



## Book Reviews

### **A Guide and Resource Directory to Male Fertility following Spinal Cord Injury/Dysfunction\***

Maria J. Amador, Charles M. Lynne, Nancy L. Brackett  
Published by: The Miami Project to Cure Paralysis,  
University of Miami 2000, 44 pp

The aim of this publication is to present current and reliable information for lay persons, and the guide fulfils this aim. It is well written and illustrated.

First it gives an introduction to the erectile function and possible treatments of disorders. This is brief and informative. It would have been worthwhile in relation to the use of Viagra<sup>®</sup>, that the risk of use of nitrate medications in particular and not only "certain cardiac medicines" was mentioned. Further, for individuals with spinal cord lesions the reviewer believes penile implants for sexual use only could be discouraged.

The ejaculatory function and treatments including semen retrieval is likewise well explained. Even though we may be able to obtain erection as well as ejaculation we are not able to give the spinal cord lesioned man his orgasm if it is lost. This question could also have been addressed. For the semen retrieval there is an excellent description of the use of penile vibratory stimulation (PVS) as a non invasive method to obtain semen in 60–80% of the spinal cord lesioned men and in particular the possibility for self administration of PVS is informative.

Likewise the methods for achieving pregnancy, both with in-home inseminations and the various medical assisted procedures are well written and up-to-date.

Finally there is a good discussion regarding the semen quality following the spinal cord lesion.

Generally the guide is very easy to read, very informative and excellent for spinal cord lesioned individuals themselves as well as relatives and health professionals working with individuals with spinal cord lesions and their relatives.

Although the guide is mainly for the USA the information can also be helpful to individuals outside the USA, not least because there are several good world wide web addresses, where further information may be obtained.

Fin Biering-Sørensen

### **Contemporary Approaches to the Study of Hysteria**

Edited by PW Halligan, C Bass and JC Marshal  
Published by: Oxford University Press 2001, ISBN: 019 263  
254 £75.00

Why do some patients show apparent neurological dysfunction with signs and symptoms without having experienced any trauma to the nervous system or any disease affecting the

nervous system? Why do we see patients with apparent paralysis, sensory disturbance, speech disturbance, memory disorder, pain etc and find no convincing explanation of their symptoms? Could it be that these patients have an underlying condition which has not yet been demonstrated? Could it be that the patient is consciously and deliberately practicing deceit?

A great number of questions but not many answers so far. Even after ruling out neurological misdiagnosis and straight-forward deceit, there is still a large group of patients for whom the label of hysterical this, that or the other is still not appropriate.

This excellent book sets out to answer some of these questions in considerable depth.

There are 32 contributors all of whom are well known in their fields.

The first section deals with the history of hysteria and this is a fascinating section. It begins with Ferriar's 'Hysterical Conversion' and continues with Freud's Conversion. War-based hysteria including medically unexplained syndromes and various specific post-conflict combat syndromes are discussed. A further chapter in this section deals with hysteria as seen in history dating from Herodotus and the first case of 'shell shock'.

The second section deals with classification, epidemiology and the construction of modern diagnostic criteria including the criteria in the Diagnostic and Statistical Manual of Mental Disorders. This section continues with the discrepancy between the diagnostic criteria and clinical practice and ends with the epidemiology of hysterical conversion.

The third section, Aetiological, Clinical and Legal Perspectives, includes the contribution of life events, clinical neurological view of hysterical conversion, factitious disorders and malingering, non-epileptic seizures and the legal view of conversion hysteria. Part four deals with theoretical perspectives and includes such diverse topics as psychodynamic theories and imaging of hysterical paralysis. The final section deals with prognosis and management including rehabilitation.

The book is well produced with clear tables which give very clear summaries: for example the table which gives the clinical features and description of various psychogenic gait disturbances, or the table which gives medical disorders mistaken for epilepsy and another table which gives sleep disorders mistaken for epilepsy etc etc, and the tables continue right throughout the book and maintain a very high quality of information with a clear presentation.

Each chapter includes a comprehensive list of references.

This is an excellent book and I doubt if there is another text on hysteria which can really compete with this volume.

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