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Problem-based Pain Management. Edited by Eric S. Hsu, Charles Argoff, Katherine E. Galluzzi, Raphael J. Leo, Andrew Dubin. Cambridge, United Kingdom, Cambridge University Press, 2013. Pages: 394. Price: \$85.00.

In the field of pain management, the bread and butter tends to be the evaluation and management of neuraxial sources of pain. However, as the field grows and as health care tends to rely on specialists for the management of more and more problems, it is likely that practitioners will see patients with many sources of pain outside the spine. *Problem-based Pain Management* does a nice job organizing these numerous topics and getting straight to the points that practicing physicians need to feel comfortable with the care of these patients.

The book is divided into nine sections, each of which represents a segment of the body, except for the last section, which has some catch-all special topics. Within each section are several short chapters, each dedicated to a specific type or source of pain. As examples, the neck and shoulder section has chapters on cervical radiculopathy and brachial plexopathy and the thorax section has chapters on intercostal neuralgia and thoracic spinal pain.

Each chapter is usually only a few pages long, although some of the larger topics, such as "Acute and chronic back pain, back strain and sprain," tend to be a bit longer. The chapters are broken down in a format that closely resembles clinical practice. The order of sections within a chapter includes clinical presentation, signs and symptoms, laboratory tests and diagnostics, imaging studies, differential, pharmacotherapy, nonpharmacologic approaches, interventional procedures, follow-up, and prognosis. Each chapter also has a short references section at the end.

This highly structured organization makes it very easy to review a particular pain source. Review of a topic is guaranteed to be succinct and built on a common scaffold, so one need only focus on the material at hand. This scaffold fits nicely into actual clinical practice by avoiding esoteric details or discussions that do not directly relate to clinical decisions. For example, the chapter on hip arthritis and bursitis pain not only discusses those problems but also compares them carefully to other items in the differential in a way that suggests how to appropriately approach this real-life possibility. The text reads easily and is straightforward, again in-line with the practical nature of the book.

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Each chapter clearly seems to address a topic that a practitioner can expect to see in daily practice. Of special note is the first section, which is devoted only to headaches, a common patient complaint that can be caused by many problems and is often difficult to differentiate by practitioners who have not had a lot of experience treating these patients.

This careful structure does have some drawbacks. It does not contain any images, which would be of obvious benefit in a field that so heavily uses image-guided procedures. Likewise, there are no diagrams. Some more non-text-based layouts might have been useful to illustrate concepts, such as differentials, decision points. The text does use some tables for this purpose, but they are far from common. Sections within chapters occasionally seem sparse, such as a brief mention of an intervention without elaboration of technique or discussion that an interventionalist might expect, although that level of detail may be hard to incorporate in a text that is not aiming to be a large reference book.

The author does suggest in his preface that more images and color may become part of future editions, along with a plan to release updates each year. That foresight and plan for regular updates makes it easier to invest in a reference. New editions will likely build on a structure that readers have already used to learn this material.

The physical format of the book also has its advantages. It is 383 pages, soft-cover, and slightly smaller than legal paper. This makes it easy to carry, access, and hold in one hand. Coupled with the clinical focus of the book, it is a good format to take to a clinic, train with, or use in a variety of preferred reading spots.

As the primary author points out in his preface, he collaborated with physicians in neurology, psychiatry, physical medicine and rehabilitation, and internal medicine/gerontology and expects the book to apply to a similarly wide audience. This, I believe, is very much in-line with the types of patients that pain management practitioners can expect to manage, arriving from a wide variety of referring physicians and with a wide variety of pain sources. I think this would have been a useful book earlier in my training but will continue to be useful in my last few months and even as an independent practitioner. It stands apart from most references as being especially focused and targeted to clinical practice, making it a great addition to most libraries.

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Michael J. Avram, Ph.D., served as Handling Editor for this book review.