Flor-Henry's ideas may be unfamiliar to some readers. His most important contribution to knowledge was a study of epileptic psychosis, published in 1969. He found that patients with left temporal lobe epilepsy tended to have a schizophrenic picture to the psychosis while those with right-sided lesions tended to have a depressive or manic illness. This paved the way for numerous studies on lateralised hemispheric dysfunction in endogenous psychosis—clinical, pathological, radiological, electrophysiological and neuropsychological. At the present time the state of knowledge can only be described as chaotic. Flor-Henry has always championed the idea that *left hemisphere dysfunction underlies schizophrenia* and *right hemisphere dysfunction affective disorders*. This is almost certainly wrong, but Flor-Henry's importance is not his insistence on the precise form but a general appreciation that hemispheric imbalance of some sort is involved.

I would strongly recommend both neurologists and psychiatrists to buy this book, though at £35. it is not cheap. It is, in my view, the first genuine attempt for 100 years to close the gap between neurology and psychiatry.

It should be said that Flor-Henry is not the best advocate of his own case. He is prone to flight of ideas and overinclusion of evidence which detract from his main theme. Statements such as "One could view..... hysteria as an attenuated *forme fruste* of schizophrenia in the female" are unsupported. He also has a tendency to misquote others' work to suit his argument. This is a pity because he only alienates the discerning reader.

In my view classical schizophrenia is more likely to be an effect of right hemisphere dysfunction, and a paranoid-hallucinatory psychosis caused by left temporal damage. These details are not so important at the present time as the recruitment of interest into the whole subject of hemisphere imbalance and psychosis. Flor-Henry can at least take the credit for this.

J CUTTING

**Fish's Schizophrenia—Third Edition.** Edited by Max Hamilton. (Pp 236; £10·95.) Bristol: PSG Wright, 1984.

Professor Fish's monograph has long been valued by English-speaking readers for its distillation of the views of many leading German psychiatrists and philosophers. Although some of this now has more of a historical than an immediate interest, the clinical observations, and the ideas behind them, are still relevant to present day practice. In this volume, some of the material has been succinctly updated by the editor and we are still left with a considerable exposition of the phenomenology of schizophrenia and its classification, with particular reference to the writings of Kleist, Leonhard and Conrad. In addition, there is a chapter on "Theories of Causation" with an extensive discussion of existentialism and schizophrenia. Professor Hamilton, rightly regarding this chapter as "unique", also seems to rate it as something of a museum piece, to the extent of letting it stand, leaving Jung to be discussed as though he was still alive.

While no longer a complete guide to current practice, this book continued to make its special contribution to the literature on schizophrenia.

JLT BIRLEY

**Anxiolytics: Neurochemical, Behavioural, and Clinical Perspectives.** Edited by Jeffrey B Malick, SJ Enna and Henry I Yamamura. (Pp 232; $48.36.) New York: Raven Press, 1982.

Anxiolytic drugs are so widely used it is perhaps not surprising that so many books on this topic have been published in recent years. However, it is the major advances made in the understanding of the mechanism of action of anxiolytics, particularly benzodiazepines, that have stimulated so much interest. The initial discovery of the benzodiazepine receptor and its linkage to the GABA receptor complex provided a neuronal basis for their pharmacological effects. Latterly, the search has been on for the endogenous ligand for these receptors with numerous putative transmitters being proposed; current interest centres around the involvement of B-carbolines. The present volume attempts to present a current view of anxiolytic drug action. It is a well balanced volume which discusses in detail the classical view of benzodiazepine action *via* GABAergic mechanism but which gives space to the action of these drugs on other neuronal systems including dopamine. The emphasis on basic research in this area is highlighted by the nine chapters dealing with pharmacology compared to the two clinical chapters. Even here interest is mainly confined to the potential abuse of these substances. Inevitably any book dealing with a subject which is expanding as rapidly as anxiolytic research will be somewhat dated. Nevertheless, as a reference background volume the book is well worth reading. As part of a series of volumes dealing with different classes of centrally acting drugs it will provide a useful addition to libraries.

P JENNER

**Minute Eye Movement and Brain Stem Function.** By Davis Coakley. (Pp 112; $46·00.) Florida: CRC Press Inc, 1983.

This book is based on the author's MD thesis and is concerned with the value of quantifying ocular microtremor (minute oscillations of the lobe due to unfused muscle twitch contractions) as an index of the integrity of brainstem function. The first half of the book reviews the physiology of eye movement, methods of recording microtremor and the characteristics of normal records. The latter half describes the author's own investigations of the characteristics of microtremor during sleep, anaesthesia and in brain damage and compares the findings with other means of assessing brainstem function. At first sight the book is a model of layout with excellent illustrations and would appear to be a unique, comprehensive survey of the clinical aspects of ocular microtremor. Unfortunately there are serious omissions relating to the origin and interpretation of microtremor. Of most importance is that the author has neglected the problem that brainstem insults may selectively destroy oculomotor structures involved in the generation of microtremor, without affecting other sensorimotor functions or level of conciousness. This means that alteration in microtremor may correlate with widespread brainstem injury but not necessarily *vice versa*. This is possibly a serious drawback to the use of microtremor as an index of brainstem function and should have been discussed at length. Reflecting this inadequacy, the review of the physiology of brainstem oculomotor and premotor structures is at best, scanty and little attempt is made to correlate changes in microtremor with lesions of brainstem structures related to eye movements. In addition the text omits technical information which is important to the evaluation of the technique. Of note are the absence of explanation of the methods of spectral analysis used to quantify microtremor; the absence of discussion of how to deal with contamination of the recordings by spontaneous