

technologists involved in intraoperative spinal cord monitoring.

Overall, I would recommend this book for purchase by neurosurgical or orthopedic departments who are engaged in intraoperative spinal cord monitoring.

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LUMBAR DISC HERNIATION. 1999. By Franco Postacchini. Published by Springer-Verlag Wien, New York. 623 pp. C\$442.52 approx.

Professor Postacchini is an orthopedic surgeon actively practicing at the University La Sapienza in Rome, Italy. In this self-authored book, he provides an exhaustive review of all aspects of degenerative lumbar disc disease. A glowing forward is narrated by James N. Weinstein.

The book appears to be well organized and the chapters are well planned and laid out. Chapter 1 addresses the historical aspects of lumbar disc disease. Subsequent chapters cover anatomy, biochemistry, biomechanics, pathophysiology, epidemiology, clinical presentation, diagnosis, treatment options, and outcomes. Chapter 24 completes the publication by reviewing professional liability. The amount of information contained in each chapter is often overwhelming. Clearly, much attention has been paid to providing a complete review of all pertinent publications. With a few exceptions, most chapters cite between 100 - 200 references and contain, on average, over 20 figures each. The text appears to be written in an objective fashion. Illustrations and figures are graphically descriptive, clearly reproduced, and pertinent. The index is cross-referenced, concise, and easy to use.

Passing consideration is provided to the patient with "discogenic" back pain and the potential indications for fusion. A brief introduction is provided for the various ALIF and PLIF procedures, but no mention made of their as yet, contentious outcomes. Quite understandably, this information is outside of the scope of this book.

In criticism, the English translation is occasionally problematic. In most instances the correct interpretation is immediately apparent to the reader, but at times confusion can arise. For example, the term "vertebral foramen" is used to indicate the spinal canal rather than the nerve root foramen, as one might more readily expect. Concavity and convexity are juxtaposed in reference to sacral anatomy. The term "backwards" is confusing and would be better replaced with inferior or posterior as appropriate. The section on historical perspectives reads a bit sterile, with often stark details lacking colorful background information pertaining to that period of history. In the section describing nerve root anomalies, MR anatomical correlates would be more helpful than myelographic findings.

In summary, Lumbar Disc Herniation by Franco Postacchini is the definitive reference text for degenerative conditions affecting the lumbar disc. This publication is comprehensive and provides meticulous detail in essentially all aspects of disc disease. For primary care physicians the book could serve as a useful reference tool in exploring rationale and methodology behind both non-surgical and surgical options for patient care. For the average neurologist and neurosurgeon, this book is not likely to change

present practice patterns. However, for the spinal enthusiast, this work provides an entire library (on a relatively narrow subject) at one's fingertips. No spinal reference collection will be complete without it.

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CASE STUDIES IN NEUROSCIENCE. 1999. By Ralph F. Jozefowicz, Robert G. Holloway. Published by F.A. Davis. 230 pages C\$59.13 approx.

This small, well-organized book will be useful to medical students and other health care professionals in training, as well as to those who teach them. It presents a series of case studies that cover a broad range of neurological topics.

Each chapter begins with definitions of key terms. This is followed by a case history and a description of the clinical examination. Diagnostic studies are presented that aid or help confirm the diagnosis. Once students have digested that material they are then presented with a series of questions designed to emphasize key points of anatomy, physiology, clinical presentation, diagnosis and management. Each question is then answered briefly and clearly.

While this book could be used in a variety of ways, its greatest utility may be in small group teaching that would allow the active engagement of the students by teachers. I expect there will be a tendency for students to cut to the answers too early in the course of case presentations, but by having teaching sessions structured around these cases, the teacher can add personal knowledge to the exercise. It will also be useful for students to help them consolidate their knowledge of basic and clinical sciences by relating them to actual case studies.

As with most medical publications price may limit the acquisition of this book, particularly when there are so many choices currently available.

*John D. Brown
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ATLAS OF PERIPHERAL NERVE PATHOLOGY. 1999. By Rosalind King. Published by Oxford University Press, Canada. 216 pages C\$248.00 approx.

This is an elegantly produced book with excellent light and electron microscopic pictures. The sections on preparation and artifacts deserves special mention for it should be of use to anyone involved in the processing of peripheral nerve and electron microscopy. Although not every disease is included in this atlas, it covers a wide range of normal microscopic anatomy of peripheral nerve, its ultrastructure and pathology. Some nonspecific changes are overemphasized for no apparent reason. There are redundant illustrations of fenestrated capillaries, regenerating clusters, vesicular myelin and minor perineurial changes. A greater criticism is focused on the importance given to endoneurial lymphocytic infiltrates for the diagnosis of CIDP. Many authors have pointed out that often endoneurial inflammation is not demonstrable in peripheral nerve biopsies in patients with proven CIDP. Some outdated information is conveyed under the rubric of perineuriosis.