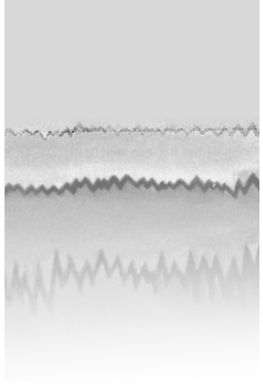

FOREWORD

Following the publication of the first two parts of the Atlas of Electroencephalography, devoted to awake and sleep patterns, respectively epilepsies and epileptic syndromes, Philippe Gélisse, Arielle Crespel and Pierre Genton have now issued this third volume, which elegantly completes the former two. It focuses on neurological disorders and critical care conditions inducing electroencephalographic alterations, and thus applying to a wide range of settings encountered essentially in inpatients.

Books of this size written by few authors are becoming less and less frequent in the panorama of medical publications, one might add for the disadvantage of the readers. In fact, this approach, which proves much harder than the nowadays popular multi-author compilations, requires considerable time and energy, but allows finding throughout the text a definite point of view and interpretation that will definitely ease the task, or the learning path of the reader. This appears particularly relevant in the field of clinical electroencephalography interpretation, which still relies on some subjectivity, even for widely recognized clinicians such as the three authors. The thorough integration of the American Clinical Neurophysiology Society (ACNS) critical care terminology accompanies the reader in getting familiarity with this taxonomic approach, and allows a good generalizability to other recent scientific papers, especially from North America.

This book is organized into etiological groups, with metabolic-toxic, inflammatory-infectious, vascular, migraine, neurodegeneration, and neurosurgical-neuro-oncological sections. This has the advantage of offering very nice and at times rare examples of patterns encountered in these conditions, even if several of these patterns are not disease-specific and may be encountered in other sections. The authors rightfully strengthen the importance of background reactivity testing in the obtunded or comatose patient, in order to differentiate between ictal and non-ictal patterns, with obvious therapeutic consequences. Throughout the text, there are many useful literature references, in part from several decades ago. This is important, as one may tend to forget these seminal works beyond the "academic half-life" of about 20 years. Some nice pearls are also found, reflecting the solid experience of the authors in sleep investigation, such as REM-sleep enhancement of polyspikes-waves in Lance-Adams syndrome, or the sleep-related attenuation of periodic transients in (early stage) prion disease.

The always carefully and concisely written legends to each plate allow the reader to get a rapid, effective message, and render this volume an ideal reading not only for beginners, but also for experienced electroencephalographers.

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