PostScript

BOOK REVIEWS

Neurological therapeutics: principles and practice

Edited by John H Noseworthy, with 14 others. Published by Martin Dunitz, London, 2003, pp 2874 (in 2 volumes). ISBN 1-85317-623-0.

Neurological therapeutics: principles and practice is a two volume book consisting of 2874 pages by 345 authors. It is divided into 14 system-based sections that are further divided into 271 subject-based chapters. The chapters are generally short and accessible, making this large book surprisingly practical. Each chapter is formulated to contain sufficient background information to direct treatment decisions. The book works best, therefore, when the diagnosis is established and a review of the issues surrounding a treatment decision is required—a format that allows for daily use. For example, during the course of this review I found the informative sections on peripheral nerve disorders, critical care neurology, and neurological complications of systemic disease of direct clinical use, as were several other chapters including those on CADASIL, cerebral vascular malformations, and brain tumours. That is not to say that the text does not contain some deficiencies. Taking the epilepsy section as an example, whilst the technical aspects of EEG interpretation were discussed, the more important issue (at least to the practising neurologist) of predictive value was not. Treatment of epilepsy in women was generally well covered, but recent concern regarding cognitive development in children born to mothers taking sodium valproate was not mentioned. Antiepileptic drug therapy in the elderly and in renal failure was discussed, but treatment in liver failure was not. As with the text generally, the chapter on legal and regulatory issues for people with epilepsy was written from the perspective of the USA. Such deficiencies are inevitable however, and should not detract from its value as a clinical resource. If unable to provide the precise therapeutic information being sought, the text succeeds in providing an informed and readily accessible starting point from which educated treatment decisions can be based.

M R Johnson

Suicide in children and adolescents

Edited by Robert A King and Alan Apter. Published by Cambridge University Press, Cambridge, 2003, £110.00 (paperback). ISBN 0-521-62226-3

Suicide is the third commonest cause of death in young people. Attempted suicide is one of the most frequent causes of hospital contact for young people, and is associated with considerable psychiatric morbidity and increased risk of later suicide. These important problems have been the focus of substantial research, and are well suited for this recent book in the excellent *Cambridge Child and Adolescent Psychiatry* series.

The book consists of 13 chapters that cover both suicide and attempted suicide, written by an international group of authors. The first seven chapters are concerned with epidemiology and aetiology. Excellent contributions in this part of the book are by Gould, Shaffer, and Greenberg on epidemiology; Kelleher and Chambers on cross-cultural variation; and Apter and Wasserman on attempted suicide. There are then two chapters on assessment, which are slightly idiosyncratic (at least from a British perspective) in view of their psychodynamic and idiographic orientations. The last four chapters concern intervention, and outcomes of attempted suicide. Chapters by Harrington on cognitive behavioural therapy after deliberate self-harm, and by Boergers and Spirito on follow-up studies, are particularly good.

Problems of the book are the inevitable duplication that may occur with multi-authored texts, and the omission of frequently used treatments such as family intervention. The title is misleading as it does not include attempted suicide. Despite these comments, this is a very useful book and would be of interest to researchers and clinicians. It will be useful for trainees and also more experienced professionals from varied backgrounds, and would make an important contribution to libraries.

M Hodes

Malingering and illness deception

Edited by Peter Halligan, Christopher Bass, David Oakley. Published by Oxford University Press, Oxford, 2003, £35.00, pp 362. ISBN 0-19-851554-5

This excellent book gets off to a cracking start. The introductory chapter by the editors lays out the evidence that many of our patients may be deceiving us, and that much of this deception may be conscious. We are introduced to several major themes of the book, including the debate as to whether or not malingering should be identified as a psychiatric disorder, a disorder of free will, or simple criminal behaviour. What is one to make of the evidence of high rates of fraud within society? We are introduced to the difficulty of detecting deception and therefore the problem of known unknowns—everybody finds it difficult to answer the question ''how many times have you failed to detect a lie?'' Simon Wessely then takes us on a delightful tour of the history of malingering—perhaps it all stems from legislation passed in Imperial Germany in the late 1800s!

This book consists of a fascinating collection of essays covering an enormous breadth of animal and human study. The editors seem content to let the authors express their own views; the views expressed in one chapter may be contrary to those expressed elsewhere in the book. This is a strength—we see the matter being debated by specialists with very different backgrounds. Chapters include: ''Can monkeys malinger?''; ''Law, lies and videotape: malingering as legal phenomenon''; ''The misadventures of wanderers and victims of trauma''; and ''The contemporary cultural context for deception and malingering in Britain.''

The chapters written by the lawyers came out pretty well—they were clear thinking and pragmatic. On the other hand, the occasional chapter seemed to be over-concerned about dissecting out the minutiae of differences between various ''models'' that needed to be considered. For example, in the chapter on illness deception in disability assessment a range of conceptual models is considered ending up perhaps unsurprisingly with a biopsychosocial model. I was not convinced that this got very far in helping the physician tasked with weeding out those who were claiming insurance fraudulently.

So, having read this book are we going to be any better at detecting malingerers? I suspect not despite guidance offered in the final chapter on ways to detect deceit by analysis of vocal and non-vocal characteristics. I suspect that most sensible doctors will continue to accept that they don't know whether or not they are being duped. In the mean time, if they have read this book they will, however, have been entertained and educated.

S Fleminger

Community rehabilitation in neurology

Edited by Michael P Barnes, Harriet Radermacher. Cambridge: Published by Cambridge University Press, 2003, £55.00 (hardback), pp 244. ISBN 0 521 80874 X.

This book must have been extraordinarily hard to conceive and write. The word ''community'' has no easy definition; the word rehabilitation is interpreted differently by almost everyone; only neurology has a reasonably certain meaning. Unfortunately the authors have not managed to overcome these obstacles very well, writing a book that has some good parts but is unlikely to satisfy the expectations of most (potential) readers.

Indeed it is not clear who the book is aimed at. Much of it is related to the UK, but parts suddenly refer to the ''South'' (another word with no clear meaning and not well defined). The section on evidence is appropriate for a critical academic, but other parts are much more discursive without being directly practical.

The best chapter is that on the evidence base for community rehabilitation. The authors have identified a wide range of relevant studies that should be useful to anyone interested in this topic.

Most other chapters are relatively unstructured, being brief reviews of topics, such as measurement of outcome, that try to cover a large topic generally, with a passing reference to its application to community rehabilitation.

Books on community rehabilitation are a current publishing favourite, presumably because of the increasing interest in trying to reduce health expenditure and (if one is charitable) because rehabilitation delivered

to people in their own homes or workplaces might be more effective. Unfortunately there are no books known to me that have risen to the challenge. This book is another attempt that unfortunately fails.

D Wade

Hypothermia and cerebral ischaemia—mechanisms and cerebral ischemia

Edited by Carolina M Maier and Gary K Steinberg. Published by The Humana Press, New Jersey, 2003, £99.50 (hardback), pp 177. ISBN 0-86903-660-X

The idea that the evolution of acute brain injury can be reversed either by reducing cerebral metabolic rate or arresting metabolic pathways that determine irreversibility is one of the central concepts of acute neuroprotection. Induction of hypothermia has for many years been an attractive means of achieving this, particularly in the absence of any widely practicable and proven pharmacological treatment. This book, with a largely North American authorship and contributions from Germany and Japan, comprises 10 chapters that address experimental and clinical studies of mild hypothermia (reductions of 2 to 5° below normal brain temperature) in global and focal cerebral ischaemia, and in traumatic brain injury. Much useful scientific information is assembled. For example, in discussing experimental cerebral ischaemia, Maier makes the point that hypothermic neuroprotection is unlikely to derive purely from reductions in metabolic rate. Issues such as ion and membrane stability, excitatory amino acid release, gene expression cascades, and apoptosis are covered by several authors in the different areas of global and focal ischaemia and trauma. The message in each case is rather similar. The chapter by Schwab and Hacke, describing their experience in the clinical management of patients with stroke, is essential reading for any neuro-intensivist considering using hypothermia.

Although the design of the book inevitably entails a certain amount of duplication, all the information is there. There is a good index and this book will be a useful source of information and advice for neuroclinicians, as well as their basic science collaborators. It should be on the library shelves of any intensive care unit treating patients with acute brain injury, and is essential reading for any investigator entering this specific field.

A J Strong

The molecular and genetic basis of neurologic and psychiatric disease—3rd edition

Edited by Roger N Rosenberg, Stanley B Prusiner, Salvatore DiMauro, Robert L Barchi, Eric J Nestler. Published by Butterworth Heinemann, London, 2003, £99.00 (hardcover), pp 823. ISBN 0-7506-7360-5

This is a single volume 844 page book, divided into four sections and made up of 77 chapters by 125 authors. Part I is a review of the general principles of genetic mechanisms of disease. Parts II and III cover neurological and psychiatric genetics respectively, and consist of both disease and system based chapters. Part IV is a single chapter that provides a gene map of neurological disorders. The general production values of the book are high.

The emphasis of this text is on the molecular pathogenesis of neurological and psychiatric disease, reflecting the editors' assertion that identification of molecular pathogenesis of genetic neurological disease is "indispensable to the development of pharmacologic or gene therapy for these disorders." As such, the text will probably be of most interest to the neurologist engaged in neurogenetic research or neurogenetic counselling, than the general neurologist requiring a text that will assist him or her in their day-to-day clinical practice. Taking the phakomatoses as an example, whilst neurofibromatosis 1 and tuberous sclerosis complex are adequately covered, neurofibromatosis 2 and Von Hippel-Lindau disease are only briefly considered, with little mention of genetic management such as the relevance of mutation analysis, counselling, or screening protocols for affected or at-risk family members. Similarly, other tricky clinical areas such as seizures associated with inherited metabolic defects are not really written with the jobbing neurologist in mind, but in keeping with the book as a whole, the focus is on explaining the underlying pathogenetic mechanisms rather than providing a genetic guide for the uninitiated. However, in its focus on underlying genetic mechanisms, the book clearly succeeds. Many chapters, such as those on muscle and nerve genetics or metabolic disorders—including the porphyrias—are exemplary.

M R Johnson

Lysosomal disorders of the brain: recent advances in molecular and cellular pathogenesis and treatment

By Frances M Platt, Steven U Walkley. Published by Oxford University Press, Oxford, 2004, £85.00 (hardback), pp 430. ISBN 0-19-850878-6

This is a marvellous book. It is comprehensive in its coverage and also gives much hope for the future. The authors of the individual chapters are held in international renown for their work and on the whole the book is skilfully edited and beautifully set.

The book addresses recent advances in molecular and cellular pathogenesis, and treatment of lysosomal disorders of the brain. The book is organised into four sections. Firstly, there is an overview of the endosomal-lysosomal system and storage disorders. This includes the known biology of the endosomal-lysosomal system, a new way of classifying lysosomal diseases on the basis of the molecular defects, and the clinical approach and diagnosis. The next section examines the molecular mechanisms of storage. This includes the primary defects in lysosomal enzymes, defects in lysosomal enzyme modification, trafficking and protection, and defects in activator proteins and in lysosomal transmembrane proteins. This is followed by a section on model system pathophysiological mechanisms. This includes non-mammalian and mammalian storage disease models and the pathogenic cascades causing brain dysfunction. The final section relates to the treatment of lysosomal storage and diseases. Treatment approaches include enzyme replacement therapy, cell mediated delivery systems, inhibition of substrate synthesis, and, finally, gene therapy. This layout makes an authorative and comprehensive review of lysosomal disorders of the brain. In addition to this comprehensive account of the current understanding of lysosomal disorders of the brain, there is also a Foreward written by H G Hers who developed the concept of inborn lysosomal disorders, and a moving Prologue about family life, work, and dilemmas when children and young people are affected by an inborn lysosomal disorder.

Throughout the book it is evident that the investigation of inborn lysosomal disorders has become a tool for learning about the biology of normal cell systems. This is further emphasised by the classification of these disorders, which emphasises the functions of the defective proteins. One of the editors' aims for this book is to broaden the disciplines of scientists and clinicians to consider the richness of storage diseases as a focus for research. This book will certainly achieve that. This book also reflects the progress of medical science over the 20th century and into the 21st. Many of the lysosomal disorders of the brain were first described at the beginning of the 20th century as enigmatic, eponymous clinical conditions. At the beginning of the 21st century these disorders are now exquisitely defined by gene, protein, and clinical condition. The book also clearly shows the optimism for finding a cure for these otherwise fatal neurological conditions.

R Surtees

CORRECTION

Emma Frasson, Alberto Polo, Alfonsina Di Summa, *et al*. Multiple sclerosis associated with duplicated CMT1A: a report of two cases (*J Neurol Neurosurg Psychiatry* 1997;**63**:413–4). The fourth author of this paper should be referenced as Fabrizi GM.