The authors must have worked very hard to prepare this atlas which includes a series of colour photographs taken from a videotape during a variety of seizures together with the EEG possibly recorded simultaneously. At times, in addition to the EEG, an electrooculogram records the movements of the eyeballs during an attack. When necessary a surface electromyogram and an electrocardiogram are recorded as well.

The authors not only mention that they are "great friends of Professor Henri Gastaut" from Marseilles but follow his ideas very closely and are very keen on his classification of seizures. The illustrations of the EEG events are well selected even if the cutaneous colour of the inking gives a less satisfactory contrast than black and white. Following the *Epilepsy Dictionary*, the presentation is didactic for each group of seizures describing (1) the clinical aspects of the attack (with motor, sensory, somatosensory, "vegetative" symptoms and mixed forms, (2) the EEG features during the attacks, (3) the EEG features between attacks, (4) the anatomical evidence, (5) the aetiology, and (6) the age of the patient.

Such a scheme is clear at first but, later on, the clinical and EEG aspects become predominant, and the rest is no longer mentioned. This is understandable as the anatomical evidence is usually lacking and the aetiology is generally unknown.

Here and there, odd drawings are included to convince the reader of the mechanisms which are supposed to underly the sequence of events during an attack or some of the patient's subjective impressions. What fun to illustrate with red stars and blue arrows some aspects described by the patients during "elementary visual attacks" and the colours are very striking and beautifully printed. Pity that on page 88 the sketch of salami and smoked ham is only in black and white!

Some of the drawings, such as the impression of micropsia, macropsia, or diplopia, are useful. A variety of sketches (some in colour) depict the visual hallucinations during an epileptic seizure or the musical aspects of auditory hallucination. The authors left out the drawings on "vegetative hallucinations" probably because they call their patient's attack "orgasmolysis."

The EEG features are presented throughout with an amplification appropriate to the size of the signals and a paper-speed of 15 mm per second. It is surprising that no artefacts appear during a variety of seizures while the EEGs are recorded through pad electrodes or "tripodes." I was unable to find any specification of the time constant employed or the high frequency cut. Towards the end of the text (page 307) there is the description of "anarchic epileptic attacks" which are said to constitute a variety of "unilateral attacks" but which occur during the first month of life. The concept of anarchy is obviously different in Spain from other countries and the reasons why these attacks are classified as anarchic is that the rhythmic discharges "vary in distribution from one region to another."

Only one page (313) is devoted to "unclassified epileptic attacks" (12% out of their 3000 patients with epilepsy in Barcelona). On this aspect the authors differ from Gastaut's figures of 23.5% of unclassified seizures. The desire for classifying seizures is widespread on both sides of the Atlantic and few people seem to be aware of the futility of such an exercise. The bibliography is very selective (three pages) and two pages are devoted to the many papers of Dr L. Oller-Daurella. A brief index is helpful to identify examples of each "class" of seizures. The publishers should be congratulated on the presentation of this substantial atlas which weighs kg 1.760.

G. Pampiglione


Although this book is written by two American psychologists for American readers most of what it has to say is applicable internationally. It is designed to help people with epilepsy to cope effectively with their problems and, generally speaking, it succeeds in this aim.

Unfortunately, the first chapters dealing with the medical aspects of epilepsy leave something to be desired. For example, there is a lack of clear distinction between epilepsy and epileptic seizures and between auras and pre-ictal phases. Furthermore, undue weight is given to the EEG as a diagnostic instrument, and the description of temporal lobe epilepsy is somewhat misleading.

The main portion of this book comprises six chapters dealing with such topics as doctor–patient relationships, the taking of medication, family and social relationships, employment, self-help, and future expectations. These matters are covered very adequately and contain much useful advice. The rules about taking medication are sound and clearly expressed with the aid of brief illustrative case histories. The authors very rightly stress the importance of what people with epilepsy think of themselves, as opposed to what other people think about epilepsy, when the problems of social adjustment have to be faced. The advice given to families is excellent, and the authors do well in emphasising the importance of adequate preparation before meeting a prospective employer. In matters of self-help common sense rules are recommended although the case histories quoted concern rather exceptional individuals. The long-term implications of epilepsy are discussed very briefly, and a guide to relevant American organisations is given in the penultimate chapter. The final chapter embodies a list of recommended additional reading material. Those books which are written specially for lay readers will be helpful but the recommended scientific books will probably make rather heavy reading for most, and the list of books of drugs seems a little out of date.

**Maurice Parsonage**


It has been said that although the behaviourists have successfully stolen the psychoanalysts' clothes they are no more able to wear them. The major exception to this statement lies in the treatment of obsessive-compulsive neurosis where the formerly gloomy prognosis has been significantly improved by behavioural means. This development stems from Meyer's suggestion in 1966 that if an obsessional patient could be prevented from carrying out his avoidance rituals his anxiety would eventually diminish and he would...