Clinical MRI, a book with 492 pages, devotes 116 pages to the brain, 110 to the spine, and 53 to the head and neck. That amount is not really long enough to cover the brain in any detail. In this review, I limit my comments to the neuroradiology section of the book.

Even though this book was first published in 2002, it seems that it was written a decade ago. The author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.

A limited discussion of diffusion and perfusion is presented. Discussion of diffusion MR imaging is very short (pages 49 and 50). Therefore, for those who know the subject, it is superficial. For those who do not know the subject, the author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.

A limited discussion of diffusion and perfusion is presented. Discussion of diffusion MR imaging is very short (pages 49 and 50). Therefore, for those who know the subject, it is superficial. For those who do not know the subject, the author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.

A limited discussion of diffusion and perfusion is presented. Discussion of diffusion MR imaging is very short (pages 49 and 50). Therefore, for those who know the subject, it is superficial. For those who do not know the subject, the author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.

A limited discussion of diffusion and perfusion is presented. Discussion of diffusion MR imaging is very short (pages 49 and 50). Therefore, for those who know the subject, it is superficial. For those who do not know the subject, the author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.

A limited discussion of diffusion and perfusion is presented. Discussion of diffusion MR imaging is very short (pages 49 and 50). Therefore, for those who know the subject, it is superficial. For those who do not know the subject, the author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.

A limited discussion of diffusion and perfusion is presented. Discussion of diffusion MR imaging is very short (pages 49 and 50). Therefore, for those who know the subject, it is superficial. For those who do not know the subject, the author spends a lot of time on issues that were pertinent 10 to 15 years ago but are clearly resolved now. For example, they often compare CT and MR imaging of different pathologic abnormalities of the brain. First of all, I am not sure what place discussions about CT have in a book on MR imaging. Second, why not spend more time on interesting new aspects of MR imaging? Most of the interesting innovations in MR imaging, such as spectroscopy, functional MR imaging, and diffusion tractography, are not even mentioned.
versity during the 1980s (5). For something to be called an infarction, a T1 abnormality must be present; otherwise, the lesion should be called leukoencephalopathy. Golomb et al (and others) have shown that the lesions are different pathologically.

The only “atrophic” brain diseases mentioned are Huntington disease, central pontine myelinolysis, and “cerebellar degenerative disease.” I found it stunning that normal aging of the brain, Alzheimer disease, and Parkinson disease are not even mentioned. Far less common diseases, however, such as Leigh, Canavan, Hurler, and olivopontocerebellar atrophy, are mentioned.

The book is not well organized. Many topics are discussed several times in the book. Chiari malformations are discussed in the brain and C-spine sections (rather extensively, as this book goes: pages 98–100 and 121–123). Neurofibromas, meningiomas, astrocytomas, metastases, disk herniations, and multiple sclerosis are discussed in both the C-spine and the T-spine sections. Some of these entities are discussed for a third time in the L-spine section. This seems to be a colossal waste of space, considering that more important topics are not addressed.

In summary, from a neuroradiologist’s point of view, I cannot recommend Clinical MRI to any group. Because it contains insufficient information, factual errors, and many substandard images, it would be of little use to residents, fellows, or practicing neuroradiologists.

References