

medical management, community and institutional management, and ethical and legal issues. The format is attractive with numerous boxes and tables to assist in organising the information. Important points in the text are bulleted. The authors of the individual chapters include many prominent workers in the field. The book is authoritative but remains very readable. It is not encyclopedic but focuses on the most important concepts and developments in the study of Alzheimer's disease. It is well-referenced and an exploration of these references will expose the interested reader to the breadth of recent advances in our understanding of Alzheimer's disease.

A sampling of the content in the Medical Management section begins with a chapter on Mood and Behaviour Management. Introductory comments address the alterations of pharmacodynamics in the elderly. Next follows an approach to assessment and management of depression in patients with Alzheimer's disease. Nonpharmacological management is discussed including insight-oriented psychotherapy or cognitive therapy strategies for mildly impaired individuals and behavioural strategies for more severely impaired patients. Information is presented regarding the selection of the most appropriate cyclic antidepressant, properties and selection of the various SSRI antidepressants, atypical agents and MAO inhibitors, selection of patients for ECT, duration of treatment and how to approach the patient who fails to respond to treatment.

Similarly, behavioural disturbances such as delusions, hallucinations, misidentification, wandering, insomnia, agitation and aggression, catastrophic reactions, eating disorders and disruptive vocalizations are dealt with in terms of nonpharmacological approaches and pharmacological treatment with antipsychotics, benzodiazepines, antidepressants, mood stabilizers, beta blockers and cholinergic agents. Specific applications for the different classes of medication are discussed. Where available, results of controlled clinical trials are outlined.

Subsequent chapters describe symptomatic treatments including cholinergic agents; stabilization approaches or disease modifying agents; and treatment of associated medical conditions and complications. The second edition discusses the role of antioxidants, anti-inflammatory drugs, MAO-B inhibition, estrogen replacement therapy, neurotrophic factors and cholinergic agents as neuroprotective agents in the treatment of Alzheimer's disease.

Clinical Diagnosis and Management of Alzheimer's disease can be heartily recommended as a reference for medical and allied health students. It will serve as an excellent guide for medical, psychiatry and neurology housestaff and practitioners alike.

*Paul A. Shelton
Winnipeg, Manitoba*

DISEASES OF THE SPINE AND SPINAL CORD. 2000. By Thomas N. Byrne, Edward C. Benzel, and Stephen G. Waxman. Published by Oxford University Press. 416 pages. C\$192.00 approx.

This book offers a great deal of information about common disorders of the spine and spinal cord, and is sufficiently inclusive to act as a reference book for the broad spectrum of disorders of the spine and spinal cord. It has many positive features, and only a few shortcomings.

The authors have intended to be neurologists and neurosurgeons including trainees. In general, the book will be of greater value for neurologists than for neurosurgeons.

It includes detailed descriptions of the anatomy of the spine and spinal cord and comprehensive rendering of the multitude of clinical syndromes associated with diseases of the spine and spinal cord. There is also a useful discussion of pain associated with lesions of the spine and spinal cord.

Although the authors have included the more modern imaging techniques with CT and MRI, there is still an unnecessary display of myelograms. The selection of MRIs and the quality of the reproduction are often disappointing.

Although there is an attempt to discuss the pathophysiology of many of the reported conditions, the discussion is often rudimentary. For example, the issues of spinal shock, central cord syndrome and blood supply of the spinal cord are quite incomplete and not up to date. Furthermore, surgeons will find the discussion of spinal cord and spinal trauma, syringomyelia and spinal cord tumours to be quite incomplete.

*Charles H. Tator
Toronto, Ontario*

DIFFERENTIAL DIAGNOSIS IN NEURO-ONCOLOGY. 2001. By Jerzy Hildebrand and Michael Brada. Published by Oxford University Press. 298 pages. C\$157.95 approx.

Neuro-oncology is an expanding subspecialty within Neurology, and perhaps because of a perceived scarcity of relevant texts, the past few years have witnessed the publication of a number of monographs dealing with a number of topics in clinical neuro-oncology. Cancer and its treatment frequently involve the nervous system, with perhaps 25% of all cancer patients developing neurologic complaints at some point during their illness. However, in this country most cancer patients with neurologic symptoms are not evaluated by neuro-oncologists, who for the most part work in specialized cancer centres and concentrate their efforts on the management of patients with primary brain tumors. Consequently, a cancer patient usually relates his neurologic ailments to his primary physician, usually a medical or radiation oncologist, or an internist, who may or may not obtain a neurologic consultation.

Jerzy Hildebrand and Michael Brada are two seasoned European neuro-oncologists who have co-authored an interesting and somewhat unique neuro-oncology text entitled "Differential Diagnosis in Neuro-Oncology." This book is not intended to serve as a comprehensive neuro-oncology reference text, rather it is designed to assist the clinician in diagnosing and managing neurologic problems arising in patients with known or suspected cancer. To achieve this goal, the authors have organized the 12 chapters of this text by symptoms such as altered consciousness, epileptic seizures, cerebellar dysfunction, and muscle disorders and fatigue, to give but a few examples of chapter titles. Each chapter is organized according to a standard template with four main sections: clinical presentations; potential causes, including neoplastic and treatment-related; relevant investigations; and, finally potential therapies. Each chapter is generously illustrated with numerous MR and CT scans (imaging is the essential investigation in neuro-oncology), and tables and algorithms help the clinician develop a simple but comprehensive approach to the diagnosis and management of common neurologic symptoms. Moreover, relevant and current references for each chapter provide the interested clinician with an opportunity to obtain more detailed information if desired or needed.