book are more useful but I am surprised by the fact that a table is produced showing the assessment of risk of development of bed sores without any mention being made of the various clinical assessments of severity or recovery of stroke.

The photographs in the book are well produced but the volume cannot be recommended to physicians involved in the care of patients with stroke and nor can I see it being used by paramedical personnel because the language used in the text is inappropriately complicated.

David Bates


This book, volume 3 in the series, is of a different generation and has an aim very different from the standard works on clinical evoked potentials, such as Halliday's and Chiappa's volumes, published a few years ago. The authors of this work have attempted, largely successfully, to select what is relevant, interesting and important in the field, whether basic or clinical. The book is not intended to be all-encompassing but a great deal is covered in the 49 chapters, by no less than 99 contributors. The great majority of the contributors are from North America, with Italy and Israel particularly well represented among the rest. All the contributors are well known for their work on the aspects of EPs which they here review, describe or discuss according to their preference.

There are eight sections in the book: methodology, animal models, anatomy, biochemistry and pharmacology, differential diagnosis, surgical monitoring, paediatrics, and cognitive disorders. Though the reason for placing some contributors in their particular section seems somewhat arbitrary at times, this arrangement works reasonably well on the whole. I certainly found, when searching for a particular chapter that my attention was frequently caught by an interesting or relevant page or illustration in one of the adjacent chapters.

Most of the workers whom one would hope to find in a major work on clinical and basic science of EPs are here and it is both a pleasure and a great convenience to have in a single volume such diverse workers as Lehmann on spatial analysis, Kaufmann and Williamson on the neuromagnetic field, Maffei and Fiorentini on the pattern ERG, Yamada et al on bilateral stimulation for SEPs and Blumhardt on the VEP and visual field defects, to choose a few at random. There is much of interest in all eight sections perhaps that termed Anatomy has the most to offer for the clinician apart from the obviously clinical sections, with, for example, Möller and Jannetta on the BAEP, followed in sequence by Desmedt, Kimura and colleagues, and Burke and Gandevia on various SEP aspects. The section entitled Differential Diagnosis is generally good and contains a real gem of a short chapter by Picton, classifying BAEP abnormalities. Surprisingly the smallest section is that on surgical monitoring, with only two contributors, both on the SEP, and no mention of BAEP monitoring or the more problematical VEP.

The arrival of this work is timely since certain aspects of the EP field seem likely to undergo critical reappraisal in the near future. In the USA if not yet in Britain, the rapid increase in availability of magnetic resonance imaging is bound to be accompanied by a decrease in the use of EPs for diagnosis of multiple sclerosis. Event related potentials, for years a candidate for growth, have still to establish a clinical role, and though there has been a remarkable recent increase in commercial averagers with facilities for topographical display of EPs, and thus for generation of pretty pictures, there are many who have reservations about the true value of this technique. This book is packed with interesting material and is in general well produced; the price is reasonable. It will be of great value to clinical neuropsychologists wishing to improve their understanding of basic mechanisms, pondering new ideas for research or aiming to improve their routine clinical service.

NMF Murray


As might be expected with a multiauthor book this one suffers from a certain amount of repetition. Although aimed at residents and practising radiologists there is more than enough technical detail in the first nine chapters, which occupy over one third of the book, to satisfy any other than someone who has to devote much of his practise to MRI. However, these chapters are well written and easy to understand and the chapters on artefacts is very detailed and will be particularly useful. My only regret is that the sequences used are only spin echoes. Inversion recovery is not mentioned because it is not commonly used in the United States.

The clinical section from chapters 10 to 26 are somewhat unbalanced, 140 pages being devoted to diseases of the head and only 50 to the spine. Since tissue characterisation and experience of disease patterns is sometimes limited, many of the head sections devote much space to clinical background, and relatively little to MRI detail and could well have been enlarged. The last two chapters deal with the nasopharynx and neck. Although useful, it find strange that they are included but no space is found for consideration of the petrous bone or orbit.

Overall, however, it is a well written book full of useful information. In some areas it is more detailed than strictly necessary and in others there is too much padding. However, it is well worth reading and despite its cost it must be recommended to anyone who is going to be regularly involved in MRI.

DPE King


The title suggests an important and neglected field, of which this book provides mere glimpses. As a psychologist the author writes convincingly about personal problems of advancing disability. The predominant emphasis of spinal injury reflects her interests, and she should have resisted the temptation to add vague generalisations on an assortment of other conditions such as multiple sclerosis. The overall prognosis and the progressive increase of medical problems in spinal injury and other causes of so-called static disability is an important topic from a practical point of view. The author is hampered by the scarcity of existing information, and also by an obvious lack of clinical perspective. The tendency of seemingly static central nervous system disorders (especially not but exclusively poliomyelitis) to enter a phase of late progression raises issues not only of practical but also of general theoretical interest. The author recognises these issues but proves incompetent to discuss them in any depth.