

Clinical Neurology, 3rd edition

edited by Timothy J. Fowler and John W. Scadding, 544 pp., Oxford University Press, \$49.95

This book is a remarkably broad yet concise text from which to learn and review clinical neurology. The stated goal of the authors is to “help in the education of medical students, junior doctors” as well as those preparing for board examinations and “physicians of all specialties.” They have without question met this goal. In particular, the book is a wonderful primary text for medical students confronting clinical neurology for the first time or for junior residents developing and refining their approach. Specialists in other fields who wish to refresh or expand their neurology foundation would also find the book to be an excellent reference.

The nearly 600-page text is written by a team of London-based physicians. It is well organized, clearly written, and supplemented with frequent tables and high-quality images and illustrations. The first several chapters outline a general approach to common neurologic issues. They address the fundamentals of physical examination, frequently encountered neurologic symptoms, diagnostic tests, and current imaging modalities. These first chapters may be the most useful for a medical student exposed to neurology for the first time, and any medical student or resident might benefit greatly from careful reading of these chapters before beginning a neurology rotation.

The subsequent chapters are organized by neurologic disorder. Chapters on neuropathy, neuromuscular disease, nerve and spinal disease, movement disorder, headache, epilepsy, dementia, head injury, multiple sclerosis, pediatric neurology, ataxia, elevated intracranial pressure, infection, and cerebrovascular disease are included and have been updated since publication of the previous edition. Chapters on the interface between neurology and both general medicine and psychiatry as well as a chapter on neurorehabilitation are especially helpful in understanding important neurologic aspects of diseases managed by nonneurologists. In addition, new chapters are presented on neurogenetics, neurointensive care, and pain. Though the styles vary, most chapters begin with a discussion of disease epidemiology and the current understanding of pathophysiology before proceeding through disease presentation, diagnosis, and limited discussion of basic management. Nearly all major topics within neurology are covered in reasonable depth, though the neuro-ophthalmology, neurooncology, and behavioral neurology content is quite limited.

In conclusion, this text provides an excellent overview of neurology best suited for the medical student interested in neurology, or a junior resident. It is also appropriate for specialists in neurology or other fields who wish to have an accessible and broad text on neurology to which they can easily refer.

Adam Crystal, MD, PhD

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Handbook of Headache, 2nd edition

by Randolph Evans and Ninan Matthew, 417 pp., Lippincott Williams & Wilkins, \$45.00

Aside from being one of the most common chief complaints seen by neurologists, headaches can be one of the most challenging to diagnose. The differential diagnosis ranges from benign conditions, such as tension headache, to life-threatening conditions, such as subarachnoid hemorrhages. This text is an excellent overview of the diagnosis and management of a broad range of primary and secondary headache disorders.

The first chapter should be read by all first-year neurology residents in the beginning of their training. It gives an overview of the international classification of headaches, strategies for evaluating headaches, and a brief synopsis of the major headache conditions further detailed in the rest of the text. The chapter is set up such that readers could simply look at the tables if they quickly needed a refresher. The end of the chapter concisely addresses medical-legal issues surrounding headache, which are often difficult to find in other headache texts.

The remainder of the book is set up in more of a reference manner, with fewer tables and lengthier text. Each chapter remains brief, and the clear writing style makes for a quick and easy read. Throughout the book, path physiology and pharmacokinetics are discussed in a clear manner. There are excellent references throughout the book. The authors name multiple major studies that support their evaluation and management of different headaches. Although they frequently compare different medications, such as the many different triptans available, there is no sense of author bias toward a specific medication.

There is a chapter on headaches in children that remains very basic and is more of a brief overview than a reference. There is a particularly useful chapter on headaches associated with trauma and concussive syndromes. The book contains a headache diary, which can be useful in a practitioner's clinic. There is a 35-question quiz at the end of the book to help readers identify the areas in which their knowledge is weaker. There is also a 42-case style quiz with references to which chapter addresses each particular headache syndrome. These quizzes could also be taken before reading the book, to help the reader identify which chapters to study more thoroughly. The cases could also be used to help teach medical students who have less exposure to outpatient neurology.

Overall, this book is an easy read, a concise but complete headache reference, and fills a useful niche in the practice of neurology. However, the practitioner must understand that this book remains a more useful text for the outpatient setting. Common headache situations seen in the emergency room, such as algorithms for status migrainosus management and when to image pregnant patients with headaches, are missing.

I strongly recommend this text for all neurology residents, private practitioner neurologists, and primary care physicians. It is an essential quick reference text to use in outpatient settings.

Jessica Feldman, MD

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See also pages 1333, 1521–1524

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