Centre for Pain Relief, Walton Hospital, Liverpool. Such distinguished editors would be expected to produce a good book and your reviewer is not disappointed. It is intended that each volume will deal with certain aspects of intractable pain.

The thirteen chapters here treat of the theory, principles and practice of treating persistent pain. The book begins with the Mechanisms of Nociception and proceeds with a chapter on the Measurement of Pain (a recent meeting on this subject at the Royal Society of Medicine filled the large hall for a day!). Then comes a most useful and instructive section on the principle of managing breast cancer. The management of osteoporotic pain of the spine, the psychological aspects of chronic pain patients, the techniques of biofeedback follow. The problems associated with Headache and Central Pain syndromes, and the use of the lesion generator in treating chronic neck and back pain are dealt with next and the complex (to the reviewer) use of analysis in clinical trials. The use of non-analgesic drugs in the management of pain, a new technique of percutaneous cordotomy and improvements in spinal injections for cancer pain with a fascinating section on Neural Mechanisms of Acupuncture Analgesia are a fitting close to this interesting and helpful book.

The constant reminder runs throughout that the treatment of persistent pain is a serious, complex and often difficult business. So often the conclusion, “I can't figure it out” would be a better record for the notes or “Minime intellego” as LJ Mengers suggests in his contribution “The so-called psychogenic pain complaints are just as real, relevant and legitimate as the organic”. The diagnosis of “psychological” should be heard less as clinicians realise their inadequacy in many pain situations. Dr Mehta's views on spinal injection in terminal cancer pain are welcomed. Experience at St Christopher's Hospice over the past three years suggests that possibly 10% of such patients may benefit from neural blockade combined with drug therapy.

The book is nicely produced and the diagrams and illustrations are clear—especially the reproduction of X-ray films. The bibliography is excellent. It is comfortable to hold in the hand and will withstand wear and tear in use—it will be consulted often. It is very good value for its £19.80. There is no doubt that this series will become one of the standard works in the problems and treatment of Persistent Pain for some time to come. To quote the publishers' “blurb” it will provide a unique service to the practitioner by providing him with a constantly updated source of information and background material in the field of pain relief. Here is distilled the experience of the acknowledged experts—“It will be of immense importance to doctors in all the many pain clinics throughout the world as well as being of great interest to surgeons, anaesthetists, neurologists, and general practitioners”. Certainly it should be required reading for FFARCS candidate who in the future will have the problems of intractable pain in their training and examinations.

CDT JAMES


The avowed purpose of this book is to explore the application of biofeedback and other techniques of behavioural medicine in the management of some neurological disorders. The areas chosen are epilepsy, specific learning disabilities and the hyperkinetic syndrome. In that, of the book's total of 188 pages, only approximately 17 assess this task specifically, it fails, in the sense that the authors have devoted most of their space to theories, description, and discussion of other methods of treatment in these areas. However, individually the material presented in all sections is interesting, albeit at the expense of some rather dogmatic comments. The first chapter gives an outline of the development of the theory and practice of techniques in behavioural medicine stemming largely from the work of Pavlov and Thorndike. This is followed by a comprehensive presentation of seizure disorders, up-to-date, but at times misleading. For example, “pseudoseizures” do not occur almost exclusively in those with genuine epilepsy”, and in this condition incontinence can occur. Likewise, gingival hyperplasia secondary to phenytoin is reversible, and dependence on anticonvulsant drugs can occur. The chapters on epilepsy are followed by four on such topics as minimal brain dysfunction, hyperkinesia and specific learning disabilities. Again, adequate reviews especially for the non-specialist, but largely devoid of discussion of behavioural treatments.

Of most interest, with regard to the title, is the section devoted to the behavioural approaches in treatment of seizure disor-
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Discerning readers will note Arnold Friedman's comments that we still lack a definition of migraine, an explanation for focal neurological symptoms or unilateral headache, as well as adequately controlled epidemiological studies. Lance hints at the purpose of migraine—a daring question. Finally, a remark by Merskey, a world psychiatric authority on pain "There is no good evidence for a migraine personality". This should put an end to this old warhorse providing occupational therapy for the research registrar.

All in all a stimulating Conference and even at this price cheaper to read and digest at home compared with journeying to Florence.

JN BLAU


This book covers a wide range of disabilities of a non-neurological nature. There are five sections: selected chronic medical illness, disorders of the neuromuscular system, disorders of the musculoskeletal system and injuries, psychosocial aspects, and dentistry. Such varied subjects and such multiple authorship makes this a difficult book to review but must first of all raise the question of its intended audience. Anyone involved in the care of the handicapped child may well benefit from reading this book although there is no guarantee that the individual will be satisfied as so much depends on particular interests.

The first section includes rheumatoid arthritis, cystic fibrosis and asthma and the reviewer is not qualified to comment on these chapters. Cerebral palsy starts the second section, but is disappointingly brief as this condition must be one of the most rewarding fields for habilitation. Also in the chapter on seizure disorders the fact that there is so much more to the treatment of epilepsy than giving drugs is not well illustrated, and some of the recommendations are open to question, such as routine lumbar puncture after the first febrile convolution and the treatment of these seizures in most instances. Some would doubt the importance of medication in the management of learning disorders but the treatment in general, particularly of language disorders, is well discussed. Among other chapters on spinal, neuronal and myopathic diseases, the one on disorders of muscle presents an excellent review of the subject, but should such clinical details be included in a book on rehabilitation?

Section three can stand on its own as a selected text book of orthopaedics and plastic surgery, and there is a brief section on dentistry for the handicapped. The fourth section on psychosocial aspects is of particular relevance to rehabilitation, making the point that physically handicapped children have higher rates of psychiatric disturbance compared to the general population. The book seems to make its greatest impact when the social implications of long-term illness and educational and vocation programmes are discussed, although the latter are orientated to the American scene. Also statements such as the bones of children with osteogenesis imperfecta are no longer fragile at puberty need to be qualified.

The very diversity of the conditions considered means that this book will fulfill different needs for different people, and for that reason it is to be recommended to the library rather than the individual. With the inevitability of increasing specialisation it is open to question if the concept of such a book is realistic although knowledge of the accomplishments of other disciplines is no doubt desirable.

NEIL GORDON