

consciousness, especially anoxic seizures. The discussion is mainly about children and after reading this book it is easy to feel insecure about the diagnosis of epilepsy for many young patients.

There are 16 chapters and several hundred references including 16 of the author's own papers that are referred to frequently in the text. The book is easily read. Some of the book is polemic such as the chapter on definitions of various types of epilepsy or the section on febrile seizures. Some is didactic such as the chapter on history taking and some seems out of place such as the chapter on "Funny Turns and Funny Attacks" which briefly describes many disorders from tics to oculomotor apraxia. However most is informative, especially the delineation of various types of syncope with and without anoxic seizures. The careful review of the exact clinical manifestations of anoxic seizures is a highlight. For example we learn that myoclonus in this setting rarely consists of more than six jerks and downbeat nystagmus is common.

The section on the pathophysiology of "vasovagal" syncope is noncommittal about its mechanism. The description of the ocular compression test is clear but the discussion of its specificity and sensitivity as a diagnostic test fails to emphasize many false negatives. For example in one figure notes that 9/39 children with "vagogardiac" anoxic seizures have less than 5 seconds asystole with the compression test. "Tilt testing" is briefly reviewed and mention is made of the need for further validation of this test in children — a sentiment that I highly endorse.

Throughout the book there is emphasis on the amount of "bad" that results from misdiagnosing anoxic seizures as epilepsy. Through the case histories the fright of parents is well illustrated as they watch these seemingly life threatening events in their children. These two important themes suggest to me that this book should be read by all neurology residents, especially those headed for a career in pediatric neurology. I would like to assign the book to all pediatricians, pediatric dentists and many parents because it so illustrates the final quote from a parent — "Oh, the vagus! Why don't the doctors know about this?"

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NEUROBIOLOGY OF HEARING — THE CENTRAL AUDITORY SYSTEM. 1991. Edited by Richard A. Altschuler, Richard P. Bobbin, Ben M. Clopton and Douglas W. Hoffman. Published by Raven Press, New York. 512 pages. \$206 Cdn. approx.

This is the second volume in the series, *Neurobiology of Hearing*. The book brings together the latest neurophysiologic studies dealing with the central auditory system. It is written by the foremost investigators in this field. The book chapters are arranged on an anatomic basis. There is an initial overview of the entire central auditory system. Subsequent chapters focus on specific levels, starting with the cochlear nucleus and ending with the auditory cortex. At each level there are chapters dealing with anatomy, neuropharmacology, functional physiology, and developmental biology. Interaction between levels receives appropriate emphasis. The final chapters address issues of clinical significance such as auditory brain stem response measure-

ment and cochlear implants. The editors and authors have achieved their goal of producing a comprehensive and current reference for advanced students, researchers, otolaryngologists, and audiologists.

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DISORDERS OF PERIPHERAL NERVES. 2nd Edition. 1991. By Herbert H. Schaumburg, Allan R. Berger, and P.K. Thomas. Published by F.A. Davis Company. 348 pages. \$77 Cdn. approx.

This is the second edition of this text, with co-authorship by Allan R. Berger replacing Peter S. Spencer. This book remains the well organized, readable and definitive "short text" of peripheral nerve disease despite being exactly 100 pages longer than the previous edition. The additional pages are well spent and the result is more comprehensive and informative with new sections discussing HIV-related peripheral neuropathies, Lyme Borreliosis and rehabilitation. The section on Laboratory investigation has been placed earlier and follows a new section entitled "Diagnosis and Assessment". In this section the authors have outlined a helpful diagnostic algorithm and suggestions for the work up of neuropathy. This section is particularly welcome and not to be found from other sources. The authors' reminders that careful electrodiagnosis should always precede consideration of biopsy is worth emphasizing. Illustrations of nerve pathology and abnormal electrophysiology are limited, but the attempt is to reduce the number of pages. In most chapters the reference list is considerably more comprehensive than in the previous edition (e.g., diabetic neuropathy 36 references to 66 references). The tables in the new edition are also easier to read.

The information in this book is largely mainstream and accepted by most workers in peripheral nerve disease with some exceptions where controversy exists. For example, some readers might argue with the assertion that carpal tunnel syndrome surgery should be deferred following attempts at corticosteroid injection. The section on toxic neuropathies from pharmaceutical agents and occupational, biological and environmental agents is helpful and comprehensive. The inclusion of some neuropathies in a list entitled "Rare or Poorly Validated Neuropathies" is somewhat arbitrary and a different title for this section might have been considered. The use of the term "myelinopathy", (used inconsistently in the text), although technically correct leads to confusion and many would prefer "primary demyelinating". The authors have now designated chronic inflammatory demyelinating polyneuropathy by its more recognized short form CIDP rather than CIP or CRIP in the old edition. The classification of peripheral nerve disease by Victor and Adams in "Principles of Neurology" has advantages over the classification in this text because it is more approachable by clinicians. In spite of this, the text is an excellent choice. For more information about electrophysiologic findings or the basic science side alternative sources would be required.

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