by the sort of painstaking studies described in this book. This is a 'must' for all those involved in or commencing GABA research.

C. D. MARSDEN

The Practice of Pediatric Neurology By K. Swaiman and F. Wright. (Pp. 1198; illustrated; £65.70.) Henry Kimpton Publishers: London. 1976.

Dr Ford's textbook of paediatric neurology enjoyed an exalted reputation well beyond the sphere of interest of paediatricians and paediatric neurologists; indeed there were some who averred that in its time 'Ford' was among the best of all neurological texts. The last revision in 1966 was a valuable but unsuccessful attempt at updating; since then there have been important and extensive advances in paediatric neurology which have sharpened the need for a replacement, and none of the recent texts directed to paediatricians and those with a general interest in paediatric neurology has sufficed as a work of reference.

Professor Kenneth Swaiman and Dr Francis Wright, as co-editors of a two-volume treatise, have drawn together contributions from 44 other American authors, and are the first to try and fill the vacuum left by Ford. But at £65.70 is it worth it?

There are three main sections: 'Evaluation of the patient's problems', 'Symptoms and signs of neurologic disease in childhood', and 'Discussion of neurologic diseases in childhood', and thus there is a commendable emphasis on the clinical basis of paediatric neurological practice. Many of the authors are accepted experts on the subjects about which they write, and their contributions have an authority which others, written by others with less experience, lack.

The transatlantic emphasis does not limit coverage of the world literature but there are some surprising gaps. For example, there are only three pages devoted to speech and language, matters which have deservedly attracted great attention in both America and Europe, whilst the sections on neuropsychiatry, which occupies a proportionately large part of a paediatric neurologist's time, seem to lack insight as well as incisiveness. There are tautological difficulties over the relation between migraine and epilepsy (p. 156), while the section on vertigo owes more to adult neurology than to an understanding of the problem in young children. Leber's amaurosis, a much more frequent cause of poor vision in childhood than Leber's disease, is not mentioned, and once again the genetics of the latter disease is inaccurately presented. Evidently the author of the section on movement disorders has not realised that the patients described by Pampiglione and Maia suffered from the same disorder as those presented by Kinsbourne as the dancing eye syndrome.

As in many neurological texts, therapeutics get minimal attention, or is this the malign influence of FDA? Casual examination of the bibliography reveals sufficient inaccuracies to make one wonder if there has been systematic checking. Illustrations are clear and plentiful but not always relevant.

Although this text will serve as an important and valuable reference work, it lacks the authority of Ford. Its place is in departmental libraries—weight as well as price are threats to private bookshelves.

JOHN WILSON

The Diagnosis and Treatment of Alcoholism By G. G. Forrest. (Pp. 257; no price quoted.) Charles C. Thomas: Springfield, Illinois. 1975.

The author of this book is a clinical psychologist who is supervisor of an alcoholism rehabilitation programme at Army Headquarters, Fort Carson, Colorado. He has a major interest in a psychotherapeutic approach to the alcoholic and problem drinker. His concepts are eclectic in nature, embracing a much wider range of therapeutic strategies than might be expected in certain transatlantic psychoanalytic strongholds.

Misleading stereotypes of the alcoholic, leading to therapeutic nihilism, are initially discussed. Psychotherapeutic tactics are later described. Principles of individual psychotherapy on modified Rogerian lines are lucidly presented. Group psychotherapy, however, is rightly depicted as being currently the most promising treatment modality. Warmth of personality and a positive liking for problem drinker patients—not always easy to achieve—are regarded as important ingredients in the therapist himself. A success rate of 75% is claimed for group therapy over a six month period—a figure which would seem optimistic in the north of Britain where heavy drinking receives strong cultural approval. The book ends with a useful discussion of the follow-up and evaluation of alcohol rehabilitation.

This volume is a valuable addition to the already large literature on alcoholism and will be informative to all who are involved in alcohol rehabilitation programmes.

A. BALFOUR SCLARE

Pathophysiologic, Diagnostic and Therapeutic Aspects of Headache By M. E. Granger and G. Poch. (Pp. 128; illustrated; SwFr./DM 62-, $24.00.) S. Karger: Basle. 1976.

This is the fourth of the series *Research and Clinical Studies in Headache* edited by Dr Arnold Friedman and Dr Mary Granger, the first of which appeared in 1967. This volume does not pretend to be comprehensive, but picks out selected topics for its contents. The selection is curious and the topics seem to contain no thread of continuity to link the subjects which are covered.

The first chapter on the head in the body image concept is typical of the trendy impressionism perpetrated by the modern day psychologist *cum* sociologist. There is little attempt to relate the somewhat speculative conjectures to the patient with headaches, and one's interest wanes a little on encountering '. . . found a tendency for men with high head awareness to be relatively unconcerned about anal aspects of behavior, such as obsessive concern about cleanliness . . .'.

A useful survey of headaches associated with diseases of the eye by Myles Behrens covers the major areas of overlap between the ophthalmologist and the neurologist. Spira, Mylecharane, and Lance provide a fascinating account of their experimental pharmacology of humoral and anti-migraine drugs on the circulation of the monkey; to some extent this fills the gap of the lack of an experimental model for migraine, but not completely—as the authors themselves concede. This chapter complements the following one by Dalessio which reviews vasoactive substances, vascular permeability, and their role in migraine. Catecholamines, histamine, serotonin, kinins, prostaglandins, and 'slow reactive substance (SRS-A)' are considered as vasoactive substances associated with inflammation. Some would doubt the concept of a sterile inflammatory reaction, postulated by Dalessio, in the absence of evidence of a cellular response in the vessel wall in migraine.

Succeeding chapters review the role of allergy, the place for investigation by

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