
By the year 2040 mortality from neurodegenerative disease in the USA may well displace cancer as the second leading cause of death. Physicians will need to face this challenge and to graft the holistic approach of geriatric medicine on to the scientific basis of modern neurology. This is an important book that begins to define geriatric neurology to complement similar developments in neuropsychology. The clinical expression of neurological disease in the elderly reflects not only changes related to aging, but also, and much more importantly, the impact of earlier disease events and additional current pathologies, as has now been demonstrated so elegantly by recent clinico-pathological studies in Parkinson's disease. The main strength of this book lies in its first three sections on aging in the nervous system, clinical examination and diagnostic studies, and mental status. There are also excellent accounts of the special senses and aging, gait disturbances and seizures. Standard text book accounts of neurological conditions have generally been avoided, though this is always easier for some topics than others. The book is well referenced up to 1992. On the whole though, this is not a text about treatment or management. Readers would find little new in its recommendations (which reflect North American practice), and some surprising omissions, such as the role of serotonin reuptake inhibitors in the treatment of depression in the elderly. Neurological rehabilitation is not addressed. However, this second edition, giving an expanded account of the neurobiology of aging in relation to geriatric neurology, still makes a valuable addition to the best standard textbooks of both neurology and geriatrics. It should be read by all physicians and researchers interested in neurological disease in the elderly.

RJ MEARA


This book is an attractive collection of articles discussing various toxin induced models of the common neurological conditions of Parkinson's disease, Huntington's chorea and Alzheimer's disease. The advantages and disadvantages of this approach are explicitly discussed in the early chapters, although the discussion is not extended to a comparison with other techniques of modelling such as transgenic studies. This discussion successfully bridges the gap that exists between scientifically derived models and unique clinically recognised disease states, whilst making the point that the modelling variable is the known pathology rather than the aetiological process.

The book can best be summarised by referring to the four major diseases it discusses. The chapter devoted to motor neurone disease is an extensive account of the clinical features and animal models of this condition. Although it reads more like a catalogue than a discussion, it is very topical and includes recent work on the Cu/Zn SOD expression in familial Alzheimer's Disease.

In contrast the chapter on Huntington's chorea is adequate if a little dated. For example no reference is made to the recent identification of the gene defect in Huntington's chorea, the use of the mitochondrial toxin 3-nitropropionic acid or the differential effects of striatal grafts prepared from the lateral and medial eminence of the embryonic striatal primordium.

Parkinson's disease is represented by a selection of papers that not only discuss the well established models using 6-OHDA and MPTP but newer models, although no explicit comparison of the merits of these different models are discussed. This has perhaps been most graphically illustrated recently with reference to the mechanism of action of different grafts of non-neural tissue (eg adrenal medulla).

The final chapters of the book are concerned with Alzheimer's disease, and represent the weakest section of the book. No overview is offered, unlike the other diseases. Furthermore all the models have fundamental problems not least of which is to what extent the cholinergenic denervation of the cortex is important in the expression of the clinical features of Alzheimer's disease. This is especially pertinent as the advent of more refined models of cholinergic lesions highlight the disparity between cholinergic deficits at the cortical level and its effect on memory.

However overall the book is an excellent summary of an often poorly discussed area of research. It is therefore recommended reading to anyone coming to the area of research for the first time but to clinicians at a loss to understand the rationale behind models that mimic the diseases with which they are familiar.

ROGER BARKER


The burgeoning development of behavioural neurology has led to an expansion from the dementias into other cerebral disorders. It has become well established that several movement disorders exhibit cognitive dysfunction characteristic of subcortical pathology. This text aims to offer a comprehensive account of the behavioural neurology of movement disorders.

The initial section addresses the relation between the basal ganglia and behaviour. Subsequent chapters focus on particular diseases. Parkinson's disease is rightly given most space. There are discussions on cognition, mood, and personality changes, due to both the condition and its treatment. The section on Huntington's disease addresses the associated cognitive and behavioural abnormalities, and the problems of presymptomatic testing in at-risk subjects. There are useful contributions on other akinetic rigid syndromes, Wilson's disease, tardive dyskinesia, dystonia and focal basal ganglia lesions. Psychogenic movement disorders are well covered, with a helpful discussion on psychiatric factors which predispose patients on neuroleptics to tardive dyskinesia. Tourette's syndrome, although rare, is dealt with exhaustively. This is forgivable given the fascination of the disease, and the associated attention deficit disorder, sensory phenomena, and obsessive-compulsive disorders often seen in this condition.

The book achieves its aims flawlessly. Although the authors proclaim its benefits for all clinicians, the depth of coverage will swamp most readers; it is most appropriate for the neurologist with a special interest in movement disorders.

JOHN GREENE