

published in 1983, there necessarily are some points that have changed. For example, we now know that some antisera to neurofilaments cross-react with the paired helical filament, contrary to the statement made on page 52. The section on Pharmacologic Investigation into the treatment of Alzheimer's Disease provides informative descriptions of the agents that are under trial for the treatment of degenerative dementias. Other sections of the book cover the Epidemiology and Genetic factors, Clinical Diagnosis and Differential Diagnosis of Alzheimer's Disease, Psychometric Diagnosis, Special Diagnostic Procedures, Clinical Syndromes Associated with Alzheimer's Disease, Non-Human Models of Alzheimer's Disease, Psychotherapeutic Approaches of Management to Alzheimer's Patients and their Families. Clinicians, will find the chapter by Fuld on Psychometric Differentiation of the Dementias especially helpful, but may be disappointed in the section on the Clinical Diagnosis and Differential Diagnosis of Alzheimer's Disease and related disorders. This latter section is too brief and provides little useful information on the various clinical presentations of Alzheimer's Disease and related disorders.

The book on the whole is quite informative not only for the medical students and practising physician but also to the neurologist, psychiatrist and geriatrician working in this field.

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RECENT DEVELOPMENTS IN PARKINSON'S DISEASE. Edited by Stanley Fahn, C. David Marsden, Peter Jenner, and Paul Teychenne. Published by Raven Press, New York, 1986, 375 pages. \$75.00

This volume consists of papers presented in October 1984 at a workshop on Parkinson's Disease. It is divided into six chapters. They deal with: anatomy, biochemistry and pathology, imaging of dopamine and receptors, MPTP-induced parkinsonism, pharmacology and long-term treatment, use of bromocriptine, and use of other dopamine agonists. The contributors include many leading authorities on Parkinson's Disease.

The chapter on anatomy, biochemistry and pathology is up-to-date, though without any remarkable new developments.

While the efforts of the 1950's led to drug-induced parkinsonism animal models, the 60's featured discovery of dopamine deficiency and use of levodopa, the 70's was dedicated to therapeutics, the diagnosis of Parkinson's Disease, however, remained an exclusively clinical exercise. The chapter on dopamine and receptors deals with a development of the 80's — the use of PET scanning in diagnosis. It could help us to determine the natural progression of the disease. Very few centers today have access to PET scanners. It is a "recent development" and promises to add significantly to our knowledge.

MPTP-induced parkinsonism is another development of the 1980's. The mechanism of its toxicity has now been elucidated, namely MPTP is oxidized by MAO-B oxidase to MPP⁺. There are some indications that those exposed may develop a progressive neurological deficit thus resembling the idiopathic disease. The pathology is however, limited to the substantia nigra and there are no Lewy body inclusions. It has been postulated that MPTP, in conjunction with some other environmental factor, may be the cause of idiopathic disease.

The pharmacology and long-term treatment chapter is not as strong as the other chapters are.

The use of bromocriptine in Parkinson's Disease has been discussed by a number of workers with considerable experience, including Donald Calne who first reported that in 1974. The issues of when, how, and how much to use are discussed. Most reports indicate that the best time is early, in conjunction with levodopa, and in a small dose. This chapter is worth reading for anyone who treats Parkinson's Disease patients.

Clinical trials on other dopamine agonists — pergolide and lisuride clinical trials are reported. Their side effects preclude a widespread usage. Mesulergine resulted in testicular tumors in rats and therefore human trials have been terminated. Patients who become resistant to one dopamine agonist may respond to another agonist, therefore, a search for safer agonists is essential.

On the balance, this book is not for practising neurologists who see an occasional parkinsonian patient. However, neurologists would be well advised to read the chapter on the use of bromocriptine. This book is a necessity for all libraries in departments with residency training programs and is a must for those who are actively involved in Parkinson's Disease research. On the whole, the effort succeeds in bringing into focus the "recent developments in Parkinson's Disease".

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HOW TO EXAMINE THE NERVOUS SYSTEM, SECOND EDITION. By R.T. Ross. Published by Elsevier Science Publishing Company, Inc., New York, 1985. 274 pages.

In this age of sophisticated electrophysiological "functional" testing and computerized imaging, it is fashionable to suggest that clinical examination of the nervous system if not an obsolete relic of the nineteenth century is no longer cost-effective, or that at most, a simplified "screening" assessment will tell you where to aim the technology. Current de-emphasis of physical examination applies not only to the nervous system. Indeed, cardiologists freely admit to the atrophy of their skills in examination of the heart. However, bedside testing of smell and taste and the use of the tuning fork (256 or 512 Hertz) are still to be advocated in the absence of readily available electrogustometry, angiography and computerized imaging. As Ross has pointed out elsewhere, lack of skills in neurological examination on the part of physicians will only enhance skills in the courtroom on the part of lawyers.

There are a large number of books, some only locally available describing in various degree, methods of examination of the nervous system. Perhaps, most clinical neurologists harbour the conviction that they carry in their hoary heads proofs of the definite manual for mandatory assessment of the nervous system, full of pithy wisdom and iconoclasm. Robert T. Ross is a distinguished senior neurologist and teacher of critical and independent mein and known as the founding editor of this journal. It is therefore a pleasure to see the approach to the new expanded version of his "How to examine" book which is in paperback. As in most of the genre, it includes directions for each manoeuvre, liberally accompanied by drawings and with appropriate discussion of anatomy, physiology, abnormalities to be encountered and pathologies. But more than that this book can be said to be "fully explicit". Instructions are given