



Title	An evidence-based resource for pain relief
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Neurosurgical management of pain

Ed: North RB, Levy RM

Springer-Verlag Singapore Pte Ltd., #04-01 Cencon I, 1 Tannery Road, Singapore 347719
HK\$1081, pp 360, ISBN 0 387 94256 4

Neurosurgical Management of Pain covers most topics about chronic pain management. While very suitable for casual reading, it contains plenty of valuable information, including that about surgical techniques. The book starts with 10 chapters about pain physiology and clinical presentation, which are followed by six chapters on ablative procedures and eight chapters on augmentative procedures. Most chapters have been written by experts in each of the respective fields.

Pain management has been an unpopular, if not neglected, subject among neurosurgeons in Hong Kong. As the editors rightly point out, neurosurgeons are uniquely qualified to provide a range of interventional

treatments and diagnostic procedures for persistent or chronic pain. I believe neurosurgeons in Hong Kong should engage themselves more in pain management. There are only a few good monographs dealing with the neurosurgical treatment of pain—this book is one of them and provides neurosurgeons with a good foundation in pain management.

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An evidence-based resource for pain relief

By: McQuarry H, Moore A

Oxford University Press, 18/F Warwick House East, Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong
HK\$1020, pp 272, ISBN 0 19 262718 X

The timely publication of *An Evidence-Based Resource for Pain Relief* adds to the momentum of the popular notion that the practice of medicine should be based on evidence. Nobody argues against the idea that treatment should be decided by scientific information. Yet, the numerous variables involved in a clinical situation often make the outcome difficult to assess. This problem is especially true in pain relief, which entails subjective reporting. The most valuable information provided by the book, however, is how to examine the evidence about pain relief.

The authors state at the beginning of the book that the aim is to assess evidence to determine the best analgesic in a particular context. This goal is indeed what every medical practitioner would like to know. The authors' comments at the end of each chapter are particularly useful, because they provide information about which therapies are most likely to be effective.

The book has three parts: on methodology, acute pain, and chronic pain. The section on methodology reviews randomised controlled trials. Analgesic efficacy is used as the yardstick, which is expressed as the number needed to treat—that is, the number of patients who need to receive the active drug to achieve 50% pain relief when compared with effects of a placebo. In the section on acute pain, 15 chapters provide detailed information regarding how drugs are different from placebos and from each other in various situations; the comments are an invaluable guide. The section on chronic pain is a literature review, although limited to some small studies; relative performances of the study interventions are ranked by indirect means. The methods evaluated are analgesics, nerve blocks, and alternative techniques such as acupuncture and transcutaneous electrical nerve stimulation. The conclusions outline which interventions are not effective (eg varying fractionation schedules of radiotherapy for bone pain, or relief of chronic pain by transcutaneous electrical

nerve stimulation) and those which have no evidence, such as the first-choice antidepressant. Unfortunately, the multidisciplinary approach—the classic treatment for chronic pain—was not evaluated.

An Evidence-Based Resource for Pain Relief is a very readable book and contains a minimal amount of jargon. The book is not intended as a textbook, however. Rather, it points out which treatment is more efficacious in a

particular setting and places emphasis on a new direction in pain relief—that of more science and less art.

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Manual on assisted reproduction

Ed: Rabe T, Diedrich K, Runnebaum B

Springer-Verlag Hong Kong Ltd., 701 Mirror Tower, 61 Mody Road, Tsimshatsui, Hong Kong
HK\$75, pp 951, ISBN 3 540 61134 7

Manual on Assisted Reproduction encapsulates the scientific, clinical, and laboratory aspects of assisted reproduction. The book is divided into two sections. The three chapters in part I are devoted to reproductive physiology and cover the physiological mechanisms involved in human reproduction (with emphasis on follicular development, sperm maturation, and oocyte interaction), as well as the physiology of the menstrual cycle. This section provides a comprehensive review of the scientific basis on which strategies in the clinical management of infertility are established.

Part II comprises 16 chapters that cover a wide spectrum of reproductive technologies—from conventional intrauterine insemination and in vitro fertilisation, to recent developments in microinjection, gamete cryopreservation, in vitro maturation of oocytes, and pre-implantation diagnosis. The use of gonadotrophins and gonadotrophin-releasing hormone agonists and antagonists in assisted reproduction are addressed, as are matters such as the ovarian hyperstimulation syndrome and the luteal phase. The understanding of the various modalities of treatment is greatly enhanced by reference to the theoretical basis of therapy. Towards the end of the book, two chapters are devoted to reproductive surgery; however, the discussion is restricted to surgical management by the endoscopic and microsurgical approaches. It must be recognised that these manipulative procedures require special training, skills, and facilities that may not be readily available in many centres. The book concludes appropriately with a final chapter on the andrological approach in assisted reproduction, which has given new perspectives in the management of male infertility.

The editors have succeeded in assembling contributions from many recognised international experts,

and the practical details featured in some chapters are widely applicable and will be especially valuable to those who are inexperienced in a particular methodology or procedure. However, variations and modifications to the procedures described may be necessary, depending on the circumstances of individual laboratories. All chapters are well and concisely written; they are presented in a consistent format and are appropriately illustrated with clear line-drawings, figures, and colour plates. Salient features and information are summarised in tables and charts; references at the end of each chapter provide a valuable guide for further reading.

Manual on Assisted Reproduction is written primarily for scientists and clinicians who specialise in assisted reproduction. The integration of physiological, scientific, and clinical elements into one volume should appeal not only to specialists in the field, but also to non-specialists who wish to have an insight into assisted reproductive technologies.

This manual is highly recommended as an accurate guide to current techniques used in reproductive medicine. Continuous progress is inevitable and revision to take into account the latest advancements may be appropriate in the not too distant future. Considerations may also be given to the inclusion of other aspects such as implantation, assisted hatching, blastocyst culture, and related bioethical issues.

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Start by marking "An Evidence-Based Resource for Pain Relief" as Want to Read: Want to Read | Want to Read. Evidence-based medicine (EBM) is the conscientious, explicit, and sensible use of the best evidence in making decisions about the care of individual patients. The practice of EBM requires the integration of individual clinical expertise with the best available external clinical evidence from systematic research. The techniques of evidence-based medicine now allow us to com Evidence-based medicine (EBM) is the conscientious, explicit, and sensible use of the best evidence in making decisions about the care of individual patients. Different kinds of pain need different medicines for relief. Find out which might be the most effective and suitable pain relief medicine for you. Timely, independent, evidence-based information on new drugs and medical tests, and changes to the PBS and MBS. Medicine Finder. Find information on medicines by active ingredient or brand name. Medications for pain or pain relievers can be grouped into different categories, depending on how they work. The following is a summary of the common pain relievers. Taking them only when you need pain relief will not work as well. Your doctor will start you on a low dose and increase the dose slowly if you need it. Antidepressants do not start working immediately – it can take a few days for you to notice the pain relief effects. If tricyclic antidepressants help your pain, you can continue to take them for as long as you need to, but do not take any more than the amount prescribed without talking to your doctor first. Te reo resources. The Māori Pharmacists' Association Ngā Kaitiaki o Te Puna Rongo has a free phone line to answer questions whānau have about their medicines. An Evidence-Based Resource for Pain Relief is a high quality textbook that will inform clinicians practising in pain management for some time to come. It also issues a challenge to other disciplines to organise their research similarly to enable rational assessment of the evidence to assist clinicians who are not expert in the field. Footnotes. An Evidence-Based Resource for Pain Relief can be purchased online at www.oup.usa.org/ for US \$65.00. The table of contents can also be viewed at this site. Request Permissions. 264 pages : 29 cm. Brings together reviews of pain management trials, examining the evidence for the effectiveness of many of the interventions commonly used in pain relief. Aims to draw together an approach for assessing evidence: how to find the papers, criteria by which to judge them, what data to extract and how to handle that data. Includes bibliographical references and index. Methodology -- Finding all the relevant trials -- Judging the quality of trials -- Pain measurement, study design, and validity -- Estimating relative effectiveness -- Combining data and interpreting the results --