

Stroke Treatment and Prevention: An Evidence-based Approach

This book represents a typically thorough and conscientious approach by Graeme Hankey to gather together the best of the evidence, where it exists, to help the clinician manage patients with cerebrovascular disease. It is a book of just over 500 pages and 18 chapters, all following a similar structure. The first two chapters briefly discuss, firstly 'the size of the problem of stroke' and, secondly, understanding the evidence. The latter is a particularly useful chapter, leading one through the currently standardised levels of evidence, helping the reader to understand and evaluate critically randomised trials, and also, and more pertinent to this book, meta-analyses and systematic reviews.

Then the book proper begins. Each chapter, looking at different clinical questions or dilemmas (e.g. acute thrombolysis, neuroprotection, anticoagulation, blood pressure lowering, carotid artery revascularisation, etc), follows a similar theme. The first part of each chapter is entitled 'rationale' and describes the arguments believing that a certain treatment might work. Different treatments are then described, the evidence for or against in relation to placebo or other existing therapies, with accompanying forest plots of all included trials. Then, most importantly there is a comment regarding interpretation of the evidence and implications for practice. The latter is largely a comment based upon analysis of the previous evidence,

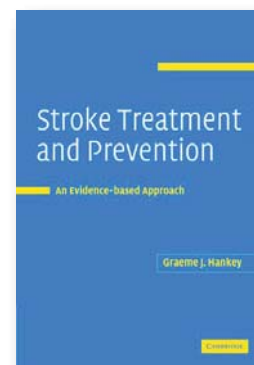
but where such evidence is lacking or controversial, Graeme Hankey provides the reader with potential options to take. Finally, each chapter finishes with a section titled 'implications for research' which brings the reader completely up to date with where a given field was heading at the time of writing and where it might go in the future. There is a final summary for each chapter which is an excellent means of getting to grips with the data in a very convenient way.

Each chapter is of course fully referenced, as are all the studies included in each meta-analysis, and as a rapid source of reference to any clinician dealing with stroke it is the sort of book that really should be on the office shelf.

I would very much hope that in five years time Graeme Hankey will have the energy to update the book as it is an excellent format and he deserves enormous credit for his commitment to gathering such a wealth of trial evidence.

Although much of the data is available through the Cochrane Library (which Graeme Hankey is the first to acknowledge in his preface) his interpretation of the evidence, and his ability to highlight where the data are lacking, incomplete, or need further work, is what makes this work a very worthy addition to the cerebrovascular literature.

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Author: Graeme J Hankey
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Human Traces

"I am suffering from the limits of my mind," he said. "There is a simple enough problem that I have set out to solve. How our minds work...."

"Yes, I suppose for simplicity's sake, you might say that his guiding light is Charcot and mine is Darwin."

"So a man may first have deduced the existence of his own consciousness by imagining it in others"

"... perhaps for quite simple reasons connected to the limits of their ability to reason, human beings could live out their whole long lives without ever knowing what sort of creatures they really were. Perhaps it did not matter; perhaps what was important was to find serenity in not knowing."

Many writers have grappled with the fundamentals of what constitutes the human mind, consciousness and the soul of a person. Sebastian Faulks in his latest novel explores such issues in the context of the late 19th century running from 1870 to just after the First World War – a time of great change in many differing spheres of life and science. In *Human Traces*, Faulks uses two fictional characters to unwrap the arguments that formed the kernel of the debate in neurological-psychiatric circles in Europe at the turn of the last century, and grapples in particular with the question of whether mental illness can best be understood through a psychological approach fashioned through experiences or a more deterministic one in nature with a basis in genes and evolutionary pressures. These two stand points are adopted by the two main characters- a French psychiatrist Jacques Rebière trained in the ways of Charcot at the Salpêtrière in Paris and Thomas Midwinter, an English physician influenced by his experiences in a London lunatic asylum. These two doctors enter their respective practices with the ambition that they can begin to understand the basis of mental illness, and through this offer cures as well as providing insights into consciousness and what it is to be human. These ambitions are driven by different influences and guid-

ing philosophies- Jacques is possessed by a desire to cure his schizophrenic brother, Olivier, within whom the only memories of his mother are trapped whilst Thomas is encouraged by his desire to understand the creative genius of great artists. After spending formative years in Paris and London respectively, the two aspiring doctors unite and combine their efforts in a sanatorium they set up in the Austrian mountains, and the relationship thickens as Jacques marries the influential older sister of Thomas, Sonia, whilst Thomas marries a patient of Jacques, Kitty. This, however, is no ordinary patient, as she comes to define the difference between the two men and contributes to the unravelling of their friendship and their ultimate destinies. Initially Kitty is seen by Jacques, who explains her problems through some tortuous psychological reasoning, which he regards as being so seminal that he wishes to present her case to a scientific meeting and asks Thomas to read the case history he has written on her. His reading of it, far from confirming the validity and insight of Jacques approach, alerts him to the real problem of her condition and the physical, organic cause of her complaints. The failure of Jacques to recognise his error in this case, coupled to his introspective outlook and philosophy on mental illness, leads him to become more isolated and distant from the kindly, more physically minded and egregious Thomas. Their relationship founders and survives in no small part because of their spouses and their over-arching but crumbling ambitions.

This tension remains despite the sanatorium moving location, and is heightened by the loss of Olivier (and later Daniel, the only son of Jacques and Sonia). In contrast, Thomas and Kitty have two thriving twin girls and seem destined to live out their days happily despite Thomas nearly dying in Africa during a 3-month sabbatical. However, the arrival of the 1st World War causes them to return to their respective countries and, after time apart, the final act is played out. The two become reconciled as Thomas enters



Author: Sebastian Faulks
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a new final phase of his life, and Jacques accepts the losses and false hopes of his work and family.

Throughout this whole novel the scientific theories that dominated the neurological world and formed the foundation of psychiatry at this time are laid out, often in great detail. Whilst of interest, especially to those wishing to understand these formative years of psychiatry, they can arrest the flow of the story and impede the unfolding of the narrative. Indeed some reviewers have criticised the book as being more concerned with describing research than being a novel. Whilst this is true in parts, and there are many diversions which seem to be not wholly necessary – for example the trips to America and Africa by Jacques and Thomas respectively- there is nevertheless an underlying rhythm to the work which drives the reader on to find out how these different philosophies will work themselves out in the lives of the main characters. En route the reader is invited to engage with a range of interesting questions, not least of which is why mental illness is so common given its destructive nature on patients and families and what it can tell us about con-

sciousness and the human mind and soul. Whilst Jacques and Thomas try to answer this question from different perspectives, Kitty and Sonia seek to understand such things using less rigorous approaches and in many ways seem to have a greater, more profound understanding of what it is to be human. This they would argue is through relationships and love with their attendant memories and a sense of tomorrow and looking beyond oneself. Thus the true human traces are those left by our effect on and interactions with others, physically, mentally and spiritually. This is no better encapsulated than in the moving speech by Thomas at the end of the book, where, guided by his wife Kitty at the final family reunion, Thomas describes his own evaluation of his life: as a doctor he feels he has achieved nothing (although others disagree) but in love he has been rich.

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News Review

A 2007 Challenge...

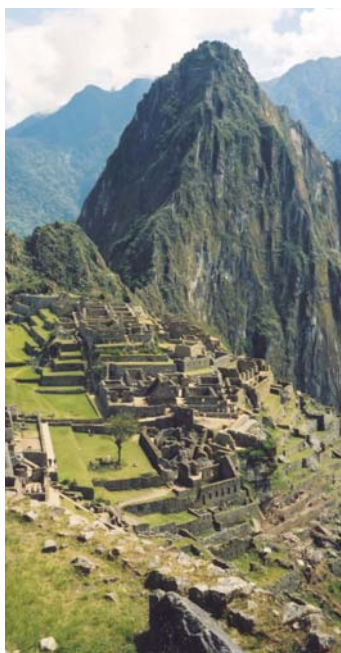
Are you or someone you know interested in taking part in a once in a lifetime trek or cycle ride whilst at the same time raising money for Headway – the brain injury association?

In 2007 Headway are offering the following trips:

15-25 Feb	-	Cuba Cycle Ride
17-25 Mar	-	Sahara Trek
27 Apr-6 May	-	China Trek
13-17 Jun	-	London to Paris Cycle Ride
18-26 Aug	-	Iceland Trek
14-23 Sep	-	Peru Trek
27 Oct - 8 Nov	-	Vietnam Cycle Ride

We will take care of all event organisation and administration, leaving you to concentrate on raising sponsorship and preparing for the trip.

*For further details please contact:
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Events and Conferences Officer,
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Email: eventsandconferences@headway.org.uk*



Primary Care Neurology Society Conference

The Primary Care Neurology Society will be holding one annual conference in England and one conference in Scotland in 2007. The first conference will be on the 17th of May at the Birmingham Hippodrome. The date and venue for the Scotland conference is still to be finalised. Over 180 people attended their conferences in 2006 with 93% rating it good or excellent. "Brilliant conference – I've learnt a lot and will approach my

neurological patients with more confidence" and "Excellent lecturers and content – thank-you" were just two of the many positive comments received. The Society is keen to develop a 2007 programme that reflects the interests of their members and is offering a 40% discount on the conference delegate fee on completion of the pre-conference questionnaire which you can access from www.p-cns.org.uk.

Trigeminal Neuralgia Association UK – first 2-day conference

Trigeminal Neuralgia Association UK will hold its first two day conference at Keele University on 30 June-1 July 2007. The programme will include eminent speakers from the USA and the UK and this event will include a Continuing Education Programme for healthcare practitioners. All interested professionals



and non-professionals are welcome to attend the conference as it will be an opportunity to meet Trigeminal Neuralgia patients and encourage two-way communication about the difficulties faced by patients. From previous conference evaluations, patients and professionals have valued the interaction that this type of conference encourages.

The proposed healthcare professionals' conference is aimed at dentists, local GPs, neurologists and neurosurgeons. The fee for the conference will include full refreshments, and accommodation is available if required. Full details will be published in future editions of ANCR, but please make a note of the date.

The aim of the programme is to increase healthcare professionals' awareness of trigeminal neuralgia, especially its diagnosis and up-to-date management. From recent data produced by Hall et al (Pain, 2006) on the epidemiology of neuropathic pain in the UK, it would appear that trigeminal neuralgia is more common than previously thought in UK medical practices. Its incidence has been put at 26.8 per 100,000, whereas this was thought to be 4-6 in 100,000. Carbamazepine is the drug of choice but this is only prescribed to 58% of patients.

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