Book reviews

The style of the book is simple and easy to follow. There are very few flaws and mistakes. One, however, keeps recurring throughout the text: aborto placenta (sic).

This volume is a welcome addition to our rather small number of neonatal pathology texts.

M ERDOHÁZI


Neurologists must have been following the explosion of information about peptides in gut and brain with some amazement. Clinical practice has not led us to suppose that there would be such a dramatic interrelation between these two organs. However, since about 1974, it has been revealed that many of the peptides present in the gastro-intestinal tract are also present in restricted areas of the brain. To have to consider that hormones such as cholecystokinin, vaso-active intestinal polypeptide, and bombesin must be involved in the workings of the nervous system may appear a difficult concept to grasp. Likewise, the discovery that certain neurotransmitters, such as substance P, the enkephalins, and neurotensin are widely distributed in the gut as well as the brain also has seemed surprising. The very number of these gut-brain peptides is amazing; at a recent count, twenty-one such substances have been identified, and there may be many more. Many of these regulatory peptides can be found in the gut and the nervous system of lower animal forms, even in such coelenterates as Hydra. It seems likely that peptides came into use as neuronal chemical messengers very early in evolution. Another remarkable aspect of regulatory peptides is the discovery that they co-exist in both central and peripheral neurons with classical transmitters such as acetylcholine, noradrenaline, dopamine and serotonin. Why two chemical messengers should work better than one remains a mystery. Indeed, the function of most of these peptides in the brain is unknown. This issue of the British Medical Bulletin presents a fascinating review of the whole topic of gut-brain peptides. Development of a series of reliable and well-defined radioimmunoassays for a variety of peptides, and their exploitation for immunocytochemical localisation of such peptides in brain and gut, stemmed from the structural characterisation and synthesis of many of these molecules. The availability of such powerful tools has led to a remarkable explosion of experimental work in the field. For anyone interested in the area, this volume will provide an excellent introduction to the literature. To those already involved, it represents an authoritative review of progress.

CD MARSDEN


A central theme underlies this collection of essays—the benefit to be derived from integrating the fields of academic cognitive psychology and clinical neuropsychology. In the Introduction, Dr Ellis calls for a two-way flow of information between specialists in normal and in pathological conditions. He suggests, the findings of cognitive psychology can illuminate neuropsychological analyses and the analysis of neuropsychological syndromes can assist in the postulation of theories of normal functioning. The book contains ten contributions covering various fields of inquiry: the theoretical issues involved in the construction of models of mind in health and disease; the analysis of language production, reading and spelling; studies of object and face recognition, memory, spatial orientation and motor action. There is also a final chapter on neuropsychological aspects of the arts. Most of the contributions are based on a detailed analysis of rare clinical case studies. The book does provide a new perspective for both the academic psychologist and the neuropsychologist, but it has limited relevance for the practice of clinical neuropsychology. Furthermore, a question of validity can be attached to theoretical models of normal cognitive functioning which are derived from analyses of single case studies.

MARIA A WYKE


Rehabilitation in medicine has traditionally come a poor third after diagnosis and treatment, and because of its low status in the eyes of doctors there has in the past been a lack of scientific method and objective evaluation applied to its problems, methods and results. This has applied perhaps more in neurology than in other specialties where rehabilitation is a major problem (such as rheumatology and spinal injury) and is not to the credit of neurologists.

Here is a readable and up-to-date account, largely from Southampton and Bristol, of basic recent advances and prospects in neurological rehabilitation. In the first section, the pathology and pathophysiology of disease, plasticity and recovery in the peripheral and central nervous system are reviewed, and there is a most stimulating chapter on the role and potential of clinical neurophysiology in rehabilitation. Problems of rehabilitation in various neurological conditions occupies the central three-fifths of the book. All these contributions are well thought out and useful and some (such as those on peripheral nerve, neuropathic bladder and chronic pain) are excellent. The last section, on future possibilities in neurological rehabilitation, contains, fascinatingly juxtaposed, a brilliant engineer’s account of the Southampton powered hand, a complete system still in development, against a sad “post mortem” on tactile sensory substitution, another complex system, which blind patients could learn and was useful, but which was never quite worth their while, at least as an aid to mobility. Overall, this should be read with pleasure by all doctors, and others whose work involves them in neurological rehabilitation.

DN RUSHTON


This publication of the Nordic Gerontopsychiatric Symposium held in Denmark in April 1981 is a timely reminder that, for patients and their families, the prevailing threat to the comfort of old age is the tragedy of dementia. Although many clinicians can recount anecdotal experiences of rare, reversible causes of the condition, the disconcerting truth is that (for the majority of the 700 000 affected in the United Kingdom) the disorder has no recognisable epidemiological patterns—beyond its association with increasing age. Moreover, in the United Kingdom, less than 2% of the retired population are in-patients but they occupy 60% of hospital beds—yet, with the inevitable increase of our aged population during the next decade, the growing demands of confused, dysmnesic patients could easily swamp the acute hospital services. Indeed, only one new confused patient requiring hospital care every half-hour would be enough to do just this.

Laboratory medicine may provide the