

nerve latencies, electromyography (EMG) and single fibre EMG are given.

Chapter 2 reviews the floppy infant and chapters 2-8 review the clinical scenarios at different sites along the motor unit. The electromyography of the floppy infant is a descriptive chapter with all possible etiologies given. At times investigations of disorders given later in the specific chapter are repeated here. The clinical and molecular genetic information on spinal muscular atrophy (SMA) is limited. EMG and muscle biopsy findings in arthrogryposis multiplex congenita is discussed. A protocol for evaluation of the floppy infant is given, emphasizing the need to examine sensory nerves and consider the neuromuscular junction.

The chapter on spinal muscular atrophies is clear and concise. The approach to plexus and nerve root lesions is well laid out with anatomical diagrams. An up to date discussion of the controversy surrounding surgery for neonatal brachial plexus injury is given together with insight into how the medico-legal system in the United States influences the investigation of this injury. The chapter on mononeuropathy is complete and descriptive with a portion told in the first person. It would have been useful to outline electrode placement of some of the more unusual nerves. Abbreviations could be less and "pediatric" is used more than is necessary in a pediatric book. Polyneuropathies are well discussed with clinical information of the various etiologies juxtaposed with electrophysiological findings. The high-low syndrome (indicating the need for a high electrical stimulus to elicit a low nerve conduction velocity) is perhaps overemphasized. The discussion of neuromuscular transmission disorders includes the effects of maturation and an approach on how to successfully test the congenital myasthenic syndromes and infant botulism as well as autoimmune myasthenia gravis. The chapter on myopathies places the need for EMG and muscle biopsy into perspective, in the light of molecular genetic diagnosis of dystrophinopathies and myotonic dystrophy. Presented are the electrophysiological findings in myopathies of all etiologies, myotonia and paramyotonia. Both of these chapters are well written, with up to date references and are easy to read.

EMG in the critical care unit (CCU) underlines the author's particular interest and gives an outline of possible investigations in CCU situations including the neuromuscular complications of sepsis, steroids and neuromuscular blockade. Inclusion, by this author, of electrode and needle placements for testing the phrenic nerve and diaphragm would have been helpful.

Throughout the book there are 39 case reports with diagnoses to highlight the topic just reviewed. They are fairly straightforward but do usually reinforce a relevant point.

They excellent feature of the book is its inclusive nature around different clinical situations, giving both clinical and electrophysiological features together, which will make it a very good reference for the electromyographer in both usual and unusual situations. Also the book will likely give most readers a few unconsidered etiologies for previously undiagnosed patients.

*Coleen Adams,  
Calgary, Alberta*

**PAIN MANAGEMENT: THEORY AND PRACTICE.** 1996. By Russel K. Portenoy, Ronald M. Kanner. Published by F.A. Davis Company. 357 pages. \$C129.00

This is volume 48 in the Contemporary Neurology series. The authors are internationally recognized leaders in the field of pain management. They are also both neurologists. They have gathered together 10 other world-class contributors.

As neurologists and neurosurgeons we find that acute and chronic pain is commonly encountered and yet may also have experienced little education specifically aimed at the study of pain itself, but more often pain as a symptom of particular syndromes and diseases. Many neurological and other texts have given little attention to pain and its management. Because this book is affordable, comprehensive yet concise, and written by neurologists, it is worthy of a thorough review in this journal.

Each chapter is prefaced by a useful summary of its contents. Chapter 1 deals succinctly and clearly with the basics, that is, definitions, characteristics of pain, and pain assessment. Without such basic information, such as the use of simple rating scales of pain severity, it is difficult to evaluate and follow patients with acute and chronic pain. Definitions of confusing terms such as allodynia, hyperpathia, and hyperalgesia are clarified according to internationally accepted criteria.

Chapter 2 is a good overview of basic pain mechanisms. Of particular interest to neurological clinicians here is an explanation of the phenomenology of the varieties of neuropathic pain such as the widespread areas of skin sensitivity with isolated nerve or root injury and the paradox of evoked pain from apparently anaesthetic skin. A clear, concise explanation of the nature and importance of endorphins is also part of this chapter. Chapter 3 is a brief discussion of the epidemiology of pain in children and adults and in different settings outlining some problems with this type of data. Chapter 4 is on headache and facial pain, and whereas this is accurate and comprehensive, it is information that is likely readily available in other texts in the neurological clinicians library. Chapter 5 is an excellent comprehensive account of neuropathic pain including reflex sympathetic dystrophy, phantom limb pain, brachial plexus avulsion, postherpetic neuralgia, painful neuropathies, and central pain syndromes resulting from spinal cord, brainstem, and cerebral lesions. Unusual cranial neuralgias are also part of this section, tic douloureux being dealt with in Chapter 4. A reasonable approach to the evaluation and therapy of low back pain is found in Chapter 6. The difficult and contentious areas of fibromyalgia and myofascial pain is well covered in Chapter 7. Chapter 8 is useful for neurological clinicians because it deals with the pathophysiology, assessment, and treatment of arthritis and painful bone diseases. Chapter 9 is by Kathleen Foley who has, for years, been a leader and advocate for the better management of cancer pain. Her chapter gives a detailed account of all the painful problems arising from cancer and its treatment.

The therapy of pain (part 3) occupies more than 1/3 of this volume. Chapter 10 covers nonopioids and adjuvant analgesics, the latter in ten categories, with practical guidelines for each. Opioid analgesics are covered in Chapter 4 by Dr. Portenoy, one of the world's experts and opinion leaders in this area. This

of the world's experts and opinion leaders in this area. This chapter gives important general principles for the use of these agents as well as specific details of individual opioids. The important, contentious but increasingly acceptable issue of the use of these drugs for nonmalignant pain is clearly dealt with here. Chapter 12 is a competent account of anaesthetic measures for pain control. Chapter 13 is written by Ronald Tasker, a neurosurgeon well known to Canadians as a world-recognized figure internationally in the pain field. This chapter gives an account of the various surgical options for pain relief and a reasonable and cautious evaluation of the results of these

approaches based on this data. The final chapters are accounts of the psychiatric and psychological approaches to pain management. These give useful and brief accounts of the choices in each of these areas.

Overall I cannot fault this book in any major way. It is a worthy addition to the many classic volumes in this series. For the price too, I recommend it to residents and to neurological and neurosurgical clinicians to provide practical, readily accessible information in this very important area of clinical practice.

*C. Peter N. Watson,  
Toronto, Ontario*