
Kevin Walsh's new book represents both an extension and a departure from his previous excellent survey of neuropsychological knowledge. Whereas the previous book was concerned to identify and structure our knowledge of brain behaviour relationships, the new book is an attempt to put this knowledge firmly into clinical practice. The attempt has succeeded magnificently.

The book begins with a statement of philosophy, and then deals in detail with a surprised at the apparent brevity of the examinations carried out. The brevity is, however, combined with focused clarity, and it is a very pragmatic yet clinically appropriate model of practice.

The book is excellent, and at £17.00 it is a bargain.

DN BROOKS


The Advances in Pain Research and Therapy series, sponsored by the International Association for the Study of Pain, includes the proceedings of the triennial world congresses and other volumes from smaller symposia. These books have proved very useful sources, but this recent addition to the series is the least successful. This is partly because it appears that an undertaking has been given to all the participants in the symposium to publish their contributions, of variable scientific standard, and partly because the book embraces much more than pain management, with several chapters on other topics including, amongst others, pain mechanisms (very well covered in the recent volume 6 of this series), measurement of pain, and chronic pain with depression. Though many of these chapters are excellent, they unnecessarily lengthen an already large and expensive volume. It is surely not intended that each volume of the series should attempt to be a complete textbook of pain, and more editorial thought might have been given to this problem.

In the first section, on basic considerations, Wall has written a stimulating review of the neurophysiology of acute and chronic pain. Particularly important is his challenge of the validity of currently widely used tests for pain in animal experiments. He argues persuasively that most of these tests are not measurements of chronic pain at all, and it is a sobering thought that conclusions drawn from the results of such tests form the basis of many of our present concepts of acute and chronic pain. In a section on pharmacological treatment, Butler reviews the present status of tricyclic antidepressants in chronic pain, in a wide range of conditions including headache, facial pain, arthritis, denervation states, low back pain and cancer. Reported results are generally favourable, but as with so many other pain treatments, there is a dearth of properly controlled clinical trials. Fraioli and colleagues contribute to the interesting recent literature on the analgesic action of calcitonin; its place in treatment of chronic pain remains uncertain. In a section dealing with other modalities and approaches, Murphy and Anderson describe a multidisciplinary approach to chronic pain management, as used in the Seattle pain clinic. Pain clinics in Britain are mostly not run along these lines and this chapter makes interesting reading. While the patient may benefit from the combined expertise of such clinics, treatment "by committee" requires a strong chairman to direct management and take overall clinical responsibility, and it should not be assumed that patients will always be best managed in this way.

The largest section in the book, entitled pain and pain syndromes, includes a number of interesting chapters. Benedetti et al address the continuing important problem of post-operative pain. An extensive review of the duration and severity of pain following different operations is followed by a con-