patients likely to be female, this is a reference work that would be a useful addition to your bookshelf.

L M Parsons

Neuroethics: defining the issues in theory, practice, and policy

Edited by Judy Illes. Published by Oxford University Press, Oxford, 2006, £29.95 (soft cover), pp 320. ISBN 0-19-856721-9

No-one interested in the neurosciences could fail to be stimulated by this book. It has a tremendous reach, but perhaps it oversteps the mark. For instance, there is the suggestion that neuroscience, via neuroethics, might help to solve the problem of socioeconomic disadvantage and sort out values diversity in education. But who really believes that brain scans will contribute significantly to solving major political and moral issues?

Well, some authors in this book do. Gazzaniga quotes himself as saying that neuroethics aims at "a brain-based philosophy of life". Writers of this ilk clearly think of the brain (like the genome) as being the key to all human problems. This must be true if (like Patricia Churchland) you believe that brains "incessantly make decisions" as well as think, remember and plan. But people (not brains) make decisions, think, feel, and so on. Language to do with people (or persons) is only used at the sub-personal level by analogy. Luckily there are some in this volume who suggest that neuroscience is largely irrelevant in the realm of meaning and recognise that reductionist science just cannot accommodate our more humanistic tendencies.

Apparently neuroethics encompasses both the ethics of neuroscience and the neuroscience of ethics. The ethics of neuroscience is simply a branch of bioethics. It is worried, for example, by confidentiality and neuroenhancement. There are also futuristic concerns about the possibility of "mind-reading". Meanwhile, whilst neuroscience can tell us a lot about the causes of mental phenomena, arguably it cannot tell us about content: meanings and memories are outside the head. Hence, the neuroscience of ethics (or religion) is simply as exciting as the neuroscience of feeling pain or making music.

So, all in all, this book is worth reading; but the standing of neuroethics as a discipline remains contentious.

J C Hughes

Psychiatry for neurologists

Edited by Dilip V Jeste, Joseph H Friedman. Published by Humana Press, New Jersey, 2005, £79.50 (hardcover), pp 436. ISBN 1-59259-960-5

Psychiatry for Neurologists is part of the Current Clinical Neurology Series. It is aimed primarily at neurologists and deals with the evaluation and management of psychiatric disorders in the neurological patient. It is an edited volume with a mainly American authorship.

The editors acknowledge at the outset the uneasy relationship between neurology and psychiatry and the different historical evolution of the two disciplines in different countries. There are two nice historical chapters exploring this further. While it is to be hoped that training in neurology will include significant attention to psychiatry and vice versa, the reality in many countries including the UK is that this is the exception rather than the rule. This volume is a welcome addition to the bridging of that divide.

The differing perspectives of neurologists and psychiatrists are reflected in the eccentric organisation of the book. After Parts 1 and 2: Introduction and Evaluation, there is a series of chapters on "Major Psychiatric Disorders": depression, anxiety, schizophrenia, hysteria, catatonia, addictions and personality disorders. Dementia and other organic disorders are dealt with in part 4 under "Psychiatric complications of major neurological disorders". Part 5, the longest section of the book comprises "Other topics". The chapter on delirium appears under "Others" in part 5. There is no dedicated chapter to head injury, or encephalitis.

The editorial and series style is to have experienced clinicians in their field write concisely and authoritatively about their area. The result is a series of accessible, relatively brief and not overly speculative articles that are likely to be useful as quick points of reference for the clinician. The quality of illustration is poor and the book generally lacks pictorial or graphic aids.

The ambition of this volume is bold and admirable, and it largely achieves its aim of being of more practical than theoretical focus. Overall, despite its omissions and necessarily limited by space, it manages to provide a reliable series of reviews of the behavioural problems of the main neurological disorders and a good account of basic

psychopathological and psychopharmacological principles. It would be a useful addition to the library of neurologists and psychiatrists.

J Moriarty

Antiepileptic drug interactions: a clinical guide

P N Patsalos. Published by Clarius Press, Guildford, £18.00 (soft cover), pp 175. ISBN 09542279-5-6

Over the past 15 years, 10 new antiepileptic drugs (AEDs) have been licensed worldwide. This brings the overall number of available agents to treat the many types of seizures and syndromes to nearly a score. Although these modern AEDs tend to be less troublesome because they are responsible for fewer drug-drug interactions, there are still enough problems with many of them to require a detailed knowledge of their interaction profiles. This is particularly the case for general neurologists who are likely to field a trickle (or flood) of epilepsy cases in their everyday practice. The increasing incidence of epilepsy in the elderly, whose care is often complicated by polypharmacy, makes the launch of this manageable little book also particularly timely for general practitioners. Even the "cognoscenti" require access to a rapid resumé from time to time.

Philip Patsalos has focused on the production of a succinct "no nonsense" approach to AED interactions. The format is concise and easily accessible. The general introduction deals with the basic mechanisms of common interactions and provides guidance on how to predict their likely occurrence and, thereby, anticipate and avoid problems. The next three sections cover interactions among the different AEDs, interactions affecting AEDs and interactions caused by AEDs. Individual drugs are grouped usefully into therapeutic classes.

This publication provides an invaluable tool for the practising clinician. This is undoubtedly the first of many editions. If I had to cavil, I would like Professor Patsalos to provide me with an index in the next update. In these days of evidence-based medicine, it might be nice too to have access to the important source references in addition to the "selected reading" list. These modifications will increase further the value of this convenient text.

M J Brodie