

2). At the very least it deserves more attention than haemorrhage into nerves (page 29). In some of the more common neuropathies, i.e., carpal tunnel syndrome, a more complete discussion of specific electrophysiologic abnormalities would be helpful, i.e., a table perhaps comparing distal motor latency, median palmar studies, antidromic or orthodromic techniques might be valuable. The author states that multiple tests on the median nerve increases the chance of obtaining a false positive result. While this is probably correct, the chance of false-positive testing may in fact be reduced if multiple tests are obtained with strict criteria, e.g., requiring greater than 1 abnormality to diagnose CTS. The difficulty, of course, is defining what the gold standard test for CTS is then judging the electrophysiology according to this (page 181). It might be of interest to know what the author's bias is. Some clinical neurophysiologists would disagree that EMG examination of abductor pollicis brevis is useful in diagnosing early CTS. In Chapter 4 I would have liked to have seen a better discussion of conduction block and temporal dispersion using up-to-date criteria. Conduction block is an important feature of a number of focal neuropathies and it would be helpful to have this discussed thoroughly. Although some MRI images have appeared in this new edition, I think readers (particularly those in the United States) will be searching for more. The revised picture of the brachial plexus in Chapter 7 is a very worthy addition to this new edition.

John Stewart has preserved his clear writing style and objective perspective. This is a worthwhile text for neurologists in general, physiatrists and particularly clinicians who see these patients in clinics or neurophysiology laboratories.

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THE MENTAL STATUS EXAMINATION IN NEUROLOGY. 3rd Edition, 1993. Edited by Richard L. Strub. Published by F.A. Davis. 244 pages. \$CDN 30.00 approx.

The examination of higher functions is assuming increasing importance in neurology yet it remains one of the most difficult and time-consuming parts of the neurological exam. Strub and Black in the third edition of their manual *The Mental Status Examination* have given us a clearly-written guide to carrying out and interpreting this segment of the neurological exam. The authors lucidly and concisely explain the various bedside techniques but go much beyond that in also dealing with the underlying pathophysiology of behavioral signs, symptoms and syndromes. Each of the chapters dealing with particular aspects of cerebral function begins by defining and explaining terminology and then discusses evaluation and finally anatomy and clinical interpretation. Subsequent chapters deal with formal neuropsychological testing, the use of ancillary services such as speech pathology and social work, a summary of the screening exam for dementia and a recording form for the mental status exam. Each chapter ends with a comprehensive reference list. A number of illustrated cases and well-selected figures add to the value of the text.

This volume is unique in providing a detailed step by step guide to the mental status examination. It will be of use to both neurologists and psychiatrists and students of these disciplines. The third edition has incorporated advances in our understanding of

behavioral neurology and in fact serves as an introduction to that discipline. This book is highly recommended.

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NEUROLOGICAL AND NEUROSURGICAL INTENSIVE CARE. 3rd Edition, 1993. Edited by Allan H. Ropper. Published by Raven Press, New York. 505 pages. \$CDN 119.00 approx.

Neurocritical care or neuro-intensive care is a new specialty that includes both clinical neurology and neurosurgery and, by necessity, incorporates many aspects of general critical care medicine. It deals with acute, life-threatening disorders of the central and peripheral nervous systems and with the neurological complications of systemic diseases.

The book contains 26 chapters written by American experts in various relevant disciplines. It deals with adult intensive care, but many principles probably apply to pediatric neurocritical care. There are specific chapters: cerebrovascular disease (including occlusive arterial disease, intraparenchymal hemorrhage and subarachnoid hemorrhage), head trauma, brain tumors, central nervous system infections, status epilepticus, Guillain-Barré syndrome, myasthenia gravis and spinal cord compression. There are also chapters that deal with more general topics: management of intracranial pressure, ventilatory management, post-operative care of neurosurgical patients, ethical and legal principles (including brain death and withdrawal of life support – from the American perspective), nosocomial infections and electrophysiological monitoring.

The book has many merits: it is a comprehensive, state-of-the-art treatment by recognized experts; it is useful and practical, with emphasis on management. A number of newer concepts, such as salt-wasting in subarachnoid hemorrhage and the pros and cons of hyperventilation for raised intracranial pressure, are well presented. Not all statements are based on rigorous clinical trials, because few have been done in this young discipline. However, most suggestions are based on scientific principles, solid experience and good clinical judgment. There is a minor degree of redundancy and there are a few obvious "typos".

The book should probably be the current standard text for this emerging discipline and is recommended to anyone interested in neurocritical care. More importantly, it will also be of great value to any neurosurgeons and neurologists, including residents, who are faced with the management of the various life-threatening diseases of the nervous system.

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NEUROREGENERATION. 1st edition, 1993. Edited by Alfredo Gorio. Published by Raven Press. 323 pages. \$CDN 144.00 approx.

This collection of 15 review articles is not the consequence of a symposium. Most of the invited contributors have been conscientious in providing extensive reviews and the result is a useful overview of research in regeneration as of 1991. The emphasis is on cellular interactions in neural plasticity and repair, only two chapters being devoted to molecular topics.