

experience in the diagnosis and treatment of parkinsonisms. The book is divided into 15 chapters with an additional one devoted to tables. The book chapters contain most of the important concepts and topics required if one was managing a patient with Parkinson's disease. Each chapter is well referenced with 8 of 15 having more than 100 references that include almost all the key references you would need if you wanted to delve deeper into a particular topic.

The chapters are easy to read and each follows a logical progression. For example, Chapter 6 on the epidemiology of Parkinson's begins with a brief review of the concepts needed to understand the topic. It then provides a very detailed discussion of the complexity of studying the epidemiology of neurodegenerative diseases and why many results seem vague and are not consistent across studies. Chapter 8 on the neuroprotective strategies goes into great detail outlining our current understanding of the basic mechanisms of why a particular treatment might be effective, then provides the clinical results using that particular strategy. Chapter 13 on the surgical approaches to Parkinson's disease provides the rationale of why lesions or deep brain stimulation in the thalamus, globus pallidus or the subthalamic nucleus might relieve the symptoms of the disease. It rightly points out our current lack of understanding of the mechanism of how they truly work but then details the clinical experience to date with each of the procedures.

As the main therapeutic treatments for Parkinson's involve levodopa and dopamine agonists, it is fitting that almost a third of the book deals directly with them. A comprehensive overview of the therapeutics is given in chapter 7, focusing on our knowledge gained by clinical trials, followed by an in-depth discussion of dopaminergic treatments in chapters 9, 10 and 11. Chapter 9 provides a detailed discussion of the current knowledge of levodopa and its complications followed in chapter 10 by its various formulations and strategies to improve its duration of benefit. Chapter 11 gives the current evidence of why dopamine agonist should be considered first line treatment for most young onset patients, yet why one might not want to consider their use in older onset patients.

A nice addition to this book, which many others discussing Parkinson's disease lack, is the chapter on rehabilitation, as many patients are now looking for alternate forms of therapy for their disease. This chapter provides the clinician with useful information about what patients can realistically expect from physical therapy based on the limited data available.

As discussed in the preface, the treatment of Parkinson's disease is ever evolving and the pace at which new knowledge is being gained is ever increasing. Most chapters contain 1998 references, yet no book can remain up-to-date. One example is the growing use of the new atypical antipsychotic, quetiapine, which is not mentioned in the chapter on the neuropsychiatric complications in Parkinson's disease. A second example is the recent important finding that alpha synuclein is one of the proteins found in Lewy bodies, yet it is not mentioned in chapter on the pathology of Parkinson's disease.

A minor criticism of the book is some of the figures. Figure 3.1 in the chapter on functional imaging really needs to be in colour, as you cannot make out which areas of the brain are being activated in the black and white images. As well, colour vs. grey-black figures of the schematic diagrams of the basal ganglion would be much easier to follow. The reproduction of the MRI showing a successful pallidotomy lesion is poor and difficult to see in figure 13.3.

Overall, this is a well-written book that is recommended for any

physician who is managing Parkinson's disease patients and wants an in-depth, up-to-date, well-referenced text that covers our current understanding and treatment of the disease.

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INS DICTIONARY OF NEUROPSYCHOLOGY 1999. Edited by David W. Loring. Published by Oxford University Press, Canada. 173 pages C\$39.95 approx.

This book is an initiative of the International Neuropsychological Society. It consists of definitions and descriptions, of varying length, divided into 26 chapters, related to the letters of the alphabet as in any dictionary. The definitions are mostly 75 words or less in length, helping to maintain a relatively homogenous content and style for the definitions.

The dictionary has limitations that were clearly intentional and *a priori* defined. This is not a listing of researchers and clinicians in neuropsychology; the names you will see are primarily related to named syndromes or tests. This dictionary is not a totally comprehensive source book. There is a specific focus, with clear direction to neuropsychology and neuropsychologists. The editors' rule of thumb for inclusion in the dictionary was what a postdoctoral fellow in neuropsychology would be expected to know. This included certain references to medical and clinical information that would be relevant to such an individual. The editor also suggests that the dictionary likely represents some North American bias.

There is lots to like in this dictionary. By involving individuals with special expertise as section editors, then having other individuals serve as overall reviewers, the editor has provided reasonable accuracy and consistency of the definitions. There is a nice touch wherein words that might be central to a definition are italicized to indicate that the information could be found in an independent dictionary. This ensures that the INS dictionary maintains its focus and is reasonable in size while providing adequate depth. The addition of certain definitions such as ADL (activities of daily living) was welcome and indicates the clinical relevance of the dictionary.

The brevity of the definitions differentiates INS Dictionary of Neuropsychology from other dictionaries such as the Blackwell Dictionary of Neuropsychology. This is a handy carry-around-reference book, the kind a fresh postdoctoral fellow, or even young behavioural neurology residents, might carry along with them.

In reviewing a dictionary, one does not read all of the definitions. I did a selective review, by looking for definitions that I would consider useful and interesting, or might consider controversial. I could not find anything on frontal-temporal lobar degeneration, a dementia disorder that I think is fairly relevant. One might also take minor exception with some of the definitions. For example, the definition of motor impersistence is not necessarily one with which I would agree in totality. However, the editors have posted warnings that, in some domains, there is still controversy about the precise definition.

In summary, would I recommend that students or neuropsychologists, or even neurologists, psychiatrists interested in neurobehaviour obtain this dictionary? I think they would find it a handy reference, which is precisely its purpose. Moreover, it is clear that this may be the first edition of other editions. The editor

welcomes modifications, and alternative definitions, to improve the dictionary. I think that this is an excellent start.

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ALCOHOL AND ALCOHOLISM – EFFECTS ON BRAIN AND DEVELOPMENT. 1999. Edited by John H. Hannigan, Linda P. Spear, Norman E. Spear, Charles R. Goodlett. Published by Lawrence Erlbaum Associates. 292 pages C\$97.93 approx.

This book gives a comprehensive account on studies in the effect of alcohol on the developing brain. Every chapter is clearly written with a good summary which explains the current status of knowledge related to the topic. The first two chapters discuss the deleterious effects of alcohol on the structural and neuropsychological development of the brain as well as the risk factors for brain damage. This leads naturally into the next chapter on studies in neuroplasticity. The following chapters on temporal windows of vulnerability, modulation of GABA receptor-gated ion channels, as well as genetics leave many open-ended questions. Based on animal models, the next four chapters have more clinical relevance which might provide more insight into adolescent drinking problems, alcohol deprivation, alcohol transfer to milk and its interaction with infants, as well as the alteration of drug responsiveness in infants by alcohol. There still exists a question of how to relate these animal studies to humans. The chapter on treating individuals with alcohol problems, though well-written, is somewhat incongruous in the context of this book. There is a large jump from various animal studies on alcohol-related neurodevelopmental disorders to practical rehabilitation management of alcohol abuse in the human. Though it is well-appreciated that prevention of such disorders may be achieved by treatment of women with alcohol abuse, this chapter does not appear to relate to any of the previous chapters.

As a reader, I would like to see more illustrations on the neuroanatomical defects and more diagrams or images (such as microscopic sections, in-situ hybridization photographs, etc.) related to various experimental designs. The graphical presentations in this book are all line graphs and bar graphs, some of which are complicated and difficult to interpret.

Overall, the book provides a complete review on the current animal models for studies in alcoholism. It is a useful reference for those interested in the field and it provides useful information for physicians who manage patients with problems of drug abuse.

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MULTIPLE SCLEROSIS THERAPEUTICS. 1999. Edited by Richard A. Rudick, Donald E. Goodkin. Published by Martin Dunitz Publishers. 592 pages C\$227.05 approx.

The advent of disease-modifying therapies for relapsing - remitting MS in the early 1990s represented a watershed in MS management: gone was the therapeutic nihilism of the past, replaced by hope that further major therapeutic advances against MS would occur in the near future. In its 574 indexed pages and 40 multi-authored chapters, this book comprehensively reviews the field of

MS therapeutics and partially fulfills this expectation. All aspects of MS treatment are covered including the use of interferons and glatiramer acetate in relapsing-remitting disease as well as chapters on primary and secondary-progressive MS and symptomatic management. The scope of the book is much broader than this, as it also contains detailed chapters on MS clinical trial methodology, measures of impairment and disability, neuropsychological function, quality of life, MRI measures of disease burden and activity and many other more obscure aspects of MS therapeutics.

I believe this is the most comprehensive book written to date on this subject. Each chapter is well-referenced and the index is more than adequate. Like all multi-authored texts, there is a certain unevenness in style from one chapter to the next as well as opinions between authors on specific subjects which are at times discordant. However, since most issues in the management of multiple sclerosis are open to debate, this discordance is a reflection of reality.

Particularly strong chapters in this book which are essential reading for any MS-oriented neurologist include the preface by Dr. Henry McFarland, chapter 1 on clinical trial design by Richard Rudick and Donald Goodkin, chapter 9 on magnetic resonance spectroscopy by Dr. Douglas Arnold and Paul Matthews and chapter 19 on MS Pathogenesis by Bjorg Oxenborg and Steven L. Hauser.

Unfortunately, the article on the management of relapsing-remitting MS, arguably one of the most important in terms of its practical effect on patient treatment practices regrettably departs from the strictly evidence-based style of the other 39 chapters, in favour of the personalized perspective of its author Dr. E. Frohman. To quote "The therapeutic approach described in this chapter represents the opinion of one dedicated MS physician. In some instances there is little literature-based evidence to support opinions" (p416). That is certainly correct.

For example, he strongly endorses the early and indefinite use of disease-modifying therapy "in all patients with a confirmed diagnosis of RRMS or SPMS" (p 427), or even first attack patients with multifocal MRI changes (p 426-7). The importance of adequate dosing with interferons is down-played. The recommendation that patients on disease-modifying therapy not stop treatment until they are actually pregnant (p 435) seems risky: by the time this fact is established, most women are well into their first trimester and the safety of these drugs in pregnancy has not been established.

Other quibbles include no mention of the risk of potentially fatal hepatotoxicity from pemoline in the chapter on fatigue management [ch 34], and no mention of surgical approaches to the management of spasticity [ch 35].

Overall, this is a very good, comprehensive reference work on MS therapeutics, of interest to all neurologists who deal with patients with MS, and a must-have item for 'MS-ologists'.

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SLEEPMEDICINE. 1999. Edited by Michael Aldrich. Published by Oxford University Press, Inc. 382 pages C\$176.00 approx.

This volume provides accurate knowledge for evaluation and treatment of patients with sleep abnormalities, based on fresh sleep and chronobiological research underpinnings to provide a better understanding of sleep mechanisms. The first part describes all aspects of normal sleep including phenomenology, physiology,