

Both volumes are laid out attractively and include a significant number of reproductions chemical formulas and other photographs. Even though the text sometimes seems a little bit unstructured, and a few more breaks and captions certainly would have improved readability, both volumes are generally well-written and edited, and contain much valuable information on the pharmacological aspects of neurotoxicology, as well as state-of-the-art methodology. In contrast to that, especially in the first volume, there is a certain lack of information regarding the clinical aspects of neurotoxicity. The books may be primarily interesting to scientists with a keen interest in pharmacology and toxicology but may be found less useful by the neurological clinician.

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**TEXTBOOK OF DIABETIC NEUROPATHY.** 2003. Edited by Gries FA, Cameron NE, Low PA, Ziegler D. Published by Thieme Medical Publishers. 408 pages. US\$119 approx.

This is an impressive-looking book. It has four distinguished editors with backgrounds in endocrinology, neurology, and basic science. There are contributions from 63 authors from 13 countries, it is extensively referenced, and is handsomely produced. This book is a gold mine of information about the diabetic neuropathies but, as in mining for that precious metal, the digging is hard work.

The title is a bit problematic: it should be "Textbook of Diabetic Neuropathies", not neuropathy. This is not a pedantic quibble. There are a variety of diabetic neuropathies – important clinical syndromes – beyond the well-recognized distal symmetric polyneuropathy (DSP). The clinical features of these syndromes, natural history, attempts at treatment, are somewhat sketchily described. That the pathogenic mechanisms are likely to be different from that of DSP is underemphasized.

A further problem is the unusual organization of the book. It is not until Chapter 5 (page 175) that we encounter a classification of the diabetic neuropathies. It would be very helpful to the reader if this were at the beginning.

A vast amount of highly relevant information is presented, but readers are likely to be frustrated by the paucity of wise and balanced syntheses of disparate information and data. Chapter 4, which deals with the pathogenesis and pathology of diabetic neuropathy, is the most striking example. This core chapter contains scholarly contributions from many researchers representing the different pathogenic camps: vascular/ischemia, toxic/metabolic, immunologic. However, it lacks a balanced synthesis to bring it all together into an intelligible focus for a neurology or endocrinology resident.

Some of the material in this book reads as if it has been reproduced from other sources without being edited for integration into this particular text. Chapter 2 contains information on the central nervous system and some neurological investigations that are largely irrelevant. Many chapters are under-illustrated, some overly so. Important information that warrants integration in main chapters, is relegated to an appendix in what appears to be an afterthought. There is a section in one chapter entitled "Central diabetic neuropathy". This is like reclassifying multiple sclerosis as a peripheral neuropathy that just happens to involve the central nervous system! Chapter 1 is an excellent general discussion on

diabetes mellitus, complete with 11 pages of references. But it is highly unlikely that many readers will read this, given that the focus of the book is that of neuropathies.

Discussions of the all-important topic of drug treatments for diabetic neuropathies are scattered throughout the book. A useful section on evaluating drug effects in disease is relegated to near the end of the book. It would have served as an excellent introduction to a comprehensive discussion on all the treatments for the diabetic neuropathies so far attempted, all leading to a wise summary of the current state of affairs. The important review of the role of glycemic control on the development and/or the progression of neuropathy is buried in the pathogenesis chapter, rather than in a treatment chapter; and there are no citations to DCCT or UKPDS in the Index to help one to find this information. Similarly the discussion on aldose reductase inhibitors is in the pathogenesis chapter.

In short, this book contains most of the information that one needs to know or wants to find out about diabetic neuropathies, but mining for these numerous gold nuggets is hard work due to the awkward layout of the material and the shortage of summaries at the end of sections or chapters.

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**WEINER AND LEVITT'S PEDIATRIC NEUROLOGY.** 2003. 4th Edition. Edited by Michael E. Cohen, Patricia K. Duffner. Published by Lippincott, Williams, and Wilkins. 346 pages. C\$41 approx.

This is the latest edition of the only widely-published pocket reference in pediatric neurology. Edited by two experienced pediatric neurologists, it is a valuable tool for multiple varieties of trainees working in the field. The most important credential of such a publication is that it meets the educational needs of the audience for which it is intended. The primary target in this case appears to be the pediatrics resident rotating through child neurology. A well-structured pocket reference can be invaluable to such an individual, particularly in neurology, as many pediatric trainees are intimidated and have a lower "level of comfort" with neurological illnesses in children. Adult neurology residents would appreciate information on pediatric-specific areas of neurology while other residents, medical students, and junior pediatric neurology residents may also find value in this book.

A junior pediatric resident anticipates their first day on pediatric neurology with great trepidation. They imagine two dreaded situations from which a well-written, pocket sized reference might be able to rescue them. The first is being asked to see a child with presenting complaint "x" such as headache, weakness, or seizure. Their need is an approach to, and differential diagnosis of, the problem. The second situation is being asked to assess a child with condition "y" such as spinal muscular atrophy or Lennox-Gastaut syndrome. Having never even heard of some of these, this resident needs to quickly familiarize themselves with the essential details of the condition. Combining these two needs into a single publication is a difficult task. However, with a few caveats, Drs. Cohen and Duffner have done an admirable job in accomplishing this.

The largest shortcoming of this publication is its overall organization. While most individual topics are well-presented, chapter arrangement appears essentially random. For our resident seeking a differential diagnosis to a problem, this disorganization is