and third editions by Mary Sheridan and Brian Neville make clear the prominence that this text should have for all developmental therapists.

In the initial chapters the complex problems of the varied motor disorders described as cerebral palsy are defined and the variety of treatment approaches that currently exist are reviewed. Research evidence, the limited theoretical grounds for the different approaches and the author's wide clinical experience lead to the development of an eclectic model which is the basis of Sophie Levitt's approach.

Since the first two editions of this book were published there has been an increase in the eclectic viewpoint in the treatment of children with motor delay and cerebral palsy. The third edition is updated and revised taking into account recent research and experience with this approach. There are also two new chapters which develop the learning principles involved in developing motor function considering how to integrate treatment, training and learning in the development of children with motor problems.

The author emphasises the need for a comprehensive assessment which takes account of the child's level of visual, auditory and language development, his intelligence and personality. It is made clear that this assessment should grow out of a collaboration with the child and his parents.

The long chapter 7 on treatment procedures describes in detail physical management techniques drawing on the author's broad clinical and theoretical experience. The text is clear and the problem solving approach is easy to use for the experienced clinician. Detailed description of the development of reflex reactions and normal developmental milestones are illustrated with delightful line drawings and photographs. The closing chapters deal with the practical issues of the use of motor function in the child's daily life, the problems of deformity and therapeutic group work.

This book is not only immensely readable; it provides a sound knowledge base for anyone working with children with cerebral palsy.

ALISON SALT

Textbook of Child Neurology, Fifth Edition. By JOHN H MENKES. (Pp 1013; price £88.00). Published by Williams and Wilkins, London 1995. ISBN 0-683-05920-3.

John Menkes described kinky hair syndrome and maple syrup urine disease, entities which are memorable enough to make him famous. This book is a tour de force written largely by the man himself and succinctly covering the whole of neurology with a paediatric emphasis. Menkes is an experienced and thoughtful physician who brings wisdom and historical perspective to his writing. Like Raymond Adams or Jean Aicardi, there is obviously nothing he has not seen.

Menkes' father practiced medicine in the foothills of the Austrian alps at the turn of the century. He had studied with the pathologist who necropsied Ludwig Van Beethoven and he remained ever sceptical that bacteria could cause disease. Perhaps it is John Menkes' intimate appreciation of how fast things have moved, coupled with his recent European origins that bring such depth and range to this book.

He does not restrict himself to the modern American literature, but quotes widely in geographical and historical terms. In comparing epileptic and non-epileptic convulsions Menkes turns to Gowers for an account. Similarly, Sydenham's chorea is defined in full by its original author with a fascinating recommendation for treatment: "Take of Black-cherry-water one Ounce, of Langius's Epiliptick-water three Drachms, of old Venice-Treacle one Scruple, of Liquid Laudanum eight Drops: make a draught"

Menkes is erudite, interesting and up to date. He gives good sensible clinical advice and avoids excessive recourse to technology and tests. He writes well and although he makes extensive use of the literature, he cuts through the detail, and provides us with clear conclusions. A comprehensive bibliography is available at the end of each chapter. The book is in one volume, but everything is there that any normal neurologist is likely to need, and it is well organised, extensively cross-referenced and well set out. It might have benefited from conversion tables so that Europeans could more easily interpret the American units, and in places a more symptom-based approach might have made it easier to look up those difficult cases when we are seeking a diagnosis. But these are minor criticisms.

REBECCA AYLWARD

Motor Activity and Movement Disorders. Edited by PAUL R SANBERG, KLAUS-PETER OSSENKOPP and MARTIN KAVALLIERS. (Pp 370; price \$99.50). Published by Humana Press, New Jersey 1995. ISBN 0-896-03327-9.

This book sets out to review the experimental approaches to the assessment of motor activities primarily in rats and how this has been applied to certain neuropsychiatric conditions such as Tourette's syndrome and schizophrenia. It is therefore a book that will primarily be of interest to experimental psychologists rather than neurologists or psychiatrists as only the last two chapters are concerned with human studies.

Each chapter sets out to combine theory with practical details and goes on to discuss some relevant experimental studies. This is an admirable approach and indeed succeeds in some places—for example, the chapter by Schwarting *et al* on automated video-image analysis of behavioural asymmetries. However, despite the attractive format, the chapters in practice often fail to achieve the right balance for a number of reasons. In the first instance the chapter topics are too specialist, for example chapter 1 is entitled "Long-term habituation of θ -related activity components of albino rats in the Lât maze". Furthermore in this chapter there are difficulties with the presentation of experimental data, in that the graphs are poorly labelled in contrast to chapter 3 where the text and graphs are too widely separated to be of complementary value.

Apart from the chapter topics being too specialised, the discussion in each chapter is limited and relies too much on the authors' own work, presumably as a result of the specialist chapter topics. Whilst this can be useful, especially from a practical point of view, it leads inevitably to unbalanced accounts with reference often to unpublished work. For example, in the chapter by Bracha and Gilger on measuring spontaneous turning

behaviours in children and adults, there are at least 10 references to the authors' own work of which three are unpublished. This is frustrating as a critical evaluation of the data is difficult when conclusions based on unpublished work are made. Furthermore this eclectic use of some studies data is further complicated by the extrapolations that have been put upon these studies—for example, Gallup and Rager discuss the relevance of experimentally induced tonic immobility to the legal position of rape victims! It would have been more useful if the authors of each chapter had concentrated on the mechanism underlying the motor behaviour being discussed. For example, in the chapter on circling behaviour of rats there is little discussion on the mechanisms underlying this behavioural effect. In particular there is no consideration given to the importance of striatal integrity and cortical afferent inputs in the mediation of spontaneous and drug induced rotation. Indeed this lack of discussion on mechanism of effect is equally true for the chapter on sex differences in rodent spontaneous activity levels by Mead *et al*.

There are, however, some fascinating chapters in this book—for example, the chapter by Mistlberger on circadian locomotor activity. In addition the book presents behavioural paradigms that may be useful in areas of experimental neuroscience where the current techniques of study are limited, such as neural transplantation where drug induced rotation dominates as the test of choice. In this respect the use of thigmotactic scanning as discussed by Schwarting *et al* may be of value as may techniques employing computer recognition systems for spontaneous behaviour.

Overall this book provides some useful information on the complexities of a range of tests that are used to study motor behaviour, primarily in rats. However, the book often fails to provide enough technical detail to be useful, whilst the eclectic choice of topics and the limited discussion undertaken in each chapter greatly limits its appeal. It is therefore a book that is hard to recommend to anyone other than the dedicated student of experimental psychology.

ROGER BARKER

Epilepsy: 100 Elementary Principles. Third Edition. Edited by WILLIAM H. THEODORE AND ROGER J. PORTER. (Pp 211; price £35.00.) 1995. London: WB Saunders Company Ltd. ISBN 0-7020-1813-9.

This is the third edition of a popular and useful book. It is emphatically not a textbook on epilepsy, but a collection of 100 guiding principles—almost aphorisms—which lie at the heart of the successful clinical management of epilepsy. This is an altogether unusual approach, yet it works well. The topics are dealt with with lightness and elegance, and the result is impressionistic almost a watercolour sketch; but the information is generally concise and apposite. The 100 principles are divided into 18 sections, starting with "Approach to the patient"—the first aphorism being "The brain is just another body organ" (Woody Allen please note) and the second "Assume that every patient with epilepsy wants to get well" (Dostoevski please note). The next sections are perhaps more conventionally organised into a variety of aspects of diagnosis and therapy, the last few concerned with

pregnancy and epilepsy and psychosocial aspects (the latter perhaps rather too superficial with only three aphorisms: "psychiatric disorders in people with epilepsy should be treated in the usual manner", "there may be many reasons for neuropsychological impairment in patients with epilepsy", "people with epilepsy require a comprehensive approach to their quality of life"). The last section is a forlorn plug for the importance of research. Roger Porter is now vice president of Wyeth-Ayest, a pharmaceutical company, and still provides a very balanced view of therapy; Bill Theodore is Chief of the Epilepsy Section of NINDS and despite this elevated position provides down-to-earth basic advice—both must be congratulated on achieving such a well-focused perspective. The information is uniformly simple and accurate, and there is indeed very little written with which one can quibble. The book has occasional weaknesses, for instance the discussion of risk of congenital malformation, the relevance of an illustration of a PET scan showing the functional localisation of unfamiliar melodies (at least to this non-functional reviewer), and the no-longer up-to-date list of ILAE and IBE chapters in the appendix. Who needs this book? I suppose the answer is who doesn't, for there is useful advice and wise counsel on most pages. It is aimed at neurologists, neurosurgeons and primary care physicians, and the authors conclude "Should this book make a contribution to the care of patients with epilepsy, we will be most pleased".

SIMON SHORVON

Microsurgical Dissection of the Cranial Base. Edited by JOHN DIAZ DAY, MANFRED TSCHABITSCHER AND CHRISTIAN MUTULA. (Pp 176; price £75.00.) 1995. Edinburgh: Churchill Livingstone. ISBN 0443075506.

Despite some initial resistance, the neurosurgical fraternity have progressively embraced the concept of subspecialisation. The surgery of the skull base is one of the areas where its benefits have become most obvious. Perhaps the clearest example is in the surgery of acoustic neuromas where the mortality and morbidity rates have fallen spectacularly since the introduction of specialist teams to undertake this type of work. Those teams who often initially focused their efforts on the internal auditory meatus have widened their horizons and now increasingly refer to themselves as skull base surgeons. The usually fruitful combining of otolaryngologists, plastic surgeons and neurosurgeons has allowed us to tackle and successfully treat many lesions of the skull base which until very recently would have been considered completely inoperable. These developments have resulted in the parallel growth of a multiplicity of specialist societies and meetings dedicated to the surgery of the skull base and to an avalanche of books and journals on the subject. This volume is another. The author(s) purpose in the volume is to propose a series of cadaveric dissections which will prepare the trainee surgeons in the various approaches to the skull base. There is no doubt that under the new training proposals about to begin in the United Kingdom the new generation of young surgeons are likely to be less surgically experienced than their predecessors and consequently are increasingly likely to require to improve their skills in the dissect-

ing room or laboratory. This book should aid that process as far as surgery of the skull base is concerned. It is lavishly illustrated and the text is clear and as readable as any anatomical text is likely to be. Unfortunately the illustrations are only in black and white and this substantially reduces their value, even if it keeps the price of the volume down. The volume is likely to find its niche in the laboratory or dissecting rooms, but I suspect that those who will be able to follow it best are those who are already experienced in and familiar with the approaches used in the book. It covers all the standard approaches to the various regions of the skull base and should prove helpful to those who want a comprehensive instruction guide to train young surgeons in the laboratory. The book represents reasonable value for money.

DAVID HARDY

Aids and Neurology. By MICHAEL J G HARRISON and JUSTIN C MCARTHUR. (Pp 262; £70.00.) Published by Churchill Livingstone, Edinburgh 1995. ISBN 0-4430-4896-7.

What was this odd disorder being described in San Francisco gays, we used to wonder as neurological registrars in the London of the early 1980s. What was the cause of this syndrome of acquired cell mediated immunity, was it the habit of sniffing amylal or the other strange habits of the denizens of the city known in our youth as the home of hippies and other exotic alternative lifestyles? Before long we were being asked to see a homosexual patient admitted with what turned out to be cerebral toxoplasmosis and our education in AIDS related neurology had begun. Later came the hysteria in the tabloid press epitomised by the Sun's infamous front page "10 symptoms of AIDS" (which included headache) allowing the birth of a second disorder familiar to those of us then working in inner-city neurology, "Fear of AIDS" adding a new dimension to the management of tension headaches in young males. A new fearful disease had been born replete with medieval archetypes of sin and imported foreign pestilence, a grim backdrop to the entrepreneurial selfishness of Thatcher's new Britain. It was just as well for neurology since syphilis, the outgoing neurological mimic, could now be replaced with a brand new multi-organ, multi-stage infectious disease whose manifestations in the nervous system were, it became clear, protean. Suddenly a whole lot of new multiple choice questions could be generated for postgraduate exams.

Michael Harrison of the Middlesex Hospital and Justin McArthur from the Johns Hopkins have now produced this invaluable monograph on the neurology of AIDS. They review the epidemiology and virology of the "neurotropic, neuroinvasive, neurovirulent" HIV whose infection presents with a neurological syndrome in 10–30% of cases. All the neurological faces of AIDS including sero-conversion disorders and the difficult issue of the neuropsychology of pre-AIDS HIV-positive patients are covered in a thorough, helpful and practical way. We learn of the different profile of opportunistic infections seen in children with HIV infection and the frequency of progressive encephalopathy in these children. In the chapter on peripheral nerve disorder in AIDS there is a nice discussion of

the differential diagnosis of neuropathic symptoms and their treatment. Perhaps new to some neurologists in this chapter is the point that Bell's palsy should trigger HIV testing in an "at risk" patient, which still means gays and drug-abusers in the "pattern 1" countries of the west (and South America). Opportunistic infections by fungi, viruses, bacteria and parasites in HIV patients are of course thoroughly covered. In this section the intelligence that pigeon droppings are a main source of cryptococcus has put Trafalgar square into a different perspective for me.

Rounding off the book are chapters reviewing the common neurological symptoms in HIV infection (more helpful than the Sun's earlier review) and the role of various neurological investigations, in which the difficulties of radiological differential diagnosis in AIDS patients are detailed. Throughout this book is beautifully illustrated with well produced colour pathological photographs of the conditions discussed, excellent up-to-date scan images and clear line diagrams. The text is liberally broken up by helpful tables and management flow diagrams. These high class production features and the excellent readable, informative text make this book a must for all neurologists who might come across a patient with the neurological manifestation of AIDS, which includes all of us.

CHRIS ALLEN

Schizophrenia. Edited by STEVEN R HIRSCH and DANIEL R WEINBERGER. (Pp 740; £69.50.) Published by Blackwell Science, Oxford 1995. ISBN 0-6320-3276-6.

It is a measure of just how far psychiatry has come over the past two decades that Hirsch and Weinberger have been able to put together a book of this substance on schizophrenia. It is striking, particularly with the American input, just how little space is allowed for the fanciful notions of psychoanalysis with regard to aetiology and treatment. The book is divided into four sections: descriptive aspects, biological aspects, where the real strength of the book lies, physical treatments and psychosocial aspects. Most of the individual chapters are excellent, especially those based on the neurosciences, providing good source material for researchers and valuable information for clinicians, for instance the chapters on treatment and Taylor's chapter on risk of violence. The absence of sections on particular topics (for example, suicide risk) is compensated for by good indexing which yields a range of perspectives on the subject.

Like most multi-author books it cannot hope to give the complete picture and some of the background and colour is missing. The arbitrary sequence of chapters reflects the individual authors' interests rather than fitting into a logical whole. This is a book for physicians who already know something about schizophrenia and beginners who need to acquire a real understanding of the disorder should turn to McKenna's excellent book "Schizophrenia and Related Syndromes".

I have a few cavils. There is no reference to the Soviet psychiatrist Snezhnevsky, despite the fact that his system of classification is now to be found in ICD-10. Another touch of political correctness is the chapter on homelessness which happens to be excellent but is akin to putting a chapter on