



Book Review

Neurosurgical Management of Pain

Edited by Richard B North and Robert M Levy

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This is a multi-author book and in recognition of the problems associated with such, an effort was made to avoid the common pitfalls of both repetition and disagreement by getting the authors together before writing their sections. This has probably been effective but as the format of the book is in itself novel in including chapters grouped under Pathophysiology, Ablative Procedures, Augmentative Procedures and Algorithms and Guidelines, I think there ends up by being inevitable overlap in several areas.

Almost the best part of the book is the foreword by William Sweet. This is typically clear, unafraid and critical of the current tendency in medicine to explore every avenue before resorting to surgical solutions for pain, when a balanced analysis of the problem might well indicate that surgery was the appropriate treatment and that it should have been instituted early. This criticism is particularly applicable to such as antero-lateral cordotomy, a godsend to the patient with months to live and lower body unilateral pain. His criticism extends even to neurosurgical sources of recommendation of trials of treatment for months while, in clinical practice, we should be capable of assessing efficiency within weeks. In parallel with his recommendation of surgery being the appropriate early treatment in certain cases, he begs recognition of the morbidity associated with heavy medication, a much under-recognised state particularly in chronic benign pains such as trigeminal neuralgia.

Overall the book is attractive in several specific ways. The paragraphs are short and easily read and include such specifics as 'the surgical treatment for vascular pain' and they are interposed with simplified technical sections, certainly sufficient to wet the appetite if not to be totally surgically secure.

I must confess to being unhappy about the chapters on facial and cranial pain using, as they do, the older classification of idiopathic and symptomatic while acknowledging the general acceptance of vaso-compres-

sion being the most common association with trigeminal pain and not mentioning pre-operative identification of this vaso-compression albeit that its recognition by magnetic resonance tomographic angiography had been published 3 years before this book. In this rather specialised area I was again surprised to hear that ectatic vessels were thought to be necessary for this vascular compression whereas I believe the majority of people would consider that the vessels themselves are more usually normal but misplaced.

The chapter on cancer pain management contains a plethora of algorithms, for those who like following arrows but, for instance, there is no mention of 'instability pain' as a clinical entity, and the fact that treatment by stabilisation for pain alone might become a surgical necessity. I find it very surprising that this is not adequately covered in a neurosurgical manual.

I was happy to find several excellent chapters, and probably the best was the review of spinal cord stimulation by Richard North who has done so much to validate this method of treatment and thereby to rationalise its use for the appropriate cases.

Some final small bleats would include a curious lack of consistency in the numbering of references, these being alphabetic at the end of some chapters and chronological in the text in others and, I wonder, whether the book took a long time to get on to the shelf as in several chapters the latest reference was 1992.

Overall one has to welcome this addition in the hope that neurosurgeons reading it will once again recognise that they have an important part to play in the management of chronic pain. I have to say that the two early treaties on the subject by White and Sweet (1955 and 1969) and the later excellent textbook by Gybels and Sweet (1989) remain far more impressive both in view of their comprehensive nature and their authority.

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