

of convincing attorneys, juries, and lay people that someone who has a genuine injury may also be capable of malingering or exaggerating. This book demonstrates how neuropsychologists, by their clinical training and access to tools and techniques grounded in psychometric science, are best positioned to unravel the Gordian Knot of differential diagnoses and symptom validity in forensic contexts.

As with many edited volumes, the writing style varies widely and is individualistic. Some authors chose to write in the first person, while others took a more formal approach. In several chapters, one could almost detect the author's smirk or rolling of their eyes as they described the unsophisticated malingerer's transparent attempts to feign pathology, including patently noncredible symptoms and well below chance performance on Symptom Validity Tests (SVTs) (e.g., Chapter 23). This reviewer especially appreciated those authors who maintained a more neutral and professional tone, even when describing outlandish behaviors by claimants. Artioli i Fortuny's two chapters on Factitious Disorder and Mold Toxicity were particularly enjoyable to read as they exemplified the best of both scholarship and clinical acumen, and presented these bizarre cases in a most professional and respectful tone.

Berry and Granacher, in Chapter 15, recommended screening for psychiatric, neurocognitive, and somatic feigning for all forensic neuropsychological evaluations. Numerous authors (e.g., Millis, Bergman, and Sweet) argue that SVTs should be part of all neuropsychological evaluations, not just to detect malingering, but to detect poor effort that invalidates test results. Millis cites Gorissen, Sanz de la Torre, & Schmand (2005) showing that persons with schizophrenia (PWS) evidenced a staggering 72% failure rate on the Word Memory Test. These PWS were not tested in a secondary gain context, so the authors surmised that negative symptoms (anergia, amotivation), which are part of the disease, negatively affected

engagement in testing and potentially invalidated the results. This reviewer agrees wholeheartedly with the recommendation to include SVTs in all evaluations, in order to be confident that our data are valid and interpretable.

An interesting postscript in many of the chapters is that the neuropsychologists had knowledge of how the cases were resolved in the courts. It was instructive to see whether the neuropsychological testimony was used, how it was used, and how it affected the final disposition of the case.

This book highlights various neuropsychology scenarios and covers almost any controversy involving symptom validity. The case study format using real forensic examinees to illustrate the complexities of effort evaluation in neuropsychological testing is utterly captivating and highly effective. Some of the most vexing and controversial clinical syndromes in a clinical neuropsychologists' caseload are vividly described, complete with recent scientific references. Not only is it exceedingly informative, it is a fascinating and entertaining read that makes the reader critically consider one's own approach to effort evaluation. An added bonus is that the reader can go to the AACN website, take a continuing education quiz, and obtain 9 APA-approved CE credits. This reviewer took the quiz and found the internet site and format to be user-friendly, time efficient, and at reasonable cost. The *Neuropsychology of Malingering Casebook* provides essential knowledge and would be an excellent addition to the library of every neuropsychologist in active practice. It turned out to be one of this reviewer's favorite nonfiction selections for summer reading!

REFERENCE

- Gorissen, M., Sanz de la Torre, J.C., & Schmand, B. (2005). Effort and cognition in schizophrenia patients. *Schizophrenia Research*, 78, 199–208.

Stories from the Frontline of Pediatric Neuropsychology

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Pediatric Neuropsychology Case Studies: From the Exceptional to the Commonplace. Jennifer Niskala Apps, Robert F. Newby, & Laura Weiss Roberts (Eds.). 2009. New York: Springer Publishing, 364 pp., \$149.00 (HB).

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A book of case studies can convert abstract concepts and theories into a more powerful, clearer, and more meaningful understanding of brain-behavior relationships in neuropsychology. What human being, and especially what neuropsychologist, does not like a good story? After over 20 years in the field, I still look forward to every day I am in my office talking to parents and hearing stories about their children. So a book entitled, *Pediatric Neuropsychology Case Studies*, proved par-

ticularly tantalizing. As I scanned through the table of contents, it made me think back to one of my first assigned textbooks, *Organic Brain Syndromes: An Introduction to Neurobehavioral Disorders*, by Strub and Black (1982). Each clinical chapter began with a case study illustrating the neuropathological process subsequently described. I knew that neuropsychology was for me when I did not put the book down after the week's assigned chapters, but kept charging ahead into the next case

study, and the next, and the next. I had a similar, but not quite as satisfying, experience with *Pediatric Neuropsychology Case Studies*, which may be related to my own idiosyncratic perspective as much as the content of the book.

The stated goal of the editors was to create a book that represented the “incredible diversity of challenges” faced by many children and families, and their attempts to understand and overcome these challenges through working with professionals who witness and mediate this process. A range of case studies are provided that illustrate the most commonly encountered neuropsychological disorders of childhood, as well as those somewhat less common, in most clinical practices. We encounter the stories and neuropsychological evaluations of children who have suffered traumatic brain injury, medulloblastoma, autism, Williams syndrome, and sickle cell disease. The stories are quite compelling; who wouldn’t want to read a chapter entitled, Grand Larceny in the First Grade: Traumatic Brain Injury in the School-Aged Years. Also, the case studies are presented in a narrative style that is engaging and easily accessible. The lack of references cited throughout the text is one unusual aspect of most chapters that definitely creates a livelier and more novel-like read, but it also makes the writing less scholarly and effective for the reader who is looking for documentation of various concepts presented throughout the text. Certainly, references are presented at the end of each chapter, but it is sometimes difficult to tie them to specific information introduced in the text.

The book is organized into three sections covering neurological disorders, developmental disorders, and interesting questions and controversies in our field, with each section prefaced by an introduction to orient the reader to the ensuing chapters. The following 32 chapters are well formatted with key terms printed in bold face type the first time they are used and then defined at the end of each chapter. This feature will be particularly helpful to students and those less familiar with terminology used in the field of pediatric neuropsychology. The 31 authors represent a diversity of backgrounds and settings, from neuropsychologists in private practice and academic settings authoring chapters in the first two sections of the book to a professor of occupational therapy and a speech-language pathologist in the latter section of the volume.

Pediatric disorders are covered in varying detail. Some more common disorders are discussed in several chapters, whereas other disorders are covered in only a single chapter. In Chapters 2 through 5, cases are presented illustrating the neuropsychological impact of traumatic brain injury. Likewise, four chapters are devoted to the presentation of several variants of reading disorder/dyslexia, and three chapters present case examples of children with seizure disorder. Multiple chapters related to a particular diagnosis allow for the illustration of various facets of the disorder, including pertinent assessment tools, severity, age, remediation strategies, and outcomes. Although one could argue that multiple chapters for a diagnostic category allow for more stories to be told, a case could also be made for limiting the number of cases and providing a more in-depth discussion of the diagnosis under discussion. In addition, single chapters address a variety of

interesting, but somewhat less common disorders, such as prematurity and related post-hemorrhagic hydrocephalus (Chapter 1) and pediatric bipolar disorder (Chapter 24).

Many chapters throughout the text provide numerous useful recommendations and intervention strategies for the disorders that are discussed. This is a definite strength of the text and will be potentially beneficial to many pediatric neuropsychologists, especially those who are early in their career. For example, in Chapter 22, Wiebusch describes the consultative role of the neuropsychologist in treatment of a child with moderate autism spectrum disorder through the use of Applied Behavior Analysis therapy. Also, other resources such as websites and books for clinicians and families are cited at the end of each chapter.

The more conceptual aspects of the book pertain to the controversies in pediatric neuropsychology discussed and illustrated in the third section of the volume. It was a bold and important decision by the editors to provide space for the discussion of topics such as sensory integration and central auditory processing disorder, which raise the passions of advocates on both sides of the issues. As they note in the introduction to the section, “we also seek forums such as the present book to spark valuable discussion among disciplines,” while acknowledging, “systematic research is also needed to test hypotheses and build support for the construct validity of ideas from other fields.” In this section, a sensory processing model from the occupational therapy field is presented with an extensive list of references, which is helpful given that this is an unfamiliar or minimally familiar area for many neuropsychologists. Also, since the size of the chapter limits the critique of the research cited, the extensive reference list allows the readers the opportunity to explore further research more thoroughly on their own.

A substantial drawback of the text from this reader’s perspective is the very limited discussion of brain–behavior relationships in the majority of the chapters. Although the chapters on reading disorder present very good information about many aspects of the disorder, such as the double-deficit hypothesis of dyslexia, there is virtually no mention of the extensive accumulating research on the neuropathology of this disorder. Similarly, the chapters covering traumatic brain injury (TBI) provide only minimal reference to brain-related mechanisms affecting the neuropsychological effects of TBI. It seems that the editors chose to maximize the number of very interesting stories presented at the cost of not integrating these case studies into a broader neuropsychological context.

Pediatric Neuropsychology Case Studies is ideal for those in training or practicing early in their careers, as it will provide them with exposure to a wide variety of disorders, and the basic assessment tools and intervention strategies associated with these diagnoses. Ideally, one would read this book as an accompaniment to a more theoretically and research referenced text. Dessert is wonderful, but usually best when accompanying a more substantive meal.

REFERENCE

- Strub, R.L. & Black, F.W. (1982). *Organic brain syndromes: An introduction to neurobehavioral disorders*. New York: F. A. Davis.