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Crying and laughing after brain damage

We doubt that Allman’s suggestion will find much support, yet the problem he considers is a real one. It is not only a question of facilitating communication. An important aspect is the need for a term that, like most other medical terms, can be used in various parts of speech without recourse to cumbersome circumlocution. The indispensable need, however, is for a term that recognises the essential feature of the phenomenon, namely that it is a disorder of the mechanisms of expression of emotion, and not of emotion or affect itself. This is what is wrong with the suggestion “emotionalism”.

Perhaps the solution for this problem of nomenclature demands a lateral flight of fancy. The vocabulary of medicine is predominantly Greek. On the whole, this poses no problems, indeed it helps to avoid the contamination of meaning that often attends the use of English expressions through their vernacular connotations. The traditional symbol of the expression of emotion is the ancient Greek diptych of the theatrical laughing and crying masks, known as prosopoeia. This suggests dysprosopoeia, allowing the equally simple adjective dysprosopetic. Where Sigmund Freud has trod, we surely dare to go.

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| BOOK REVIEWS |

Therapy of Parkinson’s Disease. Neurologic Disease and Therapy Series 5. Edited by WC KOLLER and G PAULSON (Pp 583 Illustrated; Price $125.00 (US and Canada), $150.00 (All other countries). New York: Marcel Dekker Inc. 1990. ISBN 0-8247-8219-4

Having enjoyed reading and commending Koller’s Handbook of Parkinson’s Disease last year, I looked forward to learning more about therapy from this new book edited jointly with Paulson. Their preface reminds us, perhaps a little unkindly, that few of the contributing authors are old enough to remember patients with end-stage Parkinson’s disease “who lay in sawdust” or, those given levodopa in whom we “witnessed dramatic changes as patients in Stages III or IV became completely functional”. Very true, but I am not sure we would all agree with Koller’s introductory remark that “the types of therapy have dramatically increased vastly over the past decade due in large part to the discovery of MPTP model of parkinsonism.” The contents show 69 contributors in serried ranks, amongst whom are included almost all of the USA dowsen as well as a selection of Europeans.

The five main sections cover Assessment and measurement of symptoms and signs, Pharmacologic agents, Surgical approaches, Diet in therapy, and Other therapeutic approaches.

The result is a very useful and comprehensive survey of treatment which is up-to-date, well referenced and authoritative. Modern techniques range from amphetamine, a rebirth of stereotactic thalamotomies, appraisal of neurotransplantation, levodopa infusions and, to be right up to the minute the DATATOP trial of selegiline and tocopherol; all are reviewed in detail.

There are however faults. In a fact laden text, good writing and thereby easy reading are just as important as in a more discursive series of essays. And here the book disappoints, despite the publisher’s attractive printing format illuminated by clear illustrations and diagrams. Many contributors have careened the edifice of rational, reflective prose in favour of an almost obsessive devo-

This book is the sixteenth in the series "Progress in Neurological Surgery." Unlucky for some, perhaps, but the sixteenth edition which covers transcranial and temporal basal tumours, CSF shunts, spinal intramedullary lesions, lumbar discs, and brain death, should not prove a disappointment to the editor, Dr de Villiers. The "pitfalls" and complications which may result from incorrect interpretation of clinical signs and investigations, or occur as a result of the operative procedure.

The first chapter is an excellent review of the problems encountered with the radiological interpretation of pituitary tumours and transphenoidal surgery. The text accurately describes the nasal complications following operation (usually omitted from other descriptions) and advises on the ways of minimising these. Surprisingly, the author fails to mention the need for steroid cover during an anaeasthetic or operative procedure in these patients with potential pituitary insufficiency. There follows a rather disappointing chapter on frontal and basal tumours. The radiological examples are all based on angiography, air encephalography and early generations of CT scanning. Much information with useful advice is buried within a very detailed text which makes heavy reading. Again there is no emphasis on the need for steroid cover during operation for frontal or temporal tumours. Shunt complications bedevil us all. A chapter on the ways of minimising these provides practical advice. Perhaps the text should have included some mention of the advantages and disadvantages of the newer variable pressure valves.

The next chapter provides helpful information on spinal intramedullary tumours, incorporating a detailed description of the surgical techniques and a subsequent chapter on lumbar disc prolapse is full of gems often omitted from more standard texts. Interestingly, however, it inevitably contains controversy. I was surprised by an introductory sentence stating that "confirmation tests" (i.e. confirming the clinical findings) "will be required by the majority." Surely in this day and age, all patients should undergo at least a CT scan if not myelography? Classic root signs do not necessarily result from disc protrusion at the expected level. The "outpatient" operative procedure for disc removal will also raise some eyebrows.

The final chapter on the diagnosis of cerebral death by the editor is a model of clarity—that is all except the title. The author himself points out, the "cerebrum" may be destroyed while the brain stem remains intact and the term "brain death" or "brain stem death" seems more appropriate. The best way to practise surgery is to anticipate problems before they arise. In this way, complications are prevented and their effects if they occur are minimised. This book approaches the subject in a pragmatic manner. I am sure neurosurgeons, at all levels, and in particular trainees, will find it valuable. It should sell well despite seeming relatively expensive for its size. Perhaps another edition along the lines covering the vascular topics should be considered in the future.

KW LINDSAY


Much of the most severe chronic intractable pain seen in pain clinics is neuropathic rather than nociceptive pain and whereas mechanisms of pain with an intact nervous system have been extensively investigated, mechanisms of neuropathic pain are poorly understood, and have received much less attention.

This book is particularly concerned with these mechanisms of neuropathic pain and with treatment, but also considers peripheral nociceptive mechanisms and cancer pain, much of which has a nociceptive basis. The editor, Fields, opens with a succinct overview of pain transmission in the normal and damaged nervous system. This is an excellent introduction for the newcomer to this subject. Raja and colleagues next consider hyperalgesia and receptor sensitisation, covering both neurophysiological and chemical aspects. Devor and Rappaport review experimental peripheral nerve injury. Perhaps the single most important change to emerge from all the work on peripheral nerve injury is that damage to sensory axons frequently leads to ectopic impulse generation, and this is a likely basis for at least some of the pain experienced by patients. Banchs considers the effects of deafferentation and this is linked with a discussion of the place of the dorsal root entry zone lesion operation described by Nasholt. A prominent effect of deafferentation is disinhibition of central neurones with the development of chronic abnormal repetitive neuronal discharges. This explains the common failure of ablative surgery. More damage may not improve. A separate chapter by Watso is devoted to post herpetic neuralgia, dealing with clinical features and treatment rather than possible underlying mechanisms of pain.

The involvement of the sympathetic nervous system in peripheral nerve injury and in the obscure reflex sympathetic dystrophy syndromes is discussed in two chapters. Roberts and Kostis consider mechanisms and offer several interesting ideas but we are far from understanding these abnormal states. Payne provides a clinical description of reflex sympathetic dystrophy and considers treatment options. The frequent total failure of treatment is under-emphasised here. Astbury surveys pain in peripheral neuropathies, drawing attention to the different mechanisms.

In a masterly review, Tasker considers the place of surgery for pain, both of nociceptive and neuropathic type. Stimulation procedures in spinal cord and brain are also discussed and there is brief mention of spinal and intraventricular opiate installation. The literature is comprehensively reviewed and the author admits, with honesty, the influence of personal bias. The unpredictability of results and variability of success of the same procedure in different surgical hands are the two main messages which emerge here. Portenoy considers cancer pain, in which the multiplicity of possible causes and mechanisms is stressed and thus the need for careful clinical assessment. The final chapter, again by Portenoy deals with the drug treatment of chronic pain.

Neurologists and neurosurgeons will find much of interest and relevance to their clinical practice here. The authors have been well chosen and present difficult subjects clearly, and the book has the advantage of being fairly short. It should find a place in all departmental libraries. The book is not complete in its coverage; those wanting to find full accounts of pain of meningeval, spinal or thalamic origin will be disappointed. These topics are only briefly covered in the chapter by Tasker. Perhaps correctly, in a book of this length, the emphasis is on the more common painful neurological conditions and this is a small criticism. Overall, the book can be highly recommended.

JW SCADDING


The title of this book is misleading. It is not about neuroanatomy at all, which is what one might expect. It is a heterogeneous collection of papers presented at a conference on schizophrenia in Milan in 1987. All the papers are not even about schizophrenia. There are one on phenytoinmonia, one on eating disorders and nine (out of 24) on affective disorders. The topics covered include the genetics of depression among the Amish population in Pennsylvania, CT scan findings in schizophrenics, the description of a new battery of psychometric tests and glucose-6-phosphate dehydrogenase deficiency in psychiatry. Altogether it is a curious mixture. Equally puzzling is why it has taken three years for the book to be published, because it is not printed but an amalgam of different types of written manuscripts, a process which I had always assumed speeded up publication. More serious, though, is the fact that some of these contributions would not have passed the refereing process of a reputable journal. With five editors available one might have expected a higher standard. In fact, bypassing the refereing process is now almost the norm, so that I have come to expect that the reason why we rarely see papers of the quality of those written by German, French and British neurologists in the first