

NEUROSURGERY CASE REVIEW: QUESTIONS AND ANSWERS. 2010. By Remi Nader, Abdulrahman J. Sabbagh. Published by Thieme Medical Publishers, Inc. 435 pages. C\$135 approx.

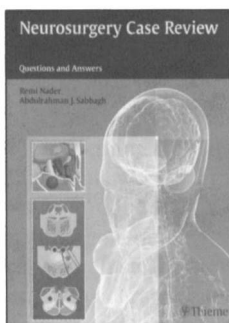
Rated **UNAVAILABLE**

“Neurosurgery Case Review: Questions and Answers” is a well-rounded review book that will prove invaluable to neurosurgery residents preparing for their certification exams. The authors have done well to cover the most common neurosurgical conditions encountered by residents in training, and readers of this book will readily associate the cases reviewed in this book with patients that they have personally looked after over the course of their training. Both the contributors of cases, as well as the section reviewers, come from a variety of geographical backgrounds, helping to show the readers the variability that exists in day to day management of neurosurgical cases.

The book has been organized, quite practically, into cranial and spinal sections, with peripheral nerve problems included in the latter section; to emphasize its importance, the authors could have easily separated peripheral nerve cases into its own standalone section. The various subspecialties within each larger section, including oncology, vascular, infection, and developmental conditions, are covered in a systematic manner with the most common conditions in each area chosen as illustrative cases. A separate section on neurology has been appended as a third section, however could have been included in the intracranial part of the book given the section’s focus.

Readers will find the cases extremely beneficial as they have been well organized and reinforce the most important features of the entity under discussion. The authors make a concerted effort to outline important facets of the clinical history, physical examination, diagnostic investigations, and management principles. Questions posed in each case are detailed and require the reader to critically think, much as one would in a routine clinical encounter. Where appropriate, readers are asked to consider specific surgical approaches, a common facet of neurosurgical certification exams. For future editions, the authors could consider revising the aesthetic layout of the case solutions as the questions appear to run together and some physical separation of each question may serve as a useful memory aid for prospective exam takers. Finally, readers of this volume will be happy to know that many of the authors have written both the Royal College of Physicians and Surgeons of Canada certification exam in neurosurgery and the written exam of the American Board of Neurological Surgery. As such, this book will prove useful to trainees on both sides of the border, and those overseas looking to certify in North America.

The authors of “Neurosurgery Case Review: Questions and Answers” should be commended for compiling a large, and often confusing body of information, into a practical case-based review that will prove extremely useful to those appearing for certification exams in neurosurgery. Readers of this volume will be pleased



with its emphasis on the most common conditions encountered in daily practice by neurosurgical trainees. Those looking for a quick, practical ready reference on fundamental neurosurgery cases would be wise to keep this book handy.

*Shobhan Vachhrajani
Toronto, Ontario, Canada*

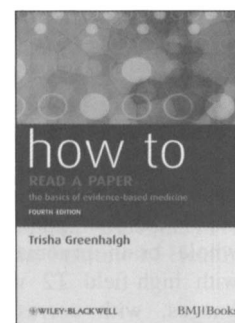
HOW TO READ A PAPER, THE BASICS OF EVIDENCE-BASED MEDICINE. FOURTH EDITION. 2010. By Trisha Greenhalgh. Published by Wiley-Blackwell. 238 pages. C\$54 approx.

Rated **UNAVAILABLE**

This book is the fourth edition of a previous published book with the same name, edited by Trisha Greenhalgh and published by Wiley-Blackwell. This is one of the most successful books ever published regarding evidence based medicine. The book is dedicated to discussing basic aspects of evidence based medicine, specifically the concepts that should be used every time a medical article is read by a physician. The book is divided in 15 chapters. This book has much Canadian representations, as David Sackett and his colleagues have popularized the concept of evidence based medicine around the world. Previous editions of the book have been translated into French, German, Italian, Spanish, Portuguese, Chinese, Polish, Japanese, Czech and Russian. As an important recognition for the author of this book, it has been considered in some countries such as the UK as basic literature during training for medical students and pharmacists.

I had the opportunity to read a previous edition of this book some years ago and I have to say that it has not changed a lot in its content. The book has the same chapters and only a few of them have been added to or modified in the later editions. One of the new chapters is the entitled “Searching in the Literature”. This is a very useful chapter that was missing in previous editions and reviews very well the available resources to search medical information. This chapter makes the book stronger. The other chapter that was revised in this edition is the chapter on systematic reviews and meta-analyses. This is an excellent chapter and makes a very good review of the use of this type of methodology of research and how physicians can review meta-analyses with a systematic approach. Interestingly the book ranks meta-analyses as the highest level of evidence along with randomized clinical trials. Another new chapter in the book is the titled “Getting evidence into practice”. This is a very interesting chapter that discusses the difficulties in helping organizations construct appropriate structures and systems to develop evidence based medicine. The rest of the chapters are similar to previous editions and only minimal changes have been done over time.

I strongly recommend this book. This is one of the basic books that every medical student and resident of any specialty has to read during training. Although, the ideal time to read this book is during training, this is one of the books that should be present in every



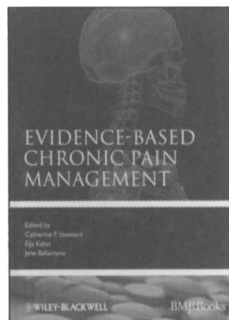
medical library around the world in order to be used when necessary to analyze a medical article with a potential translation into clinical practice.

*Jose F. Tellez-Zenteno
Saskatoon, Saskatchewan, Canada*

EVIDENCE-BASED CHRONIC PAIN MANAGEMENT. 2010. Edited by Catherine F. Stannard, Elija Kalso, Jane Ballantyne. Published by Wiley-Blackwell. 450 pages. C\$240 approx.

Rated **UNAVAILABLE**

Evidence based medicine (EBM) can be defined as the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. As such, EBM aims to apply the best available evidence gained from studies using the scientific method to medical decision making. It seeks to assess the quality of evidence of the risks and benefits of treatments (including lack of treatment). Over the last three decades, EBM has become a gold standard in the evaluation of interventions provided by physicians. The new book, Evidence



Based Chronic Pain Management, strives to provide readers with EBM as it relates to chronic pain, a large and diverse field. This is a difficult task, as the condition of chronic pain is managed by numerous specialties and many patients with chronic pain never even seek the care of a physician, instead turning to alternative therapies, or self-therapy. In any case, pain as a field has progressed over the last decades to become much more evidence-based, but

not without hurdles. Although EBM is designed to make decisions about the care of individual patients, generalizability is difficult for conditions where literature is sparse. Finally, extrapolation to longer follow-up time periods of years is often difficult for patients with chronic pain, where most studies occur over weeks.

This book begins with a review of evidence itself – this provides a very good overview and sets the stage for future chapters. Important concepts and meaningful examples are provided. The next chapter proceeds to discuss trial design and evaluation of evidence. This chapter integrates well with the first chapter and provides a good overview again. The information provided is important for the clinician, but will not satisfy the needs of an epidemiologist or statistician.

The following chapter is all too brief in discussing the Neurobiology of Pain; for example, central inhibitory pathways are discussed with alluding to the significant literature regarding serotonin and norepinephrine roles. This could be permissible given the nature and intent of the book, but for clinicians looking for an encompassing overview, it may be underwhelming.

There is a review of psychotherapy and its evidence which may not be well known by most clinicians who often first turn to pharmacology. For the Neurologist unfamiliar with all causes of pain, there are also chapters discussing data in pelvic/perineal pain

syndromes, as well as in forms of arthritis and chest pain syndromes. Many Neurologists will not be familiar with the diagnosis nor treatment of these conditions, so the reviews provided are important and make for good overviews. As well, there are reviews of alternative therapies, for which most Neurologists will not be familiar with study outcomes. Lesser used therapies such as spinal cord stimulation are also considered in depth.

Neurological conditions such as diabetic peripheral neuropathy and post-herpetic neuralgia are reviewed thoroughly, with all recent publications considered in the formulation of the review and figuring in the authors' recommendations. Less common, and more difficult conditions, such as phantom limb pain and complex regional pain syndromes are also reviewed in good depth. Chapter 16 examines post-surgical pain syndromes where there really is insufficient data to properly review EBM, leading to this chapter becoming more of a review of the condition itself. This cannot be the fault of the chapter or its authors, however.

Chronic back pain is not very sexy and is often the bane of most Neurologists' practices. Nevertheless, it is common and has numerous tribulations, but also trials. Chapter 7 examines the evidence for entities such as back schools, behavior therapy, and pharmacotherapy. The majority of the data cited were based upon Cochrane reviews, followed by guidelines, and finally, the authors' recommendations. Chapter 8 uses both positive and negative studies to highlight management in chronic neck pain – a novel approach and a nice method of presenting the work that has been done. This chapter also permits the realization of uncertainty – despite the high prevalence of chronic neck pain, studies to date have not led to a conclusive clinical management pathway in today's practice.

One notable absence in many chapters is the use of figures/tables. Some megaplots, meta-analysis graphs and other demonstration devices would have been useful in Chapters 7 and 8 examining back and neck pain, for example. Other chapters do have Boxes to summarize data. There are some conditions which are notable for their absence, such as trigeminal neuralgia, which has ample EBM behind its management. Radiculopathy, a condition managed differently than mechanical back/neck pain, is not considered separately.

This is a good review for the Neurologist seeking an overview of common and some uncommon conditions causing pain. There is strength in authorship, with many well known researchers contributing chapters. There is also effectiveness in the brevity of many of the reviews presented. Drawbacks include the absent subject areas described above, and there is a lot of overlap between chapters or sections inherent in a collection such as this. Nonetheless, I recommend this to General Neurologists and Neurologists who have greater proportions of pain than the average clinic. Those physicians and allied health care professionals who are particularly interested in management strategies for pain and its related conditions will also find this book to be a good reference. I would not recommend this to all Neurologists, and do not recommend this as a book for patients to learn about pain.

*Cory Toth
Calgary, Alberta, Canada*