

BOOKS RECEIVED

HANDBOOK OF EPILEPSY TREATMENT. THIRD EDITION. 2010. By Simon Shorvon. Published by Wiley-Blackwell. 418 pages. C\$95 approx.

NEUROMUSCULAR ASPECTS OF SPORT PERFORMANCE. VOLUME XVII OF THE ENCYCLOPEDIA OF SPORTS PERFORMANCE. 2011. Edited by Paavo V. Komi. Published by Wiley-Blackwell. 307 pages. C\$190 approx.

AGING AND AGE-RELATED DISORDERS. OXIDATIVE STRESS IN APPLIED BASIC RESEARCH AND CLINICAL PRACTICE. 2010. Edited by Stephen Bondy, Kenneth Maiese. Published by Humana Press. 471 pages. C\$205 approx.

WHY WE SEE WHAT WE DO REDUX. A WHOLLY EMPIRICAL THEORY OF VISION. 2011. By Dale Purves, R. Beau Lotto. Published by Sinauer Associates, Inc. 262 pages. C\$60 approx.

COMPUTATIONAL MODELS OF CONDITIONING. 2010. Edited by Nestor Schmajuk. Published by Cambridge University Press. 275 pages. C\$105 approx.

BOOKS REVIEWED

FOCAL PERIPHERAL NEUROPATHIES, FOURTH EDITION. 2010. By John D. Stewart. Published by JBJ Publishing. 692 pages. C\$200 approx.

Rated ★★★★★

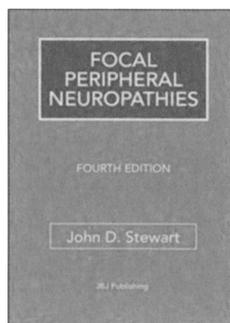
“Focal Peripheral Neuropathies” is a recently published and very well written textbook, whose title is self-explanatory, and which should be on the shelves of every neurologist, physiatrist or other specialist who sees patients with focal numbness or weakness, which in the end is most of us. It’s highly readable, helped immensely by the fact that it is organized in a logical and consistent fashion.

The initial chapters are devoted to the basics of the structure and anatomy of the peripheral nervous system, pathology of peripheral nerves, neurophysiology, and general principles of how to diagnose focal neuropathies. The information in these initial pages is, although not essential to the understanding of more clinically applicable material in subsequent chapters, nonetheless invaluable to understand what we see in the clinic and EMG lab in patients with focal neuropathies.

Subsequent chapters address specific peripheral nerve disorders and are organized neuroanatomically, including chapters on nerves arising from the cervical and lumbar spine, brachial and lumbosacral plexus, and chapters devoted to the individual major nerves in the arms and legs. Each is similarly organized, beginning with a clear and concise description of the clinically relevant neuroanatomy. The author also discusses frequent anatomic

variations that can produce clinical and electrophysiological confusion. This is followed by a discussion of possible etiologies and lesions of the individual peripheral nerves, organized logically and anatomically, beginning with lesions affecting the proximal portions of the nerve and moving towards the periphery. Easily digestible tables list the common causes for neuropathies at each of these locations. Dr. Stewart’s extensive clinical experience with disorders of the peripheral nervous system is readily apparent in the ensuing discussion on the clinical features, with many “pearls” about the clinical diagnosis of the various neuropathies, including a concise summary of the pertinent literature. This is followed by discussion of the ‘real world’ differential diagnosis, mirroring the clinical thinking applied when seeing patients with specific motor or sensory complaints. The value of the various diagnostic tools for each nerve and at each location is then discussed, with a concise and useful discussion of the electrophysiological studies. This part of the text does not provide a detailed description of the techniques involved, but provides insight into the specific techniques available, addressing both their potential values and shortfalls. This overview is aimed towards physicians who might order EMG studies or receive reports of such studies, but often provides very useful electrophysiological pearls which those of us who use this diagnostic tool in day-to-day practice will benefit from. Increasingly imaging, whether MRI or ultrasound, is of use in the diagnosis of focal peripheral nerve lesions. The book provides an excellent summary of where imaging is, or might not be, useful. The final parts summarize the practical management of these disorders, again organized into the management of lesions of clinically important branches of each of the major peripheral nerves.

In this day of easy access to electronic literature searches, an obvious question before parting with your hard earned money is why any textbook, and why this textbook? Even with the availability of instant evidence based medicine through PubMed



searches, Dr. Stewart's knowledge of the field allows a comprehensive review of the pertinent literature, with numerous and up-to-date references to back up the discussion in each chapter. I frequently found very useful references that would not otherwise be easily accessible in a literature search using key words. As to why this textbook, the answer is easy. I have found previous editions of this textbook incredibly useful in my day-to-day practice, and the current one even more so. This is a single author publication from a widely respected clinician and electrodiagnostician who has a wealth of experience in the diagnosis and management of disorders of the peripheral nervous system. His common sense approach to their diagnosis and management carries over in the way that the textbook is written, giving it all the readability of a best seller. Its 23 chapters, covering 692 pages, contain significant updates and revisions since the third edition, published some ten years ago. It is over a hundred pages larger, fully modernized and evidence-based! It contains a wealth of very practical and useful information, whether anatomic, clinical, diagnostic or therapeutic. The expanded material since the previous edition consists of new text sections, more and improved photographs, as well as updated references.

He provides a common sense, reasoned and balanced discussion regarding several areas of controversy (the disputed thoracic outlet syndrome, electrophysiologically normal "carpal tunnel syndrome", radial tunnel syndrome, piriformis syndrome and others), again backed up with appropriate references from the literature and a summary of where the evidence supports, or more commonly does not, the existence of some of these entities.

The illustrations are numerous, appropriate and well done, with clear and relevant line drawings of the appropriate anatomy, numerous concise and easily read tables, excellent clinical photographs demonstrating a wide variety of clinical signs seen in various disorders of the peripheral nervous system and reproductions of relevant imaging.

Of the textbooks on my shelf, many of which I confess that I refer to rarely, this is one of the few that I consider absolutely essential and refer to frequently. I learn something new and useful every time I pick it up. It should be a mandatory possession for any "student", including those of us getting longer in the tooth, of peripheral neurology, as well as those whose interests are more inclined to the central nervous system, but whom inevitably will be faced with patients who have focal motor or sensory deficits suggesting localization to the peripheral nervous system. If you still think that a Tinel's sign is a useful way to diagnose a CTS, it's time to update your knowledge base. It is very easily read, highly practical and is suitable for clinicians at all levels; whether in training, generalists, specialist or subspecialist.

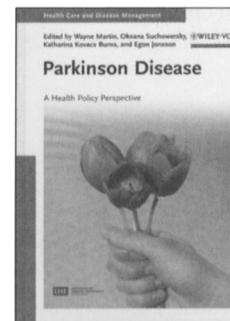
I truly can't think of a single reason why every neurologist should not own a copy of this book.

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PARKINSON DISEASE. A HEALTH POLICY PERSPECTIVE. 2010. Edited by: Wayne Martin, Oksana Suchowersky, Katharina Kovacs Burns, Egon Jonsson. Published by WILEY-VCH Verlag GmbH & Co. 336 pages. C\$125 approx.

Rated ★★★★★

According to the preface, the intended audience for this book is quite broad and includes health policy makers, family members and caregivers, healthcare professionals and social services providers. The text is organized into two parts. *Part I: Parkinson Disease – Diagnosis and Treatment* is a general review including clinical features, management of motor and non-motor features, palliative care and the economic costs of Parkinson disease (PD). The bulk of one chapter consisted of two tables – a 14 page table summarizing selected systematic reviews and a six page table summarizing selected practice guidelines; while the accompanying text is succinct, overall this chapter is a highly useful reference. A patient-authored chapter on her personal perspective using music, dance and art as therapy is included. My favourite chapter was by two Pharmacy faculty members reviewing natural health products in Parkinson disease which is of particular use to clinicians. Part I concludes with a chapter on highlights of current research in PD, acknowledging by name a few prominent Canadian scientists in the field.



Part II: The Case of Alberta, Canada starts with a chapter on the incidence and prevalence of PD in the province. Age-gender-standardized maps based on sub-regional health authority boundaries for incidence and prevalence of PD are presented; for those living in Calgary or Edmonton you can tell if your neighbourhood has a higher or lower prevalence of PD compared with the provincial average. Subsequent chapters include knowledge, service access and needs of PD patients; the experiences of caregivers; a well-written but brief chapter on concepts and measures of health-related quality of life in PD (with inclusion of commonly used scales at the end of the chapter); and a chapter comparing the quality of life in PD with the Canadian general population. The final chapter on policy considerations for Alberta recommends coordinating neurological services and establishing a committee to review the management of persons with neurological diseases - the conclusions and recommendations are reasonable though generic enough to apply universally for chronic illnesses.

All but one of the 21 contributors are from Alberta. The text is well organized and referenced and the lay-out of the pages makes it easy to read. Two appendices appear before the index – an FAQ sheet about PD and a glossary. Despite the various backgrounds of the authors (including physicians, nurses, physiotherapists, economists, pharmacists) the writing styles were not that dissimilar, making for a pleasantly cohesive text. I credit the editors for their efforts although I suspect the publisher played a role in the frequent appearance of the term "whilst", as I would not