presented and there is a clinically orientated section dedicated to motor unit disorders which covers a broad area, including CNS disorders. The end of the book contains a section on specialised examinations including paediatric and intraoperative topics. The book is very well referenced, with a comprehensive selection of original and reproduced figures. This is a serious reference text, therefore, which is accessible, readable and potentially useful to clinical neurophysiologists when faced with new or unusual cases.

SIMON BONIFACE

Infantile Spasms and West Syndrome.

Edited by OLIVER DULAC, HARRY T CHUGANI and BERNARDO DALLA BERNARDINA. (Pp 310 £40.00.) Published by W B Saunders Co, London 1994. ISBN 0-7020-1777-9.

West syndrome is the combination of infantile spasms with hypsarrhythmia on EEG. The onset in the first year of life is all too often associated with profound cognitive regression and a poor long-term prognosis. Fortunately Dr West did not know this when he first described the syndrome in his own baby son in 1841. His boy, unusually, did well. Initially spasms were thought to be rare, an impression not helped by the wide spectrum of names given to them. With better classification of the epilepsies, we now know that the incidence of spasms is 1:1400–1800. The pathophysiology is not known. It seems likely that a wide range of factors affecting the cerebral cortex can produce spasms if they occur at the correct stage of brain development. The revolution in neuroimaging, both structural and functional, has improved our understanding of the range of pathologies causing infantile spasms and of the differences (sometimes subtle) in their clinical presentation.

This book, although detailed, does carry a clear message: infantile spasms are usually symptomatic. If a structural lesion is found but not treatable, the prognosis is poor. If found and treatable, it is better. But if no cause can be found and particularly if pre-morbid development was normal, the outcome may be good, and it would be useful to identify these patients early. Prompt recognition of children with an operable lesion may also be important. The book reviews evidence that early surgery prevents the appalling long-term consequences of spasms, and discusses the role of functional imaging (SPECT, PET) in defining this group. Drug treatment is unsatisfactory. The book reviews the patchy evidence favoring ACTH over prednisolone. The authors are perhaps too low key about vigabatrin which seems promising, particularly in the treatment of the refractory symptomatic group. The question of the relationship between vaccinations and infantile spasms also deserves more prominence. Recent evidence suggests that this association is coincidental, but it has such important implications that it warrants a chapter of its own.

Overall this is a welcome book. Occasionally a clear picture is obscured by detail but one can find a lot of good new information and useful consolidation of the old.

REBECCA AYLWARD

Craniopharyngioma. Edited by GIOVANNI BROGGI. (Pp 158). Published by Springer Verlag, Berlin 1995. ISBN 3-540-75001-0.

This monograph on the surgical treatment of craniopharyngioma comprises papers given at a meeting organised by the Paolo Association for Neuroscience which was held in Milan in May 1993. The result is an up to date summary of the surgical management of craniopharyngioma by some of the recognised authorities in paediatric and adult neurosurgery. Each of the authors report the results of their personal series in the treatment of this demanding condition which was described by Northfield as being "fraught with difficulty to a degree not offered by any other benign intracranial tumour". Publishing the proceedings of a meeting as a book results in much repetition and there has been little editing of the text resulting in loss of clarity and frequent textual errors which I found distracting. Many of the chapters are illustrated with radiographic images which are adequately reproduced and clear.

The title of the monograph reflects a distinct surgical bias which emanates from a large body of current opinion which holds that the ideal treatment for these tumours is radical microsurgical excision. Although this view is widespread it is by no means unanimous and I do not think sufficient space has been devoted to the difficulties facing clinicians who have to balance the theoretical benefits of total excision against the very sizeable neuropsychological, visual and endocrine morbidity associated with this approach even in the most experienced hands. However, other treatment methods are covered including intracystic bleomycin, colloidal isotope administration and stereotactic radiosurgery. There are further chapters on neuropathology, neuroradiology, endocrine tests and hormonal replacement therapy but these topics are not covered in sufficient depth to make this text alone a sufficient source of information for doctors managing these patients.

I found the final chapter rather disappointing. This is a transcription of a round table discussion chaired by the editor addressing five important controversies in the management of craniopharyngioma. However, the exchanges left me unclear whether, for example, preservation of the pituitary stalk should be attempted and, if achieved, whether it would confer any benefit without increasing recurrence risk. The topic of who should be operating on these patients was raised but then not discussed in any depth. Overall, a useful contribution to the literature, but unlikely to find a place on many bookshelves.

RODNEY LAING

Muscle Disorders in Childhood. By v DUBOWITZ. (Pp 540; £70.00.) Published by WB Saunders Company Ltd, London 1995. ISBN 0-7020-1437-0.

There can be few clinicians who have such widespread experience of paediatric neuromuscular disease as Professor Dubowitz. This is perhaps emphasised by the fact that all but a handful of the illustrations in this beautifully presented book are derived from

his personal cases and clinical records. The book has been completely up-dated since the first edition to include much recent work on the molecular biology of the muscular dystrophies.

There is also an excellent review of our current state of knowledge regarding various ion channel disorders where there have been major advances in our understanding of this complex group of conditions within the last few years.

A further chapter encapsulates the author's extensive clinical experience of dermatomyositis in childhood but I was a little surprised not to find some discussion here about the recent pathological studies suggesting the involvement of muscle fibre capillaries at any early stage in dermatomyositis which would appear to differentiate this disorder more clearly from polymyositis than was previously thought. There is an excellent review of the author's personal experience of drug therapy in juvenile dermatomyositis, including the use of cyclosporin.

I enjoyed reading this book in which Professor Dubowitz has achieved a very successful blend of his extensive clinical experience with recent advances in molecular biology and immunocytochemistry. It should be available in any centre with a paediatric neurological clinic and would be an excellent reference text book for trainees in paediatrics or neurology seeking up to date background information on muscle disease in childhood. For anyone running a neuromuscular clinic I would suggest it to be required reading.

TIM WALLS

Magnetic Resonance Imaging of CNS Disease. A Teaching File. By DOUGLAS M YOCK. (Pp 724; £99.50.) Published by Mosby, St Louis 1995. ISBN 0-8016-8098-0.

This is a hard-covered book of 724 pages compiled from the Departments of Neurosciences and Radiology of Abbott Northwestern Hospital, Minneapolis, USA. The author explains in the preface that the book is designed to "offer a survey of CNS disease but does not constitute an all-inclusive atlas" of brain and spine MR. However the following chapters constitute a very significant proportion of what a radiologist working with MR can expect to uncover during his or her career. There are 18 chapters (13 brain, five spine) and a selected pictorial index. The main chapters are divided into pathology sections—for example, metastases, white matter disorders, hydrocephalus and cysts etc. The second contents list presents anatomical location so once the scheme is mastered it is possible to locate a particular pathology entity at a particular anatomical site fairly easily. Each page consists of two cases with a single MRI or MRA (MRI in a great majority) with several lines of text describing the interpretation of the MR with limited clinical correlation and pathology. Only one image is offered with each case (although a few cases are duplicated with different images) which is not ideal for interpretation. However, the images used are first class, both in content and quality; this is definitely the strong point of