

Matters arising

criteria for diagnosis could be the following: (1) onset with acute organic brain disease, (2) anamnestic and/or laboratory evidence of lithium over dosage prior to the onset of acute organic brain disease, (3) simultaneous appearance of severe cerebellar signs and of mild peripheral neuropathy as consciousness recovers, (4) persistence of cerebellar signs six months after poisoning and discontinuation of lithium therapy.

This last point is supported by the evidence that substantial improvements of the neural deficits themselves cannot be expected after six months, though functional improvement may occur³ up to one year after poisoning.^{1,4}

As Dr Adityanjee remarks, non-nervous acute and chronic sequelae, such as renal and/or cardiac failure, Grave's disease and myopathies may complicate the clinical pic-

ture.⁴ These sequelae may also be dramatic enough to point to some form of acute intoxication,¹ and/or persist to various degrees of severity⁴; nevertheless, they seem to lack the specificity needed for a suspicion of lithium poisoning either in the acute or in the chronic phase.

Dr Adityanjee claims that neurological signs and symptoms may well follow chronic lithium intoxication, too: however, he also recalls that usually they are much more various and reversible than those following acute intoxication. Thus, I suppose he would agree that the identification of a specific and irreversible syndrome in chronic toxicity should be much more questionable.

Certainly, limiting the diagnosis of the syndrome to the cases fulfilling the above minimal criteria should make this syndrome a rather rare finding. At the same time, how-

ever, the syndrome itself could be identified and related to lithium poisoning with a higher degree of specificity.

References

- 1 Tesio L, Porta GL, Messa E. Cerebellar syndrome in lithium poisoning: a case of partial recovery. *J Neurol Neurosurg Psychiatry* 1987;50:235.
- 2 Cohen WJ, Cohen NH. Lithium carbonate, haloperidol, and irreversible brain damage. *JAMA* 1974;230, 9:1283-7.
- 3 Izzo KL, Brody R. Rehabilitation in lithium toxicity: case report. *Arch Phys Med Rehab* 1985;66:779-82.
- 4 Schou M. Long-lasting neurological sequelae after Lithium intoxication. *Acta Psychiatr Scand* 1984;70:594-602.

Book reviews

Symptom Management in Multiple Sclerosis. By Randall T Schapiro. (Pp 128; \$14.95 h/b; \$9.95 p/b.) New York: Demos Publications, 1987.

The editor of this small book is the Director of Rehabilitation at a multiple sclerosis centre and the Clinical Professor of Neurology at the University of Minnesota. He has assembled a team of twelve to describe the management programme developed at their rehabilitation unit.

For each symptom there is a brief explanation, a mention of drug treatment and a variety of rehabilitation therapies. The contributors are in the main nurses, occupational and physical therapists and it is in these supportive ancillary professions that the main appeal of this book will find favour.

There is an excellent introductory summary of the CNS in two pages, a brief but equally lucid statement on "multiple sclerosis is...". Then chapters on tremor, spasticity, weakness, fatigue, sexuality, diet, pressure sores, bladder and bowel etc. Each is commendably brief, simple and clear. In fact most sections left one wanting to know more detail of what was done in Fairview Hospital. Although the neurologist will learn nothing new, it may be helpful for him to read about the way others handle his patients.

The editor also has in mind the multiple sclerosis patient, family and friends, who doubtless will find interesting and readable

accounts which will aid their understanding of what are nowadays termed "therapeutic goals".

Simple plain writings often conceal considerable labours in their preparation. This small practical volume is welcomed and will benefit a wide range of readers.

JMS PEARCE

Intensive Neurodiagnostic Monitoring. (*Advances in Neurology Vol 46*). Edited by Robert J Gumnit. (Pp 285; \$64.50.) New York: Raven Press. Japanese distribution exclusively by Igaku-Shoin Ltd, 1986.

This, the 46th volume of the *Advances in Neurology* series, is only the second to be devoted wholly to diagnostic investigation. As many readers will agree, the issues in this series have varied considerably in their worth, and this current edition is only moderately useful. These multi-authored books usually are composed of formal reviews, and this volume is no exception. It is the publication of the proceedings of a conference on Intensive Neurodiagnostic Monitoring, held as a satellite to a meeting of the American Epilepsy Society. The book is therefore almost entirely concerned with monitoring in epilepsy, and is a largely American view (indeed, the style and imprimatur of the American Epilepsy Society is very obvious throughout). It comprises 18 chapters grouped into sections on: combined video and EEG recording, ambulatory EEG,

intensive monitoring in specific problem areas, data reduction and a summary section. My main criticism of the work is that it covers an area already well reviewed, often by the very same authors—and indeed some chapters follow very closely previously published papers. Most of the chapters go over well trodden ground, and while many are well written, the whole has a pedestrian feel. The book must have been some time in conception, as few (any?) of the references post-date 1985 (the date of the conference was not given). The best chapters are the most original or the most technical, and these include the two chapters on data reduction (by Gotman and Frost), and that on ambulatory ECG and EEG monitoring (by Blumhardt). Ives gives a simple but succinct review of video recording, and Kellaway an authoritative review of monitoring in children. The chapter by Engel and Crandell, is interesting in seeming to show a much more cautious approach to intracerebral recording than in their previous publications, and their indications for this procedure seem to have narrowed. Omissions from the book include any mention of intensive care monitoring or the monitoring of sleep. In 1985, Supplement 37 of the journal *Electroencephalography and Clinical Neurophysiology* was published as a hard back volume, to celebrate the 50th anniversary of the Montreal Neurological Institute, entitled *Long Term Monitoring in Epilepsy* (Ed Gotman, Ives and Gloor). This was a much more interesting and original, and more technically accomplished book.

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