Islands is attributed to red squares (jargon for diathesis positives) males amongst the Allied troops fraternising with female islanders during the second world war—seemingly in defiance of conventional rules of gestation since many of the affected patients were born before the war.

Later, Field strays from the genetics of multiple sclerosis to embrace several other disorders under a unitary hypothesis of mem- brane 'abnormalities'. He is continuously liberally sprinkled with quotations, many unattributed, but perhaps more than any other part this passage epitomises the type of evidence on which this book's elaborate weave is judged. Finally, in support of his hypothesis, Field discusses the evidence that steroids and all forms of immunosuppression have a role in the treat- ment of multiple sclerosis and recommends instead a regimen consisting of various preparations of Naudicilles, vitamins E and C, a low animal fat diet, living in peace, tepid baths, and never swimming unaccompanied.

In addressing the question 'can multiple sclerosis be treated?' Field highlights the issue that has dismayed many neurologists dealing with distraught parents who have been advised that their family has the multiple sclerosis diathesis. He advocates Naudicille twice daily in young children increasing to six tablets after ten years and has little sympathy for negative responses—'usually professional . . . or ostrich attitude and an endorsement in medical practitioners'—to his counsel. Many readers are going to find it hard to accept the Lamarckian position that the inherited defect of myelin underlying multiple sclerosis would be corrected, and the condition eradicated, if all red circles (women with the multiple sclerosis diathesis) were to refrain from pregnancy until the red cell abnormality has been restored to normal by treatment with essential fatty acids.

When it comes to his critics, Professor Field pulls no punches. 'Alvord's opinion has . . . been as fluctuating as is the course of multiple sclerosis . . . in 1984 he was in one of his up phases of belief.' He was gratuitously at grant giving agencies and young scientists brainwashed by the dogmatic opinions of their supervisors; 'without interrogating the evidence, many clicking the hand counter, the researcher looked up to pass the time of day . . . the old man (an eminent authority on lymphocyte traffic) was expecting a high result and this [would] please him.' It may belong in a book of medical cartoons but does not illuminate a serious scientific document. A nursing officer who smoked heavily and could presumably recogni- sition herself is castigated for contaminating the E-UF system apparatus so that it had to be washed out with 1 litre of distilled water. And in an astonishing outburst, failure of the neurological community to take up the E- UF test is attributed not to its deficiencies, or any lack of sensitivity and specificity (4 false positives are described) but to a political conspiracy led by the then Secretary of the MRC (Sir John Grey) who had just resigned. Field has had to take very early departure from the MRC . . . [and closed] the only unit specifically devoted to the elucidation of mechanisms of multiple sclerosis—just in which time much damage was done and the knowledge on the advances made in recognising the multiple sclerosis diathesis were quashed'. Field then lashes out at three neurologists—Reginald Kelly, Helmut Bauer and John Walton—for incompetent handling of the facts of their muddled assessments of his work. He introduces and then names the young neurologist 'who spent 4 working days in our laboratory during which he . . . spent a bare ten minutes seeing how the cells move draw- ing the comment that one will hardly become a pianist by watching Claudio Arrau at work.' In his discussion of the epidemiological aspects of multiple sclerosis, Field poses at 'a world famous children's hospital in London and an equally famous hospital for nervous disease' (can anybody help with the identities?) where a case of multiple sclerosis has not been identified. He is pieced diagnosis followed up by clinical examination and family E-UF studies. The author warms up the final two chapters with a further outburst against grant- ing agencies—most of his old enemy the ARC—and goes over the same Kelly, Bauer, Walton routine, adding a fourth muskateer (David Bates). Those who carry out clinical trials receive a severe wagging for employing defective methodology but some of Field's ideas are bizarre: the proper controls are 'a therapeutic intervention for a clinical trial of patients with multiple sclerosis is (sic) those with neurophilips, massive gliomata, advanced arteriosclerosis and alcoholism'. Some may also find exec- utive the author's gratuitous references to the book's publications and entries in Citation Classics.

Lively debate, refuting dogs that has not illuminated difficult problems, and adven- turous thinking are essential for scientific progress and those who break new ground often have to be persistent in the face of criticism. EJ Field has made observations in the laboratory from which he has constructed an hypothesis which he believes to be correct; others do not share his conviction. The treatment Field recommends seems to be harmless but in negotiating the difficult inter- face between research and clinical practice, the hopes and fears of vulnerable individuals must never be exploited.

ALASTAIR COMPTON


This is a multi-authored book, sixth in the Wiley Series on Studies in Child Psychiatry, edited by two American psychologists. I can say that I picked up this book with much enthusiasm for, with the current explosion of medical publishing, numerous volumes of this sort exist. These are of limited (if any) value acting mainly to clutter libraries and service bibliographies. Such prejudice proved unjust; this book is very useful; most chapters are well written and cover a range of subjects beyond the usual melange. There are no major parts to the book. First, are medially orientated chapters, including excellent chapters on the classification of childhood epilepsies by Dreifuss, and by Zelinski on the associations of childhood epilepsy and mental retardation. This latter chapter is exceptionally clear and interesting on an often murky and confusing subject. Second, are chapters concerned with neuropsychological functioning, including aca- demic achievement, cognitive function and psychological prognosis. Third, are chapters concerned with the effects of epilep- sion on behaviour and social adjustment. David Taylor is good on the difference between epilepsy—the illness, and epilepsy —the predicament. The predicament encompasses such psychosocial constructs as pseudo-death, hyperpaedophilia, and parox- ysmal displays; and (as is characteristic of the author) this is original and stimulating, and is followed by an excellent exposition of the sociology of epilepsy. Finally, there are chapters concerned with treatment, here the widest sense incorporating psychological and vocational intervention (Schotte and DuBois), as well as surgery (Wylie). Indeed, the emphasis on psychology and social and wider societal issues is a common and impressive theme. The editors are to be congratulated on a well conceived and tightly edited volume, and is also refreshing original. ED SHORVON


This volume dedicated to Nerve Growth Factors represents a further excellent con- tribution to the IBRO Handbook Series. The hardbacked book contains 17 chapters written by leading neuroscientists. The chapters cover a wide range of techniques which are currently available for the investigation of the role and significance of Nerve Growth Factors in the nervous system. Fittingly, the foreword, by Professor LoVerde-Montalenti ack- nowledges the wealth of sophisticated methods now available and challenges the present generation to reveal novel aspects of the neurobiology of nerve growth factors. The major focus of the book is on nerve growth factor, although specific chapters deal with other growth factors such as ciliary neurotrophic factors and neuroleukin. An overview of the techniques described offer a general applicability for the investigation of other trophic factors. The book is designed for use as a laboratory manual. The volume is divided into six major sections which deal with methodological aspects of purification and bioassay systems for nerve growth fac- tors, histological localisation of nerve growth factor and its mRNA, administration of nerve growth factor and antibodies to nerve growth factor, molecular biological techniques for the structural analysis and assay of nerve growth factor and a final section dedicated to receptor technologies, namely purification, characterisation and cloning. An introduction to each of these subjects is given. This is well referenced with background reading. The remainder of each chapter is largely devoted to a compre- hensive description of the techniques that are covered. The chapters also include appendices. In many instances to add clarification to specific points and technical details are nicely illustrated with black and white photographs and/or line drawings. Perhaps an indication of the usefulness of this book is that on reading each of the chapters, even if one is not conversant with the method one would feel confident to try the method.

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The chapter on neuroleukin was particularly informative. Chapter 4 also merits a mention for the clear manner in which dissection of ganglia, preparation of collagen gels and nerve growth factor activity tests are described. Various culture systems (retinal, PC12 and chromaffin cells) and their use for bioassay of growth factors were detailed in chapters 6-8. One chapter is devoted to histological and neuronal effects of nerve growth factor. The authors demonstrate how to localise it at both light and electron microscopy levels. The second part of this contribution details the localisation of nerve growth factor mRNA using in situ hybridisation and non-isotopic labelled cRNA and cDNA probes by means of easy to follow protocols. Chapter 10 provides interesting reading on the various merits of in vivo administration of growth factor and includes useful tables which summarise the known effects using various regimes. Explicit protocols are given which possibly have a general applicability for other mRNAs which occur in low copy numbers. The book thus brings together a wide range of up to date techniques. It is excellent value for money and would be a useful guide for any researcher embarking on a new field of study on nerve growth factors.

JULIA M POLAK


A textless book, it looks very attractive and, more important, it is produced with practicality in mind. As small and compact as an atlas can be, in hard cover for hard wear and wire-bound for opening for quick use. Full page but rather miniature EEGs, 200 of them, are well reproduced. The target seems to be easily recognisable classical patterns and this is admirably achieved; among the very few exceptions are the 14/6 positive spics which are, even to the experts, only just identifiable. This atlas is divided into nine chapters including three on epilepsy—ictal status. This latter is particularly impressive as sequences are reproduced over several consecutive pages. The first chapter on normal EEGs, awake, asleep and during overbreathing gives a fair account of electrical normality in adults. A representative sample of normal children was clearly not intended; then why select just two examples, of a 9-month-old and a 3-year-old? Would it have been perhaps better if these were also omitted? The chapter on artefacts is excellent; so is the one on coma. Chapter 8 is called “Occasionally encountered patterns of unknown or non-specific clinical significance” and the last one on “various neurological and medical conditions”, two chapters clearly meant and useful for the sophisticated in contrast to some of the previous chapters which display classical examples for the uninstructed. In this discrepancy lies one of the flaws of the book; it seems that the authors did not define clearly in advance the book’s prospective readership or more precisely its potential audience. In order to sample the people’s opinion—without poll tax—I showed the book in the several EEG departments I am connected with. The first encounter with the atlas induced eyes to light up, smiles to appear and general eagerness to browse through it. In line with my own initial thoughts, the technicians felt it may be very useful for teaching students, technical or medical. This opinion held true until tested. During a series of EEG seminars the medical students became interested and, yes, even marginally excited when exposed to real life EEGs; however they remained less impressed when looking at similar examples of abnormalities or artefacts in the Guberman-Couture atlas. Atlas, and remarked that only a few could simultaneously be near enough to see them. Generations of EEG people considered the Guberman atlas to be the ‘Bible Revisited’, and it conveys a sense of authentic participation. By omitting the life size EEG pages the Bible Revisited lost its feel of authenticity but gained from its more user-friendly format.

MARTA ELIAN


Neurologists are most concerned when they can clearly diagnose a well demonstrated physical disorder. Unfortunately this situation is relatively uncommon. Up to a third of outpatient referrals are difficult to diagnose at all in clear ‘organic’ terms. Even when a disorder such as multiple sclerosis or Parkinson’s Disease does exist thelimp poods of neurological diagnosis are frequently disturbed by waves of psychological and behavioural disorder. The diagnosis and management of chronic fatigue states is an extreme example of these problems. The physician may choose to ignore these issues. This solves his own problem but rarely that of the patient. Accepting the burden of a three-dimensional approach to diagnosis: physical, psychological and behavioural requires the ability to set aside extra time for the individual patient and the resources to cope with the results of opening the Pandora’s box of a person’s feelings.

This multi-author volume aims to help the physician to deal more effectively with these issues. As the editors comment in their introduction, the format inevitably leads to patchiness, some reduplication and a variable standard. The physician reader should avoid concentrating on these defects for the positive aspects of the book are many and varied. Out of twenty chapters, about half have direct or indirect relevance to neurological practice, including such general topics as chronic pain, management of cancer, death and dying, distressing hospital procedures and liaison psychiatry as well as more specific neurological topics such as head injury, stroke, facial pain and headache. The small chapter on neurological disorders as such covers only MS, Parkinson’s Disease and root pain. It deserves expansion in any future editions of the book. The lack of any reference to epilepsy and pseudoseizures is disappointing and motor neuron disease, the most distressing neurological disorder should also have been covered.

Although one of the editors mentions an intimate relationship between neurologists and psychiatrists, this is largely historical and has not been evident of late. Inadequate training in and experience of the other’s discipline is the norm. Poor communication and confusing terminology are the result. Hopefully this volume will help to remedy the problem, in one direction at least.

RA METCALFE


The Cavernous Sinus is one of the Neurosurgical microanatomical frontiers that has begun to yield to exploration by pioneers such as Parkinson and, more recently Dolenc and his colleagues. Although the approaches to the cavernous sinuses were summarised comprehensively in 1987 in "The Cavernous Sinus" (Ed. VV Dolenc) but there remained the problem for the less experienced, and those familiar with only a minfield into practice. Professor Dolenc has now provided a dissection manual based on injected fresh cadaver specimens, operative photographs and line diagrams to illustrate the anatomy. It is the purpose of the book to detail the skin, bone, muscles and vessels of the orbit and head. The first 137 pages are devoted to anatomy and the detailed charts. The surgical approach to the cavernous sinus is described, followed by application to carotid ophthalmic aneurysms, intracavernous vascular lesions and tumours and, en passant, to basilar tip aneurysms. This rather expensive dissection manual will be of considerable assistance to neurosurgeons contemplating such surgery and would be best read alongside one’s own effort at dissecting cadaver specimens. However, I was disappointed not to see any discussion of mortality, morbidity or cosmetic results of this type of surgery, nor the use of simple cerebral blood flow probes to define when an intracavernous carotid lesion can simply be trapped and sacrificed. In the second edition, the line diagrams should be improved—at present they are not as aesthetically appealing nor as readily understood as those, for example, in Sugita’s Microneurosurgical Atlas. It would also be helpful to include some operative photographs of basilar aneurysms rather than diagrams alone. This manual will need to be read in conjunction with the 1987 publication on the cavernous sinus: both will serve to stimulate considerable interest in refining the indications for this demanding surgical technique.

JD PICKARD

SHORT NOTICES
