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Book Review

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Diseases of the spine and spinal cord

TN Byrne, EC Benzel and SG Waxman ISBN: 0 19 512 9687Price: £79.50

This book is presented as an outgrowth of a previous publication *Spinal Cord Compression* written a decade ago by two of the authors also for the Contemporary Neurology Series. The preface aims the book at 'house officers and practicing physicians' offering them an 'optimal approach for evaluating and managing patients with spine and spinal cord diseases'. The three authors with diverse backgrounds, neurology and neuro-oncology, neurosurgery and spinal disorders, and the molecular aspects of neurological disease, have intended to provide 'a single, coherent approach' and believe that 'that an understanding of pathophysiology is an essential prerequisite to clinical judgement'.

Certainly, in the first few chapters, that intention is well served. 'Anatomy and biomechanics of the spine and spinal cord', 'Clinical pathophysiology of spinal signs and symptoms' and 'Pain of spinal origin' are useful accumulations of diverse material and clinically relevant points, many of which are rarely included in standard texts. An example would be false localising signs such as the finding of mid-thoracic sensory level with cervical level central disc protrusion.

The style tends to be narrative, with illustrations often reproduced from reference publications in an unsophisticated manner, although generally providing an effective information impact. The text is well referenced, the vast majority being original articles. As such, these chapters provide both an understanding of pathophysiology, which brings together the anatomical, functional and clinical aspects, and a resource of original articles.

In subsequent chapters this valuable approach continues in part – that is, based at the level of clinical teaching and covering the breadth of things to think about and consider when assessing a patient in the clinical context. The style of publication does not allow for key points to be emphasised, which might have made it easier to retain and take away the value of clinical experience that has gone into many sections.

Degenerative disorders of the spine, epidural tumours, intradural-extramedullary and -intramedullary tumors and vascular malformations, leptomeningeal metastases, noncompressive myelopathies, infectious and noninfectious inflammatory diseases affecting the spine and syringomyelia and spinal haemorrhage are dealt with in the next seven chapters.

Coverage of particular diagnoses and disorders is variable in terms of detail and depth - presumably reflecting the interests and expertise of the authors to some extent. In some areas, this comprises useful aggregations of material, which appear to be lifted from previous publications, and older reviews. In some areas, older clinical series have been considered in some detail, presumably because of their teaching merit in contrast to more recent publications, for example, clinical series of patients with epidural abcess reflective 1930–1982 era experience. As with any textbook, some areas lose contemporary relevance quicker than others. This tends to apply most to treatment and management aspects particularly in the current climate of evidence-based medicine and clinical practice guidelines – the section on back pain provides an obvious example.

The penultimate chapter – Spine trauma, spinal cord injury and spinal stability covers an overview of these topics adequately enough but with little in the way of 'added value'. The final chapter entitled Management of the spinally impaired patient adds nothing to this book or the topic.

For the price, half of this book would be invaluable – it goes a long way to providing the background pathophysiology and the integration of approaches and thoughts that make for clinical judgment that is almost more, rather than less, necessary in the modern imaging context. The other half can provide a reasonably comprehensive coverage of disorders and diagnoses, but the inconsistency of detail and lack of an obviously systematic approach make it difficult to trust as an information resource.