chapters are difficult to read (including the now usual extensive use of abbreviations) and appear to have been written for a super specialised readership. A stronger editorial hand would have been required to avoid these excesses. As expected, in a multiauthor book, the contributions vary greatly in quality. I particularly liked the thoughtful critical chapter on epidemiological aspects by Armon *et al* and the very clear chapter on neurophysiological aspects by Stalberg and Sanders. There is a useful and detailed review on neurotransmitters and second messengers by BR Brooks.

The prologue by the distinguished theoretical physicist, Stephen Hawking, gives interesting details of his disease. As a small boy he was not well coordinated and not good at ball games. By his third year in Oxford, he was more clumsy, had falls and was eventually told, at the age of 21, that he had an incurable disease that would kill him in a few years. Twenty-nine years later it is clear that only the first prediction was accurate. It is regrettable that the general neurologist will not find enough data to, get in perspective such histories in the clinical sections.

Overall, the book contains a wealth of material, but with the rapid pace of research most books are not up to date when published. The book will interest basic and clinical neuroscientists and will provide a valuable source of references for the various topics. At the price it should find a place in the libraries of Medical Schools and Departments but is unlikely to be bought by, general neurologists or neurological junior staff.

ROBERTO J GUILLOFF

Behcet's Disease: Basic and Clinical Aspects (Inflammatory Disease and Therapy Series/8). Edited by J DESMOND O'DUFFY and EMRE KOKMEN. (Pp 696 Illustrated; Price: \$175.00 (US and Canada); \$201.25 (All Others)). New York, Marcel Dekker Inc. 1991. ISBN 0-8247-8476-6.

There are 314 cases of the disease known to the Behcet Syndrome Society in this country, and no one knows how many of them have neurological involvement. Separate chapters in this book quote various prevalence rates, ranging from four out of 127 in Portugal to eighty out of three hundred in Turkey. Most of us see such patients rarely, and this compendium is therefore a valuable reference work. It is based on papers from the 1989 international conference held in Maryland, and draws heavily on experience of the disease in Turkey and Japan, the countries with the highest prevalence.

It is a substantial volume, of nearly seven hundred pages, covering Diagnostic Criteria and Epidemiology, Clinical Manifestations, which fill nearly three hundred pages; Aetiology and Pathogenesis; and Treatment. There is a familiar ring about many of the chapters on possible causes and treatment. Neurologists have read, and written, many similar chapters about multiple sclerosis, and the various approaches made to this multisystem disorder are instructive.

Despite the clustering of topics the general effect of the book is piecemeal, rather like an ABN poster session, but this simply reflects the fact that the disease is still at "state of the art" stage and seems as far as ever from the "unifying hypothesis" milepost. The book

can be recommended both as a source of information and as a stimulus to thinking.

NIGEL J LEGG

Clinical Brain Imaging: Principles and Applications (Contemporary Neurology Series). By JC MAZZIOTTA and S GILMAN. (Pp 480; Price: £92.00.) 1992. Philadelphia, F A Davis & Co. ISBN 0-80365944X.

This multi-author volume has been kept to a uniform and high standard by the Editors. The opening chapters describe the physics of CT, MRI, PET and SPECT with useful technical comments on the cause and appearance of artefacts. The nine chapters that follow describe the appearances of these four techniques as they are applied to neurological problems such as tumours, epilepsy, dementia, cerebellar and paediatric disorders. Helpful flow charts are offered in many sections of the book but frequently include somewhat unusual advice: for example MRI is stated to be the examination of choice for epilepsy, followed by CT if a mass is found.

Furthermore, there is an assumption that PET is, and indeed should be, a routine clinical test but nowhere is there a definite indication of circumstances in which PET is the sole discriminating test. The recommendation of angiography in the pre-operative assessment of cerebral metastases also would not find support in the UK. The use of isotope studies in dementia and cerebrovascular disease is well explained and illustrated and the refreshing use of colour brightens the text. Each chapter is extensively referenced but for a publication dated 1992 disappointingly few references are after 1989. Even the final chapter: Epilogue: Future Visions, includes only four references from the 1990's.

Overall the book is sound, correct, well laid out and illustrated, but it lacks the sparkle and stimulus that could have enlivened this essentially technically based approach to brain imaging. The ideal reader for the text has not been identified but it would form a good introduction for a trainee in any of the clinical neurosciences as well as for specialist radiologists. However, for "state of the art" information about clinical practise a reader will need to consult a more recent publication.

E TEASDALE

The Diagnosis and Management of Seizure Disorders. By RONALD P LESSER, M.D. (Pp 158; Price Not Indicated). 1991 New York, Demos Publications. ISBN 0 939957 31 0

The editor of this brief and rather strange paperback aimed to introduce 'non-epileptologists' to the 'conceptual and technical advances' in the diagnosis and surgical management of epilepsies over the last two decades. I think that the non-epileptologist would be as disappointed as I was to read such an uninspiring account.

There is a very good, if rather uncritical overview of the surgery of epilepsy as one might expect from its origins in a tertiary referral centre, but despite the title, the bulk of the material seems simply a re-working of

old ground, including the ILAE-based classification of seizures and epilepsy, the use of EEG (including that irritatingly meaningless and undefined term 'epileptiform' abnormalities) and the routine anti-epileptic drugs. Newer drugs such as lamotrigine and vigabatrin do not get a mention. While there is the usual textbook summary of pharmacokinetics, the many practical points that could have helped to remind the non-specialist of our improved understanding of the common management problems are strangely missing. In addition, some odd advice is offered, for example, in a very brief account of status epilepticus it is suggested that a diazepam infusion be set up 'if seizures persist following ... the use of an intravenous bolus of diazepam', a practice which in my experience is likely to be both unsuccessful and to delay the institution of other, more effective treatments. There are many more helpful and more detailed protocols for managing status available elsewhere. Again, while the authors stress that epilepsy is a clinical diagnosis less than two pages of the 158 are devoted to the clinical aspects of differential diagnosis.

While this book provides a brief, conventional and concise overview of epilepsy management, I find it difficult to decide who would find it worthwhile. In the UK it might perhaps be appropriate as an introduction for junior residents if they worked in a unit which provided surgery for epilepsy, but their interests would be better served by delving more deeply into the literature.

LANCE BLUMHARDT

Surgery of the Spine: A Combined Orthopaedic and Neurosurgical Approach (2 Vols.). Edited by G FINDLAY and R OWEN. (Vol. 1 pp 1-600, Vol. 2 pp 603-1143; Price: £175.00). 1992. Oxford, Blackwell Scientific Publications Ltd. ISBN 0 632 03021 6 (The Set) 0 632 03246 4 (Vol. 1) 0 632 03247 2 (Vol. 2).

Books on spinal surgery fall thickly from the press. It is not difficult to see reasons. Two obvious ones are that the conditions dealt with are common and disabling and they are the concern of at least two specialities, one a large one.

These two volumes cover the whole of the spine comprehensively. They are not too weighted down with the operative detail; indeed, considerable space is given to investigations, measurements and to medical conditions. There is an excellent chapter on metabolic bone disease.

A major attraction of spinal surgery, at least for the neurosurgeon, is that amongst much pathology which is difficult or unrewarding to treat, operations for radicular compression in disc disease, both lumbar and cervical, are brilliantly successful and must be among the most gratifying in surgery. It is, therefore, curious that there should be a challenge to the standard lumbar operation from a new technical development described here by Brock; percutaneous discectomy, which is applicable only to 10% of cases and requires the purchase of elaborate and expensive equipment.

It is difficult to fault the range and scope of these volumes. The extensive section on

spinal injuries is notable for informative chapters on the pathology and conservative treatment of this distressing condition. Some aspects of spinal surgery remain obscure or puzzling. That enlightenment is not to be found in these excellent volumes about the role of surgery in common spinal pain, or of decompression in spinal cord injury, must mean that no answer is available.

The work is well illustrated and, if one can ignore the frequency with which one is tripped up in one's progress through the text by the politically correct "his or hers", well written. It should prove invaluable to trainees and practitioners in the specialties at which it is principally aimed.

TT KING

Cervical Spondylotic Myelopathy (Contemporary Issues in Neurological Surgery Series) Edited by R L SAUNDERS and P M BERNINI (Pp 219 Illustrated; Price: £49.50) 1992. Oxford, Blackwell Scientific Publications. ISBN 0 86542 193 5.

This book deals with all aspects of cervical spondylotic myelopathy and describes the various surgical treatments available. The main uncertainty about the correct treatment of spondylotic myelopathy stems from lack of information about the natural history of untreated or conservatively treated disease. It can also be difficult to interpret correctly the results of conservative treatment and compare them with patients treated surgically.

The chapter on anatomy deals mainly with the bone, ligament, and disc structures but relatively little attention is given to the blood supply of the cervical cord. It is suggested that the main supply is from the anterior and posterior spinal arteries but as Abdullah and Bowden showed the main supply is from the radicular arteries. Damage to these vessels, the distribution of which is inconstant, may be one reason why the results of surgery are less good than had been anticipated.

The chapter on pathophysiology describes the main factors causing cord compression. These are a congenital narrowing of the antero-posterior diameter of the spinal canal, the presence of spondylotic bosses or bars, infolding of the ligamentum flavum and instability or hypermobility of the cervical spine secondary to disc degeneration. Cord compression is likely to occur if the antero-posterior diameter of the cord is less than 11 millimetres. The chapter on neurology gives a good review of the literature and of the symptoms and physical signs which may occur. The chapter on imaging details the various techniques and is well illustrated.

Ossification of the posterior longitudinal ligament is covered in Chapter 14. It is described as a benign progressive hyperplasia and calcification of the longitudinal intervertebral ligament and has an incidence of 2% in Japan and 0.7% in adults in the USA. When marked, especially if there is a congenital narrowing of the AP diameter of the spinal canal, this may cause cord compression. Whether this is a separate entity or part of the generalised spondylotic process is difficult to say.

Treatment may be conservative or surgical. Where there is instability the authors recommend stabilization and if there are

signs of increasing cord compression, decompression. Anterior stabilization with decompression is in most cases preferred to posterior decompression. Any surgical interference may cause complications partly be due to the fact that damage has been caused to the vascular supply. Operations on the cervical spine are a major undertaking and the complications include acute myelopathic worsening and spinal destabilization.

This is an interesting book which deals with all aspects of cervical spondylotic myelopathy and should be read by all those interested in the subject.

MARCIA WILKINSON

The Dementias: Diagnosis & Management Edited by MYRON F WEINER (Pp 350; Price £47.95) 1991. London, The Eurospan Group. ISBN 0 88148 297 4.

This is a multi-author book from the University of Texas and the Mount Sinai School of Medicine, New York. The first quarter of the book deals with the identification, psychodynamics, investigation and differential diagnosis of dementia. The diagnosis of dementia defers reverentially to the lists of symptoms included in the DSM-III-R manual of the American Psychiatric Association.

The section on investigation is rather heavily weighted toward brain imaging and the author's personal experience of single photon emission tomography accounts for almost half the chapter. Neuropsychological assessment is surprisingly discussed separately in the management section of the book. The chapter on differential diagnosis attempts to describe the clinical features and investigations of a wide range of diseases manifesting as dementia. As a result common causes of dementia are sometimes dealt with summarily, undue weight being given to rare disorders. There is no mention of cortical Lewy bodies in the section on Parkinson's disease, to which less space is devoted than to the differential diagnosis of adult onset leukodystrophy.

The management of dementia forms the middle chapters and consists of good practical advice on psychological and behavioural management and a thorough coverage of these problems which may be helped by drugs. Some tips have a strong North American flavour and techniques are described to aid the safe removal of a patient's supply of firearms. The book ends with a 43 page appendix containing several questionnaires and assessment scales and nearly 40 pages of references.

The text is more likely to appeal to psychiatrists than to neurologists.

D NEARY

Movement Disorders in Neurology and Neuropsychiatry. Edited by AB JOSEPH and RR YOUNG. (Pp 762; Price £95.00). 1992. Oxford, Blackwell Scientific Publications Ltd. ISBN 0-86542-146-3.

Movement disorders are one of the most intriguing of the conventional but artificial bridges which span neurology and psychiatry. The influence of the mind in every organic disturbance, the motor retardation

of depression and dementia and the tics and stereotypes of schizophrenia are familiar reminders. Marsden and Fahn, Shah and Donald, and others have provided texts in the past, and so this big, largely American, volume comprising 95 chapters in 738 pages promises a comprehensive modern survey.

Drug induced disorders, dementia and neurodegenerative disorders, mood and movement, and a range of essays on tics, myoclonus, startle, ballismus, chorea, tremors and dystonias, and sleep disturbances are the main headings. The result is a very mixed bag both in content and quality. Many chapters are only 3 or 4 pages long, reducing the depth of analysis and description sought by the reader. Other sections (e.g. those on tardive dyskinesia) are unbearably repetitive. It leaves the impression that the editors sketched out titles for every possible variant and context of movement disorder, told the contributors to get on with it, but failed to eliminate the overlaps or to edit the final product. This said, there are some fascinating and authoritative essays which will enlighten and entertain. Rabbit syndrome, pathologic laughter and crying, startle epilepsy, autism, bruxism, the alien hand, and mirror movements are but a few of these engaging accounts; but are these really to be classified as movement disorders?

There is much of value in this book, but Joseph and Young have been too ambitious in trying to be all embracing, and too modest in the exercise of editorial prerogative.

JMS PEARCE

Tourette Syndrome: Genetics, Neurobiology & Treatment (Advances in Neurology, Vol. 58). Edited by T N CHASE, A J FRIEDHOFF, D J COHEN. (Pp 377; Price \$144.00). 1992. New York, Raven Press. ISBN 0-88167-922-4.

This is the second volume in the "Advances in Neurology" series to address the subject of Gilles de la Tourette's syndrome—now abbreviated to "Tourette Syndrome". Volume 35 in 1982 has now been updated by a decade in a comprehensive volume with contributions detailing progress in the understanding of this condition and its associated behavioural and psychiatric phenomena.

There are no less than 112 authors contributing to a volume of 362 pages and there is much repetition and overlap between contributions. But as the neurochemical and neuropharmacological discoveries in Parkinson's Disease in the 1960's profoundly changed the thinking about "degenerative" neurological disorders, so discoveries in Tourette syndrome are changing our thinking about behavioural neuropsychiatry and neurogenetics. This is therefore an important review of a condition with wide clinical and basic science interest.

The natural history of the disease and its clinical manifestations are described. A number of suggestions are made concerning pathogenesis with an interesting section on genetics. And the pharmacotherapy of tics, obsessive-compulsive disorder and attention deficit hyperactivity syndrome are reviewed.

This volume is an important marker of the current status of Tourette Syndrome research, diagnosis and management. It