patients with chronic lumbosacral disc diseases as described in our study. We think there are important differences in pathophysiology. So far the testing of neuropathic conditions with heat pain stimulation has rarely resulted in strong evidence for hyperalgesic or hyperpathic changes. In a very recent publication,5 however, Wall gave a great number of examples of hyperalgesic changes produced by different kinds of neuropathies and he also pointed to the fact that a non-selective blockade of peripheral afferent impulses may lead to a "partial disinhibition" and, in consequence, to hyperalgesia. This is what seemed to have happened in our patients with chronic lumbosacral disc disease. That such an event might produce effects at the contralateral side appears not too speculative when the results of contralateral TENS-effects cited in our paper are considered. Taken together, we still believe that the conclusions drawn from the pilot study described are justified.

Finally, we want to answer the questions raised by Bowsher. Two patients were affected at the L5 root affection and 7 at the S1 root. We measured the thresholds at the medial (L5) and lateral (S1) side of the dorsum pedis, where the peripheral dermatomes are to be found, and verified the location of the dermatomes in the preceding neurogical examination. As Bowsher expected, the dermatones do normally not differ in warmth and pain sensitivity.

S LAUTENBACHER

S LAUTENBACHER Max Planck Institut für Psychiatrie, Kraepelinstr 10, D-8000 Munich, Germany

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NOTICES

Tropical Neurology Symposium, London, 25 March 1993

The first Tropical Neurology symposium to take place in the United Kingdom will be held at Manson House, 26 Portland Place, London. It will be co-sponsored by the Tropical Neurology Research Group of the World Federation of Neurology jointly with the Royal Society of Tropical Medicine and Hygiene. It will be chaired by Lord Walton, Professor D Warrell, Professor N Wadia and Dr CM Poser.

Further details from: The Administrator, Royal Society of Tropical Medicine and Hygiene, Manson House, 26 Portland Place, London W1N 4EY. Telephone: 071-580 2127; Fax: 071-436 1389.

First Congress of the International Stereotactic Radiosurgery Society, Stockholm, Sweden

This congress will be held from 16-19 June 1993. Further information from The Con-

gress Secretariat ISRS 1993, Stockholm Convention Bureau, PO Box 6911, S-102 38 Stockholm, Sweden.

Ciba-Geigy \cdot ILAE \cdot IBE \cdot Epileptology Prize

Ciba-Geigy has agreed with the International League Against Epilepsy (ILAE) and the International Bureau for Epilepsy (IBE) to establish a new prize of SFr. 20.000. to be awarded in recognition of outstanding achievement in the field of epilepsy. The prize is designed to encourage applied human research in epilepsy. By cooperating with both ILAE and IBE, Ciba-Geigy emphasises that application for the prize is open to candidates from all fields of applied research.

Anyone outside the pharmaceutical industry who considers that he or she has made a significant scientific contribution in the field of epilepsy may compete for the prize. Deadline for submission is 15 January 1993.

Entries for the prize will be judged by an Adjudicatory Panel consisting of the Presidents and one further delegate each of ILAE and IBE, and an independent chairman.

The prize will be awarded at the opening ceremony of the International Epilepsy Congresses (for the first time in Oslo on 3 July 1993, and subsequently in Sydney in 1995).

For further details and a set of the rules and application forms, those interested should write to Mrs. G Haldemann, Ciba-Geigy Limited, CH-4002 Basel, Switzerland.

Correction

In the article by M Manford and SD Shorvon, Prolonged sensory or visceral symp-

toms: an under-diagnosed form of nonconvulsive focal (simple partial) status epilepticus (August 1992 issue of the jour-

nal), the figure was incorrect. The figure should have been as follows:

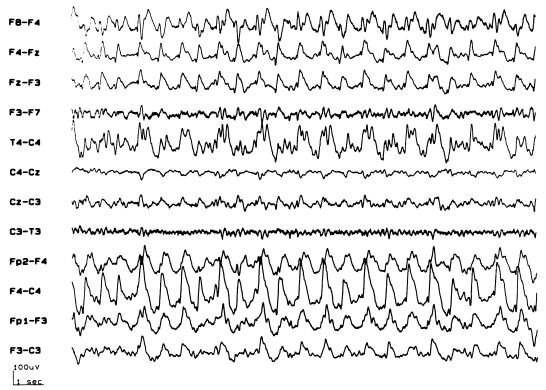


Figure Case 1: Standard 10–20 scalp EEG during a prolonged epigastric sensation, showing rhythmical slow activity, predominantly in the right frontocentral leads.

1224 Book reviews

BOOK REVIEWS

All titles reviewed here are available from the BMJ Bookshop, PO Box 295, London WC1H 9TE. Prices include postage in the United Kingdom and for members of the British Forces Overseas, but overseas customers should add £2 per item for postage and packing. Payment can be made by cheque in sterling drawn on a United Kingdom bank, or by credit card (Mastercard, Visa or American Express) stating card number, expiratory date, and your full name.

Exploring Brain Functional Anatomy with Positron Tomography. Ciba Foundation Symposium 163. Chairman: R PORTER (Pp 287; Price £43.50) 1991. Chichester, John Wiley & Sons. ISBN 0-471-92970-0.

The title is exactly right - this is an exploration. PET is a highly specialised subject, with few experts. Here you can meet most of them, and they spend half their time arguing. Good editing means that the prolonged discussions are very readable, almost audible. Even the individual tones of voice of known colleagues have been caught.

Seven of the fourteen chapters are about methods, which still excite controversy, and the others describe results. A study of stroke recovery compares blood flow changes accompanying movement of the unaffected and the recovered stroke hand. Contralateral cerebral and ipsilateral cerebellar activation accompany the former, but during the latter blood flow increases bilaterally and in novel areas of cortex, especially area 40. In a chapter on the relevance of the frontal lobe to psychosis attention is focused on area 46 in the dorsolateral prefrontal cortex, which is activated during creative psychomotor tasks. Defective function here may underlie the stereotyped behaviour often seen in schizophrenia. Other chapters deal with the somatosensory system, visual attention, memory, cognition and language activation. All of these are very readable, as are the discussions of the methods chapters, which are otherwise hard going. The sketch maps for this exploration are being steadily filled in.

N J LEGG

Clinical Neuro-Surgery Vol. 38 (CONGRESS OF NEUROLOGICAL SURGEONS) (Pp 666; Price £50.00). 1992. London, Williams & Wilkins Ltd. ISBN 0-683-02035-8.

There is a distinct subclass of medical publications which lies somewhere between a journal and a monograph. These publications are variously organized. Sometimes they have a single subject and constitute a valuable reference; sometimes they present more of the quality of a magazine with brief reference to enormous numbers of topics, for example, the Year Books.

Clinical Neurosurgery belongs to this group. This volume is subtitled "Proceedings of the Congress Neurological Surgeons; of Los Angeles, California, 1990." It is certainly much better than the average proceedings of a Congress. Many of the articles in here are

State of the Art descriptions, so for instance the status of MRI. Many of the review articles are excellent but others are too short to provide useful overall value. The section on spinal infections, for instance, is too brief to even remotely approach the comprehensive. Another criticism of books of this kind is that often they are not certain what audience they are addressing. The introduction to radiosurgery for instance is suitable for medical students whereas the sections on radiosurgery are more advanced. Nevertheless they have little value to anyone already practising it, since such surgeons have already made their decisions about the apparatus and so on, such that technical details of other peoples machines have little value. Their linac or proton beam energies and radiation sources are already in place and the purpose of their publications often seems to be to advertise their own systems.

The habit of lionising particular neurosurgeons looks strange when first picking up a book such as this. There seems little value in listing Professor C B Wilson's 480 publications and although three chapters are of excellent quality it makes the book seem a little unbalanced. On looking at all of the issues of Clinical Neurosurgery on the library shelves, however, the value of this longstanding publication seems much greater. It does indeed offer a splendid overview of the development of neurosurgery over the last 40 years since this series started off with Olivecrona as the honoured guest. The greatest value of this volume will be to grace library shelves and form part of such a collection whereas others of this type such as for example "Advances and technical standards in Neurosurgery", or the specialised volumes of "Neurosurgical Clinics of North America" which are organized by subject will have a greater value as purchases for the individual neurosurgeon advancing a particular inter-

BERNARD WILLIAMS

Handbook of Neurological Lists. By L M BRASS and P K STYS (Pp 397; Price: £22-95.) 1991. Edinburgh: Churchill Livingstone. ISBN 0-443-08696-6.

I have always been somewhat sceptical about the intrinsic value of books of disease lists, be they general or specific. The main reason for this is that such lists seldom emphasise the relative importance and significance of particular causes of symptoms or syndromes, and tend to be more concerned with detail than clinical utility. In clinical practice it is probably more important to be very familiar with 6 common causes of dementia than vaguely aware of 20 assorted causes, although rare treatable causes must be known.

I found it difficult not to be impressed with the Handbook of Neurological Lists compiled by Drs L Brass and P K Stys, both neurologists at Yale. Their approach is logical and is to base their standard classification under 11 different headings such as vascular, structural, metabolic, infectious etc. This provides a "standard template of differential diagnosis". The book is remarkably comprehensive, covering normal neuroanatomy and neurophysiology as well as neurological dis-

ease, and I could detect no major omissions. Neurological topics are considered very broadly and are closely related to general medical conditions of relevance.

There are 3 interrelated ways in which this book should prove useful to both students and clinicians. First, it will function as a general neurological aide-memoire, especially useful to the examination student. Second, because of its comprehensive nature, it should help to widen the neurological differential diagnostic ability of all those who study it. Third, because of the classification system and detail, it should help the clinician to organise his or her thoughts regarding neurological diagnosis, thereby assisting in problem-solving in the real clinical situation. Overall, the authors have performed a good job, and this book should prove to be a useful addition to the working libraries of students, general physicians and neurologists.

PETER GE KENNEDY

The Amygdala: Neurobiological Aspects of Emotion, Memory, and Mental Dysfunction. Edited by J P AGGLETON (Pp 615; Price: \$125.00). 1992. New York, Wiley-Liss. ISBN 0-471-56129-0.

The Amygdala is a structure receiving increasing neuroscientific and clinical attention since it appears to stand at the interface between memory and affect. This large reference volume brings together a series of scholarly papers devoted to the neuronatomy, neurophysiology, neurochemistry and experimental psychological studies in animals. In the interesting clinical papers contributions are made to the role of the amygdala in Alzheimer's disease, schizophrenia and epilepsy. The volume is likely to appeal to a range of basic scientists in the field since it represents an up to date inter-disciplinary group of studies contained within a single text.

D NEARY

The End of Life in Medical Practice. By
THE NETHERLANDS CENTRAL BUREAU OF
STATISTICS (Pp 78; Price: hfl31.50). 1992.
The Hague, SDU/Publishers. ISBN
903571375-3.

"The end of life in medical practice" by the Netherlands Central Bureau of Statistics, describes the findings of a survey amongst physicians about a sample of cases of death.

The aim was to measure medical decisions and actions (including withholding and withdrawal of treatment) around the end of life of the patient. This can include cases of euthanasia. Great care has been taken to keep the interview, analysis and presentation as neural and valuefree as possible. In this way this publication could best serve to give some factual input to all parties in a discussion which is often centered around principles.

The publication is a translation from the Dutch original. As the issues around euthanasia are the subject of discussion in many parts of the world and quantitative data are very scarce, the findings could serve the interests of physicians in many countries.

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The Editor is grateful to the following who assisted in the assessment of papers during the past year.

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