Book reviews

phenomenology, and gives refreshingly little space on issues such as the distinction between neurotic and psychotic depression, which tend to take up all too much room in British text books. The chapter on ECT would have benefited greatly by some acquaintance with the British literature. It is surprising that an author who believes that an "occasional patient suffers marked or mild brain injury from ECT" should conclude that the main indication for the treatment is "dire emergencies, for example, when there is great risk of suicide". At moments like these, one could have wished for a sounder grasp of the phenomenology of mental illness. The section on delusions is poor, there is inadequate mention of depersonalisation syndromes, and no mention of morbid jealousy or Cotard syndrome. There is a useful collection of appendices, although the author could have made a better choice of rating scales of mania, anxiety and depression.

In summary, this book has unusual virtues. The sections on psychotherapy gives examples of dialogue between doctor and patient. Both the psychiatric trainees, and the psychiatric patients are very fortunate to have Dr Strayhorn around.

DAB GOLDBERG

An Anatomical Aid for the Evaluation of Computed Tomography Scans. By GJR Maat, GJ Vielvoye and J Tinkelenberg. (Pp 127; \$87.50.) The Netherlands: Mefar BV, 1981.

The atlas consists of a series of photographs of slices through the head and neck in the orbito-meatal plane comparing CT with anatomical specimens. The brain slices are beautifully reproduced and liberally annotated, but as the authors admit the CT scans are of rather inferior quality and fail to demonstrate many of the anatomical features so beautifully reproduced on the post mortem sections. The CT Scans have not been annotated other than in a very limited manner although many of the features on the corresponding slices can be seen even on these rather inferior quality scans. As a reference manual for the anatomy of post mortem sections, there is much in this book to recommend it, but I cannot believe that it is worth having as a comparison between CT and post mortem studies.

DPE KINGSLEY

Mechanisms of Cutaneous Sensation. By David Sinclair. (Pp 363; £20.) Oxford: Oxford University Press, 1981.

Professor Sinclair's book on Cutaneous Sensation published in 1967 became an essential reference for the student of this topic. Physiologists and clinicians alike turned to Sinclair, with his capacity for clear thinking, critical appraisal and succinct prose for an authoritative account of the field at that time. Much has happened since then. Professor Sinclair has moved from Aberdeen to become director of postgraduate medical education in Western Australia, and encephalins and other new neurotransmitters have burst upon the scene, to say nothing of gate controls. In 1978 Professor Sinclair agreed to re-write his book, and this is the fruit of his labours. We must be grateful. As before this essay is marked by clarity of thought and writing. The author's own contributions are reflected in a concentration on the peripheral mechanisms of cutaneous sensation. For example, in a chapter on the "sensory apparatus", the anatomy of the various peripheral receptors occupies 45 pages, while that of the dorsal roots and central nervous sensory mechanisms is contained within 18. The description of the neuronal machinery of the posterior horn is dealt with in a single page which some may view as poor recognition of the "first gate". A similar balance is evident in the subsequent chapter on electrophysiology but the author justifies his approach by pointing out that much less is known about the central mechanisms responsible for the appreciation of sensation. There follow excellent chapters on the characteristics of normal and abnormal sensations, the latter including a section devoted to the mechanisms and management of various pain states. The book is introduced by a fascinating chapter on the history of thought on cutaneous sensation, which should be compulsory reading for all students of neurology, and a chapter on methods of investigation; it concludes with the author's views on "present theory and future investigation". Each chapter is provided with a brief list of relevant books, symposia and review articles, and at the end of the book there are 64 pages of original references, and an adequate index. Every neuroscience library should have a copy.

CD MARSDEN

Hearing: An Introduction to Psychological and Physiological Acoustics. By Stanley A Gelfand. (Pp 354; £16.00.) London: Butterworths, 1981.

From 1955 to 1975 there was no good intermediate level text on hearing. The position has since improved, but not sufficiently to stifle a welcome for this book. The expressed aim of avoiding a too elementary or too advanced treatment has been achieved. The topics range from auditory system anatomy through to discussion of some of the more segmental, spectrally-based phenomena in speech perception; there is considerably more coverage, and especially more up-to-date coverage, at the former end of the range where recent discoveries have been more spectacular. In the middle, the balance between auditory physiology and psychoacoustics is about even and right for commencing a fruitful connection between the two, although that connection is beyond the scope of the book itself. The author has made judicious decisions about what not to include, referring frequently and usefully to further reviews elsewhere of more specialised topics. There is space for discussion of pathology only in so far as it throws light upon bases of function, and no primarily clinical phenomena are included. But anyone commencing professional training in audiology or otology, anyone wishing to get an idea of what hearing is all about, or anyone commencing a search on a particular topic within the field of hearing would do well to start here. It is particularly valuable that Gelfand introduces short parenthetical sections and chapters on the major classes of research method and writes in a non-jargonistic non-detracting way. A typical nice touch is a figure with juxtaposed panels of the same data plotted as a researcher's upwards absolute audiogram and as a clinician's downward normalised audiogram. In this context it is surprising to find a confusing pedagogical error in the chapter on statistical theory of detection: the author uses for an abscissa value the symbol β traditionally reserved for the ratio of the ordinates of two distributions at that point. However, this is a minor blemish on a valuable teaching aid.

MP HAGGARD

Treatment of Migraine. Edited by Roy J Mathew. (Pp 171; £16.25.) Lancaster: MTP Press Ltd, 1982.

This book comprises the published versions of papers read at a symposium held in November 1979 in Houston, Texas. Of the fourteen contributors, seven are from this city. The emphasis is on biofeedback techniques and relaxation in the treatment of migraine and six of the ten chapters relate to