Book reviews

epidemiology of depressive disorders is also to be studied and in some centres, the work will be linked with a more detailed study of a particular aspect of depressive illness for example, biological changes.

An important aspect of the book is that full details of the screening schedule and of SADD are given. It would be of great interest to know how these methods of assessing depressive symptomatology compare with the "present state examination"¹ and the "general health questionnaire"² respectively, both of which have been used in many countries and languages.

RHS MINDHAM

References

- ¹ Wing JK, Birley JLT, Cooper JE, Graham P, Isaacs AD. Reliability of a procedure for measuring and classifying "Present Psychiatric State". *Br J Psychiatry* 1967;113:499-515.
- ² Goldberg D. Detecting Psychiatric Illness by Questionnaire. *Maudsley Monograph* 22, Oxford, Oxford University Press, 1972.

Essentials of Neurology (5th edition). By Sir John Walton. (Pp 488; £10.95 (paperback).) London, Pitman Books Ltd, 1982.

Receipt of the latest edition of this excellent work precipitated a moment of nostalgia: a battered second edition, which still lingers on my shelves, had steered me through the membership examination.

Long experiences of teaching, clarity of thought and terse prose make it possible for the author to encompass all the basic ingredients of clinical neurology in an easily readable form. Although the text has been thoroughly revised to omit outdated material and to include the advances neurology has seen during the past five years, the basic format remains unchanged. Introductory chapters deal with symptoms, signs and investigations, the second section adopts a pathophysiological approach (consciousness, the mind, speech, special senses, motor, sensory and autonomic systems) and there follows an account of individual diseases set out in traditional fashion (hereditary, degenerative etc.). The treatment available for all forms of neurological disease is dealt with separately in a final chapter. Newcomers might prefer to learn about therapy as they are introduced to individual diseases but the "outline" of treatment given here avoids the repetition

inherent in this approach.

Although every page is crammed with facts the text is easy to follow and stimulates interest: ideal for those postgraduates engaged in their higher examinations and for the more enthusiastic medical student.

Criticisms? On page 68 the publishers have a CT scan, (an invention of Godfrey rather than Geoffrey Hounsfield), upside down: the haematoma becomes left parietal rather than right frontal!

JEFFREY GAWLER

Symptomatic Affective Disorders. By FA Whitlock. (Pp 218; \$24.00.) New York: Academic Press, 1983.

Both depressive and manic disorders can be precipitated by physical illness or by drug treatment. This, now anodyne, fact has not been followed up by researchers as energetically as many of the other pathways of biological psychiatry. Professor Whitlock tries to put the record straight and reminds us of the implications of this interaction between medicine, pharmacology and psychiatry by reviewing the world literature on the topic. He does this well and highlights our deficiencies in knowledge as well as the more positive impact of findings such as the precipitation of depressive illness by treatment of hypertension with reserpine. Thus, for example, although most clinicians are aware that infectious disease very commonly precipitates psychiatric disturbance there is hardly an investigation worthy of the name that examines this issue.

The major methodological problem encountered in these enquiries is the impossibility of deciding whether a temporal association between physical and psychiatric illness is a chance finding, a casual link or a non-specific triggering effect. Despite this, Whitlock is able to conclude that affective illness occurring in the setting of organic brain damage is usually a direct consequence of the brain disease, and that drug-induced depression and mania mainly occurs in subjects with a constitutional predisposition to affective disorders. He ends the book by making a plea for improved observation and precision in recording affective symptoms in physical illness, the need for which is reinforced by the uncritical and often shoddy conclusions made by workers in this field. There is an extensive list of references but few from authors whose native tongue is not English. The book can be strongly recommended as

a mandatory source for those who wish to know more about the relationship between physical and psychiatric illness.

PETER TYRER

Neuroleptics: Neurochemical, Behavioural and Clinical Perspectives. (Central Nervous System Pharmacology). Edited by Joseph T Coyle and SJ Enna. (Pp 341; \$68.20.) New York: Raven Press, 1983.

Neuroleptics have been important drugs in psychiatry and neurology for 30 years. Much has been learnt about their neurochemical, behavioural and clinical aspects. Quite simply, this book is the best up-to-date overview of our knowledge of these drugs. The book is multi-authored but has been meticulously edited as, unusual in multi-authored books, the chapters are uniformly informative, well written and clear. Each chapter briefly reviews the topic historically, details the current state of the art and then gives pointers to the future. The range of the book is commendably wide, dealing with the clinical use in psychotic and neurological disorders, the side-effects, in particular, tardive dyskinesia, behavioural and biochemical effects and with the complicated issue of receptor interactions. The final chapter critically discusses the dopamine hypothesis of schizophrenia, charting a well-sounded course between the Scylla of heralding an immediate breakthrough and the Charybdis of discounting the possibility of any imminent progress in this area. The book can be thoroughly recommended as the best text on neuroleptics extant.

MH LADER

Essential Neurology (2nd) (A Concise Textbook). By William Pryse-Phillips and TJ Murray. (Pp 714; \$32.50, paperback.) New York: Medical Examination Publishing Co Inc, 1982.

Travelling from Hamilton, Ontario to St John's, Newfoundland was a particularly appropriate time to review this general neurology textbook. Appropriate because the journey takes several days (unless one makes the mistake of going by air rather than by the far more interesting alternative of train, extraordinarily cheap ferries, and bus) and this book is quite a long read, and appropriate because one passes through the backyard of one author before arriving

at the rugged but welcoming front door of the other.

"Essential Neurology" is written for medical students and general practitioners and sets out to make neurology interesting, comprehensible, and relevant to medicine in general. There is lots of pragmatic common sense and the enthusiasm of both authors for teaching a subject they really enjoy is delightful. There are even jokes such as what to do if you take Gowers' advice and test for hysterical paralysis of the legs in a surprising way, as well as amusing and very sensible advice, such as including a telephone amongst the tools of the neurological examination to be used to facilitate history-taking from distant friends and relatives (no doubt doubly important in such a large sparsely populated place as Newfoundland). There is a good explanation of how to get the most out of neurological investigations and it is helpful to have sections on the examination of children, the elderly, and for functional disorders as well as on hiccoughs and cramp which often get left out of books like this.

My main criticism is that the book is far too long for an undergraduate text and irony is that it could have been half the length if huge areas of repetition had been eliminated. Presumably this policy is deliberate because it is such an obvious feature and even one or two tables and diagrams are shown in two different places. Unfortunately, even if one can cope with the repetition, there are—for a second edition—some surprising mistakes (such as referring to a non-existent appendix, varying the spelling of Lhermitte, and forgetting about the occipital lobes in the location of disease chapter) and statements that are either wrong or misleading. For example, the CSF does not normally contain up to 10 mononuclear cells per cubic ml, the renal arteries are not frequently spared in polyarteritis nodosa, intracerebral haemorrhage is not one of the most common causes of sudden death, motor neuron disease is not a cause of dementia and I doubt if impaired thermoregulation causing a high fever is a frequent feature of cerebello-pontine angle masses. Measuring the blood pressure in both arms of practically everybody, recommending a routine WR on all hospital admission, and subjecting patients with motor neurone disease to a barium enema in the search for occult malignancy (surely not as high as in 10% of cases?) are attitudes which would not find much support on this side of the Atlantic. Finally, the quality of the illustrations, par-

ticularly the radiographs, leaves a lot to be desired although I rather like the drawings to illustrate delirium and dementia, no doubt inspired by what the rest of Canada regard as typical "Newfie" man.

I shall certainly tell our medical students that this book exists and they must then choose what suits them best. It is competitively priced but it is competing in a crowded market where there are more easily assimilated, readable and accurate texts to be found.

CHARLES WARLOW

Clinical and Radiological Aspects of Myopathies. CT Scanning—EMG—Radioisotopes. By JAL Bulcke and AL Baert. (Pp 187; \$51.20.) Heidelberg: Springer-Verlag, 1982.

The essential purpose of this book appears to be a consideration of the use of computerised tomographic (CT) scanning in neuromuscular diseases. Following a short introduction about CT and the "muscular system" there is a rather individual chapter on classification/presentation of myopathy. There are then brief sections on soft tissue radiography (including soft tissue calcification), xeroradiography and radioisotope studies. The main section of the book describes and illustrates CT of muscle. The authors have selected a series of standard levels, from neck to calf, to illustrate "CT anatomy" and subsequently abnormal anatomy with reference to myopathy and some neurogenic lesions. Finally an attempt is made to correlate CT appearances and density measurements with pathology, strength and EMG findings.

The CT reproductions are of good to excellent quality and perusing them lends a new perspective to several aspects of myology. Several large masses of muscles at sites usually documented rather scantily by clinical examination (paraspinal, psoas and pelvic muscles and those of the posterior aspect of the neck) are well shown in particular. The remarkable selectivity of muscle involvement in certain conditions is documented in a way which is not possible on clinical examination and the discussion about pseudo and true hypertrophy is illuminating. As yet correlation of density measurements and EMG with CT appearances seem unrewarding and it is disappointing not to find a rigorous approach taken to correlating cross sectional area and force production, (the MRC scale is really wholly inadequate for this type of analysis).

I found the book thought provoking and stimulating although its clinical content is decidedly patchy and the subheadings "EMG" and "Radioisotopes" on the front cover are probably inappropriate: it will be of particular interest to those with an analytical interest in peripheral neuromuscular disease rather than as a simple aid to diagnosis.

CM WILES

The Urinary Bladder: Neurology and Dynamics. By Tage Hald and William E Bradley. (Pp 339; £37.25.) London: Williams & Wilkins, 1982.

Written jointly by a urologist and a neurologist (or, as they are described in the Foreword, a "Uroneurologist and a Neurourologist") this book is successful in combining and focusing the expertise of its twin disciplines in one cover.

The basic neurology and urology of the bladder are considered fairly fully, and a heavy emphasis is then placed on functional studies such as cystometry, urethral closure pressure profile and sphincter electromyography in the diagnosis of problems of continence and voiding. In a field like this, technical terms and their abbreviations inevitably abound, but the text moves forward at a good pace, and is not unduly hard to read. The technical practicalities of urodynamics are well explained. The book has a functional emphasis, even in the section on paediatric problems, which is mainly concerned with congenital malformations and their repair. Most operations mentioned are described very briefly, except for the various artificial sphincters, which receive 11 pages. There is a useful short chapter on drugs and the bladder and urethra.

Appendices reprint the first four reports by the International Continence Society on the standardisation of the terminology of lower, urinary tract function. There are plenty of good diagrams, figures, radiographs, photographs, and a few cartoons. Colour plates are collected on five pages at the end of the book, with monochrome versions in the text. There is a good index to text and figures. Proof reading is not particularly good but most of the errors are minor printing errors.

D N RUSHTON