Recovery after Stroke

There is now quite an array of textbooks concerning stroke although the balance has very much shifted towards acute stroke, stroke neurology, and intervention in the early phase. There is, by comparison, a relative paucity of books dealing with the aftermath of stroke and this book aims to try and redress some of the balance. Large, it is a book aimed at the physician caring for the stroke patient in the rehabilitation phase but as part of the stroke rehab library it will probably be looked at by senior nursing staff and therapists involved in stroke rehabilitation.

It is a comprehensive book of 25 chapters written by different authors, largely from Europe and North America, ranging from background epidemiology, aetiology and secondary prevention stroke through to the patients’ perspective of their stroke. In between there are chapters ranging from the regenerative ability of the CNS after stroke and cerebral reorganisation, through to the evidence base for early rehabilitation in hospitals and the community; physical recovery, speech recovery, cognitive recovery, depression, sleep disorders and autonomic disorders amongst others. As such, the range of topics covered is extremely comprehensive.

One chapter follows the next but this is not the sort of book which one would read cover to cover, one would tend to read two or three related chapters at a time. Each chapter is extremely well referenced, indeed often rather over-referenced (for example, the first chapter on epidemiology, aetiology and avoiding recurrence is thirty pages long but is followed by fifteen pages of references, and that on abnormal movements after stroke contains fifteen pages of text followed by twelve pages of references!).

Many of the chapters concentrate on mechanisms and pathogenesis of differing impairments and handicaps with a heavy bias towards research, somewhat at the expense of a problem orientated approach which would be rather more useful to the clinician involved in routine patient care. I suspect this is going to limit the book’s readership quite considerably. It therefore comes as quite a relief in the chapter on sleep disorders after stroke to come across a section subtitled ‘Practical guidelines for the management of sleep-wake disorders’. Such a section in many of the chapters would have been extremely welcome.

This book will appeal to those specifically interested in stroke rehabilitation, particularly from an academic point of view, but will probably find its way on to more stroke rehabilitation unit library shelves rather than one’s own personal bookshelf at home.

Peter Martin, Addenbrooke’s Hospital, Cambridge.

Neurological Disorders in Famous Artists

Seldom have I been as excited by the prospect of reading a neurology book, no doubt a reflection of my skewed priorities (which regular readers of ACNR may be aware of). This slim volume does not disappoint expectations. Three broad groups of artists and their possible diagnoses are considered: writers, painters, and musicians. This undertaking of course faces the ‘problem of the frame’ (p. 66), the limited documentary material which may be adduced from contemporary accounts (‘second hand’ history taking), abetted in some cases by the authors’ own writings which ‘speak directly to the clinician’s ears’ (p. 18). There is something involuntary in this latter experience, an approach which undoubtedly engages devotees of the evidence-based movement. Pathography is the ideal word for these pieces, since as well as its usual meaning (‘description of a disease’) it might also be considered an example of a blend, or what the author Julian Barnes. A possible delineation of a frontal lobe syndrome in a tale by Poe is not mentioned (see Altschuler, Lancet 2004;363:902).

A 1948 paper in Brain (71:229-241) by Alajouanine, in which he described the consequences of aphasia in a writer (Valery Larbaud), a musician (Maurice Ravel), and an unnamed painter, forms the basis for three chapters. Careful medical detective work by François Boller has identified the painter as Paul-Elie Gernez; it is suggested his style became less poetic following his aphasia.

The devastating was the effect of Alzheimer’s disease on the output of Carolus Horn (1921-1992), the sparing of artistic drive but with production of gradually more abstract works, ultimately degenerating to scribble, being in some ways reminiscent of the experience of William Uttermöhlen, another artist affected with Alzheimer’s (see Crutch et al., Lancet 2001;357:2129-2233). Caspar David Friedrich (major depression) and Vincent van Gogh (bipolar disorder) complete this section. Besides Ravel, the musicians include: Musorgsky (chronic alcoholism); Handel, Haydn, and Vissarion Shebalin (cerebrovascular disease); George Gershwin (tumour); and Robert Schumann (focal or musician’s dystonia).

Professors Bogousslavsky and Boile are to be congratulated on this superb collection, which is beautifully illustrated. Though it does not retail cheaply, many neurologists will nonetheless want this book in their personal libraries. A second volume may also be considered, for example to consider the effects on creativity of dementia (Dean Swift, Iris Murdoch) or synaesthesia (Messiaen, Nabokov).

AJ Larner; Cognitive Function Clinic, WCNN, Liverpool.