

This well-written book, in one volume of modest size, provides such guidance.

The management of neurologic emergencies often begins without a firm diagnosis. Salcman provides flow diagrams that help lead the reader to the appropriate diagnostic studies and treatment. Aspects of anatomy and physiology clarify the understanding of the specific problems in each chapter.

The successful application of neuroradiology, neuroanesthesiology, microneurosurgery, and medical neurology to emergency patients provides a better and efficient initial management that can prevent brain failure and damage by adequate therapeutic support. Main topics deal with general considerations, stroke and tumor, trauma, medical emergencies, and pediatric emergencies. This second edition gives additional details about neoplastic emergencies, meningitis, and encephalitis. Despite these additions, the author maintains the comfortable size of the book. Many references are included with each chapter.

In summary, I recommend this book for all physicians dealing with neurologic emergencies.

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Epilepsy: Current Approaches to Diagnosis and Treatment, edited by Dennis B. Smith. New York: Raven Press, 1990, 288 pp. Price: \$85.00.

Selecting textbooks of epileptology is akin to choosing items from a restaurant menu. One's attention is immediately drawn to the sumptuous and often masterfully prepared main courses, such as Daly and Pedley's *Current Practice of Clinical Electroencephalography* (New York: Raven Press, 1990) and Niedermeyer and Lopes da Silva's *Electroencephalography* (Baltimore: Urban & Schwarzenberg, 1987). But one cannot ignore the appetizers, smaller portions of information meant to stimulate our hunger for further knowledge. This is where we find Dennis B. Smith's *Epilepsy: Current Approaches to Diagnosis and Treatment*.

There are three main ingredients in this volume: discussions of laboratory methods used to assist in the diagnosis of epilepsy, the role of antiepileptic drugs and seizure surgery, and an overview of psychiatric problems associated with the disease. Added embellishments are sections on the classification of seizures and epilepsy syndromes, the cellular and

molecular mechanisms involved in pathogenesis, and the economic and political issues surrounding the creation of epilepsy centers.

The chapters on laboratory methods address common pitfalls in the use of routine EEG and also the role of long-term monitoring. Color positron-emission tomography images during ictal and interictal periods reinforce a worthy discussion of neuroimaging techniques. The chapters on pharmacotherapy are individually directed to the treatment of children, adults, and the elderly. The book's strongest area, however, is the section on psychiatric issues. Dietrich Blumer offers rational guidelines for the use of antidepressants and lithium in epileptic patients with psychiatric disorders. David Treiman's analysis of epilepsy and aggression is particularly well done in that he correlates the relevant legal precedents with the medical literature.

Like many antipastos, one occasionally encounters a disagreeable morsel; an anchovy lurking under the lettuce, so to speak. I refer specifically to the discussion of antiepileptic drug selection in adults. The author's positions that carbamazepine is free of cognitive side effects compared to other antiepileptic drugs, that primidone causes less chronic toxicity than phenobarbital, and that the stigmata of the fetal hydantoin syndrome are unique to phenytoin can all be vigorously challenged. The statement that carbamazepine appears to be less teratogenic than other antiepileptic medications was probably written before the availability of recent data linking the use of this drug to neural tube defects.

Another nettlesome issue is the book's price. At nearly thirty cents a page, the cost is, to put it mildly, arresting. At that rate, the cost of Niedermeyer's text would, by comparison, rise to a hypothetical \$282.00. One can only hope that medical publishers will acquire some of the current national mania for budgetary constraint. These issues aside, clinicians will find within the pages of this book ample food for thought.

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Research Proposals: A Guide to Success, by Thomas E. Ogden. New York: Raven Press, 1991, 397 pp. Price: \$39.00.

I have grown increasingly weary of reading book reviews in which the reviewer concludes with the phrase,

"this book belongs on the bookshelf of every" With limited time and escalating book costs, this is usually wishful thinking. However, this phrase is totally appropriate in this instance. This publication should be on the bookshelf of all investigators who plan to submit a grant proposal to the NIH.

Research Proposals: A Guide to Success is a well-written, easily readable book describing how to write a research proposal. While specifically focused on the NIH, there are basic principles and suggestions that would apply to other agencies, such as the National Science Foundation and private foundations.

As appropriately noted by the author, "It is unlikely that proposals with very poor priority scores can be improved sufficiently through good grantsmanship to be funded. Such proposals are usually scientifically flawed. There is a mid-range of proposals, however, with good scores by any standard but that fall outside the funding cutoff range. Without exception, the priority scores of these proposals can be improved by better proposal preparation. If the reader follows the advice provided by the author, there is little doubt that the chances for funding will be dramatically increased.

The book is divided into two major sections: "Beginning Grantsmanship" and "Advanced Grantsmanship." In addition, the author added a section of sage advice to researchers seeking their first faculty appointment. Five useful appendices are included, providing addresses of information sources at the NIH, categorical programs of the NIH, and examples of preliminary data, informed consent, and the dreaded "pink sheet" in which the applicant receives the critique of his proposal and priority score from the study section.

"Beginning Grantsmanship" is directed to the investigator who has either not submitted a protocol or has received insufficient priority scores to be funded. The author takes the reader through each section of the NIH RO1 grant step-by-step. The book is full of bits of worthwhile details. Information such as how much equipment to request, how many citations to include, whether to request funding for a secretary, how to prepare your personal bibliography, and how to effectively use the space limitations is included. There is even a page of references to use to support your claim that anesthesia is detrimental to research involving neuroendocrinology and/or stress.

"Advanced Grantsmanship" reviews construction, center, training, instrumentation, and program project grants, and the National Science Foundation. As with the first section, "Advanced Grantsmanship" provides frank and timely information on how to work with the system.

The book is soft-covered, well-edited, and reasonably priced. It is highly recommended.

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Chronopharmacology in Therapy of the Epilepsies, edited by F.E. Dreifuss, H.D. Meinardi, and H. Stefan. New York: Raven Press, 1990, 201 pp. Price: \$92.00.

This book consists of a collection of articles presented at the workshop, "Chronopharmacology in Therapy of the Epilepsies," held in Heemstead, The Netherlands, in April 1989. The discipline of chronopharmacology involves (a) chronopharmacokinetics, the study of variations in drug concentrations resulting from biological rhythms (diurnal, hormonal, and otherwise) and from variations in the time of administration of medications; (b) chronesthesia, the study of the changes in the pharmacodynamic effects of medications and the relationship of those changes to various biologic rhythms; and (c) chronergy, the study of variations in the total effects of drugs, which includes both pharmacokinetic and pharmacodynamic factors.

This book contains 11 chapters (3 are reviews and 8 are original contributions). The first of these articles reviews the basic concepts and principles of chronopharmacology. The terms mesor, amplitude, and acrophase are defined, and the general effects of meals, posture, and formulation on drug kinetics are reviewed. The subsequent two articles are studies of the chronopharmacokinetics of valproate and carbamazepine, respectively. The first demonstrates, for example, that meals cause a delay in the absorption of various preparations of valproate, but there is no change in the extent of absorption. The fourth chapter investigates some of the circadian hormonal rhythms that occur in patients with partial epilepsy. Chapters 5 and 6 describe the temporal patterns of occurrence of epileptic seizures. One delineates the incidence of occurrence of seizures depending on the time of day and the time of month. It shows, for example, that there is an increased risk of occurrence of epileptic seizures in the early afternoon and early morning. The other article demonstrates that, whereas the occurrence of one seizure may increase the risk of occurrence of subsequent seizures, there are few factors that can predict the occurrence of clusters of seizures.

The subsequent three chapters (7-9) deal predom-