

BOOK REPORT

Neurology Emergencies

Rajat Dhar*¹ and Michael Diring^{1,2}

Jonathon A Edlow and Magdy H Selim. *Neurology Emergencies*. New York: Oxford University Press, 2011, 234 pp., ISBN 978-0-19-5388589

This pocket-sized handbook offers a concise approach to patients presenting with a variety of neurological emergencies. Each chapter is co-authored by an emergency medicine physician and a subspecialist in the area being covered (usually a neurologist). In this way, it provides a balance of both perspectives – neither neglecting the basic issues around initial stabilization and differential diagnosis, nor failing to discuss (in brief) the relevant pathophysiology and options for immediate management.

The book begins with two ambitious chapters outlining a basic approach to the neurological patient, including a review of basic neuroanatomy and the approach to common presenting symptoms (for example, altered mental status, acute headache, and dizziness). The handbook then covers the major disorders in a further eight chapters, including strokes, seizures, infections, trauma, and raised intracranial pressure. The book frequently uses tables and neuroimaging to illustrate important points (including some excellent lists outlining differential diagnoses, emphasizing ones ‘not-to-be-missed’); algorithms, when provided, are useful but could have been referenced even more liberally.

The strength of this handbook is its manageable size, simple approach and frequent practical guidance with clinical pearls throughout. Perhaps its major weakness is also a reflection of this same style – given its purpose and brevity, it cannot serve as an in-depth educational source on these important topics, and often comes across as little more than an introductory primer for medical students, or perhaps a rushed reminder for those who do not routinely see patients with neurological disorders. The book certainly will not provide much new information to enlighten the specialist, and even an experienced

emergency medicine physician or internist/hospitalist might find its superficial coverage of each disorder lacking in sufficient detail to provide more than a routine assessment and a reminder of major issues in diagnosis and management.

Nonetheless, the authors do well to cover a breadth of information on most neurological emergencies in limited space. Even greater use of bullet points, tables, figures, and algorithms might have further simplified the presentation of this dense material. In all, this is a useful introduction for the student or hospitalist seeing patients with acute neurological disorders that can be carried to the bedside, adequate to formulate a differential diagnosis and take the first few critical steps in stabilization. Those looking for a more in-depth source for emergency neurology might look to Wijdevicks’ excellent monograph *The Practice of Emergency and Critical Care Neurology*. Intensivists should refer to one of the specialized neurocritical care texts for the next steps in ICU management of neurological catastrophes.

Competing interests

RD receives grant funding from the American Heart Association and speaking fees from Astellas Pharma (relating to hyponatremia). MD receives grant funding from the National Institutes of Health.

Author details

¹Department of Neurology (Division of Neurocritical Care), Campus Box 8111, 660 S Euclid Avenue, Saint Louis, MO 63110, USA. ²Department of Neurological Surgery, Campus Box 8111, 660 S Euclid Avenue, Saint Louis, MO 63110, USA.

Published: 16 May 2012

doi:10.1186/cc11318

Cite this article as: Dhar R, Diring M: *Neurology Emergencies*. *Critical Care* 2012, **16**:311.

*Correspondence: dharr@neuro.wustl.edu

¹Department of Neurology (Division of Neurocritical Care), Campus Box 8111, 660 S Euclid Avenue, Saint Louis, MO 63110, USA

Full list of author information is available at the end of the article