be straightforward, for any stimulus applied to a young animal is liable to disturb a mother–child relationship, which itself may be important in the later results.

Some clinicians know that it is possible voluntarily to affect autonomic functions, including heart rate, piloerection or sweating, but it is only recently that this control has been studied systematically, and has been shown to be capable of improvement with training. Some of this work is described. The book is directed primarily at advanced students and mature investigators, and many clinicians will put themselves in the former category when reading this book. It gives promise of exciting discoveries but most are not yet forthcoming.

J. M. K. SPALDING

ATLAS OF NEUROPATHOLOGY

The principal feature of the second edition of this atlas is the addition of a considerable amount of electron microscopy, and one can say without hesitation that the electron micrographs, the accompanying diagrams where appropriate, and the supporting text are excellent. Many of the sections dealing with morbid anatomy and light microscopy are also very good indeed and the quality of many of the illustrations could not be better. Nevertheless, my overall reaction to the atlas is one of disappointment, particularly since there is an ever present need for a really good comprehensive atlas of neuropathology.

It seems to me that there has been an unfortunate tendency to concentrate on relatively rare conditions with the result that some of what I think to be the more important and common entities are dealt with too superficially. Thus, there is not a section dealing specifically with the distortion and herniation of the brain produced by intracranial mass lesions, and this is clearly of importance to anyone seeking basic information on neuropathology. And the sections on head injuries and hypoxic brain damage seem to me to be rather short and relatively uninformative. On the other hand, degenerative and metabolic disorders are dealt with in considerable detail, these sections being most informative.

A further slightly frustrating feature is that only a small proportion of the photomicrographs are supported by legends. The text is quite adequate for an atlas but I feel certain that most readers would prefer to read legends rather than look for the appropriate line in the text. Thus, this atlas has many commendable features but I cannot give it unqualified approval.

J. HUME ADAMS

THE CERVICAL SPINE. PRIMARY AND POSTTRAUMATIC DISORDERS; ADVANCES IN SURGICAL MANAGEMENT

This small volume consists of the edited and translated papers read at the 1972 congress of the Swiss Orthopaedic Society, on advances in the surgical management of primary and post-traumatic disorders of the cervical spine. Many aspects of cervical spine disorders are briefly mentioned, including morphological and biomedical, but in particular surgical aspects. Some of the latter material will probably not be familiar to many British workers, and it is on this account that the reviewer would recommend this book to those who are unfamiliar with the works of A. Jung, and P. Kehr. Their presentations on anterior uncoforaminectomy, on the indications for the several different cervical spine operations that are now available for various degenerative and traumatic disorders, and the comments they make on a combined cervical rib and scalenus syndrome associated with the vertebral artery syndrome, are well worth reading.

Taillard and Boussina state that in os odontoideum there is relative hypertrophy of the anterior arch of the atlas, and that flexion of the patient’s head will result in correcting the alignment; whereas in fracture of the dens there is no such hypertrophy, and reduction of the dislocation is obtained by neck extension. But this is by no means always so; indeed in a subsequent paper by Schmied and Rasmussen the patient discussed illustrates this.

Although the various disorders are classified as ‘primary,’ or ‘post-traumatic,’ the effects of injury to a patient’s cervical spine where there are already significant degenerative changes present, is a common happening and presents particular problems in diagnosis and management, and also regarding insurance and other compensations. There are other conditions and forms of treatment discussed that would stimulate discussion, and it is likely that, at the actual meeting of which this book is a result, there was considerable and interesting discussion.

Without an index, and with very few references, the book is of limited value.

PHILLIP HARRIS


This new journal is drawn to the attention of those interested in problems of motor control. Its scope—from philosophical examination and aesthetic
evaluation, to bioengineering aspects, and its limitation to human movement or animal studies relevant to the latter, seem to imply that it is aimed at physical educationalists rather than a medical readership. The distinguished editorial board should ensure continuation of the high standard of the first number.

J. A. SIMPSON

This is the fourth volume in a series of 15 French books on surgical techniques for the various body systems. It covers surgery of the central nervous system, cranial and peripheral nerves, the sympathetic nervous system, and the adrenals. Surgery of the spine, skull vault and head injuries is covered in volume 2 of the series. Three-quarters of the book is devoted to surgery of the central nervous system, the remaining quarter to that of the peripheral nerves, the sympathetic nervous system and the adrenals, which is not of concern to British neurosurgeons. The drawings are idealized as in most books on operative surgery. There is a limited bibliography to most chapters (two after brain abscess, one after hydrocephalus and none after cerebellomedullary malformations). The book is well bound, has good quality paper and the type is big, making reading easy for the eyes, but the text could have been reduced without affecting the content of the book.

KHALIL JAWAD


These five titles form part of the new Methuen series Essential Psychology, edited by Peter Herriot, and comprising thirty-six short books—each one less than 200 pages—and arranged in six units: A, Experimental Psychology; B, Social Psychology; C, Developmental Psychology; D, Personality; E, Psychology and Work; F, Psychology, Society and Change. The books under review here are: in order, A1, A7, B1, C2, and F2. The series is aimed at 'all students of psychology, or of the many subjects demanding a knowledge of some psychology', and the level appears to be that of first or second year university specialist courses in psychology.

Assuming that the five books are a representative sample of the whole series, then students seeking an introduction to the subject matter and concerns of psychology are very well served indeed, with the books giving a competent, interesting, and often pleasingly idiosyncratic view of a given area. Although the authors cannot go into their subject in any depth, this limitation is overcome by means of selection of topics to be covered in some detail, so that students may get a feel for how psychological research has developed.

Particular plus points include: Rosemary Shakespeare's thorough and compassionate review of handicap, and Kevin Wheldall's refreshing treatment of social psychology in terms of learning theory. Particular minus points include: limitations of space which lead Rosemary Shakespeare to omit the topic of handicapped adults, and the trendy cover illustrations—particularly for the book Thinking and Language. Overall summary: a good introductory series which will be a 'must' for new psychology students for some years, and which has set a new standard for introductory texts.

D. NEIL BROOKS

NOTICES


CZECHOSLOVAK SOCIETY FOR NEUROLOGY: VIIIth NEUROLOGICAL CONGRESS, Bratislava, 19–23 October 1976, with international participation. Details from Professor D. Bartko, Congress Office, Slovak Medical Society, Mickiewiczoza 18, 833 22 Bratislava, Czechoslovakia.

CORRECTION


The following corrections should be made: On p. 351 (Procedure): the low study dose of dantrolene was 50 mg (not 25 mg) four times daily, that of diazepam, 3 mg (not 2 mg) four times daily. In Table 5, hip flexor strength at Hi DZ vs Control was significantly decreased at 0.02 (not NS), and station stability at Hi DZ vs Control was decreased (not increased). On p. 353: improvement of muscle cramps or spasms by diazepam was reported by 50% (not 76%) of patients.