Atlas of hearing and balance organs: a practical guide for otolaryngologists

By: Leblanc A
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The anatomy of the inner ear, including the cochlear and the semicircular canals, is intricate and difficult to comprehend. The various nervous pathways leading from these organs to the central nervous system and their spatial orientation further complicate the issue. Textbooks of otology generally display only a few line-drawn diagrams; and even in large anatomical atlases, only one or at most two pages are designated to the inner ear. Books that are specialised in temporal bone anatomy, on the other hand, contain too much detail. They are usually of significant size and expense.

Atlas of Hearing and Balance Organs: a Practical Guide for Otolaryngologists is a highly specialised book that concentrates on the anatomy of the inner ear and its connection with the central nervous system. The information contained in the book includes part of the author's 40 years of work of dissection in the anatomy laboratory. The chapters are well organised, and the difficult part of the anatomy—the vestibular and cochlear nerve with their nuclei—is presented in detail. The relationship of the inner ear to the external and middle ear is also included. A separate chapter is dedicated to the anatomy of the Eustachian tube, which is not covered in many other textbooks.

In each chapter, the anatomy is well illustrated with line-drawing diagrams, photographs of anatomically dissected specimens, and cross-sectional imaging pictures as computed tomograms or magnetic resonance images. The anatomy of each structure is displayed clearly and from different angles. Most of the anatomical specimens and diagrams are coloured, which increases the perception of the structures, especially when they are crowded. As a consequence, the three-dimensional features of the inner ear can be appreciated even by novices. The text is well written and concise, and the structures in all the photographs are labelled in detail. The author has also included six reduced-size posters in the appendix, which are useful for teaching. Unlike many other atlases, this one has only 58 pages and is bound in a soft cover to make it easy to handle.

The atlas serves as an excellent reference for senior clinicians or scientists and is suitable for otolaryngologists, neurologists, radiologists, and anatomists who are interested in this region of the body. The clarity of the illustrations will also help junior physicians understand more of the anatomy of the inner ear. It is reasonably priced and is recommended to medical libraries and departments that contribute towards the management of patients with inner ear problems.

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Dementias: biological bases and clinical approach to treatment

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Dementia has evolved from a forgotten disease to one receiving public attention and professional interest with prospects for treatment and prevention. Advances in our understanding of dementia have revealed its multiplicity. *Dementias: Biological Bases and Clinical Approach to Treatment* is a multi-author book that comprises 15 chapters written by geriatricians, neurologists, psychogeriatricians, pharmacologists,

neurochemists, neuroscientists, sociologists, and philosophers from Europe and North America. Some chapters are written by international authorities such as Vladimir Hachinski, who writes on vascular dementia, and Jeffrey Cummings, who writes on neuropsychiatric symptoms in dementia patients.

Dementias: Biological Bases and Clinical Approach to Treatment starts with three chapters covering the epidemiology, biological basis, and classification of dementias. Following these are discussions on the various forms of dementia: Alzheimer's disease, vascular dementia, dementia with Lewy bodies, frontotemporal dementia, and pseudodementia. We learn that Alzheimer's disease is no longer regarded as a single disease but rather a complex syndrome with heterogeneous aetiologies and manifestations. In addition, a broader concept of vascular cognitive impairment is formulated as a new approach to vascular dementia with emphasis on early detection, treatment, and prevention. A chapter is devoted to dementia with Lewy bodies—an important clinical condition to recognise, because of its potential beneficial therapeutic response to cholinesterase inhibitors and the sensitivity of patients with this form of dementia to neuropharmacological agents. Polypharmacy is emphasised as the most common cause of potentially treatable dementia. The symptomatology of dementia is reviewed in two chapters: one on neuropsychiatric symptoms and the other on non-cognitive symptoms, which may well be underreported. The treatments of Alzheimer's disease—both pharmacotherapeutic and non-pharmacological—are also reviewed concisely.

Although the stated mission of the book is "to help us remember...that science and technology can cope with the needs of the demented", the editors nevertheless realise that science has yet to be supplemented by art to enable one "to recognize, care for and help the person inside the demented patient." Accordingly, the book concludes with chapters devoted to the art of care—namely, on prosthetic life care at home or in institutions, economic aspects, and ethical issues. Realising the limitations of the traditional custodial and current biomedical models of the care of those with dementia, the authors advocate a socially interactive scheme. Their scheme represents a people-oriented and programme-based approach in the presence of a supportive and therapeutic environment, and with a focus on physical space as a human living space rather than a staff working space. On the economic side, the book reveals that the money spent on aids (such as adult diapers) equals that spent on drugs, and that one fifth of the cost allocated for drugs is spent on sedatives. One might wonder that of those with dementia, how many have their associated geriatric problems—incontinence and confusion—assessed and properly managed? The final chapter focuses on some ethical issues about caring for a demented person. Should the patient be told the diagnosis? What do we mean by the term 'competence'? The book suggests that this term be abandoned and replaced by specific capacities, such as communicative capacity, decisional capacity, and self-care capacity.

Dementias: Biological Bases and Clinical Approach to Treatment is comprehensive, well illustrated, and well referenced. However, an index section is missing. Many abbreviations have been used, but while commonly used abbreviations such as DSM-IV and CJD can readily be deciphered, it would be difficult to understand what 'PHFs' would mean to the cursory reader. It would be better to have a list of abbreviations at the back. Some abbreviations are also not used consistently throughout the book—for example, vascular dementia has been abbreviated as VD and VaD in different chapters of the book.

I would recommend this book to all disciplines active in the field of dementia and especially to those who are committed to helping and caring for dementia patients.

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