Many pages in philosophical and scientific texts, and countless doctor–patient contact hours have been devoted to descriptions of pain. These have often been unsuccessful, for pain, like taste, tends to defy verbal description, and attempts to disprove this can involve sufferers in prolonged introspection. We have often seen this lead to a detrimental obsession, the patient in our surgery so intent on describing his pain that he cannot see beyond it. It seems that the need to express the pain accurately is the same as the need to prove its existence, thereby exciting empathy, acceptance and treatment. Because of this difficulty with ‘proof’, pain sufferers often feel isolated and depressed, and one of the first steps to rehabilitation can be their doctor’s understanding.

The theme of this book is therefore important. It collates a series of photographic interpretations of chronic pain. The photographic artist (Padfield) worked with patients at a pain clinic in London, aiming to represent their pain in picture, after talking and listening to them, and going through repeated iterations of the final, exhibited image. She tells us that this was done in the name of art, but that the results may be useful in therapy. The main body of the book comprises these photographic images, annotated by brief descriptions of the patient/client/ sufferer to whom each image relates.

There is an excellent introduction by Brian Hurwitz that is a testament to the benefits of combining art and medicine. The nature and consequences of pain are considered in a historical, scientific, humane and academic manner, leading us appropriately into the exhibition, and leaving us reflecting on our work in primary care.

Sadly, many of the images left me cold, despite their undoubted technical excellence. While they may have been meaningful representations of some individuals' pain, they did little to increase my understanding of pain generally. Some seemed little more than visual versions of familiar descriptions (stabbing knives, crawling spiders). Others were meaningless without the accompanying text (an apple, a coathanger). Some were more aesthetically pleasing to my untutored eye than others, which influenced my willingness to engage with them. In the end, I found the idea of the project that led to this book more valuable than the output. I agreed with the conclusion of Charles Pither, the Pain Specialist’s epilogue: adding a photographic dimension can promote pain-related communication. However, there surely are as many potential representations as there are sufferers (and verbal descriptions), and one exhibition is unlikely to portray my pain. The scope for art therapy is confirmed.

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References