Greenfield's Neuropathology

Seth Love, David Louis, and David Ellison (eds), Oxford University Press, Oxford, NY, 2008, 8th edition (2 volumes with DVD), \$599, ISBN: 978-0-0340906820

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Diagnostic tests have veered toward neuroimaging, but they cannot be understood well without knowledge of the processes that underlie these changes. Many patients die in the Neurointensive Care Unit, and some come to autopsy. Therefore, there is no question that neurointensivists need a comprehensive grounding in neuropathology. The continuing infatuation of many physicians with MR imaging can lead to loss of interest into the pathologic changes surrounding acute neurologic disease and that could lead to a generalization of the specialty making it more intensive care than neurology. Where to turn to? *Greenfield's neuropathology* is a major multivolume work and expensive, but it is worth every nickel. I would not settle for less.

Most chapters are written by leading UK and US experts in neuropathology, neurology, and neurosurgery. These chapters are not only comprehensive in the neuropathologic description at a tissue and cellular level, but mechanisms of disease are eruditely explained and

treatment options are offered. Outstanding chapters are traumatic head injury, intracerebral hemorrhage, cerebral infarction, brain edema, acute white matter diseases, and the consequences of anoxic-ischemic encephalopathy. The book has chapters that are mandatory for neurointensivists starting with the first two chapters on determinants of intracranial pressure, hypoxemia, and related conditions, the neuropathology of vascular diseases and most useful traumatic head injury with a comprehensive discussion on axonal injury. For neurosurgeons, there is an exhaustive section on tumors in the CNS. Several chapters compare photography during surgery with microscopy.

The book addresses a whole host of disorders, all one time or another will confront practicing neurointensivists. This 2-volume neuropathology tome needs to be on shelves in the NICU right next to other intensive care texts. It will need to be consulted frequently in order for neurointensivists to understand what is happening to their patients.

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