



Discover Generics

Cost-Effective CT & MRI Contrast Agents



FRESENIUS
KABI

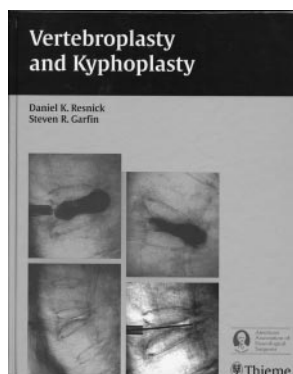
WATCH VIDEO

AJNR

Harrison's Neurology in Clinical Medicine

AJNR Am J Neuroradiol 2006, 27 (9) 2016
<http://www.ajnr.org/content/27/9/2016>

This information is current as
of June 9, 2025.



plication Avoidance and Management in Percutaneous Vertebroplasty” is well written, concise, and unbiased, offering advice to the beginner and the more experienced practitioner. A nice review of the pros and cons of each technique is included in the chapter “Vertebroplasty and Kyphoplasty: Advantages and Disadvantages.” Chapters 7 and 8, dealing with patient selection and work-up

and kyphoplasty technique and hints, respectively, are also quite useful and thorough, though the latter does attempt a few jabs at vertebroplasty that seem outside the stated scope of the chapter.

Similarly, the relatively short chapter “Outcome Measurements for Vertebroplasty and Kyphoplasty” is interesting and helpful when summarizing the differing methods that have been used as outcome measurements, though because of the nature of the publishing industry, the book cannot report on some of the more recent articles dealing with this topic. However, as in many of the chapters, an unbalanced bias toward kyphoplasty appears to rear its head and casts a pall over some of the book. In this example, after stating, incorrectly, that no large series or prospective trials regarding vertebroplasty have been performed, the authors tout the advantages of manufacturer-supported studies without mentioning any negatives to a situation in which the company selling a product is also paying for the clinical trials. Possibly, the reason for the absence of the larger vertebroplasty studies is that the latest article cited is from early 2001, but from a book with a 2005 copyright date. I would expect the chapters to have been updated before publication, especially when dealing with a rapidly advancing field that has a very high number of articles published each year.

Besides the lack of recent data, the other somewhat troubling issue is the relative lack of radiologists as authors, leading to a distinct surgical bias in many chapters. I would expect a book dealing with vertebroplasty, which was developed and is primarily performed by radiologists, to include more radiologist authors. The book as a whole would have benefited from a more balanced, and therefore unbiased, collaboration. Many of the chapters portray kyphoplasty as a distinctly superior procedure, by using “evidence” that is dubious at best, which is unfortunate, because some other parts of the book provide a more balanced and unbiased view, objectively listing the evidence available. As it is, there are many passages in the “Techniques” sections that will cause eyebrows to rise and mouths (and possibly temples) to twitch in many radiology reading rooms as the book is read. Some examples include the statement that the ideal place to perform these procedures would be in an operating room, as well as an emphasis on prevertebroplasty venography (which 1 chapter states changes the injection technique in ~30% of cases) and a recommendation to inject 5–10 mL into each vertebral body because “it is not likely that 3 mL achieves the goal of vertebral stability.” In addition,

the vertebroplasty training and credentialing chapter, describes “appropriate training” as going to a course or spending time watching an expert, though it does admit that hospitals may actually require some proctored cases.

Ultimately, the unevenness of the book is a major detriment. Some parts are worthwhile, whereas other chapters seem biased; and unfortunately, the data, as evidenced by the dates in the chapter bibliographies, often seem dated. Instead of a flowing book with chapters that lead the reader through the procedures and evidence, the book has been constructed as a loose collection of articles, many of which contain duplicate information, whereas others contradict statements made elsewhere in the book. Although there are a number of chapters that could be useful to the practicing radiologist, especially those practicing kyphoplasty, radiologists involved in spine intervention will probably want to wait for a more balanced, up-to-date, and better constructed book to be published.

BOOKS BRIEFLY NOTED

Harrison's Neurology in Clinical Medicine

S.L. Hauser, S.A. Josephson, J.D. English, J.W. Engstrom, eds.
Hightstown, NJ: McGraw-Hill; 2006, 691 pages, 100+ illustrations, \$64.95.

For someone wanting a brief and simple review of neurology, this segment from *Harrison's Principle of Internal Medicine* may be of value. There are 65 authors/coauthors and 43 separate chapters, among them a 14-plate chapter on imaging in neurologic disorders. That chapter is a superficial overview of neuroradiology and would be of interest only to someone who is neither a radiologist nor involved primarily in clinical neurology.

The material in this 691-page soft-cover book covers all major neurologic diseases and could be used as a quick source of key information. The layout of each of the chapters is pleasing, with clear subdivisions, abundant tables, and key facts highlighted in boxes. The clinical manifestations, neurologic findings, differential considerations, imaging (although unfortunately highly limited), laboratory findings, and treatment constitute the main portions of each chapter. This book has important information on vascular disease, tumors, infection, toxic/metabolic disorders, genetic diseases, degenerative disorders, psychiatric problems, muscle/peripheral nerve disease, movement disorders, demyelinating diseases, and trauma, along with specific clinical syndromes.

An added feature of the book is a segment entitled “Review and Self-Assessment.” It consists of 44 questions (with multiple-choice answers); it is followed by an answer section and reference back to specific parts of the book. It would be of value for a neuroradiologist to take this test before reading parts of the book to see how much neurology he or she remembers (or has forgotten). It could be an incentive to read the book cover to cover.