

Disclosures

Dr Brown is a laboratory instructor for Johnson & Johnson. The author has no personal, financial, or institutional interest in any of the drugs, materials, or devices described in this article.

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10.1227/NEU.0000000000000598

Book Review: *Escourolle and Poirier's Manual of Basic Neuropathology, Fifth Edition*

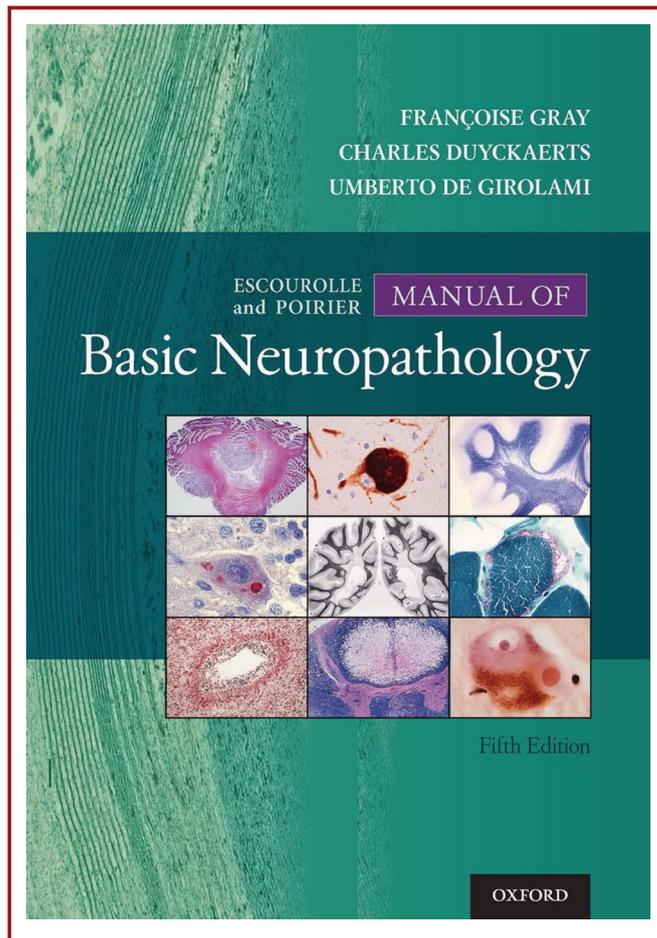
By: Françoise Gray, Charles Duyckaerts, Umberto De Girolami
Published by: Oxford University Press, New York, NY, 2013
Paperback: 424 pp.
Price: \$98.50
ISBN: 978-0199929054

The *Escourolle and Poirier's Manual* has been a great resource for trainees in pathology and neuropathology on the basic concepts of neuropathology since its first edition. Most significantly, the manual is of great use for trainees in related neuroscience areas due to its concise but deep content format integrating the basic concepts of neuropathology with clinical and radiological definitions. In this sense, this new edition is extremely timely due to the latest developments in the field since the last edition in 2003.

The book covers essential topics in cerebrovascular, neurodegenerative, infectious, metabolic, toxic, forensic and tumoral neuropathology, neuromuscular disorders, and pituitary pathology, with excellent gross and microscopic illustrations. Although the coverage is extensive, the book chapters are concise and contain the most relevant aspects of the different diseases, making it very readable for the nonpathologist including neurologists, neurosurgeons, and neuroradiologists.

The respected group of expert authors provides a knowledgeable and updated review of each topic incorporating classic neuropathological findings with new molecular genetics data on tumors (Chapter 2), vascular diseases affecting small blood vessels (Chapter 4), human prion diseases (Chapter 6), and muscular dystrophies (Chapter 12), as some examples.

A special bonus is the Appendix with a nice summary of the most common techniques used in neuropathology from removal



of the brain and spinal cord at autopsy to histological and immunohistochemical techniques to brain banking guidelines. This section is of great utility not just for the pathologist trainee, but also to trainees in other neuroscience areas for familiarization with appropriate surgical techniques for muscle and other neural tissue samplings.

Textbooks in pathology tend to be expensive because of the color illustrations. This manual has the particular value for being a comprehensive and richly illustrated textbook within a reasonable price for trainees and even medical students (less than \$100.00 USD). In addition, the book may also be purchased electronically for the tablet and/or smartphone user.

In conclusion, this new edition of *Escourolle and Poirier's Manual* is a great tool for every professional interested in a practical but detailed review of the diseases of the nervous system.

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10.1227/NEU.0000000000000616

Book Review: *Normal Pressure Hydrocephalus: Pathophysiology, Diagnosis, Treatment*

By: Michael J. Fritsch, Uwe Kehler, Ullrich Meier
 Published by: Thieme Medical Publishers, Inc,
 New York, NY, 2014
 Hardcover: 204 pp.
 Price: \$149.99
 ISBN: 978-3-13-164601-9

Normal Pressure Hydrocephalus: Pathophysiology, Diagnosis, Treatment by Fritsch, Kehler, and Meier provides a well-written, timely, and readable summary regarding this important topic that is relevant for Neurosurgeons, Neurologists, or Geriatricians. Normal pressure hydrocephalus (NPH) refers to the triad of neurological symptoms (gait, cognitive, and urinary) with associated ventriculomegaly (hydrocephalus) first described by Hakim¹ in 1965. The topic has relevance and this is well stated by the authors: idiopathic NPH (iNPH) is frequently undiagnosed, the number of potential patients is rising as populations demographics evolve because of increased lifespan, and there is effective treatment available for this disorder. iNPH is a treatable form of dementia and should be recognized as such.

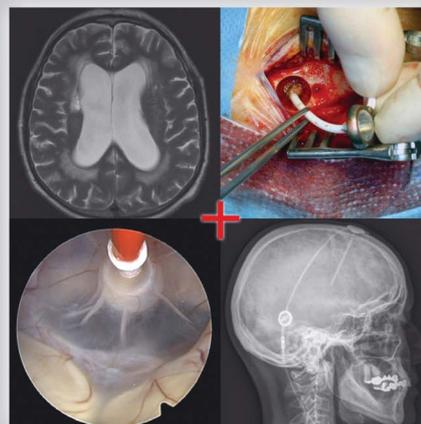
The authors have started their book with an introduction to the concept of secondary NPH (sNPH), which is often thought of as acquired hydrocephalus and iNPH. This has the potential to be confusing in that iNPH typically refers to elderly patients, who are most associated with this disease. Most of the book deals with iNPH patients, but there is frequent use of the term NPH and rare use of sNPH. I think it is reasonable to assume that while much of the book may have applicability to adult hydrocephalus patients, it is reasonable for the reader to accept that the majority of the material presented is directed toward the elderly patient with iNPH.

Chapter 2 navigates the literature regarding the epidemiology of iNPH. Prevalence is often discussed in terms of the percentage of patients over the age of 65 with dementia, or over the age of 65 total. It is challenging to find reliable information regarding the prevalence of iNPH. However, while the authors have attempted to review the literature, they often refer to the prevalence of patients evaluated in a study, rather than in the whole population. Determining the incidence of iNPH is also a difficult subject to evaluate. Additional caution should be exercised given the problems that exists with determining what incidence at different

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Pathophysiology • Diagnosis • Treatment

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Thieme

ages might mean. Although most think the increase of iNPH rises with increasing age, there is no reliable published information regarding this topic.

The chapters dealing with history (Chapter 3), clinical characteristics and differential diagnosis (Chapter 4), noninvasive diagnostic work-up (Chapter 6), and imaging (Chapter 7) are excellent, concise reviews with good illustrations. Each of these will provide the reader with a balanced overview of the subject material.

Chapter 8, which deals with invasive diagnostic work-up, is perhaps the most important in the book. It is critical to understand the takeaway message: currently there are good and reliable methods to determine if a patient with symptoms and hydrocephalus could benefit from treatment. The noninvasive diagnostic workup, while important, does not adequately predict the benefits of treatment. Here the differences in current common practice between Europe and North America are reflected by the proportion of time spent discussing the lumbar cerebrospinal fluid infusion, which is more commonly used in Europe, vs the large volume lumbar puncture, also called the Tap Test or extended lumbar drainage, which are more commonly performed in North