The conclusion is that British psychiatrists of the time either ignored his contributions or misunderstood them. The latter is understandable in view of his rather laboured literary style, and the fact that many of his gems were contained in explanatory notes and footnotes. He had much greater influence on continental workers including Freud. Indeed, Dewhurst believes that Freud acquired much useful information from Jacksonian neurodynamics which he transformed into Freudian psychodynamics. Hughesl Jackson's concepts of positive and negative consequences of brain damage have in fact influenced much psychiatric and psychodynamic thought. Stengel (1954) is quoted as proposing that Bleuler's psychopathology of schizophrenia was inspired by Freud's interest in Jacksonian views of positive symptoms. Hughesl Jackson apparently had an extensive knowledge of the French medical literature, and his ideas exerted great influence in France. Indeed, Charcot is credited with introducing the eponym "Jacksonian". Through Theodule Ribot, the teacher of Pierre Janet, Hugings Jackson's writings exerted a strong influence on French psychiatry. Failure of memory proceeded with loss of most recent recall but retention of the oldest memories, obliterations of the most complex with retention of the simplest, and erasure of the most voluntary with maintenance of the most of the more automatic memories, became known in France as "Ribot's Law" although the latter always acknowledged that it was based on the application of a Jacksonian principle. Pierre Janet, although he never read Jackson's works, based his concepts of reality on Jacksonian principles. Subsequently, Pierre Janet took Jacksonian neurodynamics and merged them with aspects of Freudian psycho-analysis and Janet's phenomenology to create his concept of organodynamic psychiatry. Hughesl Jackson obviously also profoundly influenced the founders of American neurology including Silas Weir Mitchell, George Beard, WS Hammond and James Jackson Putnam. Hughesl Jackson's fundamental concepts of the hierarchical organisation of the nervous system, of the dissolution of the function caused by disease, and of positive and negative symptoms profoundly influenced the evolution of thought in neurology. In this book, Kenneth Dewhurst shows that these concepts, and also Hughesl Jackson's views on consciousness and perception, also profoundly, if often indirectly, influenced concepts in psychiatry. Kenneth Dewhurst states that the main reason for writing this book was the "general neglect of Hughesl Jackson's writings". His book should reach a wide audience to remedy this defect.

CD MARSDEN


The book commences with colour photographs of the surface anatomy of the brain labelled in detail but the main bulk of the atlas is devoted to sections of the brain and spinal cord in the plane conventionally used for CT, photographed in colour to increase the illusion of depth and displayed alongside radiographs of the sections and comparable computed tomogram slices from normal patients. Similar sections of the brain and spinal cord stained by the Weil method are included together with a brief description of the function of the more important structures. Though much of the detail of the stained sections is not visible on CT, the precise spatial relationships of these structures is emphasised and is of interest for relating CT abnormalities to clinical presentations. These sections will be of particular value for comparison with nuclear magnetic resonance images, which reveal the internal structure of the brain in detail.

All the anatomical photographs are of excellent quality; the labelling is accurate and the brief text is useful and adequate. It is disappointing that some of the CT sections are not of the same standard and the labelling and descriptive text could have been considerably more detailed. For example, notes on precise recognition of the important sulci which border clinically significant regions of the brain is lacking. CT sections of the posterior fossa are sub-optimal and none were made with intrathecal contrast medium so as to display the cranial nerves and detailed anatomy of the basal cisterns and the soft tissues of the neck including the parotid gland and the pharynx are inadequately labelled on the CT sections.

Students of neurosciences and both clinicians and radiologists interested in the interpretation of axial images of the nervous system will find this atlas useful in its present form but one hopes that a new edition...

Edited by JS Meyer H Lechner M Reivich and EO Ott. (Pp 311; £76.50.) Amsterdam: Elsevier Biomedical Press BV, 1983.

This book contains the Bertha Memorial Lecture and fifty-three papers selected for presentation at the 11th World Federation of Neurology Meeting held in Salzburg in September 1982. The papers are divided into five sections covering Regulation of Cerebral Blood Flow and Risk Factors, Neuroimaging Techniques, Critical Evaluation of Therapeutic Approaches, Cerebral Perfusion and Metabolism in Relation to Function, and Migraine.

In the Bertha Memorial Lecture Sokoloff outlines the principles behind the 2-deoxy-D-glucose method of studying glucose metabolism and illustrates the impressive results obtained by autoradiography in studying the close coupling between local functional activity and local glucose metabolism. For example, in the rat, the rates of glucose utilisation in the primary projection areas of the retina are directly proportional to the logarithm of the intensity of retinal illumination. The deoxy-glucose method can now be applied to man using positron emission tomography (PET) though the resolution is lower than that obtained by autoradiography. Using this method WD Heiss et al have shown reduced cerebral metabolism distant to the site of infarction and suggest that in part this is due to deafferentation. Other papers emphasise the ability of PET to demonstrate the dynamic changes in blood flow and regional metabolism occurring after acute infarction.

Nearly one fifth of the papers are concerned with the measurement of cerebral blood flow (CBF). The normal decline with age is enhanced in subjects with risk factors for cerebro-vascular disease and the “hyperfrontal” distribution declines with age and in patients with Parkinson’s disease. In rhesus monkeys autoreregulation in the vertebral arterial system is less efficient than in the carotid system, which may be of beneficial effect in protecting against hypotension (M Tomita et al).

In the neuroimaging section it is perhaps surprising that there is only one paper on nuclear magnetic resonance imaging. Various digital subtraction angiography (DSA) and Doppler techniques in the study of carotid disease are discussed in three papers, but only in one are they compared with conventional angiography. DSA fails to identify lesions in a small proportion of cases, whereas Doppler studies tend to overestimate the presence of disease.

Whether aspirin is of benefit to patients who have sustained a TIA is still unclear. The French “AICLA” study provides evidence that aspirin may be of benefit in preventing re-infarction in patients with minor completed strokes. Other papers discuss circulating platelet aggregates in patients with vascular disease and others concentrate on the inhibition of platelet aggregation by low and high dose aspirin therapy and by other drugs.

Sjaastad et al provide an interesting review of chronic paroxysmal hemicrania and compare the autonomic disturbances that further identify it as a separate entity to cluster headache. The relationship between changes in CBF during a classical migraine attack and the spreading depression of Leao is discussed.

This book is worth browsing through, though the price is against it: adding it to one’s own bookshelf. Although many of the papers are short and lacking in detail, and much of the data have been published elsewhere, in some cases since the conference, the wide range of topics covered is likely to include something of interest for all.

D HILTON-JONES


This is a most important publication on head injuries; it contains the experience, results and conclusions of the Glasgow team presented as one might expect in an eminently logical and readable fashion. The title should be taken in its widest context as it covers more than medical inpatient treatment. The first chapters are devoted to epidemiology, pathology and patho-physiology; the text of these chapters is simple and comprehensive. The following chapters are concerned with the clinical investigation, assessment and treatment of head injured patients with particular reference to the Glasgow experience with international comparisons. These chapters are particularly eloquent and aspects of the “aggressive” treatment of head injuries such as intracranial pressure monitoring, ventilation, steroids and barbiturates are objectively discussed. The illustrations and diagrams are in black and white and, surely, the next edition will be improved by the introduction of fourth generation CT Scans and perhaps also NMR and PET images. Chapter 9 is concerned with the management of acute injuries and this should be compulsory.