

tone and gait, but tests for the “primitive reflexes” are not recommended. Chapters discuss the current cognitive enhancing therapies approved for Alzheimer’s disease (they get a favourable yet guarded review) and the management of disturbed behaviour, typically occurring in more advanced Alzheimer’s disease.

Clinical vignettes with explanatory comment end each chapter and are very helpful in filling in and reinforcing the account. There is a glossary and throughout there is a conscious effort to avoid technical jargon and formal rhetoric.

Although the practicality of care for dementia requires streamlining of assessment methods (for example, full neuropsychologic testing and imaging need not be routine), neurologists should not be deceived into abandoning their time-honoured algorithm of lesion localization. Neurologists should have a wider perspective of lesions causing the various symptoms of dementia and generally find the Mini-Mental Status Exam a limiting and unsatisfactory tool. Continued skepticism about the diagnosis of Alzheimer’s disease is warranted. Indeed, community-based correlations of clinical diagnosis with pathology suggest we are getting worse, not better in making the diagnosis of Alzheimer’s. The authors emphasize that we need to be aware that vascular risk factors should be recognized and dealt with early rather than later whether or not there is co-existent Alzheimer pathology. Neurologists will be the “splitters” in this field.

Dementia is indeed an expensive disease. Just to begin, the assessments seem needlessly expensive with multiple visits involving multiple professionals (also unsung are Social Workers and nurses who have become expert in education, counseling and in the myriad social agencies in which patients and families living in a multicultural community must contend). The neurologists role (largely, diagnosis and research) is a limited, but essential role in the management of Alzheimer’s disease, although some will take on much more than others; for example in attending to the “4 Cs” of Rockwood and MacKnight - competence, caregiver, comorbidity and continuing care. The emergence of truly disease modifying therapies, possibly quite complex, could greatly increase this role. For the present, the collaborative approach to dementia care is a highly rewarding one and for this neurologist highly illuminating. The family physicians in the region have shown a remarkable ability to triage dementia patients, but even so, will enjoy and benefit from this manual. Even if they do not take a more active role in dementia management, it will give them important insights. The same is equally true for neurologists.

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EARLY DIAGNOSIS AND INTERVENTIONAL THERAPY IN CEREBRAL PALSY. THIRD EDITION. 2001. Edited by Alfred L. Scherzer. Published by Marcel Dekker Inc. 355 pages. C\$80.85 approx.

This is the third edition of this book, which is published as part of the Pediatric Habilitation series. It is a multi-authored book, which is primarily written by and directed to therapists dealing with children with cerebral palsy.

Chapter 1 provides a review of the history of CP and its classification. The second chapter provides a concise overview of the etiology and epidemiology of CP, which is well written, but provides little new information for medical specialists who deal with

CP. Chapter 3 offers a superficial approach to diagnosis. For example, the author states that various newborn CSF components have been effective markers of hypoxic-ischemic encephalopathy, without providing further detail or discussion. This chapter covers very basic concepts of clinical evaluation, and is clearly directed to therapists rather than medical specialists.

Chapter 4 is an overview of the clinical consequences of CP and developmental delay followed by a brief overview of current treatment options. As a resource for therapists in CP clinics, the book fails to place the role of medications and their adverse effects into perspective.

Chapter 5 is an excellent overview of the history and current status of various therapies, including neurodevelopmental treatment, conductive education and patterning. On this background Chapter 6 provides a model for the multidisciplinary clinical assessment of infants with CP. The role for physicians in this model is unclear, although I presume they would be included under “other professionals”.

This chapter will be valuable for physical and occupational therapists and for speech and language pathologists. Example worksheets are provided and Chapter 7 provides models for documenting assessment data, goal setting and treatment strategy development.

Chapter 8 incorporates family needs and how they can influence treatment choices. Model forms for daily documentation are exhaustively provided. In Chapter 9 a case study is used to apply the model to an individual patient. This chapter is accompanied by an excellent series of photographs and multiple applications of the worksheets.

Chapter 10, entitled “Research in Cerebral Palsy – Yesterday and Today” provides background on evidence-based research with descriptions of the various research models from random clinical trials to “common sense”. Chapter 11 then provides examples of how evaluation of the literature and research might be applied to three issues commonly dealt with in CP treatment. Their search strategy and evaluation of the literature is helpful and demonstrates the paucity of data to support gastrostomy, neurodevelopmental therapy or early intervention for at risk infants. The book ends with a brief overview of future perspectives on CP.

Overall this may be a valuable addition to the library of therapists who treat children with CP and should probably be in the library of every CP clinic. Pediatric neurologists who specialize in CP will find this helpful in understanding the goals of their colleagues in PT, OT and speech and language pathology but I suspect that the average pediatric neurologist or developmental pediatrician will be satisfied by reading selected components within their libraries.

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PERIPHERAL NEUROPATHY: A PRACTICAL APPROACH TO DIAGNOSIS AND MANAGEMENT. 2001. Edited by Didier Cros. Lippincott Williams & Wilkins. 432 pages. C\$133.50 approx.

The preface indicates that the target audience for this 432 page multi-authored monograph is clinicians, including non-neurologists and neurologists-in-training, who need a practical source for quick reference and continuing education. After some introductory chapters on clinical approach, biopsy, and electrodiagnosis, the book