

discussion, some understandable irritation and some scepticism. I recommend it warmly, particularly for those who are able to influence the direction in which the profession is moving. But I would recommend that it be read alongside Baroness O'Neill's *A question of trust*, published last year by Cambridge University Press.

JM HOLT

Honorary Consultant Physician,
John Radcliffe Hospital, Oxford

Perceptions of pain

By Deborah Padfield. Dewi Lewis Publishing, Stockport 2003. 128pp. £14.99.

There are clear limits to using language to express an individual's subjective response to severe chronic pain. Virginia Woolf wrote that '...the merest schoolgirl when she falls in love has Shakespeare and Keats to speak for her, let a sufferer try to describe the pain in his head and language at once runs dry'.¹ Furthermore what if the doctor can find nothing wrong and all the tests are negative, but the pain persists? A physician or surgeon may then dismiss the cause as emotional. How will the patient react – seek another opinion, lose faith in the profession?

Attempts by artists to depict pain have never really been entirely successful. Some have focussed on events associated with pain, for example by using Christian iconography or situations such as tooth extractions or joints being gnawed by imaginary beasts. Some have attempted to portray pain through facial expressions, as in the classical studies of Charles Bell, Duchenne de Boulogne and Charles Darwin. But these approaches have only ever been partly successful because they could never depict precisely how individuals actually felt about their pain. This book attempts to address the matter in an original and unique way.

It follows the success of the exhibition 'Perceptions of pain', sponsored by Novartis Pharma AG, and comprises a compilation of images based on photographs by Deborah Padfield, herself afflicted with chronic pain, selected by a number of pain sufferers who collaborated closely with her. Their pain results from accidents, assault, surgery or illness and has lasted between 9 and 42 years. In most cases no medical resolution has been found to their problems. At numerous workshops with individual patients the images were carefully selected and manipulated and transformed by cutting, stitching and writing on them. The result is a fascinating mix of black-and-white and colour images. Being a sufferer for some time from migrainous neuralgia (whatever that is) myself, I can certainly sympathise with all those involved in trying to depict their very personal experiences which are often beyond the reach of words. As Deborah Padfield emphasises, the works were not driven by aesthetic considerations but by a desire to '...look at aspects of ourselves, and experiences, which have hitherto been too painful to acknowledge'. But asking pain sufferers to try to explain their suffering in this way might also have other benefits. It could help students and doctors in training as well as more experienced individuals better to understand their patients' problems and thereby improve communication with them. It could also help to establish a diagnosis, for example in children to distinguish migrainous from

non-migrainous headache. And it might also provide useful information for possible treatments. Professor Brian Hurwitz in his thought-provoking introduction also hopes these images might '...galvanise clinicians into ensuring that NHS managers and planners accord the resources required for appropriate medical treatment of pain'. Clearly a picture can be worth more than a thousand words. This fascinating book certainly emphasises the point in a very elegant and convincing manner.

Reference

- 1 Woolf V, 'On being ill'. In: Woolf V. *The crowded dance of modern life: selected essays*. London: Penguin, 1993.

ALAN EH EMERY
Green College, Oxford

The science of the placebo: toward an interdisciplinary research agenda

Edited by Engel LW, Guess HA, Kleinman A, Kusek JW. BMJ Books, London 2002. 343pp. £15.95.

The science of the placebo is the outcome of a conference held in November 2000 and attended by medical scholars, researchers, and clinicians, including those working in both conventional and complementary and alternative medicine. Conference proceedings can be disappointing reading for the clinician, but this book is an exception to that rule. It contains a wealth of clinically relevant information in addition to that on issues of research methodology and ethics which may be of more interest to researchers. The book starts with an overview, which provides a very useful summary and guide to the later chapters; this chapter alone should be read by those interested in the way patients are affected by their interaction with clinicians.

The final chapter lists six principles that were agreed at the conference. First, that the term placebo describes a 'process encompassing dynamic features of the patient-health professional interaction' and that 'placebo (or nocebo) effects operate whenever patients and practitioners interact'. Second, that 'placebo effects are a subset of mind-body effects that emerge by eliciting innate healing processes and/or enabling an amelioration of symptoms'. Third, that it is unlikely that any 'single model of placebo effects nor any single mechanism will be able to explain how placebo effects manifest as physiological changes in the body'. Fourth, that interdisciplinary research is needed for placebos research. Fifth, that 'there is a need to eliminate the pejorative connotation of the word placebo as merely a sham and deceptive process and replace it with positive meaning'. Finally, that 'studies involving placebo effects must be designed to separate actual placebo effects from various artefacts'.

This book shows, through cited research, the important impact placebos and nocebos have for health and disease. Several of these studies will be of interest to those in clinical practice. For example there is the study that investigated the link between Chinese astrology and mortality. Chinese astrology predicts health outcome as a function of year of birth, and these outcomes are reflected in the mortality statistics (disease type) of Chinese Americans, but not in those of the white controls. The author concludes: 'It is clear from