Both volumes are laid out attractively and include a significant number of reproductions chemical formulas and other photographs. Even though the text sometimes seems a little bit unstructured, and a few more breaks and captions certainly would have improved readability, both volumes are generally well-written and edited, and contain much valuable information on the pharmacological aspects of neurotoxicology, as well as state-of-the-art methodology. In contrast to that, especially in the first volume, there is a certain lack of information regarding the clinical aspects of neurotoxicity. The books may be primarily interesting to scientists with a keen interest in pharmacology and toxicology but may be found less useful by the neurological clinician.

Albert Ludolph and J. Brettschneider
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Textbook of Diabetic Neuropathy. 2003. Edited by Gries FA, Cameron NE, Low PA, Ziegler D. Published by Thieme Medical Publishers. 408 pages. US$119 approx.

This is an impressive-looking book. It has four distinguished editors with backgrounds in endocrinology, neurology, and basic science. There are contributions from 63 authors from 13 countries, it is extensively referenced, and is handsomely produced. This book is a gold mine of information about the diabetic neuropathies but, as in mining for that precious metal, the digging is hard work.

The title is a bit problematic: it should be "Textbook of Diabetic Neuropathies", not neuropathy. This is not a pedantic quibble. There are a variety of diabetic neuropathies – important clinical syndromes – beyond the well-recognized distal symmetric polyneuropathy (DSP). The clinical features of these syndromes, natural history, attempts at treatment, are somewhat sketchily described. That the pathogenic mechanisms are likely to be different from that of DSP is underemphasized.

A further problem is the unusual organization of the book. It is not until Chapter 5 (page 175) that we encounter a classification of the diabetic neuropathies. It would be very helpful to the reader if this were at the beginning.

A vast amount of highly relevant information is presented, but readers are likely to be frustrated by the paucity of wise and balanced syntheses of disparate information and data. Chapter 4, which deals with the pathogenesis and pathology of diabetic neuropathy, is the most striking example. This core chapter contains scholarly contributions from many researchers representing the different pathogenic camps: vascular/ischemia, toxic/metabolic, immunologic. However, it lacks a balanced synthesis to bring it all together into an intelligible focus for a neurology or endocrinology resident.

Some of the material in this book reads as if it has been reproduced from other sources without being edited for integration into this particular text. Chapter 2 contains information on the central nervous system and some neurological investigations that are largely irrelevant. Many chapters are under-illustrated, some overly so. Important information that warrants integration in main chapters, is relegated to an appendix in what appears to be an afterthought. There is a section in one chapter entitled "Central diabetic neuropathy". This is like reclassifying multiple sclerosis as a peripheral neuropathy that just happens to involve the central nervous system! Chapter 1 is an excellent general discussion on diabetes mellitus, complete with 11 pages of references. But it is highly unlikely that many readers will read this, given that the focus of the book is that of neuropathies.

Discussions of the all-important topic of drug treatments for diabetic neuropathies are scattered throughout the book. A useful section on evaluating drug effects in disease is relegated to near the end of the book. It would have served as an excellent introduction to a comprehensive discussion on all the treatments for the diabetic neuropathies so far attempted, all leading to a wise summary of the current state of affairs. The important review of the role of glycemic control on the development and/or the progression of neuropathy is buried in the pathogenesis chapter, rather than in a treatment chapter; and there are no citations to DCCT or UKPDS in the Index to help one to find this information. Similarly the discussion on aldose reductase inhibitors is in the pathogenesis chapter.

In short, this book contains most of the information that one needs to know or wants to find out about diabetic neuropathies, but mining for these numerous gold nuggets is hard work due to the awkward layout of the material and the shortage of summaries at the end of sections or chapters.

John D. Stewart
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Weiner and Levitt's Pediatric Neurology. 2003. 4th Edition. Edited by Michael E. Cohen, Patricia K. Duffner. Published by Lippincott, Williams, and Wilkins. 346 pages. C$41 approx.

This is the latest edition of the only widely-published pocket reference in pediatric neurology. Edited by two experienced pediatric neurologists, it is a valuable tool for multiple varieties of trainees working in the field. The most important credential of such a publication is that it meets the educational needs of the audience for which it is intended. The primary target in this case appears to be the pediatrics resident rotating through child neurology. A well-structured pocket reference can be invaluable to such an individual, particularly in neurology, as many pediatric trainees are intimidated and have a lower "level of comfort" with neurological illnesses in children. Adult neurology residents would appreciate information on pediatric-specific areas of neurology while other residents, medical students, and junior pediatric neurology residents may also find value in this book.

A junior pediatric resident anticipates their first day on pediatric neurology with great trepidation. They imagine two dreaded situations from which a well-written, pocket sized reference might be able to rescue them. The first is being asked to see a child with presenting complaint "x" such as headache, weakness, or seizure. Their need is an approach to, and differential diagnosis of, the problem. The second situation is being asked to assess a child with condition "y" such as spinal muscular atrophy or Lennox-Gastaut syndrome. Having never even heard of some of these, this resident needs to quickly familiarize themselves with the essential details of the condition. Combining these two needs into a single publication is a difficult task. However, with a few caveats, Drs. Cohen and Duffner have done an admirable job in accomplishing this.

The largest shortcoming of this publication is its overall organization. While most individual topics are well-presented, chapter arrangement appears essentially random. For our resident seeking a differential diagnosis to a problem, this disorganization is

suboptimal. One of the most common presenting complaints, a child with developmental delay, provides a good example. Related chapters would include those on growth and development, cerebral palsy, developmental disabilities, progressive degenerative disease, genetics, and pervasive developmental disorders. Unfortunately, these are found in chapters 1, 11, 13, 14, 23, and 34 respectively. As the trainee is likely to read around certain problems, a more continuous representation of these topics would be helpful.

Information on anti-epileptic drugs (AED) is also disorganized. References are scattered through three chapters on seizures, another on complications of AED, and an appendix of "commonly used drugs used in neurology". The book would benefit from an amalgamation of all AED information into a single chart listing all AED names, indications by seizure type, side-effects (acute, chronic, common, life threatening), starting doses and progression schedules, final dose ranges, drug interactions, half-lives, and cost. This would consume less space in the text and be a more accessible reference.

A chapter entitled "genetics" gives a review of basic genetics that is likely oversimplified for the pediatrics resident. It then mentions little of genetic syndromes and moves on to brief discussions of mitochondrial and lysosomal inborn errors of metabolism (IEM), topics which are incompletely covered elsewhere. A chapter reviewing common neurological genetic syndromes followed by a second with an approach to IEM would be more useful.

Despite these shortcomings, the majority of the book presents clear and concise information regarding key topics in pediatric neurology. There are particularly good chapters on the neurological history and examination, floppy infant, hemiplegia and stroke, ataxia, headache, and complications of leukemia. There are no glaring omissions. The degree of detail provided is appropriate for the pediatric resident. There are an unfortunate number of typographical errors, including several that are directly misleading. While most diagrams used are of adequate detail, several areas would have benefited from additional illustrations, particularly the neuroanatomy section.

Weiner and Levitt's Pediatric Neurology is a valuable, portable reference for the pediatric resident rotating through a neurology service. It is admirably constructed to provide an approach and differential diagnosis to common presenting problems, while at the same time supplying essential information about most neurological diseases encountered in children. Its affordable cost may facilitate its use by others such as medical students or adult neurology residents. It will undoubtedly "save" many a pediatrics resident, and will likely become a recommended asset to those rotating through our program.

Adam Kirton
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CURRENT PRACTICE OF CLINICAL ELECTROENCEPHALOGRAPHY. 2002. Edited by John S. Ebersole and Timothy A. Pedley. Published by Lippincott Williams & Wilkins. 800 pages. C$220 approx.

This remarkably comprehensive textbook successfully evolves from previous tandems of editorship (D.W. Klass and D. Daly: D. Daly and T.A. Pedley) who created a clinically based book with academic overtones. Therefore, the book benefits from the concerted editorial efforts of two clinically orientated EEGers in Drs. Ebersole and Pedley.

The book consists of authoritative and comprehensive reviews of virtually all topics relative to clinical EEG. Although these often extend beyond the needs of most clinical EEGers, they provide clear expositions of the fundamentals in each area, allowing the reader to extend his/her knowledge as far as desired. These chapters provide the academician with current in-depth information and allows him/her to embark on additional areas of EEG with confidence. These range from introductory-like chapters on the normal EEG by the late Dr. Peter Kellaway and the abnormal EEG by Drs. B. Zifkin and R.Q. Cracco to advance reviews on EEG voltage topography and dipole-source modelling by Dr. John Ebersole and automatic detection and analysis of seizures and spikes by J. Gotman.

Most of the illustrations are of high quality. Vertical lines and greyish background dominate and blur the essentials of a minority of tracings. Future editions may wish to replace vague terms such as "benign variants" and "patterns of uncertain significance" with a more straightforward title of "normal variants" in Dr. Westmoreland's valuable chapter.

In summary, the breadth and depth of this high quality volume will satisfy needs of clinical EEGers at all levels of interest and experience.

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ADVANCES IN NEUROLOGY VOL 92. ISCHEMIC STROKE. 2003. Edited by H.J.M. Barnett, Julien Bogousslavsky, Heather Meldrum. Published by Lippincott Williams & Wilkins. 502 pages. C$232 approx.

The newest edition in the Advances in Neurology series is a compilation of independent chapters on ischemic stroke in all its facets. Recognized stroke experts from around the world have contributed their interpretation of biology, therapy and recovery. The table of contents divides the volume into clinically relevant sections indicating that the book is designed for clinicians. This edition is designed for intermittent reading. A chapter on all the clinically important topics in stroke is present. While I read it cover to cover, the chapters that enlightened me will be different from those that reach other readers. The chapters that I found particularly helpful are described herein.

I found the chapters on genetic epidemiology most relevant and germane to current developments in stroke research. The discussion of the general epidemiology of stroke highlights what little we actually know about the distribution of stroke and its causes on a global basis. Much remains to be done to clarify matters.

The discussion of stroke mechanism, in particular, stroke associated with aortic atherosclerosis was particularly well-written because it definitively described the place of aortic arch atherosclerotic disease and its risk factors. This condition is now well-placed for assessment by a clinical trial of alternate therapies to prevent recurrent events. Such a trial is ongoing or in the final planning stages.

Therapeutics in nonvalvular atrial fibrillation were eloquently described. Reviews of surgical and endovascular techniques for stroke prevention were thorough and again, help to place patients in the context of their disease – in part by restraining enthusiasm for nonbeneficial intervention.

The most interesting section of the book was the last one on the management of stroke sequellae. Robot-assisted upper limb