

The section on pain provides a review of anecdotal uses of steroids in various pain syndromes. In the multiple sclerosis section, the first chapter is the best, reviewing the history and uses of steroids in MS. One statement made by the author may not receive universal acceptance: "in general oral prednisone is not used as therapy in acute remitting MS". This section could have (and possibly should have) ended here as the subsequent chapters do not enhance the book. The editor contributes a chapter on high dose oral methylprednisolone (MP) (dissolved parenteral preparation!) that is non peer reviewed, a tactic repeated in the myasthenia gravis section. The final section deals with a number of other entities that may respond to steroids. The section on CIDPN is particularly poorly done with a comment about the proven lack of efficacy of steroids in Bell's palsy. The chapter on steroids in cerebrovascular disease calls for further high dose studies despite quoting a well conducted negative trial fitting their criteria. The entire text is sprinkled with calls for megadose MP in CNS diseases.

The book is unbalanced as many chapters could be eliminated due to redundancy or poor quality. Certain topics are only fleetingly discussed (cord compression by tumor) or not at all (infectious CNS diseases, sarcoid, lymphomatoid granulomatosis etc).

Certainly the use of steroids merits a small text but I feel this effort has fallen short of the mark. The text has a number of good chapters, is well referenced and reviews historical data of importance. Many neurologists will find the text useful from this viewpoint while maintaining an objective outlook on the non peer reviewed data presented.

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**ANTIPILEPTIC DRUGS.** 1989. Third Edition. Edited by Rene H. Levy, F.E. Dreifuss, Richard H. Mattson, Brian S. Meldrum and J. Kiffin Penry. Published by Raven Press. 1,053 pages. \$149 Cdn. approx.

This is the third edition of the standard reference text on antiepileptic drugs. It contains no less than 72 chapters.

The first section consists of general principles; it is clear, authoritative, and valuable to the clinician and basic scientist alike.

The sections on the major antiepileptic drugs contain up to 8 chapters each, on the modes of action, chemistry, methods of determination, absorption distribution, excretion, biotransformation, interactions, clinical use and toxicity. Of particular value are the chapters on the various less commonly used benzodiazepines and other antiepileptic drugs. There are excellent chapters on the new antiepileptic drugs currently undergoing clinical trials.

In recent years we have witnessed a change from empirical utilization of drugs to better understanding of their pharmacokinetics and in particular, recognition of the fact that different seizure problems are likely to respond to different antiepileptic medications. This volume presents the available information clearly, concisely and authoritatively. It will serve as the standard reference work for the next decade. Then it will hopefully be updated and a fourth edition published.

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**NEUROLOGICAL COMPLICATIONS OF RENAL DISEASE.** 1990. Edited by Charles F. Bolton and G. Bryan Young. Published by Butterworths. 256 pages. \$73 Cdn. approx.

The authors of this review of Neurology and renal disease have a long interest in this area spanning the period during which many of the developments in management of renal disease have occurred. The book reflects this wealth of experience and the author's extensive knowledge of the subject. In the book's preface the authors state that they wish to make the text understandable to Nephrologists, Neurologists and other medical personnel interested in this area. The book does accomplish those tasks and in a single text provides a comprehensive review of the important neurologic complications of renal disease. An equivalent text with up-to-date discussions is not available.

The bulk of the text deals directly with specific clinical disorders and will be very relevant to specialists managing these disorders. Introductory chapters dealing with historical developments and basic mechanisms of uremia induced neurological dysfunction were both interesting and useful. A chapter on the basic methods of neurologic evaluation will be too rudimentary to be of use to Neurologists.

The book's most detailed sections do reflect the authors' areas of special interest. As an example there is a long discussion on the use of nerve conduction studies in following the progress of patients on dialysis. As the authors point out this is not a universal approach. A recommendation of yearly nerve conduction studies does not reflect common practice in all centers and would likely be resisted by many nephrologists who treat these patients.

Improvements in management in renal disease have reduced the frequency of some disorders discussed in the book quite dramatically. Nevertheless, the book's integration of new and old areas of interest makes the text highly relevant to current clinical practice. The book would be suitable both as a reference source for institutional libraries but also for those who encounter patients with neurologic complications of renal disease in their clinical practice. Students studying this topic would find the text extremely useful.

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**NEUROLOGY: A CONCISE CLINICAL TEXT.** 1989. Edited by Michael Swash and Martin Schwartz. Published by Ballière Tindall. 400 pages. \$39.50 Cdn. approx.

Several smaller British textbooks of neurology have appeared in recent years. Swash and Schwartz's *Neurology: A Concise Clinical Text* is on the whole as good as many of the others. However the justification for such texts, which are directed mainly at medical students and non-neurologists, must reside in some distinctive features such as a fresh organizational approach or an effective integration of basic neurosciences with clinical information. Although there is little which is original in this book, the authors have produced an introductory text which reads well, makes ample use of tables and original illustrations, is reasonably up-to-date and gives concise but balanced coverage to most areas of clinical neurology. One welcome and original touch is the inclusion of a "Historical Introduction" to neurology. Too many students, house officers and even neurologists today are unaware of the rich historical background from which modern neurology has evolved. The second chapter on "Symptoms and Signs" is well worth reading and contains a

helpful discussion of how the neurologist approaches clinical symptoms and attempts to determine the localization and etiology of the problem. Radiographs, CT scans and MRI scans are well-reproduced although there is a paucity of the latter. EEG tracings, however, are almost uninterpretable. The references included at the end of the book are too few, somewhat outdated and heavily weighted toward the British literature.

The major weaknesses of the book are twofold. First there is a sparsity of pathophysiological discussion and neuroanatomical information which is so important for the understanding of clinical neurology. Much of the pathophysiological material which is included describes histopathology but provides little information about biochemical or neuropharmacological derangements. Second, the approach has a necessary British bias. For example,

the chapter on epilepsy is entitled "Fits, Faints and Blackouts" and chlormethiazole, unavailable in North America, is recommended as a treatment for status epilepticus. While not strictly a flaw in the book, this bias may nevertheless make it less appealing to North American readers.

Students and medical house officers can profit from reading this book for its sound, concise clinical approach. Its reasonable price and compact size are added features which will appeal to house officers. It will not, however, serve as a reference text and does not provide an adequate amount of pathophysiological and neuroanatomical material.

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