

BOOK FORUM

three editions, one can only imagine that the fourth will continue to make this massive field even more understandable.

FLOYD E. BLOOM, M.D., D.SCI.  
La Jolla, Calif.

**Diseases of the Nervous System: Clinical Neurobiology**, vols. 1 and 2, edited by Arthur K. Asbury, Guy McKhann, and W. Ian McDonald. Philadelphia, W.B. Saunders, 1992, 1,840 pp., \$210.00.

This comprehensive, two-volume textbook provides a systematic review of the entire spectrum of neurological disorders, from diseases of the muscle and peripheral nerve to diseases of "higher cerebral" and "psychic" function, which include not only aphasia, amnesia, and dementia but also somatoform, affective, and schizophrenic disorders. Despite the inclusion of individual chapters on these more traditional psychiatric disorders, as well as numerous topics of potential interest to both the practicing psychiatrist (headache, chronic pain, neurotoxicity of alcohol and other drugs of abuse, neurology of HIV infection) and the more academically oriented biological psychiatrist (neural plasticity, central nervous system control of various autonomic nervous system functions, and the clinical uses and limitations of positron emission tomography, magnetic resonance imaging, and evoked potentials), this book is clearly geared toward the neurologist. Topics of clinical interest to the psychiatrist are not covered in the behavioral depth that one would find in, for example, *The American Psychiatric Press Textbook of Neuropsychiatry* (1). However, some more basic science topics relevant to psychiatry (i.e., magnetic resonance spectroscopy) are actually covered in far more depth here.

In almost 2,000 well-illustrated pages, this textbook covers both the basic physiology of the nervous system, including more recent advances in neural gene transcription and regulation, and the specific characteristics, pathophysiology, and treatment approaches to neurological diseases as diverse as metabolic myopathies, epilepsy, aneurysms and vascular malformations, brain tumors, hereditary ataxias, Alzheimer's disease, neuropathic pain, and AIDS. The organization of the book can be a bit difficult to follow. Chapters on individual diseases are variously organized by etiology (neoplastic, vascular, and neurodegenerative), clinical characteristics (pain and paroxysmal disorders such as epilepsy and syncope), and neuroanatomical locus (higher cerebral function and muscle and neuromuscular function). This may be unavoidable, given the current limits of our knowledge in this area, but it results in many sections of the first volume containing a mixture of chapters reviewing basic physiology and chapters focusing on a specific disease. However, since this two-volume text will most likely serve as a reference (it is hard to imagine anyone intrepid enough to wade through this level of detail from beginning to end), this is not of any practical import or limitation.

The multiauthored nature of the text provides the obvious advantage of expert coverage of individual areas and the disadvantage of nonuniformity in writing style and approach. This latter aspect has been mitigated somewhat by the high level of readability of the majority of chapters despite distinct differences in organization and style. The generous use of illustrations includes helpful and novel schematics, high-quality depictions of neuropathological processes, and well-selected reproductions of magnetic resonance imaging and computerized tomographic scans illustrating key aspects of clinical dis-

eases and disorders. It is difficult to think of a topic that is not covered in at least some detail, and the index is fairly useful in helping the reader navigate the text, although there are some glaring omissions. For example, a brief discussion of serotonin and aggression is not referenced under either heading (in fact there is no heading for aggression).

In summary, this textbook contains a good deal of information, both clinical and more basic-physiological, that is concisely presented in sufficient clinical detail. Many of the chapters are successful in placing the recent literature in critical perspective without oversimplifying the topic or confusing the reader with lists of contradictions. It is likely to be most useful to the psychiatrist with some hospital-based practice who sees patients with coexisting neurological and other medical problems. However, if one is already in possession of an up-to-date textbook of neurology, what this two-volume set offers in addition may be too little for the substantial price tag.

REFERENCE

1. Yudovsky SC, Hales RE: *The American Psychiatric Press Textbook of Neuropsychiatry*, 2nd ed. Washington, DC, American Psychiatric Press, 1992

PETER P. ROY-BYRNE, M.D.  
Seattle, Wash.

**Awareness of Deficit After Brain Injury: Clinical and Theoretical Issues**, edited by George P. Prigatano and Daniel L. Schacter. New York, Oxford University Press, 1991, 264 pp., \$49.95.

Brain damage may result in a range of dramatic impairments of awareness of deficit, from bland disregard to vehement denial, accompanied by often colorful rationalizations, disowning or derogating an affected limb. These phenomena offer unique opportunities for theoretical insights. The potential insight for neuropsychology is into the functional role of the right hemisphere (the one usually lesioned in these cases); for dynamic psychiatry, the rather distinctive psychodynamics of adaptation to and compensation for severe incapacity arising from damage to the brain; for cognitive science, the nature and properties of the neural structures that represent information of which one is conscious. The recent surge of scientific and philosophical interest in issues of consciousness makes *Awareness of Deficit After Brain Injury* a timely publication because lapses of awareness due to brain damage offer unique insights into the way in which the mental representations instantiated in the brain contribute to conscious experience in normal people. This edited collection of articles constitutes the most comprehensive available compilation of findings in this domain that is at all up-to-date.

The editors work in the fields of cognitive and neurological psychology, as do most of the contributors. Neurology is represented, however, by Bisiach and his colleagues Geminiano, Heilman, and Rubens, and psychiatry is represented by Weinstein, a pioneer in this field. The authors deal with a wide range of lesion locations and disease types, including schizophrenia (McGlynn and Kazniak). In addition to a consideration of dissociations between the many subtly different forms that unawareness and denial may take, the discussions range from anatomy through implications for rehabilitation to theoretical explanations. They are framed by a fine historical introduction and forward-looking summation by the editors.

Fourteen chapters written by 17 contributors cannot be ex-

pected to converge on a conclusion that is sufficiently unified to lend itself to a crisp exposition in a brief review. However, all of the authors agree and most take it for granted that beyond the handicap to everyday living and the insult to self-concept that any injury can occasion, brain injuries in specific locations can transform the patient's experience and coping strategies in ways that could not have been predicted on the basis of the disability alone or the individual's premorbid background and personality. It is clear that the subjectively unified standpoint of the self is the end result of diverse and sometimes conflicting processes of appraisal, from vantage points that differ depending on which brain system gains control of behavior. It is difficult to imagine a set of phenomena that is more suited for behavioral neuropsychiatric investigation. Reading this volume would make a good start for anyone inclined to follow these leads.

MARCEL KINSBOURNE, M.D.  
Winchester, Mass.

**The Neuropsychology of Epilepsy**, edited by Thomas L. Bennett. New York, Plenum, 1992, 308 pp., \$45.00.

As part of Plenum's Critical Series in Neuropsychology, this book adds to the growing literature assessing the role of neuropsychology in cognitive science and medicine. The editor's primary goal was to provide a broad sampling of the current research on the neuropsychology of epilepsy. The study of epilepsy has long been considered an important way to understand the mechanisms by which the brain regulates human behavior, and this book explores both neuropsychological and psychosocial changes associated with different types of epilepsy. Further, the contributions of neuropsychological evaluation as an aid in presurgical assessment, in the identification of postsurgical deficits, and in understanding the impact of both the disorder and anticonvulsant medications on cognition are considered.

The text is divided into three sections. The first comprises four chapters that provide a general overview of the nature of epilepsy. A historical overview and a chapter presenting a conceptualization of the epilepsies from a neurologist's perspective are included. Bruce Hermann, Steve Whitman, and Michael Anton consider the multiplicity of forces that infringe on people with epilepsy and describe major categories of risk factors for psychological and social problems for persons with epilepsy. The fourth chapter is devoted to a consideration of nonepileptic (or "pseudo-epileptic") seizures and how neuropsychological assessment can be used to help with diagnosis.

In section 2, the cognitive and emotional consequences of epilepsy are described. The chapter by Thomas Bennett describing the cognitive effects of epilepsy and anticonvulsant medications is particularly helpful. He provides a concise, clearly written outline of how epilepsy itself can cause cognitive impairment and the ways in which the nature and extent of the deficits depend on the type and frequency of seizures, age at onset, duration of the disorder, and etiology. Bennett also describes the cognitive deficits associated with various anticonvulsant medications. Other chapters in this section address different perspectives on temporal lobe epilepsy and discuss whether there is a specific syndrome of behavior that can be identified. The authors of the final chapter in this section discuss the psychological and psychosocial outcome of anterior temporal lobectomy.

The focus of part 3 is on treatment approaches to epilepsy and their outcome. It begins with a description of medical

treatment of epilepsy and then discusses some very interesting research by DeLee Lantz and M.B. Sterman using EEG biofeedback, which helped to reduce the number of seizures in people with poorly controlled seizures and improved performance on neuropsychological testing. Chapters by David Loring, Kimford Meador, and Gregory Lee discuss criteria and validity issues related to the Wada procedure and the assessment of hippocampal function using depth electrodes, two procedures that are part of the preoperative evaluation of patients who are candidates for epilepsy surgery. The final chapters discuss neuropsychological changes following anterior temporal lobectomy and corpus callosotomy.

This book is well written and provides an excellent reference for a reader interested in understanding the complex relationship between neuropsychology and epilepsy. The title is somewhat deceiving, however, because the scope of the book is really much broader than is indicated. Psychosocial consequences and behavioral characteristics of persons with epilepsy are covered in some detail, and several chapters do not refer to cognition or neuropsychology in other than peripheral ways. The organization of the book is somewhat confusing at times; chapters on anterior temporal lobectomy (a treatment) are included in two different sections, and chapters on treatment approaches and their outcome include evaluative techniques as well. It would have been helpful to have the chapter providing general information on medications (chapter 9) placed before the chapter addressing the cognitive effects of medications (chapter 5).

LAURA A. FLASHMAN, PH.D.  
Iowa City, Iowa

## AGING

**Emotional Problems in Later Life: Intervention Strategies for Professional Caregivers**, by Dan G. Blazer, M.D., Ph.D. New York, Springer, 1990, 251 pp., \$29.95.

This book reflects the wisdom, compassion, and experience of one of the world's foremost scientists and clinicians in geriatric psychiatry and its related basic science of epidemiology. Dr. Blazer's intention, which is fully realized, is to offer useful frameworks to clinicians dealing with common emotional problems in the elderly, such as depression, bereavement, sleep disorders, and memory disorders. A great deal of useful medical, psychiatric, and epidemiologic information is presented in a broad biopsychosocial framework useful not only for students of medicine and psychiatry but also for students of other helping disciplines as well, including social work, psychology, nursing, and pastoral care. (The book is truly interdisciplinary, like clinical geriatrics at its best.)

Among the many appealing features of this text are the extensive use of real-life clinical case vignettes, the provision of current bibliographies that are useful for both the specialist and the general reader, and the distillation of intervention research into practical steps for helping elderly patients recover function and enjoyment of life. Such practical translation of research into broad guidelines for practice is particularly evident in chapters dealing with bereavement and sleep disorders. Dr. Blazer is adept in developing an approach that balances psychosocial and more traditionally medical approaches in a way that may be helpful in deciding when medical consultation is needed.

Dr. Blazer's approach is informed not only by his work as