

relatively "pure" articulatory dyspraxia, the responsible lesion was smaller than in these other case reports. The traumatic haemorrhage destroyed a small area of the inferior aspect of the left precentral gyrus leading to scarring and shrinkage of the Rolandic operculum by the time the second scan was performed two years later. It is impossible to conclude whether damage to the cortex alone was responsible for the disorder or whether subcortical trauma led to additional cortical disconnection, particularly in view of the inner "dumb-bell" area of haemorrhage seen on the initial scan. Presumably, there is a relatively small collection of neurons responsible for the organisation of articulation in the dominant precentral gyrus close to, but distinct from, Broca's area which when damaged produces the curious syndrome of articulatory dyspraxia.

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## 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, expiry date, and your full name.

**The New Genetics of Mental Illness.** Edited by P MCGUFFIN AND R MURRAY. (Pp 304; Price £35.00.) 1991. Oxford, Butterworth-Heinemann. ISBN 0-7506-0029-2.

This is an important and timely book. The contributors are distinguished in their fields and it ranges over a wide spectrum of

disorders. The early chapters attempt to explain the complexities of modern genetics but without some background knowledge they would be difficult to digest. Once over this initial barrier, the enthusiasm begins to break through and large amounts of data are presented very clearly. Chapter four by Professor J H Edwards encapsulates the underlying message of the book. Modern genetic methods are extremely powerful when dealing with Mendelian inheritance. They rapidly lose focus and power when this is not the case. Unfortunately, this is not so with the majority of psychiatric disorders so that vast and complex studies are needed to make even small advances. Uncritical hopes of single point mutations cannot be justified.

Psychiatry needs some proven aetiological substrate. Every new advance is pursued with vigour and hope. Every new hormone assay, every new immunological test, every new imaging technique is applied to cohorts of psychiatric patients. Now we have the new genetics and it would be wonderful if it provided us with some markers to underpin our diagnoses. This book brings us down to earth and explains how unlikely that is. Abnormalities of mind remain tough nuts to crack.

This is a recommended text, especially for dewy eyed trainees hoping to net a Nobel prize with a bit of genetic research.

CM TONKS

**Migraine and Other Headaches: The Vascular Mechanisms.** Vol 1. *Frontiers in Headache Research Series*. Edited by JES OLESEN. (Pp 358; Price \$112.50.) New York, Raven Press. 1991. ISBN 0 88167 795 7.

Research in migraine and new drugs to combat it, progress apace. Olesen has gathered a large number of authorities to produce a highly technical book devoted mainly to cerebral blood flow studies. It is clear there remain serious difficulties in the methods applied; different workers appear to obtain divergent results. Transcranial Doppler which shows velocity and by inference flow in the basal arteries now complements both <sup>133</sup>Xenon tests of rCBF, and Tc-HMPAO tracer applied to SPECT studies of static tissue flow. The results are confusing. The editor's early work is confirmed: regional oligoemia in the occipital lobe(s), its failure to conform to arterial territories, its slow spread which usually outlasts the aura, and its confinement to classic migraine with normal results in common migraine. Cluster headache shows normal cerebral flow but dilatation of basal arteries. There is much more of interest, but interpretation is clouded by uncertainties, some of clinical definition, some technical.

Although the publishers and editor make no mention of a conference, the book reads very much like one. Each section ends with a summary by one of the experts, and one (Nyberg-Hansen) lets slip "a recent study reported at the symposium..." but to be fair, he does not say which one. If this is a symposium in print, why is this not plainly stated? If not, then the editing, writing and format should be upbraided.

Olesen's book is a valuable source of contemporaneous data for migraine researchers.

JMS PEARCE

**The Psychoses of Epilepsy.** By MICHAEL R TRIMBLE. (Pp 210; Price \$77.50.) New York, Raven Press, 1991. ISBN 0 88167 739 6

Very few subjects in neuropsychiatry have succeeded in exerting such a sustained hold on the clinical imagination as *The Psychoses of Epilepsy*; while among psychiatrists in particular this group of disorders has taken on a new significance in the search for an organic model for psychosis. Publication of this book is therefore timely.

The first half of the book examines the existing classifications for the epilepsies and for the psychoses and provides a summary description of limbic system structure and function. Aetiology, phenomenology and treatment of the inter-ictal, post-ictal and post-operative psychoses are dealt with in the second half. The clinical sections in particular are densely referenced and the book is a valuable resource for those wishing to pursue studies in this area. Methodologically, many of the studies fall rather short of the mark which may explain why so many of the controversies—forced normalisation, laterality of focus and so on—continue to rage unabated. The author's concluding summaries at the end of each section, lucid and balanced, are therefore most welcome. The book is not without its blemishes. The burning of the midnight candle is evident in a liberal sprinkling of factual errors. The reviewer was grateful to find mention of several of his papers but dismayed to encounter sizeable numerical mis-quotations in two of them. This aside, the book can be confidently recommended to those with an interest in understanding the organic contribution to abnormal experience and behaviour.

BK TOONE

**Transient Amnesia: Clinical and Neuropsychological Aspects.** Major Problems in Neurology Series 24. By JOHN R HODGES. (Pp 161; Price: £25.00.) London, W B Saunders & Co. 1991. ISBN-0-7020-1553-9.

This monograph begins with a review of the literature on the clinical syndrome of Transient Global Amnesia (TGA) and a discussion of the aetiological theories for this disorder. It is immediately apparent that many of the previously published series have been heterogeneous, containing not only patients with the distinctive disorder described by Fisher and Adams but also patients with additional, and atypical, clinical features suggesting a different aetiology. A description of the author's personal series of 114 patients with TGA begins by defining strict diagnostic criteria. The clinical features and epidemiology of the syndrome are reviewed including several descriptions of the author's personal observations of patients during attacks. The convincing epidemiological evidence against a thrombo-embolic cause for typical TGA is presented and the relationship between migraine and TGA discussed. The author concludes that TGA fulfilling his diagnostic criteria is a benign disorder with a good prognosis and a low risk of recurrence except in a small subgroup of patients who subsequently develop epilepsy.

In contrast, TGA with atypical features has a poorer prognosis and is thought frequently to be a manifestation of cerebrovascular dis-

ease. There are useful sections on the differential diagnosis, management and investigation of transient amnesia and an extensive chapter on neuropsychological testing during and after TGA which would be helpful to psychologists, interested clinicians and research workers.

There can be few clinicians who have such extensive personal experience of TGA as Dr Hodges. I enjoyed this book, which must now be the definitive work on the subject, and I would recommend it to anyone seeking information on this interesting disorder.

TJ WALLS

**The Molecular Pathology of Alcoholism Molecular Medicine Series.** Edited by T NORMAN PALMER. (Pp 293; Price £22.50.) 1991. Oxford, Oxford University Press. ISBN 0 19 261903 9.

The refined pleasures and social nuances of the discriminating enjoyment of fine wines or carefully produced malt whiskies contrast badly with the scene of organs and minds ravaged by alcohol excess which daily populate our wards. Simplistic behavioural theories have long been insufficient to explain the progress (descent?) to alcohol abuse, and the differential susceptibility of individuals to damage by similar amounts of alcohol remains a puzzle. The explanation must be genetic and biochemical and this timely book seeks to explore the current state of knowledge.

Overall, it succeeds in its aim. Unfortunately the first chapter (more than one fifth of the book) is unhelpful and redundant, seeking but failing to give a concise account of the clinical manifestations of alcoholism. Things improve hereafter, with Charles Lieber, the doyen of liver alcohol researchers, neatly reviewing the substantial corpus of knowledge about alcoholic disease of the liver up to 1990. Alcohol and aldehyde dehydrogenases, so central to current thinking about reasons for, as well as mechanisms of, alcohol abuse, are efficiently described in a breathlessly up to date chapter from the Karolinska and Pittsburgh. This leads to a description of the molecular genetics of the enzymes, and a more general discussion of genetic factors in alcoholism. A somewhat exotic account of alcoholism in Orientals and South American Indians highlights some possible genetic aspects in these races, particularly the possibility that an inherited low ALDH<sub>2</sub> level may lead to a greater flushing response to alcohol and thus aversion. However, the genetic discussion is entirely about the likelihood of becoming an alcoholic and does not deal with the equally important topic of individual variation of susceptibility to specific organ damage.

The CNS chapter is authoritatively written by John Littleton of King's College describing clearly the hydrophobic effects of alcohol on lipid molecules, the changes in Cl<sup>-</sup> flux through GABA<sub>A</sub> receptors and inhibition of Ca<sup>++</sup> channels and the way these may lead to the well known central nervous effects of alcohol. Nothing is said about mechanisms of peripheral nerve damage.

This is a good account of a rapidly moving field. Anyone who wants to be up to date should read it.

JOHN R BENNETT

**Advances and Technical Standards in Neurosurgery.** Vol 18. Editor in Chief: L SYMON. (Pp 209; Price DM 168.00) 1991. Wien, Springer-Verlag. ISBN 3-211-82243-7.

Volume 18 of this add-on series consists of five chapters. The first of two in "Advances" discusses the future of robotics in neurosurgery from the Grenoble Group, and is, frankly, disappointing. Too much detail is given of stereotactic theory, and the many precautions taken when the authors robotic system is in use. Little space is given to discussing the future. The second chapter in "Advances" discusses the medical management of subarachnoid haemorrhage. It is useful, clear and concise, and also has an excellent reference section.

The final three chapters deal with technical standards in neurosurgery. Professor Yasargil describes his unilateral partial hemilaminectomy approach to the removal of spinal tumours, but does not show a clear advantage over the suspension laminoplasty. The second chapter discusses the primary transportation of head injuries in Germany, and is a fascinating account of how a wealthy country deals with this difficult problem. Helicopter ambulances are expected to arrive at the road side within five to twenty-five minutes of the injury, and operate over fifty kilometres. The final chapter describes the current status of implanted drug delivery systems and their applications, with particular reference to Baclofen and Morphine. The author has wide experience of the two current market leaders. No mention is given of costs which limit the use in the NHS of the expensive, but excellent Infusaid system. Otherwise this is a very useful chapter.

MICHAEL POWELL

**Cluster Headache Syndrome.** Major Problems in Neurology Vol. 23. By OTTAR SJAASTAD. (Pp 429; Price £45.00.) 1991. London, WB Saunders Co. Ltd. ISBN 0 7020 1554 7.

This is a very unusual book and represents one man's interest in a difficult and intriguing problem. It is nearly 400 pages long and contains over 900 references. The book is divided into four chapters. In the first, the classification and diagnosis of the cluster headache syndrome is discussed. The second chapter is devoted to episodic cluster headache, the third to chronic cluster headache and the fourth to chronic paroxysmal hemicrania. This last chapter is long, 100 pages, and includes everything that is known or postulated about chronic paroxysmal hemicrania. This is a very unusual condition the author having only nine patients in his series with a total of 84 cases reported throughout the world some of which are not fully documented. The diagnosis of pain syndromes presents great difficulty and in the absence of major physical signs the diagnosis must rest mainly on the history. Professor Sjaastad has used various methods for assessing symptoms and signs including techniques such as dynamic tonometry, corneal temperature recordings and pupillometry. He describes these tests in detail. In the case of chronic paroxysmal hemicrania extensive studies have been done on the patients available, but due to the rarity of the syndrome most of the observations have been done on

only a few cases in some instances on only two or three patients.

In the section on treatment of cluster headaches he gives a good account of all the treatments available which is summed up in table 2-18 and he emphasises the need for prophylactic treatment as well as for attack therapy. He points out that if the attack is short lasting, i.e. 20-25 minutes the therapeutic treatment can only be administered after approximately 5 minutes and if it does not take effect for 10-20 minutes little can be achieved by giving the remedy. One interesting feature of chronic paroxysmal hemicrania is that the response to Indomethacin is one of the diagnostic features.

This is a useful book for headache specialists who are interested in the cluster headache syndromes but the information given is so detailed that unless the reader knows something of the field some of the writer's arguments may be difficult to follow. It does however give all the information at present available on this complicated syndrome.

MARCIA WILKINSON

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## SHORT NOTICES

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**Neuropsychology of Aggression. Foundations of Neuropsychology Series.** Edited by J S MILNER. Series Editor B P Uzzell. (Pp 193; Price Dfl205.00, US\$90.00, UK£62.25.) 1991. Dordrecht, Kluwer Academic Publishers. ISBN-0-79231-245-7.

**Deafferentation Pain Syndromes: Pathophysiology and Treatment (Advances in Pain Research and Therapy, Vol 19).** Edited by B S NASHOLD, JR AND J OVELMEN-LEVITT. (Pp 351; Price \$122.50.) 1991. New York, Raven Press. ISBN 0-88167-823-6.

**Culturing Nerve Cells.** Edited by G BANKER AND K GOSLIN. (Pp 453; Price £44.95.) 1991. London, The MIT Press. ISBN 0-262-02320-2.

**Disorders of Peripheral Nerves. Edition 2 Contemporary Neurology Series.** By H H SCHAUMBURG, A R BERGER AND P K THOMAS. (Pp 348; Price £54.00.) 1991. Philadelphia, F A Davis Co. UK Distrib: London, Williams & Wilkins Ltd. ISBN 0 8036 7734 0.

The second edition of this established authoritative work includes three new chapters: Diagnosis and Assessment, Rare and Poorly Validated Neuropathies, and Rehabilitation in Peripheral Neuropathies. AIDS and Lyme disease are other additions in this updated text which is the definitive work of manageable size.