tures of brain tumours, haematomas and aneurysms, it does not assess any specifically headache-related radiological problems. Similar chapters in competing books have discussed the indications for CT scans in headache patients and the radiological findings in migraine.

This book, despite its shortcomings, contains a great deal of useful information, it is clearly presented with summaries at the end of each chapter, and is generally well referenced.

I hope the sixth edition contains far more radical changes. In the meantime this volume remains one of the standard works on headache. It will mainly be used by neurologists but also by ophthalmologists and general practitioners. It is a sad reflection on current medical textbook prices that £50 no longer seems exorbitant for standard reference works.

F SCHON

Cranial Nerves: Anatomy and Clinical Comments. By Linda Wilson-Pauwels, Elizabeth Jakesson and Patricia A Stewart. (Pp 177; £19.00.) Oxford: Blackwell Scientific, 1988.

This book on the anatomy of the cranial nerves has been written by three anatomists and is designed for the student studying neuroanatomy for the first time. The book goes through each cranial nerve in turn and describes the anatomy including connections within the brain in a series of very clear drawings. The components of the nerves are colour coded so that their functional components can be easily recognised. Different colours for the pathways for special sensory, general sensory and visceral sensory functions are used and visceral motor, branchial motor and somatic motor are clearly shown similarly. The drawings, made by the first author, are very clear and the colour coding is very helpful in following the complicated connections of a nerve such as the facial nerve with its multiple components and complicated connections. The book is I believe designed mainly for those studying anatomy and though there are some clinical comments, these are rather brief and not always entirely accurate. Thus, the commonest aneurysm by far to produce a third nerve palsy would be one arising from the internal carotid artery, and a facial palsy would not be a common presentation of an acoustic neuroma. Given that the book is mainly directed towards students of anatomy the clinical information it gives is probably adequate but I think that the value

of the book goes beyond its use to medical students. I feel it could be of considerable value to neurologists and neurosurgeons who would find the clear drawings very useful for quick reference and verification of detailed anatomy learnt long ago. On that basis the book can be recommended warmly to clinicians and it is to be hoped that some additional clinical input into the next edition might make the book of even more value.

RD ILLINGWORTH

Primary and Secondary Brain Stem Lesions. (Acta Neurochirurgica Suppl. 40.) By Gyorgy Csecsei, Oskar Hoffmann, Norfrid Klug, Albrecht Laun, Robert Schonmayr, Jan Zierski. (Pp 130; DM 165.00.) Vienna: Springer-Verlag, 1988.

This 130 page book is supplement 40 of *Acta Neurochirurgica*. It is composed of six chapters which are loosely collated; all contributions are from the Neurosurgical Department of Giessen University. As stated in the foreword, the *raison d'être* for this supplement is that it was requested by the late director of the neurosurgical department in Giessen (Professor HW Pia) and is therefore dedicated to him.

The format of the book is very similar to *Advances and Technical Standards in Neurosurgery*. The quality of printing, photography and line drawing reproduction is consistent with Springer's usual high standard, although several tables and graphs have been published direct from inferior quality computer graphics.

The first two chapters (Schonmayr) concern effacement of the CSF cisterns with supratentorial and infratentorial mass lesions and clinical deficits associated with primary and secondary brain stem lesions. Both are descriptive and present a voluminous data that has little direct clinical relevance. In particular the latter chapter presents a mass of uninterpretable data concerning loss of brain stem reflexes. The cohort studied covers a heterogeneous group of neurosurgical patients who are studied with no reference to aetiology of the lesion, initial Glasgow coma score or Glasgow outcome scale. There is also no mention of the Liege coma score which has been found to be highly useful, and its contribution to the assessment of patients with severe head injury and brain stem insults. The third chapter again presents a mass of clinicoradiological data entitled "Acute Direct and Indirect Lesions of the Brain Stem — CT

Findings and Their Clinical Evaluation". Like the preceding chapters this is particularly difficult to evaluate, more so since the aim of the study is not stated. In view of the poor imaging of the brain stem with CT compared with MRI, characterisation of the lesions in the brain stem is extremely limited. The contribution of electrically elicited blink reflexes and brain stem auditory evoked potentials to clinical evaluation of patients with rhombo-encephalic lesions is presented in chapter 4. The authors conclude that these evoked potentials can provide useful information in brain stem but not cerebellar lesions. They also include an experimental study in cats evaluating the effects of raised intracranial pressure on the blink reflex. Despite presenting a well illustrated study, this chapter again suffers from being overwieldy and difficult to follow. An experimental study of changes in cerebral blood flow in various brain structures caused by raised intracranial pressure due either to inflation of an intracranial balloon or mock CSF infusion in cats, follows. This is a concise study that examines the effects of cerebral perfusion pressure and compartmentalisation of cerebral blood flow that occurs with raised intracranial pressure. No consistent changes in cerebral blood flow occurred with ICP less than 40 mm of mercury. At ICPs in the 40 to 60 mm range differential global and local changes in blood flow occurred. However, brain stem blood flow was preserved despite very high ICPs. The final chapter describes a biomathematical model of CSF dynamics and haemodynamics which to the non-mathematician will be extremely perplexing.

Overall this tome is disappointing. The burdensome language contributes to difficulties in comprehension of often confusing and voluminous data. Other than having excellent references (often to the neglected Franco-Germanic neurosurgical literature), there is little to recommend this poorly edited book. Byron (1809) wrote "Tis pleasant sure to see one's name in print". However, I do not think Professor Pia would be happy with this text which is dedicated to him.

IR WHITTLE

Psychiatric Aspects of Headache. Edited by Charles S Adler, Sheila Morrissey Adler, Russell C Packard. (Pp 387; £44.00.) London: Williams & Wilkins, 1987.

This is at first glance a comprehensive and well structured book devoted to an area that

is given scant attention in textbooks of psychiatry. The problem of patients with headache is one of the most frequent in the practice of liaison psychiatry and an authoritative overview of the problem seems most welcome. The book is organised in five sections including sections devoted to the assessment of the headache patient as well as treatment. The major contribution is from the two principal editors who co-author 14 of the 33 chapters. It is somewhat of a disappointment that the content of the book rarely matches the form. The language and theoretical of perspective is largely psychodynamic which renders the book less accessible or acceptable to British psychiatrists. Indeed the view that American psychiatry has in the past decade shaken off the shackles of psychoanalysis might easily be questioned on reading this book. As an example, in the chapter on assessment, tests like the MMPI (Minnesota Multiphasic Personality Inventory), the Rorschach and Thematic Apperception Tests are recommended as useful adjuncts to routine work up of the patient. These tests have long been assigned to the dustbin by empirically minded psychiatrists and their uncritical inclusion as of potential value in routine evaluation of patients is a good example of the general tenor of the whole book. In summary it cannot be recommended to anyone who has lost faith with the church of psychoanalysis.

RJ DOLAN

The Management of Headache. Edited by F Clifford Rose. (Pp 192; \$24.50.) New York: Raven Press, 1987.

This book can be considered to be very much in two parts. One part consists of a review of current research into the mechanisms of migraine, and as is customary leaves the reader somewhat confused as to the likely front runner. What emerges is the present insecurity of the vasodilatation-vasoconstriction theory of the traditionalist, and the reiteration of work on platelet dysfunction and serotonin with the addition of some recent researches. The cerebral blood flow studies in migraineurs are well covered. The chapter on investigations in migraine properly concludes that at this time no specific diagnostic test exists, but goes on to describe a wide variety of complex tests involving platelet function.

The remainder of the book is largely clinical in content and deals with the subject very well on the whole. In the chapter on

examination of the patient, the general examination does not mention the measurement of blood pressure, and under the heading of *Necessary and Informative Investigations* one would have thought that the necessity for carotid artery ultrasound, facial thermography and digital subtraction angiography is muted.

Some terms will be unfamiliar to the United Kingdom reader, such as cheiro-oral migraine, but the chapters on management understandably reveal little that is new, apart from the introduction of calcium channel blockers. The chapter on muscle contraction headache emphasises the lack of objective evidence that any excessive muscle contraction in fact exists, and the chapter on cluster headache is well written.

The chapter on headache in the emergency department is particularly commended. It is a topic not often dealt with in standard texts, is well written, and as well as being a very useful practical guide to casualty physicians, is pleasurable reading.

The author defines an experienced clinician as one who has made lots of mistakes, and the book is almost worth reading for this chapter alone. The references are comprehensive, and the book can be recommended both as a reference for the researcher in migraine and as a guide to the practicing clinician. Although somewhat disappointingly produced, it is very reasonably priced.

JG GRAHAM

Headache: Problems in Diagnosis and Management. (Major Problems in Neurology vol 15.) Edited by Anthony Hopkins. (Pp 398; £30.00.) London: Bailliere Tindall, 1988.

The 15th volume in the series, *Major Problems in Neurology*, concerns itself with headache and the problems of diagnosis and management. Hitherto the monographs in this series have been written by one, two or three authors but Dr. Hopkins has brought together 17 individuals contributing to 13 chapters, some chapters being presented by two authors in association. The editor of the series comments that the reason for this change will become clear to the reader as he works his way through the volume. We are presented with a combination of essays dealing with all forms of headache, worldwide, with contributions from Hong Kong, London, Cardiff, Melbourne, Pittsburgh, Copenhagen, New York and Kansas City.

We are reminded of the extent and

importance of the problem of headache in the initial chapter written by the editor and his associate from Kansas City, a comparison being made between the importance of the problem both in the UK and in the United States; certainly headache is a major problem in terms of incidence.

Ziegler in Chapter 2 discusses the importance of epidemiological surveys and there then follows a chapter on headache as seen by a neurologist, a comprehensive chapter mentioning perhaps too briefly the types of headache which can be categorised as acute, of recent onset, chronic and recurrent and headache with focal neurological symptoms, that is, the migraine complex. Vascular headache, headache of raised intracranial pressure and other headaches are discussed. The author considers the problem of investigation of headache and quotes Laffey and colleagues "That headache was the commonest reason for a scan but had the lowest percentage of abnormal findings." With Bohmfalk's slightly contrary view "I encouraged primary physicians to screen headache patients with CT scans, when the penalty for being clinically incorrect is so severe." The author then addresses the problem in a carefully argued resume and I feel no one would disagree with his conclusions. He considers the question of specialised headache clinics, presents us with quotations from their supporters but leaves us a little uncertain as to his own opinions of their value.

The pathophysiology of classical migraine is carefully considered by the joint authors from Copenhagen and New York. John Graham writes a very workmanlike and valuable chapter on "Cluster Headache and Pain in the Face" and considers the difficult problem of "atypical facial pain". Many of us would feel that a claimed success rate with the use of a tricyclic antidepressant of 81% is perhaps more than we can achieve and Graham's statement that treatment is "quite successful" whilst quoting Feinmann's claimed success rate, perhaps underlines his own slightly more pessimistic experience.

Jannetta's views on microvascular surgery in the posterior fossa bring us up to date and the chapter on "Post-herpetic Neuralgia" is comprehensive, especially in those paragraphs devoted to management and treatment.

There is nothing new in the field of cranial arteritis, but from St. Thomas's Hospital the authors provide us with a clear account of its clinical features, the importance of complicating visual failure and its management in a very well illustrated chapter.