on its application in focal dystonias, with the provision of useful diagrams to illustrate Dr Tsui's approach to injecting torticollis patients. Botox® units are used throughout, with some additional reference to the Dysport® preparation. Brin and Tsui state that "from discussions with European colleagues we suspect that one mouse unit of Botox® is approximately equivalent to 4–5 mouse units of Dysport®", but a recent report in this *Journal* suggests instead a 1 to 3 equivalence. This issue of differing potencies is clearly crucial to safety, efficacy and cost.

There is a fair amount of repetition between chapters, but this probably makes them individually easier to consult as references. There are also a few minor inconsistencies between what different authors say, and a phantom electrophoretic gel on page 356. You might also hope that for an outlay of \$165 at least the photograph of a Kayser-Fleischer ring might be in colour, but you would be disappointed. Despite these quibbles, I can definitely recommend this book as an excellent reference text that deserves a place in all departmental libraries. However, its excessive price, although "only" the equivalent of less than one botulinum toxin torticollis treatment, will put it out of reach of most neurologists' personal libraries, which is great pity, and I continue to wonder why medical publishers charge so much for a book, especially when they pay nothing to the authors.

NIAL QUINN

Clinical Neurophysiology. Edited by COLIN D BINNIE, RAY COOPER, CLARE J FOWLER, FRANCOIS MAUGUIERE and PAMELA F PRIOR. (Pp 572; £85.00). Published by Butterworth Heinemann, Oxford 1995. ISBN 0-7506-1183-9.

This is a book dealing with EMG, nerve conduction, and evoked potentials. It has a companion volume that covers central neurophysiology. The initial technical section is followed by a description of electromyography and nerve conduction studies, much of which is presented in a problem orientated approach which emphasises important clinical topics. The evoked potential section is also organised in a very logical manner and contains a chapter on diagnostic strategies. The book is well illustrated and comprehensively referenced. This is a good reference text, therefore, which combines a clear presentation of basic principles with an emphasis on addressing appropriate clinical questions: a rare combination.

SIMON BONIFACE

Operative Neurosurgical Techniques. Indications, Methods and Results. Third Edition. (Pp 2196, £283.00). 1995. London: W B Saunders Company Ltd. Vol 1 ISBN 0-7216-5542-4. Vol 2 ISBN 0-7216-5543-2. Set ISBN 0-7216-5541-6.

This extensive piece of work edited by Schmidek and Sweet is the 3rd edition of a

classic textbook concerning neurosurgical methods and techniques. The editors have gathered over 240 contributors to address 175 neurosurgical operative topics. The two volumes are subdivided into several sections according to specific concerns of anatomical location, pathology or systems. For example, there is a section for head injuries, lesions of the orbit, pituitary tumours, vascular disorders, functional neurosurgery and CNS transplantation.

Each chapter has been organised in a comparable way addressing the historical, anatomical and pathophysiological concerns before moving on to the general and specific surgical indications, methods and results. Overlap between topics has been kept to a minimum and each chapter is extensively referenced. The illustrations are in black and white, and the graphical illustrations are particularly well represented. The intra-operative images and illustrations generally achieve their objective although it seems that in some case older images have been included which are of poor resolution.

This edition differs significantly from the previous editions to take into account the dramatic changes that have occurred in neurosurgery over the past five years. Endovascular therapies, image guidance technology and magnetic resonance imaging technology have all been incorporated in an effective way. There has been a considerable change in the authorship to accommodate these changes with a greater contribution from outside North America.

My only criticism is that some of the surgical chapters have been written with a very strong personal bias and that the recognised alternatives have not been given a fair airing. Overemphasis on personal series and data makes some of the chapters unnecessarily lengthy. Previous editions of "Operative Neurosurgical Techniques" have been regarded as the gold standard textbook against which others are compared. The 3rd edition is no exception to this and in many ways has been improved on previous editions. These volumes are essential reading for trainees in neurosurgery and is extremely useful as a reference manual to more senior specialists. I recommend this work strongly.

PETER KIRKPATRICK

Cortex Cerebri. Performance, structural and functional organization of the cortex. By O D CREUTZFELDT. (Pp 658 £65.00). Published by Oxford University Press, Oxford 1995. ISBN 0-19-85234.

It is rare for an individual to master even one discipline. Creutzfeldt, however, managed to study three, namely neurology, physiology and philosophy. This left him in a unique position to elucidate brain-behaviour relationships.

Regarding the structural and functional organisation of the cortex, the approach taken here draws strongly on anatomical and physiological studies. A succinct historical introduction is followed by a chapter on the development of the cortex. There follow very good reviews of the structural organisation and neurophysiology of the cortex. Electroencephalography and evoked potentials are considered in detail.

The author clearly favours basic rather

than applied neuroscience: anatomy and physiology are extensively covered. However, reservations are voiced regarding neuropsychology, particularly its ability to elucidate underlying physiological mechanisms, and this is reflected by the sparsity of neuropsychology in the text. In a similar vein, functional imaging is mentioned briefly. There is a very brief section on PET, while I could find no mention of SPECT or functional MRI.

The functional anatomy of sensory and motor areas, the association cortex and the limbic system is covered extensively. Cognition, in particular linguistics and hemispheric specialisation, is addressed. The text is concluded by a chapter which manages to unite Creutzfeldt's neurophysiological and philosophical views.

In addition to demonstrating Creutzfeldt's contribution to neuroscience, this text provides an excellent review of the contribution of anatomy and physiology to our understanding of cortical function, and is highly commended.

JOHN GREENE

Imitators of Epilepsy. Edited by ROBERT S FISHER. (Pp 372, \$64.95). Published by Demos Publications, New York 1994. ISBN 0-939957-56-6.

I must admit to a sly hope that this volume was a historical or literary analysis of "great imitators of epilepsy", perhaps with reference to Dostoyevsky or the like! Students of literature will be sadly disappointed. Dr Fisher's aim in editing this volume was rather to elucidate the differential diagnosis of the borderlands of epileptic phenomenology. To do this what is really needed is an analysis of symptoms that are misinterpreted by physicians or perhaps an analysis of misdiagnosed cases of epilepsy. After all, all physicians can recognise a generalised tonic clonic seizure, or a complex partial seizure with prolonged automatisms and confusion. But what of the patient with dizzy spells and altered consciousness, episodes of brief psychoparesis or tingling in one hand? As episodic phenomena are common not only in most branches of neurology, but in psychiatry, vascular disease and endocrinology, to attempt even a reasonably comprehensive description of non-epileptic attacks is a daunting task.

This volume provides 13 chapters on disorders which produce episodic symptoms, such as syncope, migraine, cerebrovascular disease and episodic dyscontrol. There are useful sections. Dr Fisher's on the use and abuse of serum prolactin estimations is excellent. Many neurologists have suspected for some time that an elevated prolactin level very rarely helps in the diagnosis of epilepsy. Complex and simple partial seizures are frequently unaccompanied by a significant rise and the test therefore has poor sensitivity and specificity except where the clinical diagnosis is obvious. The chapters on electroencephalography and endocrine imitators of epilepsy are also good introductions to the subjects.

Nonetheless, overall I have come away with the opinion that there is too much missing here for a wholehearted recommendation. Real insights from experts in the