Book reviews

Neurological Surgery with Emphasis on Noninvasive Methods of Diagnosis and Treatment Edited by Raul Carrea. (Pp. 420; illustrated; \$85.00.) Excerpta Medica: Amsterdam. 1978.

This volume includes contributions presented at the Sixth International Congress of Neurological Surgery at San Paulo, Brasil, in 1977. Particular emphasis was placed on noninvasive methods in diagnosis and treatment. There are six sections, devoted to computerised tomography, nonoperative treatment of glioma, vascular lesions including cerebral and spinal arteriovenous malformations as well as cerebral revascularisation, spinal cord procedures for pain, psychiatric surgery, and cervical spine trauma.

The quality of original papers is generally high. Critical reviews by invited speakers provide a broader perspective in which to set the specialised contributions. Taken together they represent an up-to-date survey of current practice and of recent advances in selected areas of neurological surgery, which will be of use to postgraduates in many branches of neurology in addition to neurosurgery. The book is well produced, and the editors have achieved a high standard of accuracy and clarity in the published papers. However, the volume is expensive for what is neither a report of a specialist symposium on a single topic nor a comprehensive reference work.

DAVID G. T. THOMAS

Advances in Neurosurgery Volumes 5 and 6 Edited by R. A. Frowein, O. Wilcke, A. Karimi-Nejad, M. Brock, and M. Klinger. R. Wullenweber, H. Wenker, M. Brock, and M. Klinger. (Pp. 396; illustrated; price not stated.) Springer-Verlag: Berlin. 1978.

These books are based on papers presented at two meetings of the German Society of Neurosurgery. They rise above the usual level of such proceedings because each meeting focused upon two main topics. Thus, the first part of volume 5 (28th Meeting of the Society) is devoted to head injuries, and the

papers reflect current interest in epidemiology, prognosis, the recognition and management of complications, and the role of CAT scanning. Electrophysiological and biochemical methods of assessing patients are described but the papers do not present convincing evidence that these techniques add to conventional clinical and radiological tests. In the review copy the second part of volume 5 is marred by a printing error—pages 171–202 are duplicated and pages 203–235 are missing. The remaining papers deal with aspects of the investigation and management of patients with tumours in the posterior fossa. The plain CAT scan is reported to demonstrate 90% of these tumours. When intravenous contrast medium is given the positive rate increases to 96.6% and the combination of the CAT scan and clinical features are usually sufficient in children but angiography and ventriculography are still necessary in certain adults. Preoperative drainage or shunting appear not to solve entirely such problems as raised intracranial pressure and disordered CSF circulation but the papers on medulloblastoma do show that advances in operative and postoperative management have resulted in improved survival at this stage of management. By contrast, several authors are uncertain about the value of recent trends in radiotherapy and chemotherapy and express concern about their after-effects: one paper concludes “chemotherapy has its price.”

The 29th Meeting (volume 6) was held in conjunction with the British and Dutch Societies, and its themes were hydrocephalus and computer tomography. The papers on hydrocephalus are mainly concerned with the results of treatment by shunting and compare the complications of different procedures. There are reports from an impressive collaborative study carried out between no less than nine German centres and containing data on 1612 patients. Its results reinforce the view that ventriculoatrial shunting may be subject to less frequent, but more serious, complications than ventriculoperitoneal diversions. Another collaborative study shows that ventriculocisternal shunting

is sometimes followed by continuing raised intracranial pressure so that a high proportion fail in the early post-operative period. This operation should be reserved for patients in whom pre-operative tests have demonstrated that CSF absorption from the subarachnoid space is normal. This is not the case in many patients with the “internal” hydrocephalus associated with aqueduct stenosis. In the papers on CAT scanning the emphasis is upon its limitations as an indicator of specific pathology, in contrast to its undoubted reliability in demonstrating merely that some kind of abnormality is present.

The two meetings also contained free communications covering the whole spectrum of neurosurgery, and the picture the two volumes paint of contemporary German neurosurgery is an impressive level of activity, organisation, and collaboration. Inevitably, the view of the various topics is fragmentary, but many papers report valuable information not otherwise available in the English language literature, and every neurosurgeon will find something to interest him, to inform him, and perhaps to stimulate him to compare his own practice with that of the German neurosurgical community.

GRAHAM TEASDALE

Operative Surgery. Fundamental International Techniques — Neurosurgery Edited by Charles Rob and Rodney Smith. (Pp. 506; illustrated; £45.00.) Butterworths: London. 1979.

To describe an operation so that the reader experiences each movement as if through the eyes and mind of the writer, is a rare gift. Many accounts are little more than a superficial list of the steps in a procedure and convey as little about what is done, and how, as a theatre programme does about the events to unfold upon the stage. Previous editions of this well-known but expensive series have attempted to overcome this problem by adopting an almost pictorial approach but, although an artist's picture may be realistic and accurate, it may also fail to bring out