Book Reviews


Neurology receives scant treatment in standard paediatric textbooks. Publications in the excellent series, Clinics in Developmental Medicine, have done much to remedy this. The latest addition, double volume 20/21, ably fills another gap. Despite the traditional high standard of adult neurology in Britain, paediatric case notes in this country rarely contain a systematic neurological examination. Richmond Paine and Thomas Oppé have effectively removed any excuse for this.

History taking directed towards a neurological child patient is first described. This is followed by a useful chapter on 'some particular symptoms', e.g. involuntary movements, flippiness, pica, which brings together information previously only available in original papers. A routine scheme of central nervous system examination is outlined. In succeeding chapters, the component parts of this examination are dealt with in very considerable detail: ranging through assessment of mental state, speech, cranial nerve function, gait, motor function, reflex activity, sensation, and autonomic function. Practical details, special tricks and manoeuvres necessary at different ages are given, with information on the range of normal, and the age at which co-operation in the various tests can be expected.

However, this volume is far more than a handbook on examination technique, the implications of abnormal signs are fully discussed, and the authors have succeeded well in their 'hope of bridging the gap between mere techniques of examination and the making of an anatomical and aetiological diagnosis'. The section on infantile automatisms and their interpretation is particularly succinct. There is an interesting and informative chapter on special tests of cerebral function, in which it is stated, but perhaps insufficiently stressed, that very considerable experience is required in the giving and interpretation of these tests which would normally be carried out in conjunction with a clinical psychologist. The last chapter gives an up-to-date review of special investigations; again many would presumably be done in special centres in conjunction with consultants in other specialties. The illustrations are well chosen and clear.

This book is highly recommended to all established and aspiring paediatricians, and to neurologists who examine children. It should be available to post- and undergraduate students in teaching hospital libraries.

The enjoyment of paediatric practice will be enhanced, because during an adequate examination of the nervous system one inevitably gets to know the child.

Biological Factors in Temporal Lobe Epilepsy. By Christopher Ounsted, Janet Lindsay, and Ronald Norman. Clinics in Developmental Medicine No. 22. (Pp. 135; 27 figures + tables. 21s. or £3) London: Spastics Society Medical Education and Information Unit in Association with William Heinemann Medical Books, Ltd. 1966.

This nicely presented booklet of 135 pages starts with a very short but clear introduction by Gilbert H. Glaser, Professor of Neurology at Yale. In just over a page, he mentions the difficulties of classifying particular types of seizures involving behavioural automatisms, personality and thought disorders, and visceral disturbances. He promises a selection of provocative and stimulating data arising from the limited series of 100 cases presented clinically and many less presented anatomically.

Some of the clinical data analysed were part of Dr. Janet Lindsay's material for an M.D. thesis, but these are integrated by studies carried in Oxford on clinical and EEG features, and by a chapter by Dr. Ronald Norman from Bristol based on his own neuropathological material. The book is divided into 12 chapters and the authors have obviously taken a lot of trouble with the coding of their data in various directions. They also mention that the EEG evidence of temporal lobe discharge was a sine qua non of diagnosis in their 100 cases presented clinically. They also mention that 6 of their children in the study were dead by the time the data were coded. However, the excellent chapter on neuropathology (The Pathogenesis of Temporal Lobe Epilepsy), which is beautifully illustrated, does not specify how many, if any, of the cases illustrated are part of the clinical series.

Sometimes it is difficult to understand which of the 100 cases selected on clinical grounds are part of a series of 1000 children with seizures studied by Dr. Ounsted. This series of 1000 children is often mentioned in relation to particular aspects, such as the genetics and the role of status epilepticus (chapter 4, and chapter 2), but the reasons why the 100 patients were selected from this larger series is not very clear. It is also difficult to understand how the authors define what they call 'temporal lobe seizures'. However, in the group of 100 selected children, a prominent feature is the hyperkinetic syndrome which is said to be 'a common complication, and in many ways the gravest complication of temporal lobe epilepsy in childhood'. On the other
hand, though apparently 36 children in the sample had

catastrophic rage bursts as a prominent feature, this is

c onsidered to be a peculiar general biological reaction of

an intermittent kind to frustrating situations in brain-
damaged people, rather than a peculiarity of 'temporal

lobe epilepsy'.

'Many of the children in this sample were academic

failures in spite of good intelligence.' This appears to

be a very interesting point, and it is somewhat tantalizing

that very little further information may be found in the

rest of the book on this subject. It is interesting,

however, that the authors state that intelligence as

measured by tests was a poor predictor of schooling

success and work record. Amongst the 100 cases, in the

12th chapter, it is mentioned that only two patients had

a disorder which was probably genetically determined

(phenylketonuria in one case and tuberose sclerosis in the

other). It is difficult to understand how, in these cases

for example, the evidence of 'temporal lobe epilepsy' was

reached. However, it is very interesting to note on

page 125 that 'one third of all children who develop

temporal lobe epilepsy seem to derive their lesions from

severe febrile convulsions occurring in early life'. If

this statement is confirmed by other well-documented

series of children, it would change considerably the

paediatrician's view of 'febrile convulsions'. However,

it all depends on what one calls 'febrile convulsions'.

This nice little book, with the occasional quotation from

Hippocrates, or Ovid, is completed by 2 1/2 pages of

references (with many notable omissions including those

of Penfield and Jasper's book, of Gastaut, and, in this

country, the early work of Hill, of Falconer, of Margerison

and others). A useful index of 5 pages completes

easily this produced book which the reviewer found

extremely clear in the printing and illustrations. At

the end of the book the reader might wonder why the term

'temporal lobe' should have been included in the title of

this book, rather than omitting it altogether and calling

it 'Biological Factors in 100 Patients with Epilepsy'.

The Motor Deficit in Patients with Cerebral Palsy.

By KAREL BOBATH. Clinics in Developmental

Medicine No. 23. (Pp. 54 + 38 figures. 17s. 6d. or

$2.50.) London: Spastics Society Medical Educa-

tion and Information Unit in association with William

Heinemann Medical Books. 1966.

This slim hard-backed volume contains 51 pages of

descriptions of the motor development of normal infants

and of infants and children with cerebral palsy, and an

attempted interpretation of these observations in terms

of automatic reactions, postural reflexes, and other

neuropsychological phenomena. The text is illustrated

by 38 figures, most of them photographs, of reasonably

adequate quality to illustrate the necessary points.

Dr. Bobath considers normal motor development, the

motor development in cerebral palsy, factors in the

assessment of cerebral palsy, tonic reflexes, the interpret-

ation of clinical findings, and the different types of

cerebral palsy. The descriptive passages are good, and

the attempt to analyse the observed phenomena in terms

of evolving neurological patterns is a praiseworthy

pioneering effort in what seems to be the most logical and

most fruitful way to approach an understanding of these

problems. It is not always easy reading, however, and

Dr. Bobath may well leave some of his readers behind as

he moves rapidly through the speculative realms of

developmental neurophysiology. In some points the

 speculation outstrips the available evidence and the use

of scientific terminology does not make them anything

more than just speculations. There is obviously a great

deal of work and study to be done in this field, and

Dr. Bobath will be long remembered as a pioneer. His

book should be read by all who study child development

and cerebral palsy. Its main value will be to provoke

discussions and, one hopes, further studies. Some

specialists may feel irritated by parts of the book, but it

is hoped that this will lead, not to destructive criticism,

but to an increasing awareness of the need for further

study. The book will be helpful to therapists concerned

with treating children with cerebral palsy, but it should

not be used by them as a definitive answer to all their

questions.

Speech Therapy and the Bobath Approach to


xiii + 177; 19 figures. $7.50.) Springfield, Illinois:


The Bobaths have contributed to the general under-

standing of cerebral palsy by describing in neuro-

physiological terms the many abnormalities of posture

and movement encountered in that group of conditions,

and they have done a great service to sufferers from

cerebral palsy by developing a method of treatment based

on neuropsychiological principles. But the inexperienced

therapist entering this field is still liable to be confused,

both by the wide range of disorders which she encounters,

and by the role of herself and her colleagues from allied

professions.

For the therapist (and for the doctor who is responsible

for treatment and who needs to understand what the

therapist can offer) Marie Crickmay has written this

excellent book in which she describes the Bobath's

concept of cerebral palsy and its treatment against a

background of normal development. She outlines the

roles of each member of the treatment team consisting of

physiotherapist, occupational therapist, and speech

therapist. She writes lucidly and her text is well

punctuated by clear drawings and descriptive headings.

There is a useful beginning, but in her definition of the

speech therapist's role Marie Crickmay concentrates on

the treatment of defects of articulation, and it is only in

the penultimate chapter that the child's language is

considered briefly. A child with a severe articulatory

deficit will never acquire normal speech, and for him continuing

concentration on articulation may be most frustrating.

He must be given something to speak about. His

language development must be stimulated. He must be

helped to communicate.