Book reviews

Working Group on Back Pain. DHSS report to Secretary of State for Social Services and the Secretary of State for Scotland. Pp. 61. £1.50. HMSO: London. 1979.

Back pain is a well known and seemingly intractable problem. The statistics of its prevalence are widely publicised and indeed commonly incorporated within data for arthritis and rheumatism as a whole and therefore used in justification for research into the broad field. Nevertheless it is a topic which has been very much neglected. With this in mind the DHSS established a multidisciplinary working group to review the existing services and their organisation, to advise on the fundamental questions to be answered in order to plan improvements in services, and to advise on the development of back pain clinics to provide early treatment and advice on prevention.

Despite these challenging objectives their report is disappointing in failing to highlight any clear directions for future developments. They describe the difficulties in establishing fundamental diagnoses and in quantifying the problem, and they criticise previous trials. There is a need for further controlled trials of both prophylactic and therapeutic procedures, and particularly of manipulation by both orthodox and heterodox practitioners (osteopaths, chiropractors, and acupuncturists). They suggest that the difficulties could be overcome either by involving very large numbers of patients (1000 or more) or by starting with the very limited objectives of looking at variation in the various factors relevant to the development of pain and only then comparing different therapies. They doubt the value of back pain clinics except possibly as highly selective tertiary referral clinics, perhaps on a regional basis. They suggest the development of a limited number of multidisciplinary research centres, perhaps related to regional tertiary referral clinics. The only really firm proposals are extensive surveys of existing treatment facilities. These would cover all members of the Society of Occupational Medicine, 10% of all general practitioners, all relevant consultants in specialist hospital practice, 30% of all radiologists, and every hospital physiotherapy department. This will involve an immense amount of work for all concerned and provide an enormous amount of information of varying qualities. As we do not know the values of virtually any of the procedures listed I find it difficult to understand the purpose of such enormous studies. Surely a very limited survey to demonstrate the resources directed at the back pain problem is all that is required.

Although it cannot be denied that further trials of current forms of treatment are necessary, my own feeling is that real advances will come from detailed studies of the pathogenesis of spinal disorders and pain syndromes, new technological advances in assessing spinal disorders, and longitudinal surveys to determine the natural histories of back pain syndromes.

M. I. V. JAYSON

The Systemic Manifestations of Temporal Arteritis. By L. A. Healey and K. R. Wilske. Pp. 140. \$12.50. Grune and Stratton: New York. 1978.

Giant cell (temporal or cranial) arteritis and the closely related condition of polymyalgia rheumatica have received increasing attention. It is often surprising in retrospect that although they have such distinctive features they should have been widely recognised only in recent years. The precise nature of the relationship between giant cell arteritis and polymyalgia rheumatica is not known, but the 2 conditions affect the same patient population and frequently occur together in the same individual.

The author's primary aim in writing this book is to increase awareness that giant cell arteritis is a systemic disease, that it is fairly common in older patients, and that it may present in a wide variety of ways. This is important as, unfortunately, there is often considerable delay in making the diagnosis, partly because of the frequent absence of physical signs and lack of specific laboratory tests, but also because the systemic features of the disease are not recognised as being due to underlying arteritis.

The authors have reviewed the historical development by which the initial concept of localised inflammation of the temporal artery has gradually been expanded, with the demonstration that the inflammation may involve the aorta and any of its branches. They indicate how this systemic disease may masquerade and cover in detail the important eye manifestations. They discuss the relationship with polymyalgia. They also cover the histological features and other diagnostic features before emphasising the important role of corticosteroids in therapy.

In the preparation of this book the authors state that they have reviewed all the articles on polymyalgia and giant cell arteritis in the English literature as well as in many other languages. Only some of these articles are referred to in the text, but these seem to have been well selected and critically reviewed and include papers published in 1978.

This book is very readable and is strongly recommended. The authors have succeeded in their aim of bringing attention to the many diverse presentations which so often lead to diagnostic failure.

B. L. HAZLEMAN

Rheumatologic Interviewing and Physical Examination of the Joints 2nd edn. By H. F. Polley and G. G. Hunder. Pp. 286. £13.25. Saunders: Philadelphia. 1978.

It is a welcome change to see a book on the subject of examination of the musculo-skeletal system instead of one on the examination of the cardiovascular or nervous system. This is an elegantly produced volume with excellent photographs and clear anatomical drawings and diagrams. A thoughtful chapter on history taking is

followed by chapters on the examination of individual joints, including the cricoarytenoid joint. At the beginning of each chapter there is a valuable section on essential anatomy followed by sections on inspection, palpation, movement and range of motion, muscle testing, and finally any special tests. The British reader might have wished for a wider discussion on the assessment of disease activity and spinal movement and there is no mention of the Richie index. This book should be read by all rheumatologists in training and it should be available for reference in every department.

I. D. L. BREWIS

Piroxicam. Royal Society of Medicine International Congress and Symposium Series 1. Eds. W. M. O'Brien and E. H. Wiseman. Pp. 111. \$10.25. Academic Press: London. 1978.

There seems to be no end to the supply of new non-steroidal anti-inflammatory drugs. There is also a steady increase in the number of journals in which papers about them may be concealed. It is therefore useful to bring together the current state of knowledge of a new compound in a readily accessible source. This volume provides lots of information about piroxicam, and although the story is clearly incomplete it looks interesting. The pharmacology and pharmacokinetics are well described. The latter predicts that piroxicam can be

given once daily, and clinical data support this view. Clinical trials in a number of different conditions suggest that piroxicam is another useful anti-inflammatory.

E. C. HUSKISSON

Spinal Phlebography: Lumbar and Cervical Techniques. Eds. J. Theron and J. Moret. Pp. 165. DM 118. Springer-Verlag: Berlin. 1978.

Spinal phlebography is a relatively new radiological technique used for investigating vertebromedullary pathology. It has the advantage over myelography and radiculography of not requiring puncture of the subarachnoid space and seems a relatively harmless and almost painless procedure. However, the interpretation of the radiographic appearances of the epidural veins is highly skilled and demands special experience.

With various collaborators the authors have made detailed studies of the physiological and anatomical bases of the epidural venous system both in man and in animals. They then illustrate the techniques, problems, and results of phlebography of both the lumbar and cervical areas. The whole book is profusely and magnificently illustrated. Primarily it is directed at radiologists, but it will be of interest to all who have to deal with the diagnosis of lumbar and cervical conditions.

M. I. V. JAYSON

Register of Events in Rheumatology: 1980-1

October

28-30 NAIDEX '80 London

November

20-21 Heberden Society— Queen Elizabeth
AGM and Oration Hall, London

23-30 II International Seminar on the
Treatment of Rheumatic Disease Tel-Aviv, Israel

1981

April

3-4 Association of Physicians of Great
Britain and Ireland— AGM Dublin

30-1 May BARR—Annual Meeting and AGM St George's
Hospital, Tooting

June

21-27 XV International Congress of
Rheumatology Paris

A complete list of rheumatological meetings in the UK is published in January and July of each year in the BLAR Newsletter, which is available from the Arthritis and Rheumatism Council, 8 Charing Cross Road, London WC2H 0HN.

Note

VII Panhellenic Congress in Rheumatology

Organised by the Hellenic Society of Rheumatology, this congress will be held on 27-29 November 1980 at Athens Hilton Hotel. Inquiries to Demetrios M Strouboulis, MD, 11 Pindarou Str, Athens 136, Greece.