

Book reviews

tology in diagnosis; and the medical, orthopaedic, and psychosocial management of spinal muscular atrophies. These last chapters, concerned with an often neglected area, are useful. Pearn and Hausmanowa-Petrusewicz, in two good contributions on genetics and clinical aspects, still disagree about classification. This controversial issue could have been discussed further with benefit.

It should be stressed that the subject matter of this volume is really confined to the spinal muscular atrophies of childhood, and it can therefore be recommended more to paediatricians than adult neurologists.

AE HARDING

Informative Value of the Clinical EEG in Organic Psychiatry. By B van Sweden. (Pp 259; £8.00.) Belgium: Ghent University Medical Centre EEG-Lab: Dept of Psychiatry, 185 De Pintelaan, 9000 Ghent (Privately published).

The author is right when she mentions in the brief introduction to the book that accounts of the value of the clinical EEG in psychiatry are rare; hence the interest that new arrivals generally arouse. The goals proposed in the early pages appear very promising and it is disappointing that the text does not meet the expectations.

The book consists of five chapters dealing with various topics on the use of the EEG in psychiatry: two in relation to hypno-sedative and psychotropic drugs, one to the investigation of sleep and the other two to the EEG aspects in symptomatic psychoses, with special reference to alcoholism and psychiatric syndromes in epilepsy. The chapter on psychotropic drugs and that containing topics on the EEG in alcoholism provide interesting comments and discussions relative to the literature and to the author's own material of patients and EEGs. In my view, the other chapters add no new relevant issues to the available literature on the topics. Each chapter is followed by a fairly comprehensive list of references and the author makes good use of these in the text.

The display of contents is short of a coherent rationale that give unity to the book; one has the impression that this is a rather premature effort to put a series of articles together into a book, without attaining success. The same problem affects each chapter within itself; in some instances for example, the reason for differentiating paragraphs under headings and sub-

headings is not clear at all and often leads to repetition of assertions or discussions, which are superfluous and tiring.

Some of the comments on particular EEG patterns are debatable and need to be treated more thoroughly (for example burst-suppression). Several terms used to describe EEG patterns have long been discouraged by the International Federation of Societies for EEG and Clinical Neurophysiology (1974) because they may imply underlying neurophysiological mechanisms (that is, irritative, dysrhythmic, desynchronised) and can be misleading when used descriptively.

As regards technical aspects of the EEG, there is a general scarcity of information throughout the book with a lack of recording specifications and clinical parameters at the time of the EEG procedure. The selection of montages in the illustrations is not always acceptable, for example, using common reference arrangements to demonstrate "hypersynchrony" and then comparing these with samples in bipolar montages to demonstrate that the effect has receded.

Although formal aspects are not directly my concern, there are inadequacies in this respect that badly affect the contents and may be accountable for some of the criticisms; therefore to ignore them completely would be unfair to the author. The translation into English is deficient and leads to frequent oddities of the language, often obscuring the meaning of contents. Editorial mistakes are profuse, going from spelling errors to references to illustrations or case reports that are incorrect. The quality of the EEG illustrations is extremely poor, some are almost completely rubbed out and are therefore useless and making the corresponding comments on the text meaningless.

It is far from my intention to discourage the author; her line of thought and the material of patients and EEGs that she has collected have potential and deserve better treatment than the one provided in the current publication, but, unfortunately, in its present form the book cannot be recommended.

Dr R OBRECHT

Paediatric Development Therapy. Edited by Sophie Levitt. Foreword by Paul H Pearson. (Pp 265; £12.80.) Oxford: Blackwell Scientific Publications, 1984.

Sophie Levitt has gathered 12 other therapists—seven physiotherapists, three occupational therapists and two speech

therapists—to present their views on the treatment of children. The layout is similar to her previous book from the same publisher, "*Treatment of Cerebral Palsy and Motor Delay*", which has been so well received and is now in its 2nd edition. The authors appear to have been given the freedom to tackle their subjects as they thought best, which has obvious advantages. It also has the disadvantage that the book has less shape than it might and not every chapter is suitable for the wide target readership, ("nurses, teachers, child care staff, parents and social workers" as well as therapists). One chapter in particular, *Aids to Daily Living* (a good chapter), is orientated to a British readership and much of its specific information would be of little use to others.

The editor's chapters cover Child Development and the Therapist, Motor Development, the Cerebral Palsies, Spina Bifida and Severe Visual Handicap. Not surprisingly the chapter on cerebral palsy is the least successful: being such a complex and variable disorder, one short chapter addressed to such a wide readership is probably asking too much. Hilary Baddeley writes briefly, precisely and helpfully on what is known of Motor Learning; Jean Cooper's and Clare Latham's chapters complement each other well, one discussing speech and language development and the other communicating with children, which describes amongst other things the various systems used for communicating. Susan Rushfirth's chapter on physiotherapy for severely mentally handicapped children is a model of clear sighted and thought-provoking writing and Alison Wisbeach's chapter on children with brittle bones and Sylvia Hyde's on muscle disorders in childhood are excellent.

There is a delightfully perceptive chapter by Dorothy Seglow on an early intervention group for mothers and infants and what might be described as a companion chapter by Ester Cotton on the integration of disciplines. It makes a fitting end to the book, although I found the diagrams detracted from her clear text. There is an informative chapter on the role of a physiotherapist in a neonatal unit by Finuala Murphy.

A generous 1/7 of the book is on perceptual motor disorders, a grey area for therapy, where techniques of assessment proliferate and their relationship treatment becomes evermore tenuous. It is an important subject, but one which needs firm editing in a book planned for so diverse a readership.

The problem facing the reviewer is that "developmental therapy" is not a finite subject—a comprehensive book would cover all paediatric therapy—and in attempting to make it only part of the treatment of children, the book misses a major point: *all* the treatment of children is developmental, if by that one means that their developmental history, present developmental levels and likely developmental future need considering. The editor does not appear to accept this and at the beginning of Chapter 1, referring to short term illnesses and their like, states: "Therapists, especially physiotherapists, have been able to treat the malady and send the child elsewhere *for his development.*" (my italics).

Once again Sophie Levitt has had the courage to attempt the near impossible: to describe to a wide readership something even those doing it do not fully understand. Its fault lies precisely there and those who enjoy some chapters will struggle with the naivety or complexity of others. However it fills a gap in the literature and will be appreciated by many for helping them towards an understanding of a complex, diverse and amorphous subject. I thoroughly enjoyed reading it and felt suitably stimulated.

DAVID SCOTT

Epilepsy Handbook. A Guide to Understanding Seizure Disorders. By Gerald I Sugarman. (Pp 250; £9.50.) Toronto: CV Mosby Co. UK Distrib: Blackwell Scientific Publications, 1984.

Dr Sugarman has undertaken an ambitious project in writing this book. The fact that it is only partly successful is perhaps not very surprising as it not only "tells you everything you need to know about the causes, diagnoses and treatment of epilepsy", but is also aimed at "persons with seizure disorders, their families, physicians, lawyers, employers and others interested in epilepsy".

This handbook is a well laid out paperback volume, which is divided into rather lengthy chapters entitled—Introduction; the Seizure Experience; Diagnosis; Treatment and Living with Epilepsy. Within these major divisions there are clearly defined sub-headings, and the text itself is presented as questions and answers. This certainly allows some of the more difficult problems to be discussed, but does also make the argument rather fragmented. Although there is an element of program-

med learning in the presentation of information and a very full glossary running to 20 pages, the book will be of most value to those readers already conversant with some of the problems that epilepsy can present. Technical terms are used in full, and the range of topics covered is very wide, from the classification of seizures to exemption from military service, and from laws relating to compulsory sterilization to the anticonvulsant properties of marijuana! The author has made an admirable attempt to give clear cut answers to the questions posed, but in so doing the results are sometimes a little misleading. For example: Q: "Will head trauma cause epilepsy?" A: "Yes. Head injuries can cause an epileptic attack at any time". There are also a few unfortunate errors. For example, Huntington's chorea is said to be "an autosomal recessive disease". As no references are given it is difficult to know the authenticity of some statements, such as "some anti-convulsants (carbamazepine) may cause impotence but rarely infertility." The British physician may also be rather alarmed at Dr Sugarman's somewhat over-inclusive approach, as, for example, he lists 42 symptoms which may be caused by "hypoglycaemia". Included in these are chronic fatigue, reduced initiative and "making mountains out of molehills".

As a significant amount of the information in this book only applies in the USA, it is difficult to recommend it wholeheartedly to the British reader, professional or otherwise. Nevertheless it is interesting to compare Dr Sugarman's refreshingly direct approach to that of some UK authors. Anthony Hopkin's book—"*Epilepsy—The Facts*"—is the nearest British equivalent to date, although he does not adopt the question/answer format. A new book by Mary and John Laidlaw—"*People with Epilepsy*"—is aimed primarily at non medical professionals. It contains, amongst much else, a lot of very careful explanation about the working of the brain, which Dr Sugarman omits altogether, but these authors do not present the reader with a large battery of technical terms. Explanation rather than jargon is also to be one of the key features of a new book to be published in January 1985 by Peter Jeavons and Alec Aspinall—"*The Epilepsy Reference Book*"—which will adopt the question/answer format. This difference in approach between the UK and USA perhaps reflects the different way in which British and American people with epilepsy and their physicians perceive themselves and each other. Dr Sugarman

clearly views his patients as consumers, and indeed gives detailed instructions about filing complaints to the Director of Civil Rights. He has made a valiant attempt to teach his readers the technical language they will require to cope with travel in the other country of medicine and disability.

JOLYON OXLEY