

Book reviews

ROENTGEN DIAGNOSIS OF THE CRANIO-VERTEBRAL REGION By A. Wackenheim. (Pp. 600; illustrated; DM 368.) Springer: Berlin. 1974.

Professor Wackenheim has distilled into one profusely illustrated volume his own and all the other major contributions on the craniovertebral region, which is defined as including everything below the level of the inferior part of the fourth ventricle to the level of the second cervical vertebra.

There are sections dealing with mild asymmetries of the face associated with craniovertebral deformities, techniques of investigation, normal appearances of all the structures in the region with the appropriate lines, angles and indices, and functional examination. The section on pathological findings covers bone and joint anomalies, traumatic changes, neoplasms, and blood vessel and soft tissue abnormalities. The book is virtually an atlas and a reference source, as 410 pages are occupied by approximately 1 670 individual illustrations and nearly 400 diagrams, and there are 1 046 references. The text covers only 140 pages in sections between the pictures.

In the foreword Taveras notes the possible contribution to the study of this region which might be expected from the new technique of computerized tomography, but this, of course, is not included in the book. However, most neuroradiologists would probably agree with the author's contention that pneumotomography is the technique of choice in the diagnosis of mass lesions in the cervico-occipital canal, and that positive contrast ventriculography is justified to show small masses at the foramen of Magendie. The author does not mention the improved resolution obtained with aqueous positive contrast ventriculography now used in some departments. The main criticism concerns the layout of the book, which makes it difficult to find figures referred to in the text. Other less serious criticisms are the not infrequent spelling errors, and the propensity to employ the dieresis in words ending in '-oid' in the index, and one or two curious words which suggest that the translation has not been made by a native English speaker. There are also several printer's errors including an inverted illustration (Figure 295d). One can excuse these lesser mistakes as they are adequately compensated for by the uniform excellence of the illustrations, but in a book at this price one is entitled to expect perfection. It would be a very valuable addition, not only to a neurological sciences library, but also to an orthopaedic surgeon's library.

J. L. STEVEN

ADVANCES IN STEREOTACTIC AND FUNCTIONAL NEUROSURGERY Edited by F. J. Gillingham, E. R. Hitchcock, and J. W. Turner. (Pp. 267; illustrated; DM 128.) Springer: Wien. 1974.

The first meeting of the European Society for Stereotactic and Functional Neurosurgery was held in Edinburgh in July 1972, and this volume presents the papers given at that meeting which have been edited by Gillingham, Hitchcock, and Turner, the Edinburgh neurosurgeons. The opening address was given by Professor Lars Keksell, the honorary president, who gave a historical review of the subject. The papers covered the following subjects: epilepsy and involuntary movement disorders; hind brain and spinal stereotactic procedures; surgery of the pituitary gland and hypothalamus; stereotactic techniques.

This is a book that will be of intense interest to a very specialized group of neurosurgeons, and it presents the most up-to-date information on this subject, up to the time of the meeting. Everyone interested in stereotaxic surgery will find it essential reading, and it will also be of interest to medical neurologists, and neurophysiologists, because of the important contributions derived from subcortical recording techniques and particularly for the section on spinal stereotaxic work.

JOHN HANKINSON

NOTICE

INTERNATIONAL SOCIETY FOR PAEDIATRIC NEUROSURGERY Annual meeting, 5-8 October 1975, Toronto, Canada. Details from Dr E. Bruce Hendrick, 123 Edwards Street, Suite 1225, Toronto M5G 1G2, Canada.

LETTERS

DIAGNOSTIC SIGNIFICANCE OF VESTIBULO-OCULAR RESPONSES

SIR,—Rosenberg, Sharpe, and Hoyt (1975), in the January issue of this journal, have emphasized that the acute loss of vestibulo-ocular reflexes need not be a sign of structural disease of the brain-stem. Unfortunately, the title of their paper, 'Absent vestibulo-ocular reflexes and acute supratentorial lesions', is misleading. The naive reader, or one who does not carefully read the paper through to its final three paragraphs, may be led to believe that vestibulo-ocular reflexes disappear in patients suffering from supratentorial lesions without other complicating