter which addresses non-pharmaceutical approaches including surgery.

This book is in many ways like Anderson's haggis—good in parts but disappointing overall. The balance of the book is wrong: I feel that in the effort to be comprehensive, there is too much emphasis on the exotic and rare—how often does schistosomiasis cause epilepsy? (page 71)—and a bias towards overinvestigation. This is a pity because there is good advice in the management and descriptive sections. The book is well produced and illustrated though some line drawings do not further the text and could be discarded. References are appropriate. For the neurologist I found nothing to tempt him to buy, and for non-neurologists there are better reference textbooks on epilepsy.

MILNE ANDERSON

Hydrocephalus Concepts in Neurosurgery Series Vol. 3 Edited by R M SCOTT. (Pp 128; Price: £39.25). London, Williams & Wilkins Ltd, 1990. ISBN 0-683-07614-0

This attractively produced little book gives promise that it might have some of the merits but suffer the usual advantages and disadvantages of multi-authored texts. These fears seem to be justified in several of the early chapters, particularly when, upon occasion, it is unclear whether the authors are discussing infantile, childhood or adult hydrocephalus. The section on history is peculiarly unsatisfactory and as is often the case with United States productions, adopts a peculiarly dismissive attitude towards European contribu-

tions. The German literature may no longer be fashionable and may indeed be difficult to read and to render into an English text but the number of errors in the titles above certainly seems excessive even to some with only a modest knowledge of German. Mikulicz certainly ought to be sufficiently well established in the history of surgery to justify having his name spelled correctly.

Another source of difficulty which the authors of the historical section might have addressed, is the present understanding that aqueduct stenosis is a consequence of hydrocephalus rather than a cause. Much of the discussion would be more intelligible if this observation had been made. It is, of course, clear that in a proportion of cases, the clinical course proceeds after bypassing the aqueduct as though the aqueduct had been responsible for the hydrocephalus and thus it may be assumed in such cases that the aqueduct is responsible. The recent and careful work of Lapras in this connection is ignored. That the patients with aqueduct stenosis of non-tumorous origin almost always have compromised CSF pathways because of the primary pathological problem, is of fundamental importance. This explains why Torkildsen's operation and Scarff's third ventriculostomy operations are so unsuccessful in infantile aqueduct stenosis.

The importance of this realisation is markedly greater than listing the publications which deal with attempts at diversion of cerebrospinal fluid to unlikely sites and by unusual methods. In the reviewer's opinion the valveless ventricular to jugular bulb shunting work of El Shafei might justifiably be included in such a listing. Likewise, the chapter on mathematical modelling is disappointing especially in its neglect of pulsatile factors. The uncritical acceptance of Bering's views, again marks a parochial US view. The fascinating findings of Dirocco are mentioned but scarcely discussed. Certainly plexectomy is not uniformly unsuccessful as the authors state, even a modest or partial plexectomy can convert a patient into a condition where they are independent of valved shunts.

When this volume leaves its title, ie, when it stops dealing in concepts and deals in practicalities, however, it becomes a more interesting and worthwhile text. The MRI pictures and analyses are in a class which leave most people in this country at least, breathless with admiration for the techniques which properly funded surgical services can enjoy. The chapters on surgical management are excellent, full of sound practical advice and mostly free of recommendation for relatively untried procedures. The one field which might be doubtful is the suggestion for the management of slit ventricle syndrome by cranial expansion concentrated in the posterior calvarium. This section is carefully argued. The discussion is well organised, although the decision diagrams are not. Posterior calvariectomy may indeed provide more skull expansion than subtemporal craniotomy without any additional morbidity. The possibility that the posterior fossa decompression is important in children with slit ventricle syndrome, is of interest and will bear further investigation. The section on normal pressure hydrocephalus is again well organised although this reviewer is not at all convinced that one lumbar puncture can ever be a useful diagnostic test for patients with what could perhaps better be called "symptomatic hydrocephalus". Although it is true we need better organised criteria for diagnos-

ing this condition, at the present moment, insertion of the valve is the test. In the UK economy where surgeons are so hard pressed this may be a preferable means of determining likely treatment for patients with large ventricles than using CSF conductance to outflow studies, a test where the name of Eckstedt deserves a mention.

In conclusion the initial doubts felt about a textbook of this kind have largely been resolved in this reviewer's mind. It seems a sensibly discussed and unextreme statement of modern US practice in the surgical treatment of this fascinating and unremittingly difficult disorder.

BERNARD WILLIAMS

Neonatal Neurology. 3rd Edition. By GERALD M FENICHEL. (Pp 261; Price: £29.95). Edinburgh, Churchill Livingstone, 1990. ISBN 0-443-08700-8

During the last two decades, there has been a very great increase in interest in neonatal neurology. This sprang partly from the fact that clinical symptoms and signs could be correlated now with conditions identified by the newer methods of imaging which in the past were mainly possible on post-mortem examination. Better intensive care also allowed many ill infants, both premature and those with rarer neurological syndromes to survive and pose their problems to the clinicians. Greater interest in the subject no doubt has also been fuelled by the increasing litigation in infants who present with neurological problems in the newborn period, as later problems of many of these infants are commonly attributed to the associated signs of perinatal asphyxia and thus assumed malpractice.

Dr Fenichel's book was one of the first which tried to fill the gap in this field. The book, now in its 3rd edition, primarily aims to be a readable guide for clinicians and thus to concentrate on the clinical aspects of diagnosis and management with a minimum of pathological background. The first chapter describes the neurological consultation. The following chapters deal with: seizures, disorders of tone, asphyxia, trauma and vascular disorders, infectious diseases, metabolic disorders, disorders of cerebral morphogenesis, hydrocephalus and congenital tumours, electro-encephalography and evoked responses.

The neurological consultation gives a good practical approach to history taking, clinical examination and note taking. Probably more emphasis could be given to the importance of asking leading questions about trauma in pregnancy and recording, with the appropriate family tree, recurrent miscarriages, and still-births and neonatal death in the parents' relatives. Abnormal postures in neonates are illustrated with diagrams. Though visual representation is always the best method, I wish that these diagrams would bear more resemblance to a neonate and his posture! The chapter on seizures provides an extremely good practical approach to their treatment avoiding polypharmacy and unnecessarily long periods of therapy. The chapter on hypotonia reflects the author's special interest in muscle disease and thus quite a lot of space is devoted to pathological illustrations and rare conditions.

This contrasts with the chapter on asphyxia which is relatively brief, taking into account that it is probably by far the most common condition that the average clinician is going to meet. There is also little information in this chapter to guide the clinician as to how various investigations might establish the timing of the insult which might be of medico-legal importance. I found the separation of the chapter on asphyxia away from birth trauma arbitrary and artificial. The chapters on infectious diseases and metabolic disorders are excellent. The embryology and pathology in the disorders of cerebral morphogenesis and hydrocephalus are good and easily readable, though maybe too extensive for a book of this size. The chapter on electrophysiology is very informative. It is only a pity that no similar brief chapter was included on imaging.

This is a lucidly written book, though the clinician might have been greatly helped if some flow diagrams had been supplied to aid the differential diagnosis. It provides a readable and enjoyable introduction to the subject.

LILLY DUBOWITZ

Textbook of Psychiatry. Study Guide and Self-Assessment. By MR LOVELL, MD FRANZEN. (Pp 398; Price £14.95 Paperback). Cambridge University Press, 1989. ISBN 0-88048-293-1.

MCQ books are eagerly consumed by anxious pre-membership trainees in most medical disciplines. After negotiating the exam, successful candidates frequently attempt to put their hard work to practical use by publishing their own collection of questions. In psychiatry, some candidates have even passed on their wisdom in this form before completing the postgraduate exams. Until now, it has been a seller's market, and consequently many of these books are of a poor standard, riddled with errors or poor quality questions and often poor value for money. The developing glut of such books will hopefully mean that in future only better quality books will be published.

This book is compiled as a study guide to *The American Press Textbook of Psychiatry*, and consists of between 15 and 20 MCQs drawn from each chapter. The authors go about their task competently, providing a comprehensive, but rather unimaginative selection of MCQs with brief explanations accompanying answers. However, the book is unlikely to meet the needs of most buyers in the UK. The original textbook is of high quality, but is not in common use among British psychiatrists. The content is heavily biased towards American psychiatric practice, with an emphasis on DSM-III, and absence of reference to British mental health legislation. Most trainees buy this type of book to prepare for examinations, but the format of questions is unlike that in Royal College Examinations, and so is likely to arouse limited interest.

THOMAS FAHY

Neurology: What Shall I Do? By D THOMAS AND B DAILY. (Pp 115; Price £6.95). Sevenoaks, Butterworth Scientific Ltd, 1989.

This short book written for general practitioners consists of 100 questions posed by a GP and answered by the consultant. The questions usually consist of a potted case

history and are wide ranging covering an impressive range of topics. I would have no doubt that GP's will enjoy and learn a lot from this book whose format makes it extremely easy to read. Hopefully with the White paper looming they will still feel a neurological opinion is necessary. I suspect Daffyd Thomas has done us all a great favour in helping to popularise and remove some of the mythology of neurology as a difficult subject. He has also helped to show GP's what sort of patients neurologists are interested in, can help with and most importantly with what degree of urgency. There is even talk of using the telephone rather than sending everything in on the general take—the battle to get acutely ill patients with neurological problems to the neurologist must not falter. There is a refreshing honesty about some of the answers suggesting that he actually does what he says which makes for interesting reading for other neurologists. Naturally, controversial topics are discussed, though a GP reading this book will not always be made aware of them. For instance, there is a rather evangelical attitude towards the management and investigation of vascular disease. Should sell well and for the neurologist is very amusing in places.

ADRIAN WILLIAMS

The Pediatric Neurosurgical Patient: A Cooperative Approach. Edited by L P IVAN. (Pp 323; Price £38.75). Published by Warren H Green (USA). Distributed by Gazelle Book Services (Lancaster), 1989. ISBN 0-87527-352-1

There is a need for a concise and readable text book which can provide non-medical staff with a balanced introduction to the complexity, scope and achievements of modern paediatric surgery. Dr Leslie Ivan has attempted to fill this need, drawing on the experience of the staff of the Childrens Hospital of Eastern Ontario.

It is ironic that the book, whose title stresses a co-operative approach, suffers the problems of repetition and disparate content common to so many multi-author texts. Thus, the chapters vary from an excellent but rather advanced explanation of audiological testing to a discussion of speech therapy dominated by its own jargon—"the dyspraxic patient demonstrates inconsistent errors as he gropes towards target phonemes when he undertakes volitional speech movements". No small text book can escape oversimplification but there are several occasions when the authors of this book adopt a worryingly didactic approach, for example to the use of high dose steroids, barbiturates and hyperventilation in the management of raised intracranial pressure and head injury.

There are some omissions from the book which are surprising. The emphasis is very much on the role of professional hospital based health workers and it was therefore, disappointing to find no critical appraisal of their work. There is only brief mention of the role of parents, community services and self-help groups and no mention of the importance of clinical genetics and counselling. It is surprising to find that magnetic resonance imaging is dealt with in a one page addendum, despite publication in 1989.

Although this book contains much commonsense, it would be difficult to recommend it, at its present cost—£38.75—to those for whom it was intended.

RJ NELSON