

Academy of Neurology and the American Headache Society have published an evidence-based guideline for migraine treatment (*Neurology*. 2012;78:1337-1353). The book chapter on treatment could be updated (lamotrigine is no longer considered effective, for example) to reflect these guidelines. Also, botulinum toxin injections are now approved by the US Food and Drug Administration for chronic migraine but are described as ineffective in the book.

For practitioners who have extensive headache experience and commonly treat a large headache population, this book will seem too simple. However, for general practitioners, residents, and medical students, this is a wonderful text to help solidify one's understanding and approach to a common and sometimes frustrating disorder. You will enjoy the tables in each chapter that help make things easy to understand.

This is a well-written book that reads quickly and could easily be read in a weekend. But even nicer for the reader is the ability to return to the tables in each chapter when trying to decide on a diagnosis or treatment. This book is so well organized that it becomes a quick and easy reference when faced with the day-to-day decisions of a busy practitioner.

Disclosure

The authors have no personal, financial, or institutional interest in any of the drugs, materials, or devices described in this article.

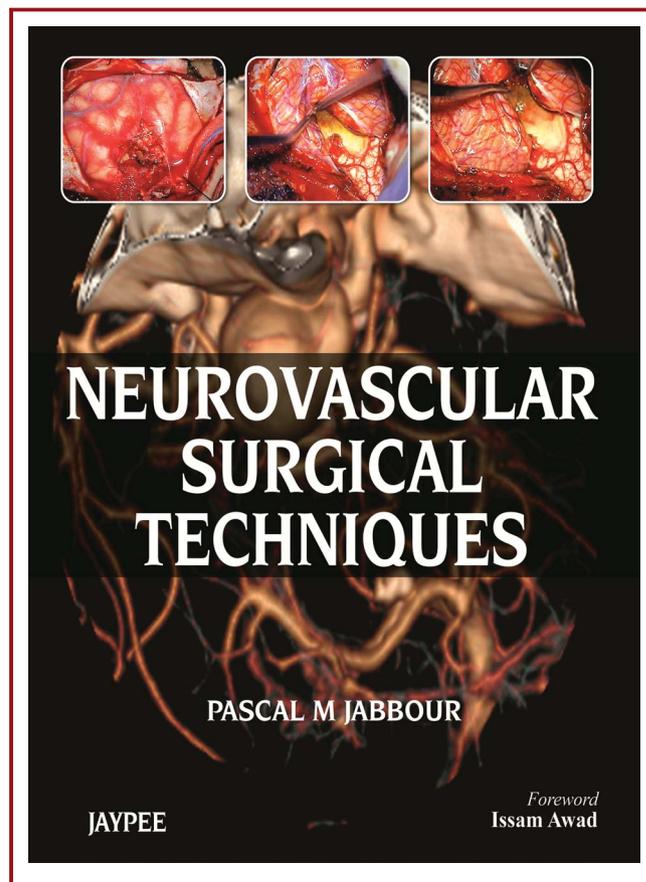
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Book Review: *Neurovascular Surgical Techniques*

By: Pascal M. Jabbour
 Published by: Jaypee Brothers Medical Publishers Ltd., New Delhi, India, 2013
 Hardcover: 433 pp.
 Price: \$182.00
 ISBN: 978-93-5090-088-8

Dr Jabbour has edited a beautiful compact volume on modern neurovascular surgical techniques. Within the rubric of “surgical” the editor appropriately incorporates both open neurovascular as well as endovascular techniques and herein lies, in fact, the originality of the book. Most of the chapters present in a relatively balanced fashion details concerning both open microsurgical and endovascular techniques appropriate to deal with the particular vascular problem discussed. Upon reading this book, some may consider that there has been undue emphasis on endovascular techniques vs open microsurgical techniques; however, I feel that



this emphasis is appropriate given that so much has been written over the past few decades about open microsurgical techniques to deal with neurovascular disease. Additionally, those of us that began our career as open neurovascular surgeons must admit that the slope of evolution and improvements in endovascular techniques currently fast outpaces that of microsurgical techniques.

One of the treasures of the book is the condensed, yet beautifully illustrated summary of so many years of work in Dr Rhoton's laboratory on neurovascular anatomy. These initial chapters in anatomic background are followed by 2 interesting chapters on microsurgical and endovascular instrumentation. There follows a number of chapters on the microsurgical and endovascular techniques applicable to aneurysms in different locations, arteriovenous malformations, and intracranial and spinal arteriovenous fistulas. The next several chapters are important in that they emphasize that the treatment of stroke and ischemic cerebrovascular disease is now, or should certainly be, an important part of neurosurgical practice. The book ends with thoughtful chapters on the future of endovascular and microsurgical techniques and very helpful chapters on “getting out of trouble and complication avoidance” both during endovascular and microsurgical procedures. Not to be missed is an excellent article by Dan Barrow and his colleagues on cavernous malformations, which is beautifully illustrated and provides invaluable comments on “pearls and pitfalls.”

Obviously, a multiauthored book of this nature, while providing very modern and up-to-date information, contains essentially no new information, and for that we would obviously have to depend on the current literature. The book is richly illustrated, and the majority of the chapters are very easy to read. Obviously, the style varies as should be expected of a multiauthored book. It is refreshing to see as authors many talented individuals that could be considered “third generation” neurovascular surgeons. It is particularly pleasing and important for neurosurgery to see that many of these individuals are, in fact, dual trained, both in open microsurgical as well as endovascular techniques. This certainly ensures a bright future for neurovascular surgery within our specialty.

I believe that this is a very useful reference text for all neurosurgical residents and practicing neurosurgeons. Obviously, neurosurgeons specializing in the treatment of neurovascular disease will find the book invaluable and will refer to it often. The book will also be very useful for endovascular practitioners in other specialties (endovascular neuroradiologists and neurologists). I strongly recommend the book.

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Book Review: *Minimally Invasive Spine Surgery—Techniques, Evidence, and Controversies*

By: Roger Härtl and Andreas Korge

Published by: Thieme Publishers,
Stuttgart, Germany, 2012

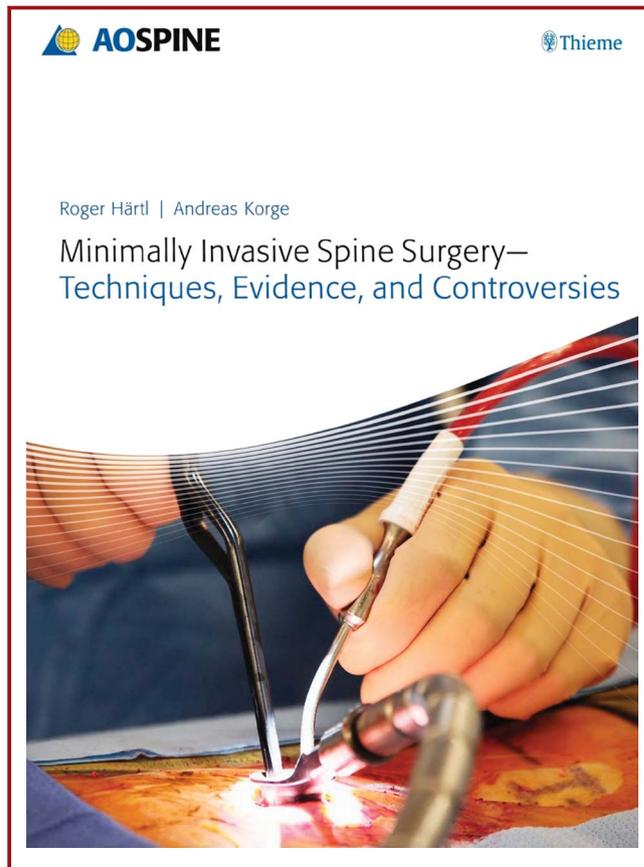
Hardcover: 510 pp.

Price: \$159.99

ISBN: 978-3131723819

Roger Härtl and Andreas Korge brought together leading neurosurgical and orthopedic spine surgeons to compose a collection of well-written summaries for the current status of minimally invasive spine surgery. This book is organized into 5 sections including 8 chapters of “fundamentals” followed by 3 sections divided into different anatomic regions of the spine: cervical, thoracic, and lumbosacral techniques. The final chapter summarizes critical overview and outlook for the future.

The middle 3 sections focus on specific technical aspects of surgical procedures according to anatomic regions. Each chapter is organized into a uniformed format, making it easier for the readers to follow:



historical perspective, terminology, patient selection, pros and cons, preoperative planning and positioning, surgical technique, postoperative care, evidence-based results, complications and avoidance/salvage procedures and learning curve, tips and tricks, and case examples.

There is a wealth of information to introduce practicing non-minimally invasive spine surgeons to the field of minimally invasive spine surgery in terms of instrumentations and technologies involved in performing different approaches and procedures. Each chapter contains “tips and tricks” from the experts on topics of discussion as well as a summary of evidence-based data available in the literature. The diagrams and photographs are very helpful in terms of understanding different minimally invasive procedures. This book also contains enough scientific review for seasoned minimally invasive spine surgeons to learn and improve his or her skills.

Intraoperative monitoring is an essential part of enhanced safety measures for most procedures described in this book; however, the authors omitted any meaningful discussion on this topic. There is a lot of controversy in the retroperitoneal far lateral approach to the lumbar spine, ie, eXtreme Lateral Interbody Fusion/Direct Lateral Interbody Fusion/Minimally Invasive Lateral Fusion, and some dedicated discussion on different modalities of monitoring techniques would have been very informative to the readers.

The authors should be congratulated on putting together a well-organized, comprehensive textbook on minimally invasive spine