Neurology: The Physician's Guide, ed by Robert G. Feldman, New York, Thieme-Stratton, 1984, 288 pp, price not given.

This volume focuses on common neurological problems encountered by primary care physicians. Each of the 16 sections is written by a different expert and presents a broad overview of the topic. While isolated criticisms can be made and omissions pointed out, it seems to this reviewer that, overall, the book does indeed serve a useful purpose as a primer on common neurological conditions. Thus, the generalist will find it useful, but it is doubtful that those who deal in the neurosciences full-time would find this text of sufficient depth to merit its purchase.

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The Diagnosis and Treatment of Epilepsy, by Richard Lechtenburg, New York, Macmillan, 1985, 239 pp, $34.95.

This book presents the author's views concerning controversial areas of epilepsy. The writing style is clear and precise. The references are good and current. The strongest section is an in-depth discussion of psychosocial issues. The Diagnosis and Treatment of Epilepsy has several problems, however. Although electroencephalography (EEG) is the most important test for the diagnosis of epilepsy, it is presented superficially. Only six EEG illustrations are included; the majority have unlabeled montages. This type of information may not be required by the family physician, general surgeon, or internist, but would be required in detail by a neurologist. Many epileptologists and electroencephalographers would strongly disagree with statements such as: "Deciding that the child actually has benign focal epilepsy of childhood (rolandic epilepsy) is greatly influenced by the patient's clinical signs, and so the electroencephalogram is not very informative." The EEG is as important as the history and physical examination in this particular epileptic syndrome. In addition, the etiology of seizures, in particular, the metabolic causes, are also dealt with

superficially. A list of the more common entities would have been helpful and should have included hyponatremia, hypocalcemia, hypoglycemia, and the nonketotic hyperglycemia coma syndrome. Porphyria, although rare, is not mentioned. The text also implies that the patient with alcohol withdrawal seizures requires chronic anticonvulsant treatment, but most neurologists would probably not agree with chronic treatment in this situation. Plus, most pediatricians would perform a lumbar puncture in a child with an initial febrile convulsion, but many would not routinely hospitalize the patient as suggested. The treatment section of the book presents several unconventional viewpoints. For example, the author states that carbamazepine and valproic acid probably are safe for pregnant epileptics; yet, several European studies have indicated an association between valproic acid treatment and neural tube defects. In Table 12-2, valproic acid is listed as a primary drug for rolandic epilepsy, but most epileptologists would probably choose carbamazepine, phenytoin, or even phenobarbital. Consequently, The Diagnosis and Treatment of Epilepsy would be of most value to the non-neurologist who has to deal with seizure disorders.

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Color Atlas of Microneurosurgery, by Wolfgang T. Koos and Robert F. Spetzler, New York, Thieme-Stratton, 1985, 420 pp, $190.00.

Although there are many textbooks available demonstrating normal brain anatomy in the prepared specimen, to my knowledge, there has never been an atlas which demonstrates the abnormal findings that one encounters in microneurosurgery until now.

The color reproductions in Color Atlas of Microneurosurgery are excellent. The line drawings coincide with each of the operative photographs so that the normal/abnormal structures are clearly indicated. The atlas is also quite complete in that it presents photographs of normal brain anatomy which are also well labeled. There is not a great deal of text associ-