complex and expensive therapies to the patient. It is very unlikely that there will be one cheap magic bullet for patients with a stroke. Clinicians will have to properly assess the condition of their patient's ischaemic brain clinically and probably with expensive imaging techniques before selecting the correct therapy for that individual case. These three books give us a taste of the possibilities for that future.

In Louis Caplan's book the chapters are lucid reviews, in the main by luminaries in the stroke field, dealing with the mechanisms of brain tissue (including ocular) ischaemia as well as the haematological, vascular, blood flow and cardiac components of the cerebral ischaemia process. The last section reviews stroke epidemiology, clinical trials, and stroke databases. Throughout Caplan interposes prefatory remarks at the beginning of sections to orientate the reader as to the relevance of the material to follow (he acknowledges that this is a style borrowed from Henry Fielding). Similarly after each section Caplan has helpful concluding remarks bringing together the chapter and emphasising clinical relevance. Although there are, in many sections of the book, too few illustrations to alleviate the data load the contributions are all well written and commendably brief with abundant (but not oppressively so) references. Ask your librarian to order this book.

Hachinski's book, in the attractive Ballière series of reviews in Clinical Neurology, is different in the sense of being a series of nine essays on different stroke topics. It is really a "recent advances" review rather than attempting any comprehensive overview of the subject. There is much of interest here with reviews of atherogenesis, stroke genetics (remember CADASIL and chromosome 19q12?), stroke rehabilitation (including an intelligent review of the mechanisms of recovery) and vascular dementia. The proximal aorta as a source of embolism is often overlooked but here has a separate chapter as does interventional radiology, carotid endarterectomy, and of course the ischaemic penumbra. The latter chapter discusses carefully the time-window likely to be available for therapeutic interventions. This may be as short as 3–4 hours, which means that the NHS is in for a serious disruption when any of these therapies are shown to work. Finally cerebral haemorrhage, much more of an event than a process, gets a chapter with summarising reviews on cerebral amyloid angiopathy, vascular malformations (including cavernous haemangiomas) and the haemorrhages due to fibrinolytic or anticoagulant therapies. In short this volume provides a useful weekend update of most of the important areas of stroke medicine.

Of this stroke trio the third book by Marc Fisher (also an author in the first) is the one impoverished neurologists wishing to keep abreast with stroke medicine should buy if they can not afford all three. In the United Kingdom the clinicians who admit strokes might benefit from reading it too, even though the United Kingdom is not represented amongst the authors from Belgium, Switzerland, Germany, Finland, Sweden, and Japan who join the 33 mainly United States contributors. The pathogenesis of atherosclerosis is covered in a chapter with only slight overlap with the first excellent one on stroke risk factors and their modification, which emphasises the important difference between attributable and relative risk

factors and the economics of primary prevention of stroke. This in turn only slightly overlaps with the review of medical therapy to prevent stroke which sits easily next to a surgical chapter which reviews the use of EC-IC by-pass and carotid endarterectomy to prevent ischaemic stroke. The pathophysiology of ischaemic brain injury and its potential inhibition by therapies are given two separate chapters again with appropriate overlap whilst excellent reviews are provided of the use of ultra-sound and new magnetic resonance technologies in the evaluation of patients with stroke and their treatments. The pertinently brief chapter on the current management of stroke deals intelligently with practical issues of respiratory complications, metabolic disturbances, urinary problems, and even bedsores. Unfortunately the chapter on thrombolytic therapy was written too late to include the disappointing initial results of trials of this treatment and so is already out of date. Finally a contribution on unusual causes of stroke tackles the thoroughly unsatisfactory entities of migraine related stroke and paradoxical embolism (have you even seen a real one?). All in all Fisher's book is excellent and is a lot easier to carry around than the Barnett's Bible even if it cannot hope to be so encyclopaedic.

CHRIS ALLEN

Clinical Neuroradiology: A Textbook.

Edited by E LOHR, KW SIEVERS, JH FAISS, HC DIENER, D STOLKE. (Pp 280; £135.00.) Published by Hogrefe & Huber Publishers, Kirkland, USA 1995. ISBN 0-88937-132-6.

This is a hard-backed book published by Hogrefe and Huber and consists of 280 pages including the index. It costs £135. Multiple authors contribute to the 13 chapters, most are radiologists but there is also a sizeable neurology and neurosurgery input. Each chapter consists of approximately one-third text and two-third images with a good mixture of plain films, CT, MR, and angiography.

Unfortunately I think that the book falls between two stools. There is insufficient written information to define this as an authoritative text and the image quality is very patchy. According to the authors the book is directed at students and practitioners. However there are several other books on the market in the same price range that are more readable, better organised, and better illustrated.

PAUL GRIFFITHS

Stroke Syndromes. Edited by JULIEN BOGOUSLAVSKY and LOUIS CAPLAN. (Pp 510; price £95.00.) 1996. Published by Cambridge University Press, Cambridge 1996. ISBN 521 45397 6.

The pedigree of this book is of the very highest order. Julien Bogousslavsky and Louis Caplan are indisputably the "syndrome kings" of clinical strokeology; if anyone should write or edit a book on stroke syndromes, it is these two. A quick electronic search showed that, between them they have written 377 articles in MEDLINE-indexed journals since 1966, and almost all of the papers were on clinical aspects of stroke and stroke syndromes. The editors have, with the help of some very distinguished coauthors, constructed it as a reference book, with a size and price (£95) to go with

that concept. Testing the index for ease of use, I was quickly seduced tangentially by some intriguing names I had never heard of (the pseudothalamic sensory syndrome of Foix Chavany and Levy, the Werneck commissure syndrome to name but two early finds). Dipping in and out of the book is a pleasure. In doing so, I saw immediately that, for an aging consultant like me, (who is frequently intimidated by the junior staff when it comes to matters of molecular biology), this book might provide some ammunition with which to, temporarily, regain the upper hand on ward rounds. On a more serious note, the introduction emphasises that the aim of the book is to aid clinical pattern matching, linking common symptoms to particular lesions (and vice versa) and identifying rare syndromes associated with stroke (eg the Divry-van Bogaert syndrome). The book certainly achieves its aims; anyone who treats patients with stroke will find it useful. However, by its emphasis on the minutiae, the book does at times detract from the reality that, in everyday practice, stroke management is often based on fairly simple clinical judgements. People who are interested in stroke should look at this book, provided they realise that clinical stroke medicine is not necessarily as complicated as this book sometimes makes out!

PETER SANDERCOCK

Walsh and Hoyt's Clinical Neuro-Ophthalmology. 4th Edition, Volume 5.

By NEIL R MILLER. (Pp 4783; £123.00.) Published by Williams and Wilkins, London. 1995. ISBN 0-683-06021-X.

The final volume of the 4th edition of this gigantic textbook is a testimony to the dedication, the energy, and the staying power of the author. There will be none of the condescension that greeted poor Gibbon on surrendering his final volume of the "Decline and Fall" to the Duke of Gloucester who curtly said "What is this, Gibbon? More scribble, scribble, scribble?". The first volume appeared in 1982, and the fifth volume brings the total pagination up to 4500 pages and 200 pages of index. This volume, divided into 2 parts has over 1500 pages and over 5000 illustrations. The first part deals with infections and inflammation of the CNS, whereas the second part deals with demyelination, viral disease, and a final section on non-organic neuro-ophthalmic problems. These two volumes will ensure that neurologists and ophthalmologists will be suitably equipped to deal with the diagnostic challenges of the future.

The first part alerts us to new diseases that will confront us, to old friends re-emerging (TB and syphilis) and to improved diagnostic capabilities (PCR etc). The expansion in the techniques for the detection, identification, and investigation of infective agents has been one of the most dramatic advances. The inclusion of 38 pages on prions and prion diseases demonstrate the need to keep abreast of terminology.

One of the species of *Borrelia* causes Lyme disease and the neuro-ophthalmic manifestations are described in 50 pages with a wide clinical spectrum, fundus photos, MRI scans, and pathological studies. Similarly, the fans of Wipple's disease, already delighted at the pathognomic clinical features of oculomasticatory myorhythmia will be glad to know that the pathogenic

organism has been isolated and named *Tropheryma whippelii*. Some of the greatest diagnostic challenges are encountered in patients with malignant disease who have had immunosuppression and radiotherapy and then develop a deteriorating clinical situation. The clinician has to decide whether they have further disease, side effects of treatment, or intercurrent infections. This section deals with these rare infectious agents and the breadth is staggering.

The second part opens with the most comprehensive overview of virology, with in many instances more pathological illustrations than neuro-ophthalmological illustrations. There is an extensive section on multiple sclerosis and the accumulation of 20 pages of double columns of references fairly reflects the depth of coverage and there are extensive reviews of the Guillain Barré syndrome. In addition there is a comprehensive and well referenced section on sarcoidosis with good fundus photos, MRI scans, and pathology. Finally, it seems appropriate that after studying the scientific and clinical material of neuro-ophthalmology for five volumes, the last breath should be reserved for the practicing clinician. The final chapter is on the "neuro-ophthalmic manifestation of non-organic disease".

This book will be of immense value and service to all in neuro-ophthalmology. It contains an encyclopaedic volume of material with cohesion and a massive bibliography. This may sometimes be at the price of clinical fine tuning but my final advice is to rejoice that this has been completed; rejoice that the author has maintained his dedication and sanity, and procuring your individual copy will give you no regrets and probably a great deal of pleasure.

MIKE SANDERS

The Treatment of Epilepsy. Edited by S SHORVON, F DREIFUSS, D FISH and D THOMAS. (Pp 835; £99.50.) Published by Blackwell Science, Oxford. 1996. ISBN 0-6320-3782-2.

The first chapters of this major new book set treatment in the context of modern accounts of the pathophysiology, classification and diagnosis of epilepsy. In doing so the book could almost claim to be a comprehensive textbook of epilepsy, which to my mind such a large tome really ought to be. At present it does lack an account of epidemiology, a gap which will shortly be filled by a review in the *JNNP* Neuroepidemiology series. The historical introduction describes the contribution of the National Hospital, Queen Square, and especially its Victorian neurological giants, Gowers and Hughlings Jackson, to the treatment of epilepsy. However the rest of the book is distinctly international with authors drawn from all over the world.

The chapter on pathophysiology is hard going for those who had forgotten the more intricate details of the T-type calcium channels and different types of GABA receptor, partly because the figures and their abbreviations have not been adequately annotated. Fortunately all is eventually revealed in a later chapter on the mechanisms of action of antiepileptic drugs. The strength of the book is its coverage of the advantages of each of the antiepileptic drugs. Another strength is the detailed description of the investigation for and remarkable success of surgical treatment in selected cases. Each of the chapters

on drug treatment includes a box summarising the editors' personal view of each drug. The other chapters would also have been enhanced, like the Scott report, by executive summaries. Every textbook is bedevilled by the march of time and perhaps the trials supporting the superiority of magnesium sulphate in eclampsia, for instance, were not published by the time this book went to press. In some of the chapters information is given in a didactic fashion without the detailed referencing which is needed in a book of this weight. With clarification of the obscurer passages and inclusion of one or two more chapters this important new book should mature into the international standard comprehensive textbook of epilepsy. It is already a valuable resource for all who treat epilepsy.

RICHARD HUGHES

Tropical Neurology. Edited by RAAD A SHAKIR, PETER K NEWMAN, CHARLES M POSER. (Pp 485; £50.00.) 1996. London: WB Saunders and Co. ISBN 0-7020-1922-4.

The editors describe this volume as a "genuinely international and comprehensive book" which aims to "distil current knowledge in a form which will be valuable to the neurologist practising in tropical zones and in temperate regions where imported cases are seen". Unfortunately, because the contents are arranged entirely by disease and grouped by their causes, a neurologist is bound to find it of limited value unless he knows the cause of the complaint from the outset. The way round the problem is simple and has been negotiated successfully by contributors to the standard large textbooks on tropical diseases. An author with great experience of neurology in the tropics—Billinghurst and Osuntokun have done the job well in two recent volumes—could have provided an overview which draws attention to common symptom complexes such as acute brain syndromes (often caused by more or less extracerebral infections such as typhoid fever which merits only a passing mention in the volume under discussion), cord lesions, or polyneuropathies etc and summarises likely causes in different regions of the world.

Such an introduction would make the whole text vastly more useful to the clinician puzzled by the unfamiliar and would have added little to the total bulk of this volume. It would have disarmed critics like myself who are obliged to ask how the text can be called comprehensive when it mentions only in passing, or not at all, typhoid and typhus (both so-called because of the clouding of consciousness they can produce), leptospirosis and Lyme borelliosis. These are important because they are treatable. Vascular diseases of the brain and cord should have been mentioned because they are very common in the tropics, often complicating hypertension, diabetes, or haemoglobinopathies.

The editors claim to have considered the plight of the practitioner with limited resources. Unfortunately many of their authors, 19 of whom work in the Western World compared with only one who practises in tropical Africa, give the impression that they would feel extremely insecure without access to MRI scanners and to facilities for culturing bacteria, let alone to patient's relatives with the wherewithal to

buy drugs which are often unimaginably expensive to those on third world incomes.

Having criticised the lack of any attempt to synthesise the contributions, and the too-often Western oriented approach, credit must be given to many of the chapters which are excellent. Warrell on cerebral malaria, Bill on schistosomiasis, Dumas on African trypanosomiasis, Wadia on neurocysticercosis, Vernant on HTLV-1, and the Warrells on rabies are all authoritative and valuable. Senanayaka's review of toxins is pertinent and comprehensive. The chapter on leprosy is marred by the statement that recommendations on treatment are undergoing constant review and the interested clinician is advised to phone a Louisiana number to find out how to treat a case. Actually, the WHO recommendations on multidrug therapy have been virtually unaltered for 14 years and differ substantially from those in the text. Of pure neural leprosy (with no skin lesions) there is no mention, despite its obvious importance to neurologists.

In 1973, JD Spillane edited a volume also entitled *Tropical neurology* which was largely a compendium of disease as it presented to neurologists practising in various tropical locales. It was strong on the syndromal approach and is still of considerable value. To be sure, much has been learnt since then, but this book, which sees itself as a successor to Spillane, would have been greatly enhanced by his insights. In his preface, Spillane stated that it will be many years before a comprehensive account of tropical neurology could be undertaken. I believe that it could be now but, sadly, this is not it.

CHRISTOPHER ELLIS

Hypnotics and Anxiolytics. (Bailliere's Clinical Psychiatry). Guest Editors D J NUTT, W B MENDELSON. (Pp 509; £30.00). 1995. London: WB Saunders Company. ISBN 0-7020-1955-0.

Anxiety and insomnia are very much Cinderella subjects, even within psychiatry. Epidemiological surveys have established quite high prevalence rates for anxiety disorders but only a relatively small proportion of such patients are treated by specialised services. Where they are, their treatment is often assumed by practitioners who might have considerable experience in conducting of anxiety management groups but are unlikely to have much experience of formal training in pharmacological aspects of treatment. Insomnia is probably one of the most common symptoms alleged in primary care and among hospital patients decisions about its treatment are frequently devolved to on-call junior medical staff called upon to write up night sedation. Thus a compilation of expert opinion upon the roles and limitations of pharmacological approaches to treatments of anxiety and insomnia is timely.

The book begins with an attempt to correct the Cinderella status of these problems in the form of chapters outlining the economic costs of anxiety and insomnia. The author of the latter of these estimates that in 1996 the total direct cost of insomnia to the United States economy was \$10.9 billion. The role of benzodiazepines in the treatment of insomnia and anxiety are outlined by acknowledged experts in these areas, and there is a useful chapter documenting and describing the phenomenology of benzodiazepine dependence and discontinuation. The use of monoamine oxidase inhibitors,