

CONGENITAL HEMIPLEGIA. 2000. Edited by Brian Neville and Robert Goodman. Published by Cambridge University Press. 216 pages. C\$89.92 approx.

Congenital hemiplegia, a condition usually diagnosed in relatively early childhood, has been, over the years, and with developing technology, associated with a myriad of etiological factors. These factors can be prenatal or perinatal and while the clinical manifestations and their management may be relatively similar, the actual underlying disease may be as different as perinatal asphyxia, cortical migration disorder/schizencephaly or Sturge-Weber syndrome, to name a few.

In this book, the editors first successfully organize “congenital hemiplegia”, a term initially used in the pre-scan era, into a systematic classification based on clinical, neuro-pathological and MRI-based evidence. This is a major feat. They next address the clinical presentation and physical assessment of children outlining particular “gems” in the physical examination of such patients.

A substantial amount of the remaining chapters cover the therapeutic management of consequences of this condition, paying attention initially to orthopedic issues related to gait and the analysis of the particular pattern of dysfunction at the level of the affected lower extremity. Again, several key points relating to the examination of such patients and to the management options are brought out. They also cover upper extremity involvement and the management of epilepsy syndromes, which are a frequent consequence of congenital hemiplegia usually declaring themselves within the first few years of life. The last few chapters cover the management of emotional, social and educational issues for these children. This is also important because, as the authors point out, most children adapt well to their condition but none are cured of their deficits.

As a Pediatric Neurosurgeon interested in the management of cerebral palsy and spasticity as well as epilepsy, this fresh look at a relatively generous group of conditions under the hat of congenital hemiplegia is timely. The book bridges classical neurology with modern imaging and modern pathological classifications. It provides very helpful management information to the pediatric neurologist, pediatric neurosurgeon, pediatric orthopedist and physiatrist. It is also a very good reference text for psychologists, occupational therapists and physiotherapists dealing with these conditions. I would recommend it strongly for health professionals actively dealing with children with congenital neurological ailments from both the diagnostic and therapeutic ends. It may not be the best reference for the medical student starting to learn child neurology because it deals superficially with several very different diseases under the “umbrella” of congenital hemiplegia.

*Jean-Pierre Farmer
Montreal, Quebec*

DIAGNOSIS AND MANAGEMENT OF PERIPHERAL NERVE DISORDERS. CONTEMPORARY NEUROLOGY SERIES, NUMBER 59. 2001. Edited by Jerry R. Mendell, John T. Kissel, and David R. Cornblath. Published by Oxford University Press. 695 pages. C\$264.00 approx.

The Contemporary Neurology (or “Black Book”) Series of monographs on selected neurological topics has long been known to trainees and practitioners in neurology as an excellent resource for clinical neurology. The latest in this series, number 59, Diagnosis

and Management of Peripheral Nerve Disorders continues that fine tradition. The three principal authors are internationally renowned clinical and scientific experts in this field, and wrote or co-wrote nearly all the chapters in the book, creating a book with an evenhanded approach and consistently high content quality.

Part 1 of the book, Chapters 1 – 8, consists of chapters on general topics such as clinical approach, biopsy, other laboratory testing, and approach to painful neuropathy. Included is a unique chapter on autoantibody testing – a controversial topic in this field which the authors handle well. I might have liked a chapter here on the practicalities of using immune suppressive treatment. Part 2 of the book includes 23 chapters focusing on individual diseases or groups of diseases causing peripheral neuropathy, including two chapters on entrapment neuropathy and plexopathy.

The book has many outstanding features. Probably most striking is the quantity and quality of illustrations. As indicated by the authors in their preface this is an intentional emphasis which proves well worth their efforts. The coverage of topics is very comprehensive. These authors are very active in clinical management of patients, and this is evident in the frequent use of case reports, discussion of clinical dilemmas, and a rational approach to treatment. In some cases (especially with paraprotein associated neuropathies) I might have liked the details of immune suppressive management to have been fleshed out better in some cases. With authors of such experience I would have been interested in their personal opinion in addition to the brief literature review presented.

The book takes the approach of starting with a specific disease, and discussing its manifestations. This is done very well. However, except for a chapter on painful neuropathies there is no discussion from the starting point of a clinical syndrome; the neurology resident looking for a discussion of differential diagnosis of GBS or CIDP will largely be disappointed.

In summary, this is an excellent monograph which highlights the many advances that have been made in understanding, diagnosis and management of peripheral nerve disease in the past decade. When asked by neurology residents or non- subspecialist colleagues what single book they should read cover to cover on the topic of peripheral neuropathy, I will indicate that this is the one.

*Gyl Midroni
Toronto, Ontario*

CLINICAL DIAGNOSIS AND MANAGEMENT OF ALZHEIMER’S DISEASE. Second Edition. 1999. Serge Gauthier, Ed published by Martin Dunitz, London. 386 pages \$C185.00 approx.

There are some books that one would expect to find on the shelves of medical school and hospital libraries. This volume should be one of those. Physicians and others experienced in the care of individuals with dementia will appreciate how relevant each and every chapter is to the day-to-day management of these disorders.

Our knowledge of the biological substrates of Alzheimer’s disease and of approaches to the clinical management of the disorder has expanded rapidly. The treatment of the topic in this volume is unexcelled in its clarity of exposition and in bringing information of clinical relevance from diverse fields of study to the forefront.

The volume is organised in seven sections including introductory chapters touching on pathophysiology, diagnosis, natural history,

medical management, community and institutional management, and ethical and legal issues. The format is attractive with numerous boxes and tables to assist in organising the information. Important points in the text are bulleted. The authors of the individual chapters include many prominent workers in the field. The book is authoritative but remains very readable. It is not encyclopedic but focuses on the most important concepts and developments in the study of Alzheimer's disease. It is well-referenced and an exploration of these references will expose the interested reader to the breadth of recent advances in our understanding of Alzheimer's disease.

A sampling of the content in the Medical Management section begins with a chapter on Mood and Behaviour Management. Introductory comments address the alterations of pharmacodynamics in the elderly. Next follows an approach to assessment and management of depression in patients with Alzheimer's disease. Nonpharmacological management is discussed including insight-oriented psychotherapy or cognitive therapy strategies for mildly impaired individuals and behavioural strategies for more severely impaired patients. Information is presented regarding the selection of the most appropriate cyclic antidepressant, properties and selection of the various SSRI antidepressants, atypical agents and MAO inhibitors, selection of patients for ECT, duration of treatment and how to approach the patient who fails to respond to treatment.

Similarly, behavioural disturbances such as delusions, hallucinations, misidentification, wandering, insomnia, agitation and aggression, catastrophic reactions, eating disorders and disruptive vocalizations are dealt with in terms of nonpharmacological approaches and pharmacological treatment with antipsychotics, benzodiazepines, antidepressants, mood stabilizers, beta blockers and cholinergic agents. Specific applications for the different classes of medication are discussed. Where available, results of controlled clinical trials are outlined.

Subsequent chapters describe symptomatic treatments including cholinergic agents; stabilization approaches or disease modifying agents; and treatment of associated medical conditions and complications. The second edition discusses the role of antioxidants, anti-inflammatory drugs, MAO-B inhibition, estrogen replacement therapy, neurotrophic factors and cholinergic agents as neuroprotective agents in the treatment of Alzheimer's disease.

Clinical Diagnosis and Management of Alzheimer's disease can be heartily recommended as a reference for medical and allied health students. It will serve as an excellent guide for medical, psychiatry and neurology housestaff and practitioners alike.

*Paul A. Shelton
Winnipeg, Manitoba*

DISEASES OF THE SPINE AND SPINAL CORD. 2000. By Thomas N. Byrne, Edward C. Benzel, and Stephen G. Waxman. Published by Oxford University Press. 416 pages. C\$192.00 approx.

This book offers a great deal of information about common disorders of the spine and spinal cord, and is sufficiently inclusive to act as a reference book for the broad spectrum of disorders of the spine and spinal cord. It has many positive features, and only a few shortcomings.

The authors have intended to be neurologists and neurosurgeons including trainees. In general, the book will be of greater value for neurologists than for neurosurgeons.

It includes detailed descriptions of the anatomy of the spine and spinal cord and comprehensive rendering of the multitude of clinical syndromes associated with diseases of the spine and spinal cord. There is also a useful discussion of pain associated with lesions of the spine and spinal cord.

Although the authors have included the more modern imaging techniques with CT and MRI, there is still an unnecessary display of myelograms. The selection of MRIs and the quality of the reproduction are often disappointing.

Although there is an attempt to discuss the pathophysiology of many of the reported conditions, the discussion is often rudimentary. For example, the issues of spinal shock, central cord syndrome and blood supply of the spinal cord are quite incomplete and not up to date. Furthermore, surgeons will find the discussion of spinal cord and spinal trauma, syringomyelia and spinal cord tumours to be quite incomplete.

*Charles H. Tator
Toronto, Ontario*

DIFFERENTIAL DIAGNOSIS IN NEURO-ONCOLOGY. 2001. By Jerzy Hildebrand and Michael Brada. Published by Oxford University Press. 298 pages. C\$157.95 approx.

Neuro-oncology is an expanding subspecialty within Neurology, and perhaps because of a perceived scarcity of relevant texts, the past few years have witnessed the publication of a number of monographs dealing with a number of topics in clinical neuro-oncology. Cancer and its treatment frequently involve the nervous system, with perhaps 25% of all cancer patients developing neurologic complaints at some point during their illness. However, in this country most cancer patients with neurologic symptoms are not evaluated by neuro-oncologists, who for the most part work in specialized cancer centres and concentrate their efforts on the management of patients with primary brain tumors. Consequently, a cancer patient usually relates his neurologic ailments to his primary physician, usually a medical or radiation oncologist, or an internist, who may or may not obtain a neurologic consultation.

Jerzy Hildebrand and Michael Brada are two seasoned European neuro-oncologists who have co-authored an interesting and somewhat unique neuro-oncology text entitled "Differential Diagnosis in Neuro-Oncology." This book is not intended to serve as a comprehensive neuro-oncology reference text, rather it is designed to assist the clinician in diagnosing and managing neurologic problems arising in patients with known or suspected cancer. To achieve this goal, the authors have organized the 12 chapters of this text by symptoms such as altered consciousness, epileptic seizures, cerebellar dysfunction, and muscle disorders and fatigue, to give but a few examples of chapter titles. Each chapter is organized according to a standard template with four main sections: clinical presentations; potential causes, including neoplastic and treatment-related; relevant investigations; and, finally potential therapies. Each chapter is generously illustrated with numerous MR and CT scans (imaging is the essential investigation in neuro-oncology), and tables and algorithms help the clinician develop a simple but comprehensive approach to the diagnosis and management of common neurologic symptoms. Moreover, relevant and current references for each chapter provide the interested clinician with an opportunity to obtain more detailed information if desired or needed.