

central nervous system. Beyond library purchasers, this book is targeted on senior trainees and hospital based consultants in clinical neurology and infectious diseases. As is correctly highlighted in the preface, the editors suggest that the comprehensive nature of this text makes it appropriate for "advanced readers". This is the second edition of a book first published in 1991. The second edition is significantly expanded with 51 chapters compared to 37 in the first edition. Chapters are added to recognize CNS syndromes attributed to the herpes virus group. Esoteric infectious diseases of the central nervous system due to Whipple's disease and Bartonella infections are included. Two new chapters recognize the unique management problems of infectious diseases in post-neurosurgical patients in the intensive care unit. As with many multi-authored texts, this reviewer can't help but notice certain editorial biases. By way of example, the chapter on recognition and management of central nervous system infections in HIV patients is a mere 12 pages in length. On the other hand the chapter on central nervous system trypanosomiasis is 22 pages in length.

In the introduction to this text there is a avowed commitment to syndrome presentations wherever possible rather than microbiologically identified topic material. The very first chapter entitled "Approach to the patient with central nervous system infection" is a brief but beautifully organized example of a syndromic approach to the clinical presentation of patients with central nervous system infections. The chapters on "Acute Bacterial Meningitis", "Brain Abscess" and "Chronic Meningitis" adhere closely to the intended syndromic organization of the text. For this reason these chapters are particularly useful in guiding the clinician in investigation and empiric therapy before final microbiological or pathological results are available.

Many subsequent chapters that discuss bacterial, fungal and parasitic infections of the central nervous system are, however, organized on the classic format of microbiologically identified infectious diseases. Each of these chapters then contains a discussion of the epidemiology, pathology, clinical presentation, diagnostics, and therapeutics of each of these microbiological entities.

Overall the organization, writing, and editing of this text is of a high quality. The reference list at the end of each chapter is extensive indeed, sometimes running to over 400 references. Many of these references have been published since the first edition was released in 1991. Accompanying tabular material, algorithms, radiographs, and micrographs are of the highest quality.

In summary the second edition of this text remains the untested library standard for those practitioners of clinical neurology and infectious diseases who are seeking a highly authoritative text in the domain of infectious diseases of the central nervous system.

*D. McNeely  
Toronto, Ontario*

**NEUROLEPTIC-INDUCED MOVEMENT DISORDERS.** 1996. Edited by Ramzy Yassa, N.P. Vasavan Nair and Dilip U. Jeste. Published by Cambridge University Press. 494 pages. \$C130.00 approx.

The book "Neuroleptic induced Movement Disorders" has been written in 7 parts: Part 1. Historical Perspective; Part 2. Clinical aspects of tardive dyskinesia; Part 3. Mechanisms underlying tardive dyskinesia; Part 4. Measurement of tardive dyskinesia; Part 5. Tardive dyskinesia in different populations; Part 6. Other neuroleptic movement disorders; and, Part 7. Treatment of tardive dyskinesia.

In Part 1, the authors describe the historical perspectives about tardive dyskinesia and discuss the role of different academic organizations in updating the knowledge concerning tardive dyskinesia.

In Part 2, the clinical aspects of tardive dyskinesia have been discussed with special reference to age, gender, type of psychiatric disorders, diabetes mellitus, genetic factor, smoking, neuroleptic treatment, and anticholinergic drugs. Role of neuroleptics in producing movement disorders has been emphasized as a multivariate rather than univariate risk factor along with age, type of neuroleptic with dosage and duration.

In Part 3, basic sciences related to neuroleptic induced movement disorders have been described. In addition to, neurochemistry, where striatal receptors are the center stage of multiple neurohormonal interactions, advances regarding the role of neuroimaging and role of animal model in further studies of pathophysiological aspects have been made. Close relation of cognitive disturbances and emergence of dyskinesia have been observed.

In Part 4, a short discussion about the utility of several instrument measures for purposes of documentation, detection of subclinical dyskinesia and differential diagnosis from other closely similar movement disorders has been included. This part provides a scope of selecting an option for assessment of different movement disorders for research purposes.

In Part 5, the authors have discussed in great depth the epidemiology of tardive dyskinesia in different populations. Low prevalence rate in Asia populations has been explained in the basis of limited neuroleptics usage and possible genetic differences. These observations encourage the future epidemiological study of the genetics of this disorder.

In Part 6, a good discussion about other varieties of drug induced disorders such as drug induced Parkinsonism, acute dystonia, tardive dystonia and tardive akathisia has been provided with respect to clinical features, risk factor, differential diagnosis and management protocol.

In the last section the authors have included a discussion of the role of newer antipsychotic drugs in reducing the incidence of extra pyramidal side-effects, and the possible role of gabergic transmission in pathophysiology and treatment of tardive dyskinesias. A short introduction about the encouraging role of biofeedback as an adjunctive procedure for training oral-lingual suppression of dyskinesic movement has been included.

This book is a comprehensive book on neuroleptic induced movement disorders – possibly written keeping in mind the need of those engaged in psychiatric practices. This will be helpful for residents, fellows, practicing psychiatrists, researchers, and clinical neurologists with interest in Movement Disorders. However it could be better if more tables could be added in epidemiology section. A section on clinical pattern of different movement disorders under tardive dyskinesia and differential diagnosis from chorea, athetosis and multiple tic disorders could be beneficial. Approach to treatment could be given in an algorithm form for quick overview.

Lastly, the authors should be congratulated for completing the great task of writing this book, particularly against the background of the inclusion of this topic mostly as a chapter in most of the text books on Neurology, Psychiatry and Movement Disorders.

*S. Das  
Calgary, Alberta*