

In summary, this book will be of little interest to most medical imagers or imaging scientists, especially considering its price and the scant content of new information. It may be useful as an overview for the businessman, investor, and/or administrator, but its value is diluted considerably by the uneven coverage of different imaging modalities and technologies and the lack of critical commentary on many of the proposed systems for the future.

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HEAD INJURY. P.R. Cooper, Ed. Baltimore, MD, Williams & Wilkins, 1982, pp 412, \$49.00

This small, multiauthored text was evaluated from the perspective of a neuroradiologist rather than that of a neurosurgeon although *Head Injury* was written for "practicing neurosurgeons" by neurosurgeons. The twenty chapters seem to completely cover the topic in its broadest sense, with excellent discussion of the epidemiology of head injury, diffuse brain injury, posttraumatic mass lesions, and complications of head injury. The topic of increased intracranial pressure, including physiology, pathophysiology, monitoring, and management, receives extensive and authoritative treatment.

The importance of imaging in the evaluation of head injury is

emphasized by virtually every author, and the chapter on radiologic evaluation is well written and well illustrated. Unfortunately, the images in the remaining chapters are of variable quality. Most of the CT figures are 160 × 160 matrix images, and the many criticisms referable to these are certainly less true than to those images obtained with better scanning equipment. The contention of one author that "stem injury can often be demonstrated if adequate CT scanning is available" is illustrated unfortunately by a CT image above the level of the petrous bones. The artifact generated by the petrous bones on all CT equipment make the pons and medulla most difficult to examine. In view of the importance of carotid dissection as a frequent mechanism of traumatic carotid occlusion, and, in some cases, the subsequent formation of cervical carotid aneurysms, it is insufficiently emphasized in the chapter on intracranial and cervical vascular injuries. The statement that "thrombi, emboli, and dissection are frequently indistinguishable by arteriography" is not true in posttraumatic carotid and vertebral occlusion. There is, however, a good discussion of carotid-cavernous fistula.

This text should interest neurosurgeons, general surgeons, and emergency room physicians, but it will not be of as much value to those with a particular interest in imaging.

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BOOKS RECEIVED

Biologie de L'action des Rayonnements Ionisants. Christiane Ferradini, Jacques Pucheault. Paris, France, Masson, 1983, 224 pp, 150 F

Computed Tomography in Radiation Therapy. C. Clifton Ling, Charles C. Rogers, Robert J. Morton, Eds. New York, NY, Raven Press, 1983, 284 pp, \$45.00

Radiation Biology (CRC Series in Radiotracers in Biology and Medicine). Donald J. Pizzarello, Ed. Boca Raton, FL, CRC Press, 1982, 298 pp, U.S. \$85.00, outside U.S. \$95.00

Biological Transport of Radiotracers (CRC Series in Radiotracers in Biology and Medicine). Lelio G. Colombetti, Ed. Boca Raton, FL, CRC Press, 1982, 329 pp, U.S. \$94.00, outside U.S. \$105.00

General Processes of Radiotracer Localization, Volume I (CRC Series in Radiotracers in Biology and Medicine). Leopold J. Anghileri, Ed. Boca Raton, FL, CRC Press, 1982, 257 pp, U.S. \$78.00, outside U.S. \$88.00

Segmental Anatomy: Applications to Clinical Medicine. Marvin Wagner, Thomas L. Lawson. New York, NY, Macmillan Publishing Co., Inc., 1982, 650 pp, \$95.00

Atlas of Topographical Anatomy of the Brain and Surrounding Structures for Neurosurgeons, Neuroradiologists, and Neuropathologists. Wolfgang Seeger. Austria, Springer-Verlag/Wien, 1978, 544 pp, \$164.00