

technologists involved in intraoperative spinal cord monitoring.

Overall, I would recommend this book for purchase by neurosurgical or orthopedic departments who are engaged in intraoperative spinal cord monitoring.

*Michael G. Fehlings
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LUMBAR DISC HERNIATION. 1999. By Franco Postacchini. Published by Springer-Verlag Wien, New York. 623 pp. C\$442.52 approx.

Professor Postacchini is an orthopedic surgeon actively practicing at the University La Sapienza in Rome, Italy. In this self-authored book, he provides an exhaustive review of all aspects of degenerative lumbar disc disease. A glowing forward is narrated by James N. Weinstein.

The book appears to be well organized and the chapters are well planned and laid out. Chapter 1 addresses the historical aspects of lumbar disc disease. Subsequent chapters cover anatomy, biochemistry, biomechanics, pathophysiology, epidemiology, clinical presentation, diagnosis, treatment options, and outcomes. Chapter 24 completes the publication by reviewing professional liability. The amount of information contained in each chapter is often overwhelming. Clearly, much attention has been paid to providing a complete review of all pertinent publications. With a few exceptions, most chapters cite between 100 - 200 references and contain, on average, over 20 figures each. The text appears to be written in an objective fashion. Illustrations and figures are graphically descriptive, clearly reproduced, and pertinent. The index is cross-referenced, concise, and easy to use.

Passing consideration is provided to the patient with "discogenic" back pain and the potential indications for fusion. A brief introduction is provided for the various ALIF and PLIF procedures, but no mention made of their as yet, contentious outcomes. Quite understandably, this information is outside of the scope of this book.

In criticism, the English translation is occasionally problematic. In most instances the correct interpretation is immediately apparent to the reader, but at times confusion can arise. For example, the term "vertebral foramen" is used to indicate the spinal canal rather than the nerve root foramen, as one might more readily expect. Concavity and convexity are juxtaposed in reference to sacral anatomy. The term "backwards" is confusing and would be better replaced with inferior or posterior as appropriate. The section on historical perspectives reads a bit sterile, with often stark details lacking colorful background information pertaining to that period of history. In the section describing nerve root anomalies, MR anatomical correlates would be more helpful than myelographic findings.

In summary, Lumbar Disc Herniation by Franco Postacchini is the definitive reference text for degenerative conditions affecting the lumbar disc. This publication is comprehensive and provides meticulous detail in essentially all aspects of disc disease. For primary care physicians the book could serve as a useful reference tool in exploring rationale and methodology behind both non-surgical and surgical options for patient care. For the average neurologist and neurosurgeon, this book is not likely to change

present practice patterns. However, for the spinal enthusiast, this work provides an entire library (on a relatively narrow subject) at one's fingertips. No spinal reference collection will be complete without it.

*R. John Hurlbert
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CASE STUDIES IN NEUROSCIENCE. 1999. By Ralph F. Jozefowicz, Robert G. Holloway. Published by F.A. Davis. 230 pages C\$59.13 approx.

This small, well-organized book will be useful to medical students and other health care professionals in training, as well as to those who teach them. It presents a series of case studies that cover a broad range of neurological topics.

Each chapter begins with definitions of key terms. This is followed by a case history and a description of the clinical examination. Diagnostic studies are presented that aid or help confirm the diagnosis. Once students have digested that material they are then presented with a series of questions designed to emphasize key points of anatomy, physiology, clinical presentation, diagnosis and management. Each question is then answered briefly and clearly.

While this book could be used in a variety of ways, its greatest utility may be in small group teaching that would allow the active engagement of the students by teachers. I expect there will be a tendency for students to cut to the answers too early in the course of case presentations, but by having teaching sessions structured around these cases, the teacher can add personal knowledge to the exercise. It will also be useful for students to help them consolidate their knowledge of basic and clinical sciences by relating them to actual case studies.

As with most medical publications price may limit the acquisition of this book, particularly when there are so many choices currently available.

*John D. Brown
London, Ontario*

ATLAS OF PERIPHERAL NERVE PATHOLOGY. 1999. By Rosalind King. Published by Oxford University Press, Canada. 216 pages C\$248.00 approx.

This is an elegantly produced book with excellent light and electron microscopic pictures. The sections on preparation and artifacts deserves special mention for it should be of use to anyone involved in the processing of peripheral nerve and electron microscopy. Although not every disease is included in this atlas, it covers a wide range of normal microscopic anatomy of peripheral nerve, its ultrastructure and pathology. Some nonspecific changes are overemphasized for no apparent reason. There are redundant illustrations of fenestrated capillaries, regenerating clusters, vesicular myelin and minor perineurial changes. A greater criticism is focused on the importance given to endoneurial lymphocytic infiltrates for the diagnosis of CIDP. Many authors have pointed out that often endoneurial inflammation is not demonstrable in peripheral nerve biopsies in patients with proven CIDP. Some outdated information is conveyed under the rubric of perineuriosis.

A lesion produced by the proliferation of perineural cells and known for many years as perineurioma; recent molecular studies demonstrate a clonal abnormality of chromosome 22 that strongly favour a neoplastic process. Incidentally, Figure 12.9 shows Ribosome-Lamellar complexes, nonspecific structures well known to electron microscopists.

These minor criticisms should not detract from a beautifully illustrated work that would be of help to those involved in the interpretation of peripheral nerve pathology.

*Juan M. Bilbao
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MIGRAINE & HEADACHE PATHOPHYSIOLOGY. 1999. By Lars Edvinsson. Published by Martin Dunitz. 184 pages C\$ 185.00 approx.

This is another book on migraine pathophysiology in this exploding field of new knowledge. Through a series of several concise reviews, most of the fundamental issues of neurovascular neurotransmitter anatomy, physiology and pharmacology pertinent to migraine are covered. The chapters on the innervation of intracranial blood vessels and on the neuronal messengers and peptide receptors in human cranial ganglia are informative and well written. An excellent review of the potential rôle of the 5-Hydroxytryptamine receptor subtypes in migraine is provided.

The information obtained from three animal research models (autoradiographic mapping of receptors, cortical spreading depression and neurogenic inflammation) is critically analysed and put into perspective.

Three chapters address the potential rôle of specific new methodologies for the study of vascular changes in the testing of potential new drugs for the treatment of migraine. A model of experimental vascular headache in humans is also presented.

Chapter 12 provides a good discussion on the cerebral hemodynamic changes in migraine. In addition to the oligoemic theory, the ischemic theory is discussed.

The last chapter discusses the place and limitations of animal models in migraine.

Of the 14 chapters in this book, seven review pertinent information on migraine neurovascular pathophysiology, five discuss potential new methodologies and the possible new information that could be obtained from human and animal models of migraine. No specific mention is made of the contribution of electrophysiological methods and neuroimaging in the understanding of migraine. Most of the book is devoted to migraine neurovascular events. It does not present the information on other types of primary headache disorders as the title would suggest.

For the clinician with a special interest in headache, this book provides a valuable concise summary of some of the pertinent information available for the understanding of the vascular neurobiology of migraine. For the researcher, new research methodologies are presented with a discussion on their potential limitations.

*Michel Aubé
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STURGE-WEBER SYNDROME. 1999. Edited by John B. Bodensteiner, E.S. Roach. Published by Sturge-Weber Foundation. 95 pages C\$75.42 approx.

This is a good but not great book. The last monograph on the subject of Sturge-Weber Syndrome seems to have been published 40 years ago. This new book summarizes the old and newer experience with this still mysterious disorder. The Forward is a concise and interesting two-page history of Sturge-Weber Syndrome. The overview chapter by Bodensteiner and Roach steals the thunder from most of the rest of the book. In eight short pages, most of the relevant information is presented. A carefully written chapter by Morelli outlines issues about port wine stains including indications and rates of success with laser treatment. Dr. Cheng reviews the ophthalmologic manifestations and provides an outstanding discussion of the problems in treatment of glaucoma. Roach and Bodensteiner then have a chapter on the neurologic manifestations of Sturge-Weber Syndrome. In this chapter, some of the sentences are word for word from the introductory chapter. Derrick Bruce reviews neurosurgical aspects although some of this is also covered in other chapters. The most puzzling chapter is by Maria et al about brain imaging as it relates to structure and function in Sturge-Weber Syndrome. There are two pages on the metabolic effects of cerebral hypoxia that do not seem clearly relevant and several pages on magnetic resonance spectroscopy without much evidence that it has been used to any benefit in Sturge-Weber Syndrome.

The final chapter is by Pat Gibson and emphasizes psychological issues of people with Sturge-Weber Syndrome. She clearly has great warmth for her patients but the chapter is somewhat generic for the effects of chronic disease in childhood. The anecdotes about Sturge-Weber are interesting and often poignant.

My main criticism of the book is that of its redundancy. The neuropathology is discussed in three separate sections and surgery is often mentioned outside the chapter on specific details of surgery. Sometimes the statements made in the book are not as quantified as I might have hoped. Various problems are called "rare" without any mention of exactly how many cases exist with the particular problem.

The book is much more comprehensive than all of the recent child neurology textbooks (Aicardi, Berg, Menkes, Ashwald and Swaiman). It will provide a good overview for residents encountering a first case. As an aging child neurologist, I am often anxious about being out of date. For others in my situation, a quick read of this book ensures that the advances in understanding and management of Sturge-Weber have not been massive. The book may not be of much help to families. Overall, I think it would be a good addition to libraries in pediatric hospitals.

*Peter Camfield
Halifax, Nova Scotia*

PARKINSON'S DISEASE: THE TREATMENT OPTIONS. 1999. Edited by Peter LeWitt, Wolfgang Oertel. Published by Martin Dunitz Ltd. 260 pages C\$185.00 approx.

Parkinson's Disease: The Treatment Options as stated in the preface gives an up-to-date review focusing on the important new developments in the treatment of Parkinson's Disease. Most of the 19 contributors are movement disorder experts with extensive