Book reviews

INTRACRANIAL TUMOURS OF INFANTS AND CHILDREN

By Wolfgang Th. Koos, and Meredith H. Miller. (Pp. 415; illus.; £15.00.) George Thieme: Stuttgart. 1971. Churchill: London. 1971.

This excellent work achieves its objective as a comprehensive survey of current knowledge in the field of intracranial tumours of infants and childhood most successfully. The authors base their text on their experience in the analysis of 700 cases of brain tumours in the Department of Neurosurgery in Vienna and their personal experiences in the United States of America and Europe. The book deals with clinical, diagnostic, and therapeutic aspects of brain tumours starting from and maintaining a strong anatomical and pathological basis.

The contents are set out in three main parts. Part I consists of an introduction, statistics, and a useful chapter on increased intracranial pressure. The various classifications of brain tumours are enumerated in this first part. The authors thereafter, in the main body of the book, use the classification of Zülch followed by the appropriate synonyms. The relative frequency in the young of infratentorial tumours is again shown, as is the rarity of meningiomas.

Parts II and III are concerned with supratentorial and infratentorial tumours respectively. Each part opens with a general discussion including the clinical picture and a brief account of diagnostic tests and treatment. It then deals in sections methodically and in depth with tumours as they affect the hemispheres or special areas of the brain, using the Zülch pathological classification. Each of these sections is again prefaced with remarks concerning the clinical picture and more detailed and appropriate diagnostic tests and treatment constituting the main bulk of the extremely well-produced work. In addition to the three main parts, which are excellent, there are chapters on metastatic tumours, chemotherapy, and a list of differential diagnoses.

The book is very well illustrated with more than 300 figures, many of which are composite and include radiographs, photomicrographs, operative and clinical photographs, and many useful diagrams and graphs. There are more than 20 Tables. On occasions, where there are many illustrations, they unfortunately tend to extend into the following subsections of text. A small amount of time spent in familiarization with the lay-out of the book is time well spent. This comment also applies to the final

bibliography, which is divided into sections not corresponding completely with those in the text. The bibliography, however, is most useful and extensive, the index is very good.

The book will be most useful as a comprehensive reference book to specialists working in the applied neurological sciences, especially neurosurgeons and neurologists as well as to paediatricians. Selective reading of the chapters on general considerations would be valuable to a wider audience. It will prove a useful addition to the larger medical libraries and of course to the specialist units.

JOHN W. TURNER

MINIMAL BRAIN DYSFUNCTION IN CHILDREN By Paul H. Wender. (Pp. xvi + 242; £5.00.) John Wiley: Chichester, Sussex. 1971.

Most neurologists are familiar with the hyperactive child whose short attention span and clumsiness make him resistant to education and a burden to his parents. The 'infant King-Kong, who burst the bars of his crib asunder and sallied forth to destroy his parents' home'. Few would argue with the concept of minor cerebral dysfunction to account for this syndrome.

Dr. Wender shows that there is no single feature or consistent group of symptoms which characterizes this disorder. He maintains that it occurs with or possibly as the basis of virtually all nosological categories of childhood behaviour disturbance. The only common factor appears to be the child's paradoxical response to amphetamine.

In a discussion of the roles of those who might contribute to the diagnosis and management he considers the responses, prejudices and expectations of the teachers and parents. He points out that the neurologist may or may not find the so-called soft neurological signs and that in any case this does not influence the diagnosis. These soft or minor neurological signs include extraocular muscle dysfunction, tremor, athetoid movements, dysdiadochokinesia, and Babinski's sign. One must question a method of categorizing cerebral dysfunction which can ignore signs conventionally held to be indicators of gross organic disease.

Dr. Wender explores many facets of cerebral dysfunction and draws valuable conclusions yet his efforts to be comprehensive blur rather than clarify this already ill-defined topic.

I. T. DRAPER