

accounts of: tumours, head injury, strokes, Parkinson's disease, multiple sclerosis, peripheral neuropathy, muscle disease, infections and so forth.

The text is to the point and lucid. It abounds with useful tables and diagrams which the student will not find easily elsewhere, for example types of nystagmus, features of epilepsy and syncope, causes of cerebellar impairment, ophthalmoplegias, neuropsychological deficits, the mini-mental state examination and the Glasgow coma scale.

There are good quality clinical photographs of retinopathies and of clinical testing of muscles, and there are flow charts for headache, dementia and vertigo which are fashionable if of over-rated value in teaching. The book is clearly printed in two-column format and the illustrations and tables are excellent.

My only criticism apart from a few type-setting errors (for example the plantar response is described as "exterior" for extensor p.34; 'parasthesiae' Fig 2.9) is that the last section is too brief to be satisfactory; its contents are better dealt with in the short neurology or general medical textbook than in a volume dedicated to clinical skills. Expansion of the other two sections and brief descriptions of the commonly performed neurological investigations could usefully fill the space if it were omitted in future editions.

I would strongly commend this to all medical students and postgraduates. Michael Harrison is to be congratulated on producing a book stamped with a distinctive personal style; it will make a significant dent in the marketing of its competitors. I look forward to the next edition.

JMS PEARCE

Epilepsy; Electroclinical Syndromes. (*Clinical Medicine and the Nervous System series.*) Edited by Hans Luders, Ronald P Lesser. (Pp 399; £69.00.) London: Springer-Verlag, 1987.

This volume is the second in the *Clinical Medicine and the Nervous System* series, and is divided into fourteen chapters. As is almost inevitable nowadays, the first chapter is concerned with the classification of epileptic seizures and epileptic syndromes, and the remainder deal with a specific seizure type or syndrome. Thus, there are chapters on absences seizures, tonic clonic seizures, simple partial seizures, complex partial seizures, and on Lennox-Gastaut syndrome,

infantile spasms, febrile seizures, progressive myoclonic epilepsy and so on. This is a customary approach, and in the last few years there has been a plethora of books and articles covering the same general areas. This imparts to the work a strong sense of déjà vu. Nevertheless, most of the chapters are well written, authoritative and a good source of reference material, and the high quality of the text certainly makes up for a lack of originality. The editors are doyens of the epilepsy service of the Cleveland Clinic and both originally trained as electroencephalographers, and the book reflects both these biases. Cleveland Clinic thinking pervades the text, a demonstration of the important contribution of the centre to current teaching in epilepsy. The EEG is assigned a central role in each chapter, which is entirely appropriate as the current classifications of epilepsy rely heavily on EEG findings. Most chapters are in the form of orthodox general reviews, and cover their subjects comprehensively. The most unconventional and the most contentious is that on *Focal status epilepticus: modern concepts*, by Delgado Escueta and Treiman, in which a provocative classification of complex partial status is proposed. The book is well edited, and well organised, and also conspicuously well produced. The figures (mostly EEG) are well chosen. The volume is expensive, however, and I suspect most neurologists will manage without a personal copy.

SIMON SHORVON

Focal Peripheral Neuropathies. By John D Stewart. (Pp 420; \$55.00.) New York: Elsevier Science Publishers. 1987.

The disturbances of peripheral nerve, particularly the compression and entrapment syndromes, are a frequent cause for referral to neurologists and electromyographers. In this monograph the author approaches the many disorders affecting peripheral nerve from the spinal root to the terminal digital branches. The nerves and plexi are described from the accessory nerve to the sacral nerve. It would have been of value to discuss the facial nerve.

The pathological mechanisms affecting peripheral nerves are well described. There is an introductory section on electromyography but in spite of the fact that the author is a director of an EMG laboratory no values are given, either for normals or for the various pathological disorders. Although the appropriate references are

given, this deficiency obliges the reader to consult those references or another text. There is also no discussion of traumatic injuries to nerve or surgical repair.

The strong points of the book are the well presented tables and illustrations and the large number of references at the end of each chapter. In addition treatment of the individual dysfunctions is well discussed. A useful final chapter concerns the mechanism and treatment of neuropathic pain.

The book is recommended as a useful guide for the diagnosis and treatment of these disorders.

MS SCHWARTZ

Hemodynamic Aspects of Cerebral Angiomas. (*Acta Neurochirurgica* [Suppl. 37].) By Werner Hassler. (Pp 136; DM 150.00.) Vienna: Springer-Verlag, 1986.

This book describes the results of Doppler flow measurements in experimental and clinical arteriovenous fistulas. Electromagnetic flow meters and the laser Doppler technique for measurement of cerebral perfusion are also used effectively to evaluate the haemodynamic changes that follow the construction of experimental fistulae of the carotid and jugular vessels. The effects of acute or delayed occlusion of these experimental fistulae on systemic blood pressure are to produce an increase in mean arterial blood pressure, but with preservation of auto-regulation. Angiographic and transcranial Doppler flow measurements are described pre- and post-operatively in a large number of patients. The intra-operative Doppler and intravascular pressure recordings in five patients are unique and revealed a 53.5% increase in proximal intravascular pressure and normal CO₂ reactivity after arteriovenous malformation excision. Post-operative hyperaemia was seldom seen (only one patient in the whole series) and the concept of normal perfusion pressure break through is therefore challenged, although staged removal of the lesion with embolisation is described, and this may limit the acute rise in proximal intravascular pressure that may occur with larger arteriovenous malformations.

There are a large number of illustrations and individual case reports which make interesting reading. The text is supplemented by an extensive and up to date bibliography which should appeal to all those who are called upon to deal surgically and radiologically with these lesions.

AD MENDELOW