Book review

Handbook of Pain Relief in Older Adults: An Evidence-Based Approach, 2nd edition

Editor F. Michael Gloth, III. Published by Humana Press, New York, NY, USA, 2011. 210 plus i-x pp. ISBN 978-1-60761-617-7
In: Aging Medicine, Series Editors: Robert J. Pignolo, Mary Ann Forciea & Jerry C. Johnson

This is a book of 14 chapters in just over 200 pages that is half authored and half edited by a specialist in Geriatric Medicine. The writing style is clear and easy to follow. I liked the presentation of the material and the layout within the individual chapters. This was pleasingly consistent throughout the book demonstrating tight editorial control of this multi-author work.

The opening chapters detail the assessment of senior patients and promote the adoption of the biopsychosocial model. They set out the particular challenges both physician and patient face. These are divided into chapters on the changes in physiology, pharmacology, pathology in elderly patients and the societal prejudices associated with their care. The chapter on Pain Management in Long-Term Care was well written by two specialist elderly care physicians and highlights the many particular problems that arise in that setting from entrenched negative attitudes and beliefs in both staff and patients and official (US) government bodies.

The chapter on interventional treatments is written by three widely published practitioners in the field. In 25 pages the whole range of treatments from simple nerve blocks to spinal cord stimulation are covered. It necessarily assumes some experience in this area of pain medicine in the reader. In 85 references 25 referred to spinal cord stimulation alone. The evidence that was reviewed highlights the lack of evidence available generally for the large number of interventions that can be done. Robust well-designed trials with clear translational application in the clinical setting are few. However the few good reviews and meta-analyses that form currency between pain physicians are in the main quoted.

The later chapters, comprising a quarter of the book, deal with challenges facing North American based physicians in funding treatment for elderly patients, and deals with society's attitudes and what motivates them. This is detailed and will not immediately resonate with practitioners working within more socialized medical systems.

On the whole I think this book is a useful *vade mecum* for those physicians starting out in pain medicine who find themselves with a large proportion of elderly patients in their practice. For a book of its size it contains a great deal

of information. Its subtitle *An evidence-based approach* irritated me. So much has been written and sacrificed on the altar of evidence-based practice that specifying it is unnecessary and pretentious.

The book is written from the perspective of a physician as opposed to a nurse or allied professional. It therefore may not find universal appeal amongst all those involved in delivering care to the elderly. It does however contain the clear message that generally elderly patients get a raw deal when it comes to managing their pain and that there is plenty of scope for improvement. The hope is that this book will sensitize those involved into effecting the necessary changes to improve the delivery of pain management in this special population – and then this book will have achieved its aim.

Competing Interests

There are no competing interests to declare.

Nicholas Padfield

Guys and St Thomas' Hospitals NHS Foundation Trust, London, UK and
University of London, London, UK

RECEIVED

16 May 2011

ACCEPTED

16 May 2011

ACCEPTED ARTICLE

16 June 2011

CORRESPONDENCE

Dr Nicholas Padfield, MBBS, FRCA, FFPMRCA, Guys and St Thomas' Hospitals NHS Foundation Trust, London, UK.
E-mail: n.padfield@btconnect.com