The past few years has seen the publication of a number of texts on developmental neuropsychology, indicating that this area is recognised as worthy of specialist study. This text results from the collaboration of researchers in Amsterdam (DJB) and Windsor, Ontario. It is aimed at advanced students in clinical and school psychology, and related professionals in special education.

The first four chapters review brain development and brain-behaviour relationships, paying particular attention to lateralisation of function and plasticity. The diagrams will be useful to beginners. The authors caution against generalising findings from adult neuropsychology and from studies of damaged brains to normal child development, but frequently forget their own warnings.

Chapter five reviews neuropsychological assessment, at least as practiced by the authors. They see the main aim of such assessment as the diagnosis of neurodevelopmental disorders, and behaviour relationships. They seem to be less interested in diagnosis or remediation, indeed they coyly view “diagnosis” as a solely medical prerogative, although later they unconvincingly argue the need for a new profession of child neuropsychologists, separate from clinical psychologists. They favour a most unusual approach to assessment: all children, irrespective of presenting problems, are administered a day-long assessment (mainly Halstead-Reitan pot-pourri) by “psychometrists”. The test results are then interpreted by the neuropsychologists “blind” to the history and other data. This approach might be justifiable in a strict experimental evaluation to ascertain the validity of the battery’s contribution to overall diagnosis and care, but it is clearly wasteful in ordinary clinical practice. Indeed, the 21 case examples (described by the dust jacket as “superb”) merely serve to illustrate how redundant this type of neuropsychology is to diagnosis and treatment.

Chapter six addresses remediation. It is unclear what neuropsychology adds to good clinical psychology in this area. The authors are aware of the dilemma of special education: whether to teach through existing skills or to try to bolster up deficits. They note that children with higher IQs have better prognoses. They talk of the need to help parents and become over inclusive to the point of recommending psychotherapy. Much of the advice is non-specific and stated in unhelpful generalities. They say little about behavioural management of seizures, the value of the Domon-Delacato approach, conductive education, augmentative communication systems or the place of new information technology, all of current concern. Indeed, merely justifiable in this contribution is the description of children with CNS impairment. Rather, they fall back on the wisdom of the 1940s: the need for limiting sensory input, for structuring the environment and the like. In many of the case examples, the remedial prescription amounts to placing the child in special class or special school as if there were no moves in special education towards integrated schooling.

Having read this text carefully, I am no clearer what this type of neuropsychology has to offer the clinician. Nowhere is there any discussion of its relationship to paediatric neurological examinations nor to modern CT and PET scans. Is the task of neuropsychology to diagnose problems, to screen for more expensive diagnostic procedures, to describe functions associated with lesions determined by other methods or what? Some critics argue that the transformation from phrenology to neuropsychology, the “critical faculty” has been mislaid. This style of neuropsychology seems unrelated to the very real needs of neurologically disabled children.

WILLIAM YULE


This short and concise book was first published in 1925, and has now been brought out in an excellent English translation. In the sixty years since the book was first written, clinical neurology has undergone enormous changes, and the relevance of such a book to the present day needs examining. In general it stands up well to this examination.

With the advent of CT scanning and other imaging techniques do we need the classical clinical skills of history taking, examination and knowledge of neuro anatomy, neuropsychology and neuropathology? Indeed, is there any need for the committed full time neurologist or can he be replaced by a scanner? Part of the answer to this proposition has been in the fact that the rapid advances in the treatment of diseases of the nervous system have converted neurology from the largely diagnostic and prognostic specialty that it was sixty years ago, into a major therapeutic specialty. But this book serves as a valuable reminder that clinical skills remain essential in the diagnosis of the vast majority of neurological diseases while scanning is helpful only in the minority and crucial even less frequently.

Mumenthaler’s Neurologic Differential Diagnosis takes major symptoms and signs and then considers their differential diagnosis. It is well set out with excellent diagrams and tables. It is written for the physician who has acquired the skills of history taking and examination, rather than the clinical student. In parts it remains orientated towards the pre-scanning era of neurology where, for example, it lists the twenty named brainstem syndromes (from Avellis’ syndrome to Vertet’s syndrome); or in describing the anatomical localisation of hemisphere lesions. But in the sections on disorders of equilibrium, involuntary movement, mononeuropathies or back pain (to select just a few) the description and discussion is elegant, informative and relevant to clinical practice. For the postgraduate student of whatever age, this book will provide a classisation over the whole range of clinical neurology, and reminds one of possibilities in diagnosis that may have been overlooked and which will frequently not be revealed by scanning techniques. This is a valuable addition to the bookshelf of aspiring and established physicians and neurologists.

RB GODWIN-AUSTEN


This introductory monograph of a new series, Current Reviews in Psychiatry, edited by Professors Eugene Paykel and Gethin Morgan borrows well for future volumes in this series.

The editors point out in their foreword that the scope of psychiatry is wide and the expansion in the base of knowledge in recent years has been impressive. No longer do we live in the age of the polymath author of standard textbooks of psychiatry. This is evident in the poor quality of the mandatory chapter on the “Psychiatry of Mental Handicap” in many such texts.

Expansion of the knowledge base has been