

neurological disorders in which negative motor phenomena play a devastating role are cataplexy, certain types of epilepsy, and a form of myoclonus. Asterix is the most familiar form of negative myoclonus. Negative motor phenomena are also part of normal motor behaviour, occurring for example, in REM sleep.

The text is very nicely organized and layed out in sections; Section I - Clinical Syndromes, Section II - Cortical Mechanisms, Section III - Brain Stem Mechanisms, Section IV - Spinal Cord Mechanisms, Section V - Pharmacology, Section VI - Summary that is very well written by Dr. James W. Lance.

Although some of the material is by nature a review article of earlier published work, other papers are refreshingly unique. The very unassuming title "Drop Attacks" chapter by Lee and Marsden is in fact a delightful review of "101 Causes of Drop Attacks" starting with attacks associated with weak legs ending with Binswanger's Disease. The chapter "Clinical Aspects and Features of Cataplexy" by Guillemineault and Gelb gives a very thorough discussion of this dramatic and curious entity from clinical descriptions to basic science to what's currently known about the genetics of this disorder.

Within the ten years since it was introduced the magnetic coil stimulator has proven to be a useful tool to study inhibitory effects on the brain. Transcranial magnetic stimulation (TMS) of occipital cortex can inhibit visual perception, TMS of the sensory motor cortex, after a continuous stimuli to the hand can inhibit somatosensory perception and with trains of repetitive TMS, speech output and memory of various types can be impaired.

As an overview this was a well written book by experts in the field and extensively referenced. Each of the chapters was revised after the workshop in light of discussions and comments that took place and can be considered definitive reviews at this juncture. There may be some who would feel that the subject matter is narrow and perhaps not too much interest to general neurologists but that would be an error. Regardless of one's area of interest one will still nevertheless encounter patients with atonic seizures, elderly "folks who fall" and patients with Parkinson's Disease who "freeze". Although apparently widely dissimilar disorders there is in fact a common theme that ties them all together in terms of negative motor phenomena. This is a text that neurology residents would want to refer to in preparation for rounds, practicing neurologists would refer to for current reviews and neurophysiologists and neurochemists would want to refer to for timely reviews that are well referenced. If this text is not on your own personal library shelf then it should certainly be in the department's library.

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PAIN AND THE BRAIN: FROM NOCICEPTION TO COGNITION. ADVANCES IN PAID RESEARCH AND THERAPY, VOLUME 22. 1995. Edited by B. Bromm and J.E. Desmedt. Published by Lippincott-Raven, Philadelphia, PA. 606 pages. \$C129.00.

The timeliness of this volume which focuses on the experiential aspects of pain was emphasized by the simultaneous arrival of a supplement to the official journal of the American Academy of Neurology, 'Neurology' on chronic pain mechanisms and management, published as a CME activity to highlight dissatisfaction by patients and physicians with the results of chronic pain treatment.

The present volume is the latest in a series on pain research and therapy which has been published regularly for over 15 years. It is the product of a satellite symposium of the 7th World Congress of Pain, and was held in Beaune in August 1993. Highlighted by an introductory chapter by William Willis Jr., this volume of monographs is divided into six sections containing thirty-six chapters by seventy five-contributing authors. The first seven chapters in Section I, Nociception, Pain, and Consciousness, set the stage for the remaining sections by reviewing relationships between nociception and relevant attributes of the state of consciousness.

For the first time in recent series, a considerable amount of new information on pain processing at the thalamic and cortical levels is presented. These chapters are complemented and extended by a broad consideration of the neuropsychologic aspects of pain including the affective, cognitive, and emotional components. Emerging from this body of data is the inescapable conclusion that we have now reached the point where future pain research must now target humans with chronic pain disorders.

It is of interest to the clinician involved in managing patients with chronic pain, that this volume and the Neurology CME supplement, conclude that successful therapy of pain emerges from targetting both nociception and the emotional, affective, and cognitive aspects of consciousness. The seminal and central role of antidepressants in chronic pain management highlighted in the Neurology supplement, is dealt with in depth in a chapter on efficacy and mechanisms based on a review of clinical trials.

The field of nociceptive research has seen revolutionary changes over the past two years, while the field encompassing experiential aspects of pain remains in its infancy. As such, some parts of the present volume, particularly the section on abnormal pain states are slightly dated. Overall however, this is a timely volume that the editors hope will stimulate increasing interest in pain research thanks to novel quantitative approaches some of which are reviewed here.

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EXPERIMENTAL HEADACHE MODELS. FRONTIERS IN HEADACHE RESEARCH, VOLUME 5. 1995. Edited by Jes Olesen and Michael A. Moskowitz. Published by Lippincott-Raven. 380 pages. \$C116.00.

The aim of this book, along with the other volumes in the "Frontiers in Headache Research" series is to demonstrate the major advances made in our understanding of the headache disorders. This volume reports on the presentations and discussions of the November 18-20, 1994 5th International Headache Research Seminar convened in Copenhagen. This book illustrates the dramatic progress which is occurring in headache research, progress which has already yielded significant therapeutic dividends at least for that 16% of the adult population which suffers from migraine. The list of contributors also illustrates the important role of the pharmaceutical industry in driving this progress, with over 20% of the contributors having direct links to industry by position of address.

In addition to the opening and closing chapters, the book has six sections. Section I focuses on the general use of models in drug