

BOOKS RECEIVED

DECISION MAKING IN NEUROCRITICAL CARE. 2009. By Jennifer A. Frontera. Published by Thieme Medical Publishers, Inc. 340 pages. C\$68 approx.

IMMUNE-MEDIATED NEUROMUSCULAR DISEASES. VOLUME 26. FRONTIERS OF NEUROLOGY AND NEUROSCIENCE. 2009. Edited by Rahman Pourmand. Published by Karger. 170 pages. C\$220 approx.

HANDBOOK OF CEREBROVASCULAR DISEASE AND NEUROINTERVENTIONAL TECHNIQUE. 2009. By Mark R. Harrigan, John P. Deveikis. Published by Humana Press. 743 pages. C\$200 approx.

THE THREE CULTURES - NATURAL SCIENCES, SOCIAL SCIENCES, AND THE HUMANITIES IN THE 21ST CENTURY. 2009. By Jerome Kagan. Published by Cambridge University Press. 311 pages. C\$25 approx.

THE CEREFY ATLAS OF CEREBRAL VASCULATURE. CD-ROM. 2009. By Wieslaw L. Nowinski, A. Thirunavuukarasuu, Ihar Volkau, Yevgen Marchenko, Val M. Runge. Published by Thieme. CD-Rom. C\$225 approx.

A CIRCLE OF SOULS. 2009. By Preetham Grandhi. Published by Sweetwater Books. 339 pages. C\$30 approx.

BOOKS REVIEWED

DEMENTIA IN CLINICAL PRACTICE. VOLUME 24. FRONTIERS OF NEUROLOGY AND NEUROSCIENCE. 2009. Edited by P. Giannakopoulos, P.R. Hof. Published by Karger. 184 pages. Price C\$240 approx.

The introduction to this book proposes that “new evidences from basic and clinical sciences should be available in a simple and comprehensive form for general practitioners and mental health professionals”. That is certainly a laudable goal – the field of dementia is important and confusing, and family physicians, specialists, and even at times neurologists, need some clear up-to-date information on how to best diagnose, treat, and manage patients. Family physicians tell us that they desperately need brief and clear guides to diagnosis and therapy. The authors who have been brought together to produce this volume are well-known academics, and work largely in Europe (especially Geneva), but also North America (including Serge Gauthier from Montreal and Andrew Kertesz from London). The approach- separating Alzheimer’s Disease, Vascular dementia, Lewy Body dementia, and Frontotemporal dementia as different sections – seems appropriate. Unfortunately, this book fails to live up to its promise. It is not in fact a volume addressed to the needs of general physicians, but a set of chapters focused on the research (and somewhat, the clinical) interests of the authors.

The volume, in short, seems to be unclear of its intended audience. I found some of the chapters (such as the chapter on “Pathological substrates of cognitive decline in Alzheimer’s Disease” by Drs. Giannakopoulos and Gold and their teams in Lausanne and Geneva), to be well-written reviews for the neurologist, but of little practical value to family physicians. Similarly, chapters on functional imaging and quantitative EEG in

Mild Cognitive Impairment and early Alzheimer’s Disease, conflate research and clinical to the point where the non-specialist will be quite confused as to how to utilize this new knowledge in his or her daily practice.

Furthermore, there were actually some statements and positions that really contradict the needs of Canadian physicians. For instance, de Souza and Dubois and colleagues in Paris basically state that “the neuropsychological evaluation is crucial to establishing the nature of memory impairment and remains the cornerstone for diagnosis” (page 6) – suggesting that the evaluation of a dementia patient MUST include evaluation by a neuropsychologist. Since few Canadian family physicians (and even internists) have ready access to such individuals, how are we to proceed? Certainly the 2008 guidelines on dementia published in the CMAJ based on the Third Canadian Consensus Conference on the Diagnosis and Treatment of Dementia (CCCDRD3), in no ways suggested that this was essential in proper evaluation of all dementia patients!

Later in the same chapter, the same team spends several paragraphs promoting the (as yet unverified and unconfirmed) position that it is possible to diagnose Alzheimer’s Disease without a “clinical dementia syndrome” as a defining feature. Recent “research criteria” proposed by Dubois and colleagues promote diagnosis based on memory loss supported by the presence of ancillary biomarkers such as PET scanning. It is disturbing that what were last year proposed as “research criteria”, are being stated uncritically in a book for clinicians as new clinical criteria! I must admit that once past the Alzheimer’s Disease chapters, the book settles down to address a more general readership. Chapters on the Vascular, Lewy Body, and Frontotemporal dementias were more designed as comprehensive and up-to-date background for