chapter about nerve conduction studies and electromyography.

In part 2 there are 23 chapters devoted to specific disease entities. Among these, the "hot topics" in peripheral neurology are well covered, including multifocal motor neuropathy, Guillain-Barré syndrome, and chronic inflammatory demyelinating polyneuropathy. Our understanding of these disorders is evolving, and this text touches on the most recent developments in the specialty. However, the discussion on Guillain-Barré syndrome fails to mention clinical masqueraders of that disorder. A chapter on vasculitic neuropathies has a unique table that outlines the causes of multifocal neuropathy that mimic vasculitic neuropathy. I had hoped for more extensive discussion of non-systemic vasculitic neuropathy, and a more

disorder-specific approach to the treatment of this group of disorders would have been helpful. The chapters on neuropathies associated with monoclonal gammopathies, porphyria, diabetes, and HIV are very useful. A chapter on sarcoidosis includes a useful table on clinical findings and assessment that incorporates data from many previous studies. The chapters on hereditary neuropathies are especially lucid, a subject notorious for obfuscation. Furthermore, these chapters describe recent improvements in our understanding of the genetics underlying these disorders.

There were a few things I looked for but did not find. A more systematic approach to therapy and management of each disorder would have been a useful thread linking all the chapters. A particularly valuable addition would have been the authors' personal approaches to the management of patients who are difficult to treat—eg, those in whom first-line therapies have failed and those with fulminant disease. The text does not discuss motor neuronopathies or disorders of the motor nerve terminal. I did not find a discussion of radiculopathy or the differential diagnosis of polyradiculopathy.

Even with the synopsis-oriented format of the chapters, the authors succeed in providing current material, up-to-date advances in pathophysiology, and voluminous references. As such, the book speaks to a wide audience, and should be a useful addition to the libraries of neurologists in training, neurologists in practice, and any physician with special interest in neuromuscular diseases.

Kerry Levin e-mail: LEVINK@ccf.org

The art of dreaming



Surrealism: Desire Unbound

An exhibition at the Tate Modern, London, UK, showing until Jan 1, 2002.

he painter, Marcel Duchamp, said that eroticism was the only universally understood "ism", which leaves surrealism among those less well understood movements. Indeed, anything that defies our expectations or is not entirely mundane now risks being classified as "surreal". Sur-realism, literally, is a higher real-

ism, to be attained by bringing together two experiences of reality: that of the unconscious and dreams with the reality of waking life. Reality seems to be like a dream and dreams seem to be real.

In Surrealism: Desire Unbound, Andre Breton, the unofficial Pope of the surrealists, is quoted as saying that desire "was the sole motivating principle in the world, the only master humans must recognise". We desire so many different and sometimes conflicting things, but the surrealists, like Freud, were mainly interested in sexual desire. They believed that we have been

brutalised by work and enchained by reason. They wanted to set free our imaginations and desires and let art enable the human mind to express pure thought. Surrealism began in Paris as a literary movement that experimented with the technique of automatic writing. But it is much harder, some would say impossible, to reduce the element of conscious control in painting, and some of the works in this exhibition are the products of artists who, paradoxically,

seem to wish to exercise dictatorial control over their subject matter and material. Despite the yearning to break social taboos, there is something dishearteningly regulatory and bureaucratic about their group photographs, meetings, and manifestoes.

Some of the works here are Freudian ideas cast into pictorial form. In Giorgio



Rene Magritte, The Lovers (1928)

de Chirico's The Child's Brain, a work that hung in Breton's apartment, the father's sallow, fleshy torso fills the frame. He has wispy, feminine eyelashes, an etiolated moustache, and a goatee beard; a red bookmark protrudes symbolically from the book on the shelf in front of him. Max Ernst's slapstick version of Michelangelo's Pieta has a self-portrait of the artist as the son being stiffly cradled by his besuited and bowler-hatted father. Intended to be

jokey and deeply disconcerting at the same time, these oedipal works now seem like trivial Freudian cartoons.

Surrealists saw human beings as creatures driven by desire for a love object. The paintings here depict various male sexual fantasies of women, from the sentimental to the sadistic. Rene Magritte's *The Elusive Woman* shows a tiny naked woman fixed to a stony surface and surrounded by giant male hands. In Magritte's *The Rape* the woman's face becomes a genital zone with breasts for eyes, a navel for a nose

and a pubic mound as a mouth; this dumb and blind sexuality evokes our pity. Magritte's Lovers are also blind; they appear to kiss, but their heads are covered in grey sheets so that they can neither see one another nor touch each other with their lips. The surrealists declared aesthetics to be obsolete. Instead of the beautiful and the good, they wanted the authentic and the emotionally powerful: the shocking, the convulsive, the accidental, and the sinister. But rather than abolishing aesthetics, they unwittingly created a new one.

The works of female surrealists have been neglected and it is a virtue of this exhibition that it presents several of these artists. Meret Oppenheim's remarkable fur-coated cup, saucer and spoon, Le Dejeuner en Fourrure, retains its power simultaneously to attract and repel the viewer. As Robert Hughes has noted, "The action it implies, the artist bringing her lips to a hairy receptacle full of warm fluid, makes Oppenheim's cup the most intense and abrupt image of Lesbian sex in the history of art".

Dorothea Tanning's *Birthday* shows the artist standing before an endless series of half-open doors; she wears a modern skirt, a blouse with elaborate antique sleeves and a green fantastic overdress of intertwined naked bodies; at her feet squats a monstrous winged creature with gun-barrel, stuporous eyes.

However paltry and tawdry many of the works in this exhibition may now seem, surrealism lives on in the imagination. Even if surrealists failed in their political and social aims, their ideas have seeped back into the modern consciousness, partly through the works of some contemporary artists, but much more powerfully via advertising. It is ironic that what was intended to liberate the human spirit has mainly ended up as an instrument of consumerism.

Paul Crichton Royal Marsden Hospital, Fulham Road, London SW3 6JJ, UK

Hildegard of Bingen: a visionary life



Hildegard of Bingen: the Woman of her Age Fiona Maddocks. London: Headline, 2001. Pp 332. £15.99. ISBN 074727398.

ildegard of Bingen (1098-1179) has been described as a visionary, medical expert, these topics and miscellaneous writings including some in a still untranslatable language. This language dates from 1150-60 and is found in two extant manuscripts. Hildegard believed that This is known as lingua ignota and consists of about 900 words, two thirds botany. Those words that scholars have who knows. There are also in existence writings is how Fiona Maddocks approaches this remarkable woman in Hildegard of Bingen: the Woman of her Age. Only the letters and the theological/visionary books can be authenticated as being directly by (or about) Hildegard. The authenticity of many original documents survive from

the medieval period is in itself a miracle. Hildegard entered the monastery of Disibodenberg, on the Rhine, when she was 8 years old. She formally entered the cloister as an anchorite (from the Greek to withdraw) sometime before the age of 14. Maddocks gives us a clear description of this practice—indeed, the background information is often more interesting than the chronological biography itself. Hildegard could neither read nor write and had the help of three monks to record her visions and thoughts. She records her visions in her three main works Scivias (know the way); Liber vitae meritorum (book of life's merits); and Liber divinorum operum (book of divine works).

For most of her life Hildegard

suffered an illness, the symptoms of which were not unlike migraine with Her illness seemed to have been at its most intense when she wanted to change her situation, and her sympto leave Disibodenberg and set up made a miraculous recovery once she had the Abbot's approval. Reluctant approval, we assume, because Hildegard's nuns came from wealthy families and those dowries would now go to her new monastery. Criticisms were levelled against Hildegard at the time. Tenxwind, a fellow German superior at another monastery, accused Hildegard of allowing nuns to wear Hildegard was elitist, only letting into her order women from the nobility, large dowries. Hildegard replied to her critic citing her visions as evidence of God's will and including the theory that we are all equal but some are more equal than others, especially on earth if

The reason we know the name Hildegard of Bingen is in no small measure due to her music, which has become popular since the Gothic Voices recording A Feather on the Breath of God in 1981. Most texts, translations, and secondary sources relating to Hildegard in Maddocks' extensive bibliography date from the 1970s onwards, indicating a surge of interest in her after that date.

The texts that relate to medical/ scientific matters appeared in 1151–58. Liber simplicis medicinae describes prevention and cure of a wide range of conditions and illnesses. Liber compositae medicinae is an extension of the first book but with one major addition; it explores the sexual natures of men and women in some detail. Quite how Hildegard had such knowledge of sexual activity is unknown but Maddocks speculates that other works of the period could have provided inspiration, and since Hildegard was more widely travelled than most nuns she could have got her information secprovides graphic, detailed practical information alongside moral welfare, There are, as with this entire period, contradictions at every turn. One by the four humours-sanguine, phlegmatic, choleric, and melancholic. Within defined according to various categories that include their body shape, veins, blood, features and colouring, characters, sexual prowess, menstruation, fertility, success with the opposite sex, appearance, and quality of semen. This is the 12th century but it could be a present day women's magazine.

It is disappointing to find no more than 22 pages on Hildegard's music. Maddocks writes "The great bonus with the music said to be by Hildegard is that a body of work, full of novelty and invention, is attached to a recognised person and is therefore performed today". Among the music attributed to her is Ordo virtutum (order of virtues), the first known morality play, yet in this brief music chapter two full pages are devoted to the lyrics of one of her 77 prose poems (Columba aspexit is given in full, in Latin and in English), and six pages to explore whether of not Hildegard illuminated her own manuscripts. Her compositions are interesting because they are much more expressive than we are used to hearing from medieval religious music with exciting leaps and colourful melismatic

The great strength of this book is the picture that Maddocks paints for us of the Middle Ages in which Hildegard lived. Filled with characters and information about practices both religious and secular that are in themselves fascinating, this book makes you want to go to the bibliography and read more for yourself.

Lorraine Limburn c/o The Lancet, London, UK