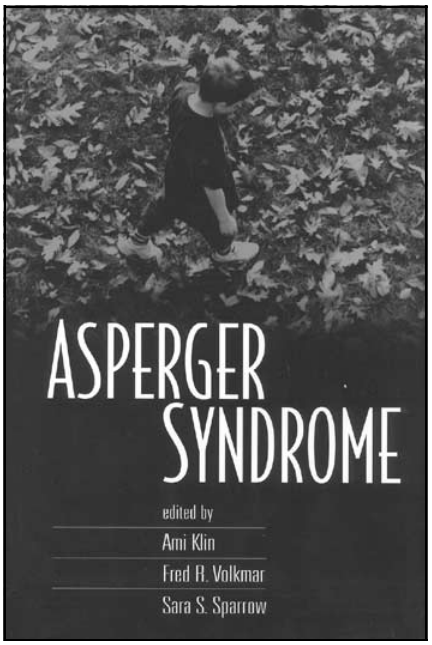
Asperger Syndrome

Edited by Ami Klin, Fred R. Volkmar & Sara S. Sparrow. New York: Guilford Press. 2000. 489 pp. £32.50 (hb). ISBN 1 57230 534 7



Call me sad, but when I was asked to review *Asperger Syndrome* my heart skipped a beat. The reasons: increasing numbers of people are being referred to mental health services for advice on 'Asperger's', yet little is known about the disorder; the editors of this book are pre-eminent in their field; and the people contributing chapters include outstanding researchers and affected individuals. So, what do we know already, and what was I hoping to learn?

We know that autistic disorder (comprising the genetically related subtypes of classic autism, high-functioning autism and Asperger syndrome) is a developmental neuropsychiatric condition and that it is associated with a significant increase in social exclusion and mental health problems. Core symptoms include impaired development of reciprocal social skills and communication, ritualistic/compulsive behaviour. Individuals with classical autism also have delayed language development and most have learning disability. However, around 25% are classified as high-functioning, because they have normal or superior general intellectual ability, in spite of having a history of early language delay. Individuals with Asperger syndrome have no history of language delay and have normal or superior intellectual abilities, but also show the characteristic impairments in reciprocal social interaction (Wing, 1997; Gillberg, 1998). Thus, in both high-functioning autism and Asperger syndrome there is a significant dissociation between cognitive and social skills.

There are also many things we do not know about Asperger syndrome. These include its genetic and neurobiological determinants, comorbidity with other mental health disorders, response to treatment, long-term outcome and the health and social costs to the person and their family.

Does this book help illuminate these issues and would I recommend it to researchers, clinicians and people affected by Asperger syndrome? My answers are "Well, sort of" and (respectively) "Yes", "No" and "No". The chapters on historical aspects, differential diagnosis, neuropsychology, brain imaging, language disorders and non-verbal learning disabilities are illuminating, and the contributions by affected people are valuable. However, there is little new information on issues of assessment, treatment or outcome. Also, some chapters seemed to be based mainly on work in classical or high-functioning autism. This is almost inevitable because our knowledge about Asperger syndrome is relatively limited. None the less, I could not help feeling that the book, while well intentioned and responding to our demand for more information, is slightly premature, given the current level of knowledge.

Gillberg, C. (1998) Asperger syndrome and high-functioning autism. *British Journal of Psychiatry*, **172**, 200–209.

Wing, L. (1997) The autistic spectrum. *Lancet*, **350**, 1761–1766.

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Behavior and Mood Disorders in Focal Brain Lesions

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The structure of this volume is theoretically based on a trichotomy, first developed by Albert, between instrumental, fundamental and executive cerebral functions. The first are essentially related to communication and are represented by cortical activities; fundamental refers to learning, information processing and mood; and executive functions are those related to abstraction, sequencing and attentional activities. The last two are predominantly subcortically and frontally driven, respectively. Abnormalities of the cerebral structures underlying these domains are represented by signature syndromes, which form the main text of the book.

After a brief review of relevant neuroanatomy, there follows a succession of chapters dominated either by a syndrome (e.g. depression and lesion location in stroke) or by anatomy (e.g. thalamic behaviour syndromes). The chapters are variable in their comprehensibility and length, and there is much repetition between chapters, which considerably lengthens the book and reduces its reader-friendliness. Furthermore, the trichotomy introduced in the discussion is somehow lost sight of.

There is a disappointing adherence to the value of using DSM–IV in behavioural neurology, and the subtlety of mental-state changes specifically related to neurological damage is not well developed. An obvious example is in the field of epilepsy. In the chapter on the evaluation of behaviour, in which behavioural rating scales are discussed, the Bear–Fedio inventory (introduced to evaluate temporal lobe syndromes) is not listed. In the chapter on temporal lobe syndromes, one of the most specific of all neurobehavioural abnormalities, the postictal psychosis of temporal lobe epilepsy is not even mentioned. Of the five references given to support the contention that there is no link between temporal lobe epilepsy and psychosis, one is a review article and the other four support the proposition that there *is* a link.

These are perhaps quibbles about a book that undoubtedly contains some excellent review chapters, all well referenced, and of considerable value for those references alone. There is a wealth of important behavioural neurology within it and there is no comparable text that covers this important topic.

The book is dominated by French and American authors, and it is significant to have chapters by French behavioural neurologists. Since the time of Charcot there have been many contributions to neuropsychiatry from France, but they are often not well represented in contemporary texts. How-

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