that high-dose IVIg may be an effective treatment for MMN. Temporal improvement was related to the administration of immunoglobulin. Repeated infusions induced sustained improvement. Deterioration was observed when the dose administration was delayed, and improvement was sustained upon regular (monthly) administered high-dose. The evolution after IVIg administration in MMN is similar to those reported in chronic inflammatory demyelinating neuropathy.³

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- 2 Parry GJ, Elarke S. Multifocal acquired demyelinating neuropathy masquerading as motor neuron disease. *Muscle Nerve* 1988;11:103-107.
- 3 Van Doorn PA, Brand A, Strengers PFW, Meulstec J, Vermeulen M. High-dose intravenous human immunoglobulin treatment in chronic inflammatory demyelinating polyneuropathy: A double-blind placebo-controlled, crossed study. *Neurology* 1990;40:209-212.
- 4 García-Guijo C, García-Merino A, Rubio G, Guerrero A, Cruz Martínez A, Arpa J. IgG antiganglioside antibodies and their subclass distribution in two patients with acute and chronic motor neuropathy. *J Neuroimmunol* 1992;37:141-148.
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Seizures and Epilepsy. By JEROME ENGEL, Jr. (Pp 536 Illustrated; Price: £39.00). 1989. Philadelphia, FA Davis Co. (UK Distrib: Williams & Wilkins Ltd, London). ISBN 0-8036-3202-9.

This is a practical, easily read book with a sensible clinical orientation on the epilepsies and seizures. The approach and organisation is logical and follows accepted terminology and classification. The basic mechanisms and causes of epilepsy are comprehensively discussed and the chapter on pathophysiology is particularly clear. The illustrations are well represented, supportive to the text and often excellent.

It is useful in one volume to have the variety of epileptic syndromes outlined; not always in the detail a specialist would demand, but with particular reference to the chosen readership, which is that of physicians in training and practising physicians. The indexing and references make it of additional value to the practising neurologist and neurophysiologist.

It is necessary to turn to more specialised texts for precise indications for surgery and new pharmacological approaches, which will of necessity emphasise the changing scene in therapeutics of epilepsy. There is a pleasant balance achieved by attention to community needs in epilepsy and a historical background. The wise counselling on the place of the electroencephalogram will be appreciated by clinical workers in the field. The statement that the most common cause of unwarranted diagnosis of epilepsy is over clinical interpretation of the EEG, and that epilepsy is not an EEG diagnosis but clinically based deserves quotation. As a contemporary review by an experienced neurologist, it covers in considerable depth the mosaic of the epilepsies. It is instructive, particularly for physicians and neuroscientists in training and to the clinical neurophysiologist.

Seizures and Epilepsy reads agreeably, it is thought provokingly didactic and is recommended.

JR HERON

excess risk is rarely enough to warrant prophylactic or simultaneous endarterectomy. This is followed by data defining the risk of neurological and psychological complications following coronary artery bypass and heart transplantation.

The middle section consists of a review of investigative techniques used to monitor and assess cerebral damage suggesting that cerebral blood flow monitoring is an important and useful technique but that the present state of cerebral function monitors precludes their usefulness. Retinal fluorescein angiography and digital image analysis of such angiography during bypass is described, though little comment is made about the potential damage to the eye caused by these techniques during surgery.

The final section analyses those interventions in blood gas management, arterial filtration and the use of membrane rather bubble oxygenators, which techniques have reduced the risk of cerebral damage, and considers the use of excitotoxic amino receptor antagonists and platelet antagonists, concluding that although the former are worthy of study, the latter, complicated as they are by risks of hypotension, appear ineffective in reducing damage.

In the summary Mr Treasure recognises the considerable advances achieved and the consequent problems in assessing future therapies created by this success. The fact that only 1-2% of bypass operations now result in permanent neurological deficits indicates that studies of novel agents and techniques will need to recruit large numbers of patients to show a statistically significant benefit.

The selection of topics and the instructions to authors to review their topic and then to comment on future possibilities has resulted in a comprehensive, up to date and well referenced volume which covers the field of cerebral complications of heart surgery.

DAVID BATES

BOOK REVIEWS

All titles reviewed here are available from the BMJ Bookshop, PO Box 295, London WC1H 9TE. Prices include postage in the United Kingdom and for members of the British Forces Overseas, but overseas customers should add £2 per item for postage and packing. Payment can be made by cheque in sterling drawn on a United Kingdom bank, or by credit card (Mastercard, Visa or American Express) stating card number, expiry date, and your full name.

Cardiac Surgery and the Brain. Edited by P SMITH AND K TAYLOR. (Pp 284; Price: £65.00). 1993. Sevenoaks, Edward Arnold. ISBN 0-340-55315-4.

Dr Smith and Professor Taylor have assembled review articles from the major contributors to the study of neurological complications occurring during heart surgery. They have deliberately concentrated on the cerebral injuries. The informative review of the relevance of carotid artery disease in the prediction of cerebral damage by Professor Harrison concludes that the

NOTICE

1993 Meeting of the European Federation of Neurological Societies

The meeting will be held in Berlin on 8-11 December 1993, and will focus on topics in cerebrovascular diseases, epilepsy, and migraine. Further details can be obtained from P & R Kongresse GmbH, Monika Porstmann, Neue Promenade 6, D-10178 Berlin, Germany. Tel. +49-30-2825113; fax +49-30-2827835.