presented and there is a clinically orientated section dedicated to motor unit disorders which covers a broad area, including CNS disorders. The end of the book contains a section on specialised examinations including paediatric and intraoperative topics. The book is very well referenced, with a comprehensive selection of original and reproduced figures. This is a serious reference text, therefore, which is accessible, readable and potentially useful to clinical neurophysiologists when faced with new or unusual cases.

SIMON BONIFACE

Infantile Spasms and West Syndrome.

Edited by OLIVER DULAC, HARRY T CHUGANI and BERNARDO DALLA BERNARDINA. (Pp 310 £40.00.) Published by W B Saunders Co, London 1994. ISBN 0-7020-1777-9.

West syndrome is the combination of infantile spasms with hypsarrhythmia on EEG. The onset in the first year of life is all too often associated with profound cognitive regression and a poor long-term prognosis. Fortunately Dr West did not know this when he first described the syndrome in his own baby son in 1841. His boy, unusually, did well. Initially spasms were thought to be rare, an impression not helped by the wide spectrum of names given to them. With better classification of the epilepsies, we now know that the incidence of spasms is 1:1400–1800. The pathophysiology is not known. It seems likely that a wide range of factors affecting the cerebral cortex can produce spasms if they occur at the correct stage of brain development. The revolution in neuroimaging, both structural and functional, has improved our understanding of the range of pathologies causing infantile spasms and of the differences (sometimes subtle) in their clinical presentation.

This book, although detailed, does carry a clear message: infantile spasms are usually symptomatic. If a structural lesion is found but not treatable, the prognosis is poor. If found and treatable, it is better. But if no cause can be found and particularly if pre-morbid development was normal, the outcome may be good, and it would be useful to identify these patients early. Prompt recognition of children with an operable lesion may also be important. The book reviews evidence that early surgery prevents the appalling long-term consequences of spasms, and discusses the role of functional imaging (SPECT, PET) in defining this group. Drug treatment is unsatisfactory. The book reviews the patchy evidence favoring ACTH over prednisolone. The authors are perhaps too low key about vigabatrin which seems promising, particularly in the treatment of the refractory symptomatic group. The question of the relationship between vaccinations and infantile spasms also deserves more prominence. Recent evidence suggests that this association is coincidental, but it has such important implications that it warrants a chapter of its own.

Overall this is a welcome book. Occasionally a clear picture is obscured by detail but one can find a lot of good new information and useful consolidation of the old.

REBECCA AYLWARD

Craniopharyngioma. Edited by GIOVANNI BROGGI. (Pp 158). Published by Springer Verlag, Berlin 1995. ISBN 3-540-75001-0.

This monograph on the surgical treatment of craniopharyngioma comprises papers given at a meeting organised by the Paolo Association for Neuroscience which was held in Milan in May 1993. The result is an up to date summary of the surgical management of craniopharyngioma by some of the recognised authorities in paediatric and adult neurosurgery. Each of the authors report the results of their personal series in the treatment of this demanding condition which was described by Northfield as being "fraught with difficulty to a degree not offered by any other benign intracranial tumour". Publishing the proceedings of a meeting as a book results in much repetition and there has been little editing of the text resulting in loss of clarity and frequent textual errors which I found distracting. Many of the chapters are illustrated with radiographic images which are adequately reproduced and clear.

The title of the monograph reflects a distinct surgical bias which emanates from a large body of current opinion which holds that the ideal treatment for these tumours is radical microsurgical excision. Although this view is widespread it is by no means unanimous and I do not think sufficient space has been devoted to the difficulties facing clinicians who have to balance the theoretical benefits of total excision against the very sizeable neuropsychological, visual and endocrine morbidity associated with this approach even in the most experienced hands. However, other treatment methods are covered including intracystic bleomycin, colloidal isotope administration and stereotactic radiosurgery. There are further chapters on neuropathology, neuroradiology, endocrine tests and hormonal replacement therapy but these topics are not covered in sufficient depth to make this text alone a sufficient source of information for doctors managing these patients.

I found the final chapter rather disappointing. This is a transcription of a round table discussion chaired by the editor addressing five important controversies in the management of craniopharyngioma. However, the exchanges left me unclear whether, for example, preservation of the pituitary stalk should be attempted and, if achieved, whether it would confer any benefit without increasing recurrence risk. The topic of who should be operating on these patients was raised but then not discussed in any depth. Overall, a useful contribution to the literature, but unlikely to find a place on many bookshelves.

RODNEY LAING

Muscle Disorders in Childhood. By v DUBOWITZ. (Pp 540; £70.00.) Published by WB Saunders Company Ltd, London 1995. ISBN 0-7020-1437-0.

There can be few clinicians who have such widespread experience of paediatric neuromuscular disease as Professor Dubowitz. This is perhaps emphasised by the fact that all but a handful of the illustrations in this beautifully presented book are derived from

his personal cases and clinical records. The book has been completely up-dated since the first edition to include much recent work on the molecular biology of the muscular dystrophies.

There is also an excellent review of our current state of knowledge regarding various ion channel disorders where there have been major advances in our understanding of this complex group of conditions within the last few years.

A further chapter encapsulates the author's extensive clinical experience of dermatomyositis in childhood but I was a little surprised not to find some discussion here about the recent pathological studies suggesting the involvement of muscle fibre capillaries at any early stage in dermatomyositis which would appear to differentiate this disorder more clearly from polymyositis than was previously thought. There is an excellent review of the author's personal experience of drug therapy in juvenile dermatomyositis, including the use of cyclosporin.

I enjoyed reading this book in which Professor Dubowitz has achieved a very successful blend of his extensive clinical experience with recent advances in molecular biology and immunocytochemistry. It should be available in any centre with a paediatric neurological clinic and would be an excellent reference text book for trainees in paediatrics or neurology seeking up to date background information on muscle disease in childhood. For anyone running a neuromuscular clinic I would suggest it to be required reading.

TIM WALLS

Magnetic Resonance Imaging of CNS Disease. A Teaching File. By DOUGLAS M YOCK. (Pp 724; £99.50.) Published by Mosby, St Louis 1995. ISBN 0-8016-8098-0.

This is a hard-covered book of 724 pages compiled from the Departments of Neurosciences and Radiology of Abbott Northwestern Hospital, Minneapolis, USA. The author explains in the preface that the book is designed to "offer a survey of CNS disease but does not constitute an all-inclusive atlas" of brain and spine MR. However the following chapters constitute a very significant proportion of what a radiologist working with MR can expect to uncover during his or her career. There are 18 chapters (13 brain, five spine) and a selected pictorial index. The main chapters are divided into pathology sections—for example, metastases, white matter disorders, hydrocephalus and cysts etc. The second contents list presents anatomical location so once the scheme is mastered it is possible to locate a particular pathology entity at a particular anatomical site fairly easily. Each page consists of two cases with a single MRI or MRA (MRI in a great majority) with several lines of text describing the interpretation of the MR with limited clinical correlation and pathology. Only one image is offered with each case (although a few cases are duplicated with different images) which is not ideal for interpretation. However, the images used are first class, both in content and quality; this is definitely the strong point of

the book. The section I particularly like is the "selected pictorial index" which, in contrast with the rest of the book, is very useful as a quick reference.

My major criticism of the book is its excessive length. There are extensive references at the end of each chapter which are not directly referred to in the text, and as such are useless in my opinion. There is much duplication without making significant new points e.g. there are over forty cases dedicated to MR images of meningioma at various sites.

The question that remains is who will buy this book? I think that most neuro-radiologists will be familiar with the majority of the cases presented in this book and there is insufficient extra information to answer specific points that they may have. It would be an excellent book for radiologists in training prior to final radiology examinations and would be a very useful adjunct to other junior staff training in clinical neurosciences. However, I think that the people who would benefit most from this book are non-neurology trained radiologists working in an MR department with a reasonable neurological workload. Similarly this will be good reading for MR radiographers and as such many MR departments will make space on their bookshelves for this text.

PAUL GRIFFITHS

Neurology and General Medicine. (Second Edition). Edited by MICHAEL J AMINOFF. (Pp 999). Published by Churchill Livingstone, London 1994. ISBN 0-443-08933-7.

Neurology is quite likely to suffer as a result of the rigid Calmanised training schedules about to descend on the British hospital service. It will be difficult, if not impossible, for neurologists in training to experience, at registrar grade, decision making responsibility for general medical patients. This will be to the detriment of their rounded training since an important part of many consultant neurologists work entails expertise at the borderzone of neurology and general medicine. Furthermore patients with nice neurological diseases have a habit of being ill in a general medical way as well (what is the commonest cause of hypoxia in a patient with Guillain-Barré syndrome?). Even though the concept of general physicians with an interest in neurology is justifiably dead, excepting a few dying embers of enthusiasm in our Royal College, confidence in the management of the common general medical illnesses will remain an important component of a neurologist's competence. The neurology in general medical (and surgical) patients is the other side of this coin and here the neurologist has to be able to help his colleagues in other specialties when their patients' nervous system needs attention (or even proper examination).

I road tested this second edition of Aminoff's already popular book for a while to answer various questions asked by my physician colleagues. Thus I found the section on "Neurological Complications in the Critically Ill" a great help when the ITU team asked me to talk about a patient with multiple-tube syndrome whose limbs were wasting. However, my patient with Anti-Hu syndrome needed more work outside this

book since he was referred, by a general physician, not with a subacute sensory neuropathy but with a motor neuropathy, not described here, but actually well recorded in patients with anti-Hu and small cell carcinoma (which we then had to twist the radiologist's arm to find). However, advising physicians of the prognosis of their patients after cardiac arrest was a doddle after chapter 9. A colleague with a patient whose hyperthyroidism presented with a hemiparesis could be supplied with a reference from chapter 18. I could talk almost intelligently to our chest physician (an expert in the breathing problems in neurological patients) after reading "Breathing and the Nervous System". I would have found the chapter on "Neurological Complications of Thermal and Electrical Burns" useful several years ago when a student developed a moderately severe delayed spinal cord syndrome after shocks from a railway's electrified overhead cable. The changing face of neurology is demonstrated in the extensive review of infectious diseases (nine chapters in all) where dear old neurosyphilis has to share half a chapter with its spirochaetal relative Lyme disease but where regrettably leptospirosis is not considered common enough in the USA to be included. On the other hand, of course, the modern neurological mimic HIV gets a chapter to itself, as does its cousin HTLV-1. As one would expect from a book based in North America, chapter 31 on the neurology of drug abuse is thorough enough for me to answer the neurosurgical senior registrar's question about cocaine abuse and subarachnoid haemorrhage.

In short, because there are too many jewels of knowledge here to list completely, "Aminoff", already a staple help-mate for neurological registrars (sorry, Unified Training Grade-ars), is bigger and better than before. It should be on the shelves of all medical libraries in the world whilst UK consultants, especially those recently appointed to posts involving a substantial general hospital interface, should dip into their pockets for a copy for their Volvo (although at 999 pages it is too bulky for the glove compartment).

CHRIS ALLEN

Advances in the Neurobiology of Schizophrenia. Edited by J A DEN BOER, H G M WESTENBERG and H M VAN PRAAG. (Pp 469 £70). Published by John Wiley and Sons Ltd, Chichester, 1995. ISBN 0-471-95287-7.

Research into the neurobiology of schizophrenia is in the ascendant. There is now a wealth of evidence that this "functional" psychosis has a substantial biological component which is increasingly susceptible to elucidation by neurobiological approaches. The main aims of this book are to bring the reader up to date with progress in the field and to link research findings with implications for clinical practice. In the main it is successful in its task, although at this stage the emphasis is much more on the research itself than its applications.

The heart of the book is the section which reviews progress in brain imaging, psychopharmacology, and neuropathology.

Brain imaging, in particular, is making rapid strides. The major findings from MRI and PET/SPECT scan studies are summarised, and a view of future possibilities is given through functional MRI and MRS. The psychopharmacology chapters focus on aspects of dopamine system activity and the renewed interest in serotonin; implications for clinical practice are considered via the development of atypical neuroleptics. One chapter is devoted to bringing together the findings from brain imaging, psychopharmacology and neuropathology. Unfortunately it re-covers the ground from the separate chapters on these topics as much as it attempts to integrate them, but the important message is that findings in each field are now solid and comparable enough for each to benefit from discoveries in the others. Amidst all this talk of integration the chapter on genetics stands somewhat out on a limb at present, a powerful neighbour hunting for susceptibility loci in order to achieve its potential.

A theme which recurs in a number of chapters is the value of judicious focusing on symptom groups within schizophrenia, and of studying vulnerability markers for the disease. The positive/negative dichotomy continues to dominate the subclassification of schizophrenia. In particular, certain abnormalities are predominantly associated with negative symptoms—for example, hypofrontality in studies of functional brain imaging. This approach is taken a step further when positive, negative and disorganisation symptom dimensions are considered. A lucid account is given of the relationship between these and neuropsychological and functional imaging findings. Vulnerability markers are reviewed in the areas of neurophysiology and attention processing, and prospects for using these in animal models of psychosis are considered. The final section investigates the relevance of neurobiological findings in schizophrenia for childhood-onset psychoses.

Overall this book provides a competent review of the current state of neurobiological research in schizophrenia and would be a useful addition to library shelves.

ALASTAIR CARDNO

SHORT NOTICES

Readers may be interested in:

Viral Vectors. Gene Therapy and Neuroscience Applications. Edited by Michael G Kaplitt and Arthur D Loewy. (Pp 485; \$49-95). Published by Academic Press, San Diego 1995. ISBN 0-12-397571-9.

Progress in Neurology. Edited by J S Chopra and I M S Sawhney. (Pp 336). Published by Churchill Livingstone, New Delhi 1995. ISBN 81-7042-082-2.

NMR Spectroscopy in Psychiatric Brain Disorders. Edited by Henry A Nasrallah and Jay W Pettegrew. (Pp 260; £29-50). Published by The Eurospan Group, London 1995. ISBN 0-88048-483-7.