Books

Epileptic Seizures and Syndromes

There appears to be a trend towards paying greater attention to the epileptic syndromes, and this book serves to introduce an interesting collection of relevant reviews and original work. It is not an attempt to provide criteria and exhaustive detail for diagnosis, these being covered admirably in Epileptic Syndromes in Infancy, Childhood and Adolescence, also published by John Libbey and edited by Wolf and others, which Janz refers to as the ‘guide bleu’.

Instead, the contributors raise discussion on a number of thought provoking issues, including difficulties with the current classification of seizures, primary idiopathic seizures which are not generalised but have regional manifestations, and the longitudinal evolution of the epileptic syndromes.

The editor has made a useful attempt at bridging the gap between questions regarding the clinical expression of seizures and explanations arising from basic science work, although perhaps more questions are asked than answered.

The contributors, as would be anticipated, originated largely from Europe, and in certain cases, a poor command of English results in murky explanations of subtle concepts. Work from North America was frequently more helpful, such as Berkovic’s concept of the epilepsies as a biological continuum, and Gloor’s discussion of the pathophysiology of convulsive vs. non-convulsive generalised seizures. The idiopathic epilepsy syndromes are particularly well covered, and there is thoughtful presentation of current understanding and difficulties with the genetic characterisation of the syndromes. I had some problems with the usefulness of certain syndromes, both new (Perirolal myoclonia with absence) and old (Grand Mal on Awakening); but here the trend in the book tends to be to encourage discussion, with editing necessarily at times relatively uncritical.

The section on symptomatic epilepsies is more straightforward and a few surgically-oriented chapters seem unnecessary, but there are again excellent reviews of secondary synchrony and slow spike and wave and of Rasmussen’s encephalitis.

Overall, this is a most stimulating book, which contains a great deal of useful material, and should be read by all neurologists and those interested in epilepsy.

Jonathan Carr

How to Do It. Volume 3: Writing, Publishing and Publicity, Something Different*

The How to Do It series of books contains reprints of articles from the column of the same name in the British Medical Journal, and in the case of Volume 3, these have grouped under the three sections of ‘Writing’, ‘Publishing and publicity’ and ‘Something different’.

Within each of these, about a dozen different topics are covered, ranging from subbediting, writing a book, writing an obituary and writing for money in section 1, to becoming a medical journalist, setting up a newsletter, getting a letter in the newspaper and giving a press conference in section 2, and — a very diverse selection — admitting you are wrong, being a patient, attending an inquest and commissioning a portrait in section 3.

Given the nature of the content, this is not a book to be read from cover to cover but to be dipped into, and none of the articles, which average around 7 pages in length (the shortest is 3 pages, the longest 14 pages), take more than a few minutes to read. Nevertheless, despite their brevity, they are comprehensive and informative, and are written in an easygoing and entertaining style; where necessary, the content has been revised and updated, or in some cases rewritten, for this new edition.

All of the topics covered are tasks that one might consider or be called upon to undertake as a professional, and for the newcomer to any of them, or for those who wish to brush up on their skills, this book will prove invaluable, while even the experienced would be likely to pick up new tips.

All in all, this would be a worthwhile addition to one’s personal library.

Books received

The receipt of these books is acknowledged, and this listing must be regarded as sufficient return for the courtesy of the sender. Books that appear to be of particular interest will be reviewed as space permits. The SAMJ does not publish unsolicited reviews.


* Book titles marked may be ordered directly from MASA Publications, Book Department, Private Bag X1, Pinelands, 7430, tel. (021) 531-3081, fax (021) 531-4126, e-mail masact@aztec.co.za.
Drug Alert

National Adverse Drug Event Monitoring Centre

The National Adverse Drug Event Monitoring Centre (NADEMC) monitors the safety profile of medicines used in South Africa.

Spontaneous reporting by health professionals of suspected adverse drug reactions occurring in the clinical use of medicines, provides important early warning signals and is a vital contribution to post-marketing safety surveillance. Health professionals are therefore urged to participate in this process by reporting all suspected adverse drug events which will contribute considerably to the establishment of a valuable Adverse Drug Reaction data base.

The following events are of particular interest:

- all suspected reactions to new drugs;
- all suspected drug interactions.

Notices

JUDASA Annual General Meeting

Annual General Meeting Notice is hereby given that the Annual General Meeting of the Junior Doctors’ Association of South Africa will be held in the Council Chamber of the SA Medical & Dental Council, 553 Vermeulen Street, Pretoria, at 08h30 on Monday, 19 February 1996.

Agenda

1. Constitution of the meeting
2. Confirmation of the minutes of the previous meeting
3. Keynote address
4. Chairman’s Annual Report
5. Determination of priorities


Intranasal corticosteroid injection

A case has recently been reported to the Medicines Control Council in which blindness occurred following the injection of a corticosteroid into the nasal mucoperiosteum. Administration of steroids by this route is not approved in the package inserts of injectable corticosteroids that are authorised by the manufacturers and the MCC. The occurrence of this devastating complication of corticosteroid injection into the cutaneous and mucocutaneous tissues of the face, neck and nasopharynx has been well-documented.

The cause of the visual aberrations is thought to be embolic, as a result of retrograde flow of particulate material in the anterior or posterior ethmoidal arteries to the ophthalmic artery, and from there into the central retinal artery and short posterior ciliary arteries. Retinal vasospasm may play a role. Incorrect siting of the injection may result in direct injury to the optic nerve in the apex of the orbit.

Alternative routes of corticosteroid administration are available, making the continued use of intranasal corticosteroid injection as treatment for a non-life threatening condition such as allergic rhinitis difficult to justify.

Acknowledgments

Kennis geskied hiermee dat die Algemene Jaarvertsag van die Junior Dokters Assosiasie van Suid-Afrika om 08h30 op Maandag, 19 Februarie 1996 in die Raadsaal van die SA Geneeskundige & Tandheelkundige Raad, Vermeulenstraat 553, Pretoria, gehou sal word.

Algemene Jaarvertsag

1. Konstitusie van vergadering
2. Goedkeuring van die notule van die vorige vergadering
3. Toespraak
4. Voorsitter se Jaarslager
5. Bepaling van prioriete