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is a section on childhood amnesia and its functional components and a section that addresses cultural and social influences in the development of memory. The chapter also broaches what little is known about the development of metamemory and prospective memory. The author thoughtfully cautions on the inevitability of including not just the analysis of the various kinds of memory, but also of other aspects of cognition and social factors in the study of memory development.

Chapter four provides an account of amnesias of child-hood and adolescence. Here, Narbona tells us about the general characteristics of childhood memory disorders and explains the differences between episodic memory—that tends to be affected—and semantic and procedural memory—that tend to be preserved. The author addresses the prevalence of childhood memory disorders in normal, learning disabled, and mentally deficient children. He explores in some detail memory disorders after bilateral partial hippocampal lesions and gives a thorough review of the consequences of bilateral mesiotemporal, mammillary, and thalamic lesions in childhood. A separate section addresses childhood epileptic states and temporal lobe surgery. Lastly, the author briefly discusses the possible contribution of disordered memory in language disabilities.

The last two chapters of this book are written by Soprano and address the assessment of memory and the treatment of childhood memory disorders. The author wisely cautions that the assessment of memory in children is in its infancy and that only in the past few years have the different aspects of memory been analyzed separately. She goes on to give an account of generic methods to assess the different kinds of memory (short-term, long-term, etc.) and she gives advice on signs and symptoms that warrant an evaluation of the child. She suggests a clinical examination followed by a psychometric examination, itself followed by an experimental examination (to clarify issues that may not have become evident during the two previous steps). The author goes on

to give a description of tests of memory for children and adolescents available in English and in Spanish. This is followed, in the last chapter, by some considerations on whether it is possible to learn to remember and the lack of efficaciousness of early repetitive techniques as rehabilitation tools and the well-known mnemonic techniques. Model based intervention programs for children are also described. She provides a list of computer-based techniques. Unfortunately, little in the way of outcome data is presented. Outcome research is a relatively new field of investigation as is the promotion of evidence-based practice. This chapter reflects the relative lag in our knowledge.

The book is uniformly well written and easy to read. It is well-organized, comprehensive, brief and to the point. Both authors do a great job of synthesizing the pertinent international literature. There is a wealth of information on early and later seminal work in the area of human memory and on the more recent study of its role in cognitive development and its disorders. *La Memoria del Niño* offers the clinician a thorough and insightful review of of memory, its development, and its pathology from two vantage points: that of the neuropsychologist and that of the neurologist. The first four chapters of this volume represent an invaluable reference for neuropsychologists, neurologists, and educators in the Spanish speaking world.

This reviewer has some cautionary notes for the reader, however, about the final two chapters. The list of available memory tests is, for the most part, just a list. Many of the tests listed do not even exist in Spanish and, when they do, there is little attempt to provide guidance as to the linguistic or cultural validity of the translation or adaptation. Therefore clinicians wishing to use many of these instruments will have to do their own homework. The final chapter may be of use to clinicians struggling to find rehabilitation or intervention tools provided they are aware of the realities of current research in this area.

## A Comprehensive Update on Frontotemporal Dementia

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Frontotemporal Dementia Syndromes. John R. Hodges (Ed.). 2007. Cambridge, UK: Cambridge University Press, 346 pp., \$110.00/£55.00 (HB)

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Neuropsychologists working with dementia patients can readily access many resources dedicated to Alzheimer's Disease (AD). Harder to find is a book devoted exclusively to frontotemporal dementia (FTD), particularly a recent publication. Since the consensus paper on the diagnostic criteria of the FTDs (Neary et al., 1998), there has been an

upsurge in research into this disease and its related syndromes. Many advances have been made in the areas of neuroimaging, neuropathology, and genetics, as well as neuropsychology. *Frontotemporal Dementia Syndromes*, edited by John R. Hodges, offers a much-needed review of the current status of the field. The authors are researchers

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and clinicians at the forefront of the discipline, and all have collaborated at one time at the specialist FTD clinic at Addenbrooke's Hospital in Cambridge, UK. However, the text offers a thorough survey of the broader literature and is targeted to both clinical and scientific audiences.

Chapter 1 begins with an overview of frontotemporal dementia, including the evolution of the terms for this spectrum of dementing disorders. According to Hodges, Arnold Pick in 1892 described patients with progressive language difficulty, all with marked unilateral temporal atrophy. Later, he focused on patients with prominent behavioral and personality changes as a result of bilateral frontal pathology, who were discovered to have argyrophilic intracytoplasmic inclusions (Pick bodies) histologically. In the 1920s, the term "Pick's disease" centered on these frontal lobe changes whilst neglecting temporal lobe degeneration. By the 1980s, cases of frontal lobe atrophy without Pick bodies came to be known as "frontal degeneration of the non-Alzheimer type." This preceded the Neary et al. (1998) paper, which divided frontotemporal lobar degeneration (FTLD) into FTD, the primarily behavioral variant, and two aphasic variants: progressive non-fluent aphasia (PNFA) and semantic dementia (SD). In this chapter, Hodges further describes the subforms of FTLD used in Cambridge, introducing the term "frontal/behavioral variant of FTD" (bv-FTD) in addition to PNFA and SD. He also discusses how FTD (or FTLD) is unique amongst dementias in its selective involvement of brain areas involved in social cognition, language, and semantic memory.

Graham, the author of Chapter 2, addresses the epidemiology of FTD. While FTD is reportedly much less common than AD, its incidence depends on whether you are looking at a community based sample (which has a base rate of approximately 5%) or a clinic based sample (with a more biased 15–30% incidence rate). He also describes the age of onset, which is earlier than for AD, and prognosis.

The next three chapters are probably the most interesting and helpful to those neuropsychologists who assess dementia patients and routinely make differential diagnoses. In Chapter 3, Kipps, Knibb, and Hodges describe the clinical presentations of FTD, including behavioral, psychiatric and language manifestations, and suggest behavioral rating scales and cognitive screens. Since neuropsychological assessments may be normal in by-FTD, behavioral rating scales become paramount. Case examples from the contributors' clinical experiences highlight the presentations. This chapter also outlines useful diagnostic criteria to differentiate FTD from AD and other neurodegenerative disorders (including dementia with Lewy Bodies (DLB), vascular dementia, and some of the "overlap" syndromes discussed in more detail in the next chapter). Overlap syndromes involve a mixture of symptoms of two different diseases in one patient. Chapter 4, by Bak, reviews the overlap syndromes with FTD, including motor neuron disease (MND), corticobasal degeneration (CBD), progressive supranuclear palsy (PSP), Parkinson's linked to chromosome 17, and amyotropic lateral sclerosis (ALS). Again, case examples illustrate the diagnoses. The neuropsychology of FTD is discussed in Chapter 5 by Hodges and Patterson. The cognitive profiles of bv-FTD, PNFA, and SD are covered, including dysexecutive, memory and language impairments, as well as less commonly assessed areas such as decision-making, social cognition, emotional processing, and empathy.

Chapters 6, 7, 8, and 9 likely represent the areas of greatest research progress. In Chapter 6, Nestor writes about the neuroimaging (MRI, PET, SPECT, and EEG) of the three clinical subtypes of FTD. The majority of the references cited here are less than ten years old. Comparative color figures clearly demonstrate structural and functional changes in FTD. Davies and Xuereb, in Chapter 7, cover histopathology. They elucidate how the pathological subtypes differ from the clinical entities, and are divided by the presence or absence of tau abnormalities (taupathology). Chapter 8, by Gasparini and Spillantini, is a more technically challenging chapter on molecular neuropathology, and Brown, in Chapter 9, summarizes the genetics of FTD. The latter focuses on the role of chromosome 17 in FTD, although concluding that FTD is likely polygenic. Brown further states that genetic factors appear important in FTD, probably more so than in AD.

Readers craving information on interventions with FTD patients and their families will find it hard to wait until Chapter 10 (Lough and Garfoot). This last chapter addresses psychological interventions. In it, the authors suggest that the psychologist's role is threefold: diagnosis, behavior management, and assessment of the needs of caregivers and families. Diagnosis is also covered in earlier chapters but, in Chapter 10, practical suggestions for behavior management and work with caregivers are offered through detailed case studies. The techniques used vary in many ways from work done with AD patients and their families. Behavior management, for example, can rely on environmental dependency, cognitive behavioral therapy (CBT), or techniques based on a model of social self-awareness and self-regulation. Family work focuses on education about FTD as well as reducing the caregiver's stress; each family is very different. The emphasis throughout is on a multidisciplinary approach, although noticeably absent is any discussion on pharmacological treatments, if only to augment psychological interventions. Perhaps this could have been addressed in a separate chapter. Lastly, even the book's appendices are thoughtful, and include the Cambridge Behavioral Inventory, resources for caregivers (admittedly, mainly for patients with AD), and website addresses. Unfortunately, the latter are specific to the U.K.

In conclusion, Frontotemporal Dementia Syndromes is a comprehensive resource for neuropsychologists, particularly those specializing in dementia, and would be a useful reference text in their libraries. This rarer form of dementia has experienced many definitional changes and research strides in the past decade, but a review of the literature was sorely needed. This edited text brings together many of the

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authoritative leaders in the field of FTD, is well-written, well organized, and very accessible with numerous tables, illustrations, figures, and case studies. Its chapter on psychological interventions in FTD may be a first, and leaves us wanting more. Both clinically and scientifically, it is a recommended and welcome addition.

## RECENT AND RELEVANT

doi:10.1017/S1355617708081320

Progress in Neurotherapeutics and Neuropsychopharmacology. Volume 3. Jeffrey L. Cummings (Ed.). 2008. New York: Cambridge University Press, 297 pp., \$180.00 (HB)

Stahl's Essential Psychopharmacology: Neuroscientific Basis and Practical Applications, Third Edition, by Stephen M. Stahl. 2008. New York: Cambridge University Press, 1117 pp., \$175.00 (HB); \$85.00 (PB)

Antipsychotics and Mood Stabilizers: Stahl's Essential Psychopharmacology, Third Edition, by Stephen M. Stahl. 2008. New York: Cambridge University Press, 232 pp., \$125.00 (HB); \$50.00 (PB)

The Normal Personality: A New Way of Thinking About People, by Steven Reiss. 2008. New York: Cambridge University Press, 212 pp., \$26.00 (HB)

Patient-Based Approaches to Cognitive Neuroscience, Second Edition, Martha Farah and Todd E. Feinberg (Eds.). 2006. Cambridge, MA: The MIT Press, 494 pp., \$55.00 (PB)

## REFERENCE

Neary, D., Snowden, J.S., Gustafson, L., Passant, U., Stuss, D., Black, S., Freedman, M., Kertesz, A., Robert, P.H., Albert, M., Boone, K., Miller, B.L., Cummings, J., & Benson, D.F. (1998). Frontotemporal lobar degeneration. *Neurology*, 51, 1546–1554.

Study Guide to Neuropsychiatry and Clinical Neurosciences: A Companion to the American Psychiatric Publishing Textbook of Neuropsychiatry and Clinical Neurosciences, Fourth Edition, by James A. Bourgeois, Narriman C. Shahrokh, Robert E. Hales, Stuart C. Yudofsky. 2006. Arlington, VA: American Psychiatric Publishing, 226 pp., \$29.95, (PB)

Prospective Memory: An Overview and Synthesis of an Emerging Field, by Mark A. McDaniel and Gilles O. Einstein. 2007. Los Angeles: Sage Publications, 264 pp., \$49.95 (PB)

From Molecule to Metaphor: A Neural Theory Of Language, by Jerome A. Feldman. 2006. Cambridge, MA: The MIT Press, 357 pp., \$36.00 (HB)

Neurobiology: From Molecular Basis to Disease, Robert Meyers (Ed.). 2008. Weinheim, Germany: WileyVCH, 836 pp., \$400.00 (HB)