BOOK REVIEW


This small book of 124 pages attempts to tackle a difficult area of medicine by describing the potential role of acetyl choline blockade in pain management through the use of botulinum toxin. Because of the paucity of studies of this agent in pain management, it may be seen as premature. However, since botulinum toxin is being used “off-label” anyway, the description of its use to practitioners with little or no previous experience of the agent is worthwhile and timely.

It starts by describing the agent and neuromuscular physiology and then goes on to report some of the clinical trials in pain relief. The two are a little detached in that the mechanism of pain relief by this agent is not described. Having said this, Dr Childers ties in the result of muscle hyperactivity as the generator of pain and its block being the rationale for treatment.

The use of the toxin in myofascial pain syndromes is very well tackled and the reader has clear facts and diagrams. This book will be a useful complement for the novice in botulinum toxin administration to more detailed texts on pain management.

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This is a book “written primarily for people with MS” and people close to them. Therefore this review is written by both a patient and a physician.

This book gives the answers to many questions about MS. The authors correctly state that each person reacts differently to the diagnosis. One individual does not need all the answers but as a patient you very much appreciate it when an answer to what, in your opinion, is a unique and personal question is given. Thus the result, maybe inevitably, is a fairly exhaustive book. The authors realize this dilemma: in the introductory chapter the reader is advised to use the book for reference purposes, and a person with a recent diagnosis of MS is advised to abstain from reading the entire book. This is good advice as the text “attempts to deal with the full range of possible problems, even the very difficult ones”. It is common knowledge to all physicians dealing with MS that it can be a problem per se to balance the need for information on possible future problems against the need to avoid discussing what will possibly never occur.

The answers are informative and honest; available treatments are described without overemphasis of their moderate effect. From a patient’s point of view the text gives much professional insight into a disease that causes problems which can only be fully understood by patients themselves: “Perhaps the loneliest aspect of life with MS is that even the most loving and supportive friend cannot feel what you are feeling”. Helpful answers are given to the problem of living with MS. These are a great relief and it gives much comfort to read the advice on dealing with the overwhelming fatigue and the obvious necessity to plan and carry out the periods of rest. People with MS will appreciate the many ideas concerning equipment and the suggestions, sometimes described at great length, of how to cope with practical problems.

One deficiency of the book is the scarcity of illustrations. In particular, the anatomical illustrations in the first chapter which are used to provide a brief overview of the disease are too few and the only detailed diagram is not adapted for laypeople. There is a valuable medical glossary, although it is sometimes too detailed; for example, is there a need to describe “afferent pupillary defect”? The book is written with US and Canadian readers in mind and it is uncertain whether the authors hope to attract readers outside North America. There are relatively detailed discussions of FDA approvals of the different beta-interferons as well as addresses and referrals for US supportive organizations; chapters on employment and insurance issues are of no practical value for persons outside the US. The detailed list of medications used in MS is also for North American readers, and of course is very useful for those readers.

In conclusion the book leaves us with two conflicting impressions: it is both very valuable and exhausting. Perhaps the ideal book for patients and their relatives should be in two sections: a straightforward, well-structured description of possible symptoms, causes and course, prognosis and treatments (not exceeding 100 pages); followed by the questions and answers, which could be considerably shorter.

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