general morphological, physiological features of skeletal muscle and its general pathological reactions. In addition to discussions of biopsy handling and staining techniques, there is also a brief section illustrating common histological and ultrastructural artifacts. The remainder of the chapters in this section illustrate and discuss the normal and abnormal cellular and subcellular components of skeletal muscle in some detail. The second major section describes the pathology of skeletal muscle on a disease-by-disease basis.

The division of the text into two sections has an invaluable didactic advantage for the diagnostician. Muscle diseases rarely have pathognomonic single abnormalities, and usually it is a suite of abnormalities that points to the disease in question. The initial discussion of abnormalities on a structure-by-structure basis is therefore useful in shaping the differential diagnosis and guiding discussion with the referring clinician. Where a disease is defined by a single morphological feature (e.g. myopathy with cylindrical spirals) there is occasionally some redundancy. The discussion is skeptical in tone but insightful. I sometimes found myself wishing for more discussion of the molecular aspects of some disease entities, but in general the text is concise, and the references carefully chosen. There is considerable historical depth in some areas as well: these features strongly and positively reflect on the clinical experience of both authors.

Probably the strongest feature of the book is the wealth of superb illustrations of ultrastructural and light microscopic features. There are over 100 beautifully printed color plates, and over 600 black and white photographs. These are carefully and liberally distributed throughout the text. The variety and quality of these illustrations alone ensure that this book will remain an important diagnostic guide for some time to come. I would recommend this reference to anyone interested in morphological aspects of skeletal muscle disease, whether resident, fellow or practicing clinician.

Patrick Shannon
Toronto, Ontario


Cerebral Ischemia: Molecular and Cellular Pathophysiology is presented as a text that will provide pertinent and up-to-date information to a variety of interested readers. The contents of the book are laid out in a manner that targets health care professionals who are already seasoned in this field. Muscle diseases rarely have pathognomonic single abnormalities, and usually it is a suite of abnormalities that points to the disease in question. The initial discussion of abnormalities on a structure-by-structure basis is therefore useful in shaping the differential diagnosis and guiding discussion with the referring clinician. Where a disease is defined by a single morphological feature (e.g. myopathy with cylindrical spirals) there is occasionally some redundancy. The discussion is skeptical in tone but insightful. I sometimes found myself wishing for more discussion of the molecular aspects of some disease entities, but in general the text is concise, and the references carefully chosen. There is considerable historical depth in some areas as well: these features strongly and positively reflect on the clinical experience of both authors.

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Patrick Shannon
Toronto, Ontario


This multi-authored volume addresses basic and clinical aspects relating to the broad spectrum of cerebellar disorders. It is directed primarily at the clinician who deals with these patients. Although multi-authored, the editor has been able to minimize style differences between chapters by applying a uniform format throughout the volume. Hence, each chapter begins with an outline of its contents, each organized in a similar fashion. A curious oversight is in the first chapter, in which the references are listed differently from elsewhere in the book.

Initial chapters deal with the functional architecture and physiology of the cerebellum, and with the history of ataxia research. Neurology residents will find the brief chapter summarizing a clinical approach to cerebellar dysfunction to be particularly useful. Individual chapters are devoted to each of the major subtypes of cerebellar disease, with each chapter including sections on epidemiology, molecular pathogenesis, neuropathology, and clinical features. Overlap between chapters, although inevitable to some degree, has been kept to a minimum. Each of the autosomal dominant spinocerebellar ataxias (types 1-7 and 10) are dealt with separately, with ample information to instruct the reader on the differences and similarities, in terms of both clinical and DNA abnormalities. The autosomal recessive ataxias are dealt with in a similar fashion, with scholarly chapters on Friedreich's ataxia, ataxia-telangiectasia, Refsum's disease, and other recessive disorders. From a Canadian standpoint, it was refreshing to see a chapter dedicated to the Charlevoix-Saguenay form of autosomal recessive spastic ataxia. Other chapters include one on prion diseases associated with ataxia, sufficiently current that it includes the important observation that ataxia is an early feature in almost all
patients with new variant Creutzfeldt-Jakob disease. A scholarly
discussion of multiple system atrophy includes useful “red flags” to
keep in mind when considering the possibility of this syndrome
occurring in the setting of parkinsonism.

The authors should be complemented on producing such an all-
inclusive volume. It is a bit large to be called a “handbook”, but is a
book that should be found on the shelves of any clinician that has
more than a passing interest in these disorders. Neurology trainees
will find it particularly useful as they are making their way through
this often confusing territory.

Wayne Martin
Edmonton, Alberta

NEUROLOGICAL EPIONYMS. 2000. By P.J. Koelhler, G.W. Bruyn,
J.M.S. Pearce (eds). Published by New York, Oxford University
Press. CS $87.95 approx.

This is a collection of 55 essays written by 51 prominent
neurologists and other neuroscientists. They are grouped under the
headings Structures and Processes; Symptoms and Signs; Reflexes
and other Tests; Syndromes; and Diseases and Defects. Almost
every one is illustrated with a portrait of its subject and most have
additional diagrams of the entity linked with his name – no women
are represented, not even Mme Dejerine (but then again, nor is her
husband). Each chapter runs to 2000 words or so, and referencing is
very adequate.

The work is an expansion of a shorter set of essays on the founders
of the neurological examination, published in Holland in 1995, and
will be a welcome addition to the library of those who like to achieve
some mental closure through understanding of the circumstances
under which the aspect of neurology in question was first defined, and
through attainment of some familiarity with details of its progenitor.
The biographies are agreeably succinct while being adequately
detailed, but most who buy the book will have much of this
information already. It is the critical evaluations of the phenomena,
in each case presenting the relevant data and analyzing them in fair but
not excessive depth, that make the book most appealing.

There are a few issues on which a picky reviewer might take issue
– did Sir Henry Head truly report that gall-bladder pain refers to the
left shoulder? Was not the most useful sign described by Jules
Froment (the ‘circle sign’) that which assists in the diagnosis of
anterior interosseous palsy rather than the clumsy signe de journal for
ulnar nerve palsy? How does the cerebellum displace downwards
within the fourth ventricle in the Chiari malformation? How many of
the patients of John Norris with vertebral artery dissections following
chiropractic manipulation developed a Wallenberg syndrome? But
this book contains only a few such small infelicities, while it
illuminates our discipline by presenting these named phenomena
both in their human and in their neurological contexts. Correctly, the
editors allege the resurgence of eponyms and defend their continued
use in response to the increasing proximity of scientific nomenclature.
In employing them, we honour their discoverer, embellish our
understanding and smooth communication.

Neurological Eponyms contains more than its title suggests. It
would be a perfect gift for a neurologist friend, for a succeeding
resident and for your departmental library. And also for yourself.

William Pryse-Phillips
St John’s, Newfoundland

Comair. Published by Lippincott Williams & Wilkins. 1060 pages.
C$292.53 approx.

Many pearls are contained within this book but one has to shuck
a lot of oysters to get at them. It is less a textbook than a collection
of essays by well-recognized authorities active in the surgical
treatment of patients with medically intractable epilepsy. It is a big
and broad and heavy book comprised of 180 chapters grouped into
18 sections and running to over a thousand pages. It could have
benefited from the editors’ blue pencil to condense and abridge some
of the chapters dealing with the same or similar topics so as to
present a more cohesive treatise on epilepsy surgery. These minor
irritants apart, the book is encyclopedic, authoritative, and entirely
up-to-date. Especially welcome to this reader is a discussion of the
contributions of Fedor Krause and Otfrid Foerster to the surgical
treatment of epilepsy in the history section of the book. This section
is followed by an overview of epilepsy surgery. The meat of the
book is entered in section three where epileptic syndromes are
addressed. Especially noteworthy in this section is the discussion on
Rasmussen’s syndrome. A short section on presurgical evaluation
precedes a more extensive discussion on structural and functional
neuroimaging. Generally speaking the quality of the reproduced
images is satisfactory, and the quality and detail of the images in the
chapter on imaging of the cerebral cortex are stunning. The
architectural planning of a monitoring unit, various modes of
detection of epileptogenic foci, and discussions of electroencepha-
lography and magnetoencephalography precede a section on
neuropsychology and psychiatry. This is followed by four chapters
on sodium amobarbital testing. By this time 60% of the book has
been covered with nary a mention of surgery. This is remedied in the
following 250 pages where invasive procedures for electroencepha-
lography with foramen ovale, epidural, subdural, and depth
electrodes, alone or in combination, are addressed. There follows an
extensive discussion of therapeutic surgical techniques for the
resection of epileptogenic foci and lesions in specific parts of the
brain. (Parenthetically, the surgical treatment of frontal lobe epilepsy
is addressed in a chapter that has five more authors than the number
of its pages). There is an especially strong chapter on the selection
of surgical procedures for patients with temporal lobe epilepsy. Due
importance is given to structural brain lesions such as cortical
dysplasias, tumors and vascular lesions as a source of epileptic
seizures. Other procedures, such as hemispherectomy in its various
guises, callosotomy, and vagal nerve stimulation, an especially
timely topic, are addressed in detail. Most of the remainder of the
book deals with outcome and the management of surgical failures.
The book ends with seven appendices addressing a variety of topics,
some already dealt with in the body of the book. Throughout the
book, special attention is given to the pediatric population in terms of
investigation, surgical planning, and surgical techniques.

The overall impression then is of a very timely, highly
authoritative and comprehensive book that will serve as a useful
reference for anyone interested in the field, from the junior resident
to the most experienced epileptologist.

Richard Leblanc
Montreal, Ontario