than the Spanish case. The EEG, normal for background activity, did not differ from an EEG of primary idiopathic generalized myoclonic epilepsy and the patient had had only one isolated myoclonic seizure of the upper arm.

Rubio et al. have confirmed our reported data and it is interesting that the less aggressive skin and muscle biopsies are diagnostic in the early stages of the disease.

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Devic’s neuromyelitis optica and Schilder’s myelinoclastic diffuse sclerosis

I read with interest the article by Hainfellner et al. reporting the occurrence of Devic’s neuromyelitis optica and Schilder’s myelinoclastic diffuse sclerosis. I was surprised to find no information about anti-DNA antibodies or complement levels. Furthermore it was stated that the erythrocyte sedimentation rate was 27 mm in the first hour and that necropsy revealed perivascular lymphoid cell infiltrates of varying prominence. These findings, including the observation of cerebrospinal fluid immunoglobulin abnormalities, can be seen in systemic lupus erythematosus (SLE). It is known that SLE may induce Devic’s syndrome and may lead to a false diagnosis of demyelinating disease, especially when systemic manifestations of the disease are not yet present.1 I followed a patient with SLE and Devic’s syndrome who was reported elsewhere. What are the arguments against SLE being the cause of the disease observed in the patient reported by Hainfellner et al.

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Neuropsychology of the Amnesic Syndrome (Brain Damage, Behaviour, and Cognitive S 1...Neuropsychology of the Amnesic Syndrome (Brain Damage, Behaviour, and Cognitive S 1...Neuropsychology of the Amnesic Syndrome (Brain Damage, Behaviour, and Cognitive S 1...

This multi authored book follows the 1st edition in 1987. The contributors are from a number of countries and generally repre- sent experts in their particular subjects. The book is one third longer than the previous edition and a number of chapters are writ- ten by new authors. The layout of the book differs from the usual electromyographic text, with subject headings such as central electromyography and tremor, in the first chapters, before the first chapter on diseases of the peripheral nervous system (chapter seven).

There are particular subjects discussed in the book which are well written and of great interest such as positive and negative aspects of neurofiber dysfunction, automaticity in atypical motor neu- rone diseases, ischaemic neuropathy and critical care neuropathy. A number of the chapters contain normal values.

This monograph is well balanced for a multi-authored text. There are definite advantages in recruiting new authors for different editions as it provides a fresh approach to the problems discussed rather than minimal updating which all too fre- quently occurs. The illustrations are well produced and the chapters adequately referred. The book functions as a reference book rather than as a manual for novices. The authors have produced an excellent book which is well indexed and easy to han- dle; it is highly recommended.


The study of the neural basis of vision is one of the fastest growing areas in neuro- science yet there are surprisingly few texts written for senior undergraduates and post-graduates in the basic and clinical neuro- sciences. This book, originally published in French by the authors in 1987, has been expertly translated by Dr R. H. Kay and possesses none of the usual idiosyncratic language usage which is usually associated with such translations. The book is divided into five sections which cover the structure and function of the retina, the physical characteristics of visual stimuli, the psychophysical laws of visual sensation, genesis and elaboration of signals in the retina, and mechanisms in the central visual pathways.

The text, which is clearly and logically written, is supplemented by almost two hundred and fifty illustrations, usually from the original literature. However one of the slightly irritating features of the book is an inconsistent approach to giving references to support statements. At this level it is obviously inappropriate to overburden the text with excessive citations but some important areas e.g. cortical colour vision are surprisingly bereft of citations, whereas others e.g. cortical motion processing, abound. In future editions sections might usefully end with lists of key original references and reviews. Because of the inevitable delay due to translation the references which are quoted extend only to the mid 1980's.

Although the main text deals with mammals a useful comparative approach is provided by the numerous short sections summarising data from non-mammalian species. This is particularly illuminating in the section on cortical visual processing.

This book would therefore serve as a useful starting point for undergraduates taking courses in visual neuroscience, psychophysics or perception. Graduate stu- dents in these areas will probably require more advance texts which are better refer- enced. For the non biologists interested in visual perception, such as those working in artificial intelligence and computational vision, the book will provide a very ade- quate background to the problems to be elucidated.

Christopher Kennard


This book is a welcome addition to the already existing, substantial literature on the subject. Professor F Scaravilli of the Institute of Neurology has been most suc- cessful in assembling a group of internationally leading neuropathologists to produce a book of high standard. The title is some- what misleading, since it covers much wider fields than strictly defined neuropathology. Of the 13 chapters only seven deal with various aspects of neuropathology, whilst the other six cover other, relevant and comple- mentary areas of AIDS. The chapters are organised in a logical fashion providing the reader with a coherent account of the sub- ject rather than a haphazard selection of chapters.

The first four chapters give a succinct review of the molecular biology and patho- genesis, epidemiology and natural history, neurological complications and neuromembranous and logical imaging. There is an exemplary chapter on general pathology, followed by neuropathology of the central nervous sys- tem. These two chapters form the backbone of the book, comprising 40% of its volume. While the former chapter gives an account of diseases of the various organ systems, the chapter on neuropathology reviews opportunistic infections, neoplasms, vascular dis- orders and a host of miscellaneous disorders. It is both informative and copi- ously illustrated. Other diseases, however, which are now considered to be caused by HIV-1 are reviewed separately together with HIV-associated dementia. The involvement of the spinal cord, and the neuropathology of AIDS in children, are reviewed in two concise, excellent chapters. The strength of the chapter on diseases of peripheral nerves and muscles is based on a sound clinicopathological approach. Separate chapters are devoted to the role of macrophages in HIV encephalitis, and to immunohisto- chemical data on the disease. The concluding overview brings in two additional, important topics, treatments and animal models, and summarises the outstanding questions which require clarification.

There are shortcomings for which neither the Editor, nor the Authors can be blamed. Research in AIDS is a fast-moving field and most references are from the second half of the last decade. This inevitably adversely affects those chapters in which there have been recent developments. It is a pity that there are so few coloured pictures, some of the illustrations of immunohisto- chemically diagnosed and operative tech- nique. Finally, the price of the book is excessive. Yet, this is a book worth having.

PL LANTOS


Over the last two decades text books of operative neurosurgery have proliferated and have become bigger and more compre- hensive. However, this book represents a departure from the standard pattern of such text books. Its scope is limited to the brain alone and, although it describes comprehensively diagnosis and operative tech- nique, it is sharply focussed, as the sub-title suggests, on ways to minimise the risks and consequences of complications in neuro- surgery.

The definition of what constitutes a compi- lection in neurosurgical management is itself debated in the book, with considera- tion of evidence from a poll by question- naire of practising neurosurgeons. The shortest workable definition is that of an unex- pected and undesirable event associated with neurosurgical management. It is clear that one very important route to improved patient care is an awareness of the range of complications so that thought may be applied to avoiding or treating them. It is also clear that avoidance of complications in neurosurgery is generally about reducing morbidity and mortality in the perioperative period rather than, in most instances, con- sidering the utility of neurosurgical proce- dures in modifying the natural history of disease. Therefore, the emphasis is on short term results rather than long term results although clearly perioperative morbidity can affect both quality and length of long term survival.

The editor has recruited over 200 con- tributors, 95% of whom work in North America, to write 91 chapters. The result is a comprehensive compendium of contem- porary neurosurgical practice, which runs to 2900 printed pages. The first volume is devoted to the first three of seven parts con- cerned with brain surgery in the supratento- rial compartment. Part one covers general aspects including basic neurosurgical tech-