

The book has a few negatives. Many images do not have arrows to identify the abnormality, requiring the reader to detect it—difficult for physicians who are less familiar with brain imaging. In one figure (page 110, Fig. 8.25), the upper- and lower-right pre- and postacetazolamide images appear reversed, as the image findings do not match the accompanying figure legends. Several other errors appear: On page 312, case 18-26, the teaching point is on subarachnoid hemorrhage whereas the image and case description is for bilateral moyamoya disease. On pages 356 and 357, the legends of Figures 19.20 A–C and D–F do not match the image findings, suggesting that the ictal and interictal images are reversed. On page 392, Figures 22 A and B refer to both the MR images and the follow-up  $^{201}\text{Tl}$  and  $^{99\text{m}}\text{Tc}$ -exametazime SPECT images. Finally, inclusion of a SPECT image on attention deficit/hyperactivity disorder would have rounded out the psychiatric disorders section, since this disease entity is imaged in many medical centers today.

This textbook is well written, has good-quality images encompassing most of the more common and less common brain disorders seen today, and describes exciting new advances that are on the horizon. The wealth of case studies supplemented by relevant brief medical histories and good descriptions of the imaging abnormalities along with key teaching points make this manual a valuable reference for functional imaging of neurologic brain diseases. The book

is a must-have in any nuclear medicine department, hospital library, or major medical library. Because brain SPECT and, more so, PET are not routinely done in many nuclear medicine departments, this book can be a valuable resource to showcase the usefulness of functional brain imaging in neuropsychiatric diseases to our referring clinicians and neurologists. With people living longer, Alzheimer disease, depression, stroke, Parkinson disease, substance abuse, brain tumors, traumatic brain injury, and cerebrovascular disease are on the rise, and functional brain imaging using newer radiopharmaceuticals and better instrumentation can help in the diagnosis and follow-up of these diseases. Brain imaging has come a long way from the planar imaging of yesteryear, and the future of brain imaging appears brighter and more promising, although more challenging, with the wider availability of high-quality brain SPECT and PET and newer radiopharmaceuticals.

I highly recommend this book as required reading for all nuclear medicine and radiology residents and medical students and as a useful go-to reference guide on functional SPECT and PET brain imaging for radiologists and nuclear medicine practitioners.

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### Errata

In the article “In Vivo Imaging of Amyloid Deposition in Alzheimer Disease Using the Radioligand  $^{18}\text{F}$ -AV-45 (Florbetapir F 18),” by Wong et al. (*J Nucl Med.* 2010;51:913–920), the main compound name is misspelled throughout. It should read *florbetapir*; not *flobetapir*. We regret the error.

The article “Diagnostic Value of  $^{18}\text{F}$ -FDG PET for Evaluation of Paraaortic Nodal Metastasis in Patients with Cervical Carcinoma: A Metaanalysis,” by Kang et al. (*J Nucl Med.* 2010;51:360–367), contains 2 data errors. In the first paragraph of the results, 6 (not 5) studies applied masking for interpretation of PET or PET/CT findings, and in the third paragraph of the discussion, false positivity (not positive posttest probability) ranged from 35% to 46% at the prevalence between 10% and 15% (not 20%). The authors regret the errors.