
BOOK REVIEWS

Interpreting WISC–III Interpretations

WISC–III: Clinical Use and Interpretation. A. Prifitera and D. Saklofske (Eds.). 1998. San Diego, CA: Academic Press. 336 pp., \$xx.xx.

Reviewed by ROBERT W. BUTLER, Ph.D., *Associate Professor of Pediatrics, Division of Pediatric Hematology/Oncology, Oregon Health Sciences University, Portland, OR 97201.*

This concise volume contains a wealth of information on scoring and interpreting the WISC–III. There are chapters on gifted children, mental retardation, attention deficit hyperactivity disorder, language impairment, hearing impairment, minority and culturally diverse children, and also emotionally disturbed children. The text also addresses the use of the WISC–III with achievement tests, accurately recording and interpreting behavioral observations over the course of administering a WISC–III, and also the neuropsychological basis of intelligence and the WISC–III.

For those of us who eschew summary IQ and factor scores, this book will probably be encountered with the same welcome that one would give a plague-carrying rodent. On the one hand, the text covers all of the bases and mentions all of the major concerns with IQ test scores. Nevertheless, it tends to treat these summary variables as self-standing entities, and statistical rules of interpretation are often provided without appropriate caveats. At times, these rules are quite du-

bious in their clinical appropriateness. For example, the chapter on the WISC–III and achievement testing recommends using conservative multiple comparison corrections. This is not always a good idea in clinical interpretation because one is often less concerned with the probability of a type I error and more concerned with false negatives (i.e., missing a clinically relevant effect when it is, in fact, present). At other times, however, the text clearly shines, and the vicissitudes of clinical interpretation with such a vast amount of data as one obtains from a WISC–III are given adequate consideration.

This text would be most useful in a graduate course on child intellectual assessment. I, personally, would use it as a supplemental text. The book needs to be accompanied by buffer to caution the reader against some of the less-than-thoughtful statistical pontificating. With this caution in mind, the book serves a useful purpose.

Lost in Translation

Wiley's English-Spanish Spanish-English Dictionary of Psychology and Psychiatry. Steven M. Kaplan. 1995. New York: John Wiley & Sons, Inc. 594 pp., \$29.95.

Reviewed by MARIO F. MENDEZ, M.D., Ph.D., *Neurobehavior Unit, West Los Angeles VA Medical Center and University of California at Los Angeles.*

On the surface, reviewing a dictionary seems like a relatively straightforward task. The book is an extensive compilation of terms used in psychology and psychiatry. The dictionary provides a comprehensive listing of the English–Spanish translation equivalents that can be useful to psychologists and psychiatrists working in increasingly bilingual

environments. This book could facilitate professional communications across the English–Spanish divide.

There are many positive aspects of this dictionary. It is indeed comprehensive. There are more than 62,000 entries, 30,000 or more in each language, covering many disciplines ranging from the clinic to the research laboratory. An-

other major positive is its user-friendliness. The majority of translation equivalents are easily found and easily understood. As the book points out, it opts for redundancy in listing terms rather than for having to “reroute” readers through a series of related items.

This book is a less a “living” dictionary than a listing of terms. Aspects that animate a work such as this are missing. How to use a term in another language is more than just knowing the translation equivalent. Examples or illustrations of word use would have been helpful. In addition, the book does not provide sufficient alternative terms or alternative usages. One can still derive a great deal of understanding for the actual usage of a term through its cross-references, but cross-linkages are omitted. Many words appear in listings that share the same first word where categories and groupings might have clarified word usage. The author, who has previously compiled an English–Spanish legal dictionary, might have profited from greater collaboration with psychologists or psychiatrists in the preparation of this work.

There are problems in word usage. For example, behavior can be *comportamiento* as well as *conducta*; cognitive can be *cognositivo* as well as *cognitivo*; and delusions can be *delirios* as well as *delusiones*. For example, one com-

monly hears references to *delirios de persecución*. Spanish-speakers often refer to migraine as *jaqueca* rather than *migraña*, to strokes as *derrames* rather than *ataques*, and to seizures as *ataques epilépticos* or *convulsiones* rather than *accesos*. There are differences in anatomic terminology; for example, brain stem is usually *tronco del encéfalo* rather than *tallo cerebral*. One occasionally still sees the dropping of the ‘p’ in *psicología* and in *psiquiatría*. Since these variants, and others, are used, they may be encountered. Moreover, the book avoids regionalisms and commonly used abbreviations. These variations facilitate communication and can add value to a dictionary such as this.

Despite these reservations, Mr. Kaplan is commendable for having undertaken this important dictionary. For clinicians working in a bilingual environment, this dictionary can be helpful in communicating with patients and clients. For students, it collates a substantial amount of terminology that can be very useful. For writers, translators, and other more language-sophisticated users, this dictionary can be of supplemental help. For psychology and psychiatry this dictionary represents an important point of departure. Any endeavor that increases communication between speakers of these two major languages is definitely worthwhile.

A Handbook of Clinical Neuropsychology

Neuropsychologie Clinique et Neurologie du Comportement [Clinical neuropsychology and behavioral neurology]. Deuxième édition. Mihai Ioan Botez (Ed.). 1996. Montréal: Les Presses de l’Université de Montréal. 682 pp. \$61.20 (CDN).

Reviewed by BERNADETTE SKA, Ph.D., *Faculté de médecine, Université de Montréal et Centre de recherche, Centre hospitalier Côte-des-Neiges, Montréal, Québec, Canada.*

There are few handbooks devoted to clinical neuropsychology or behavioral neurology written in French. Most recently, there have been two: one by Habib¹ and the other edited by Seron and Jeannerod.² This revised and improved edition of the book edited by M.I. Botez completes this short list. The Botez book is impressive in terms of both its form and its content. The first edition, published in 1987, had 413 pages, 36 collaborators, and 37 chapters. The new edition has 682 pages, 55 collaborators, and 37 chapters. Fourteen of the chapters are quasi-exact reproductions of those in the first edition, while the others have been modified or added.

The book is divided into the following seven sections: “General Introduction,” “Methods of Investigation,” “Localization Syndromes,” “Neuropsychological and Behavioral

Neurological Syndromes,” “Cerebral Organic Syndromes,” “Rehabilitation,” and “Legal Neuropsychology.”

The approach is decidedly clinical and neurological. The goal of this book is to describe behaviors related to neuro-anatomical, neurometabolic, neurophysiological or neurochemical modifications of the brain or parts of the brain. The book is written from the point of view of the behavioral neurologist and the majority of the authors are neurologists.

In the first section of the book, the introduction, there is a review of the historical evolution of the concepts and knowledge concerning cerebral functional localizations.

The second section presents the methods for behavioral neurological investigations. This section focuses on traditional and more recent methods for neuropsychological and neurological evaluation. The chapters cover the assessment of various cognitive functions, using tests and test batteries as well as more sophisticated techniques of cerebral imaging. It is now essential for clinicians and researchers to be familiar with these techniques since, in most cases, they have

¹Habib, M. (1993). *Bases neurologiques des comportements* [Neurological basis of behavior]. 2e édition. Paris: Masson.

²Seron, X., & Jeannerod, M. (1994). *Neuropsychologie humaine* [Human neuropsychology]. Liège, Belgium: Mardaga.

become obligatory elements in neuropsychological investigations for a reliable diagnosis. Hence several chapters are devoted to techniques such as electrophysiology, neuroradiology, radioisotopes, tomography, and neurochemistry.

The third section of the book deals with the classical syndromes related to cerebral localization. The section reviews the classical semiologies induced by lesions or dysfunctions of the frontal, parietal, temporal, and occipital lobes, and by the corpus callosum. These chapters are followed by two chapters on functional cerebral asymmetry. Then there are three chapters devoted to the behavioral consequences of lesions in the thalamus, basal ganglion, and cerebellum. In this second edition of the book, these three chapters underwent major modification and contain numerous additions. They stand as proof of the current broadening of notions about the behavioral consequences of subcortical lesions as well as the editor's personal interest in this field.

The fourth section of the book covers some syndromes that seem to belong to different categories. Though the editor does not really organize the chapters in this way, it is possible to see three distinct sets of syndromes. The first set focuses on behavioral modifications related to diseases such as sleep apnea, epilepsy, and chronic fatigue. These chapters were not in the first edition of the book. The second set deals with behavioral modifications related to concepts on the borders of neurology and psychiatry. For instance, one chapter talks about emotions and another chapter that is new in the second edition deals with hallucinations and illusions. Finally, a third set of syndromes includes the impairments corresponding to the classical cognitive functions such as aphasia, amnesia, apraxia, agnosia, alexia-agraphia, and amusia. It is surprising that the problem of acalculia is not included, since knowledge in this domain has been largely developed in the past 15 years by research teams working in Europe and North America.

Major changes were incorporated into the last three sections of the second edition. They highlight the expansion of both the knowledge and concerns of clinical neurologists and neuropsychologists.

Hence the fifth section delves into the consequences of diffuse cerebral impairments such as cranio-encephalic

trauma or dementia. Normal aging and hydrocephalus are also discussed. There are two chapters introducing concepts and models for caring for Alzheimer's patients, which could have been included in the next section.

The sixth section reports on rehabilitation issues. The approaches to aphasia are not new and speech and language pathologists are the professionals working on this problem in several countries. However, neurovisual and cognitive rehabilitation are domains in which neuropsychologists have to play a role in both patient care and the development of adapted and effective approaches.

The seventh and last section briefly presents another neuropsychological domain, that of psycholegal expertise.

At the end of the book there is a subject index, which is an essential tool for anyone who wants to use this book as a practical reference.

This handbook is intended for students in neuropsychology as well as neuropsychologists and neurologists. Some chapters are very short and others are very dense but sometimes lack detailed explanations. In these cases, readers will find that they have to look elsewhere for additional information. It is noteworthy that this book resolutely stands by the traditional approach in neuropsychology. Indeed, the authors rarely depart from the relation between cerebral localization and functional impairments. However, within this framework, the authors present what is now considered the most up-to-date fundamental knowledge.

The authors of the different chapters do not really discuss the psychocognitive contributions to neuropsychology. Perhaps, the authors consider that this new knowledge is more useful for researchers than for clinicians. Moreover, this book is limited exclusively to neuropsychological problems in adulthood. Problems in childhood are not covered. However, this is an entirely separate matter and it would be very difficult to cover both adult and child neuropsychology in a single book.

In conclusion, this book represents a considerable body of knowledge for French-speaking readers. It is, without doubt, a valuable reference book for anyone working in behavioral neuropsychology.

OTHER BOOKS OF INTEREST

Consciousness and whether we think at all appear to be hot topics today. For those of you following the issues and battles, here's two more books you may wish to consult:

Churchland, P.M. & Churchland, P.S. (1998). *On the contrary: Critical essays, 1987–1997*. Cambridge, MA: The MIT Press. 349 pp., \$30.00.

Fodor, J.A. (1998). *Concepts: Where cognitive science went wrong*. New York: Oxford University Press. 174 pp.
