Book Reviews

An Atlas of Epidurograms. Epidural Blocks Investigated

Clive B Collier. Harwood Academic Publishers, 1998. 99 pages. \$65.00 (US). ISBN 90-5702-323-7

The dilemma of a poorly working epidural catheter has confounded even experienced anesthesiologists. This atlas uses a radiologic means to try to identify the spinal anatomy of the patient with a failed or poorly functional epidural catheter. With the technique of epidural contrast radiographs, the author hopes to illustrate an anatomic diagnosis to explain the clinical results.

In this book, the author details indications for epidurography, the technique and methods for the procedure, and has multiple examples of the normal epidurogram. The variations and typical findings of these normal studies are discussed, as are computerized tomographic (CT) and magnetic resonance (MRI) images.

Other sections examine well-documented case studies involving catheters in the subarachnoid and subdural spaces, as well as in multiple compartments and the paravertebral space.

Septa are demonstrated with several radiographs, in cases where unilateral or segmental blocks are clinically apparent. Spinal deformity and congenitally abnormal vertebrae are also seen in cases with unusual behavior of standard doses of local anesthetic.

Equipment is also tested for variations in the appearances of the epidurographs, as well as a curious blockage in one example of catheter occlusion.

In all, this atlas is a handy resource for comparison of diagnostic epidurographs. However, most departments of anesthesia do not use this modality in instances of a disappointing epidural. The review and explanation of this technique is provocative, and leads one to consider adding this practical test to the options available for the clinically curious practitioner.

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An Evidence-Based Resource for Pain Relief

Henry McQuay, Andrew Moore. Oxford University Press Canada, 1998. 264 pages. \$175.50. ISBN 0-19-262718-X

In their introduction the authors make the important point that clinicians reading this book may find their favoured methods do not stand up well to objective scrutiny. The practice of evidence-based medicine requires the integration of individual clinical expertise with the best available clinical evidence from systematic research. How to find the papers, how to judge their value, how to extract the relevant information and how to analyse the data are described in concise terms that the practicing clinician will find easy to comprehend. There follows, in the section on acute pain, thirteen chapters of systematic reviews of specific treatments of postoperative pain that include oral and parenteral analgesics, pre-emptive analgesia, and TENS. One is left with many unanswered questions; intravenous opioids and NSAIDs, and epidural analgesia are widely used for acute severe postoperative pain, but are not covered. The section on chronic pain is somewhat shorter but no less interesting. Reviewed are ten therapies, including TENS, epidural steroids, anticonvulsants, and antidepressants. What the authors have provided is an excellent summary of the methods for assessing the evidence on the treatment of pain. The most obvious thing that this text is not is a book of recipes for managing different pain syndromes but, correctly, the authors chose to present the evidence recognising that this is not the final word on this topic.

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