A lesion produced by the proliferation of perineural cells and known for many years as perineurioma; recent molecular studies demonstrate a clonal abnormality of chromosome 22 that strongly favour a neoplastic process. Incidentally, Figure 12.9 shows Ribosome-Lamellar complexes, nonspecific structures well known to electron microscopists.

These minor criticisms should not detract from a beautifully illustrated work that would be of help to those involved in the interpretation of peripheral nerve pathology.

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MIGRAINE & HEADACHE PATHOPHYSIOLOGY. 1999. By Lars Edvinsson. Published by Martin Dunitz. 184 pages C\$ 185.00 approx.

This is another book on migraine pathophysiology in this exploding field of new knowledge. Through a series of several concise reviews, most of the fundamental issues of neurovascular neurotransmitter anatomy, physiology and pharmacology pertinent to migraine are covered. The chapters on the innervation of intracranial blood vessels and on the neuronal messengers and peptide receptors in human cranial ganglia are informative and well written. An excellent review of the potential rôle of the 5-Hydroxytryptamine receptor subtypes in migraine is provided.

The information obtained from three animal research models (autoradiographic mapping of receptors, cortical spreading depression and neurogenic inflammation) is critically analysed and put into perspective.

Three chapters address the potential rôle of specific new methodologies for the study of vascular changes in the testing of potential new drugs for the treatment of migraine. A model of experimental vascular headache in humans is also presented.

Chapter 12 provides a good discussion on the cerebral hemodynamic changes in migraine. In addition to the oligaemic theory, the ischemic theory is discussed.

The last chapter discusses the place and limitations of animal models in migraine.

Of the 14 chapters in this book, seven review pertinent information on migraine neurovascular pathophysiology, five discuss potential new methodologies and the possible new information that could be obtained from human and animal models of migraine. No specific mention is made of the contribution of electrophysiological methods and neuroimaging in the understanding of migraine. Most of the book is devoted to migraine neurovascular events. It does not present the information on other types of primary headache disorders as the title would suggest.

For the clinician with a special interest in headache, this book provides a valuable concise summary of some of the pertinent information available for the understanding of the vascular neurobiology of migraine. For the researcher, new research methodologies are presented with a discussion on their potential limitations.

Michel Aubé Montréal, Quebec STURGE-WEBER SYNDROME. 1999. Edited by John B. Bodensteiner, E.S. Roach. Published by Sturge-Weber Foundation. 95 pages C\$75.42 approx.

This is a good but not great book. The last monograph on the subject of Sturge-Weber Syndrome seems to have been published 40 years ago. This new book summarizes the old and newer experience with this still mysterious disorder. The Forward is a concise and interesting two-page history of Sturge-Weber Syndrome. The overview chapter by Bodensteiner and Roach steals the thunder from most of the rest of the book. In eight short pages, most of the relevant information is presented. A carefully written chapter by Morelli outlines issues about port wine stains including indications and rates of success with laser treatment. Dr. Cheng reviews the ophthalmologic manifestations and provides an outstanding discussion of the problems in treatment of glaucoma. Roach and Bodensteiner then have a chapter on the neurologic manifestations of Sturge-Weber Syndrome. In this chapter, some of the sentences are word for word from the introductory chapter. Derrick Bruce reviews neurosurgical aspects although some of this is also covered in other chapters. The most puzzling chapter is by Maria et al about brain imaging as it relates to structure and function in Sturge-Weber Syndrome. There are two pages on the metabolic effects of cerebral hypoxia that do not seem clearly relevant and several pages on magnetic resonance spectroscopy without much evidence that it has been used to any benefit in Sturge-Weber Syndrome.

The final chapter is by Pat Gibson and emphasizes psychological issues of people with Sturge-Weber Syndrome. She clearly has great warmth for her patients but the chapter is somewhat generic for the effects of chronic disease in childhood. The anecdotes about Sturge-Weber are interesting and often poignant.

My main criticism of the book is that of its redundancy. The neuropathology is discussed in three separate sections and surgery is often mentioned outside the chapter on specific details of surgery. Sometimes the statements made in the book are not as quantified as I might have hoped. Various problems are called "rare" without any mention of exactly how many cases exist with the particular problem.

The book is much more comprehensive than all of the recent child neurology textbooks (Aicardi, Berg, Menkes, Ashwald and Swaiman). It will provide a good overview for residents encountering a first case. As an aging child neurologist, I am often anxious about being out of date. For others in my situation, a quick read of this book ensures that the advances in understanding and management of Sturge-Weber have not been massive. The book may not be of much help to families. Overall, I think it would be a good addition to libraries in pediatric hospitals.

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PARKINSON'S DISEASE: THE TREATMENT OPTIONS. 1999. Edited by Peter LeWitt, Wolfgang Oertel. Published by Martin Dunitz Ltd. 260 pages C\$185.00 approx.

Parkinson's Disease: The Treatment Options as stated in the preface gives an up-to-date review focusing on the important new developments in the treatment of Parkinson's Disease. Most of the 19 contributors are movement disorder experts with extensive

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