It is not often that a book related to the field of pain comes along that requires me to stop and think. I am accustomed to looking at books that explain aspects of painful conditions, address means to immediately modify the pain experience, and help me better utilize medications. Instead, *Pain: new essays on its nature and the methodology of its study* investigates pain as a philosophical construct and provides over 400 pages of information in a manner that provides no specific clinical answers yet triggers fascinating questions within the reader. Therein lies the paradox of the book and its subject matter. What is pain? What does pain mean to the sufferer? How is a set of bodily phenomena experienced as pain? Why is pain so vexing to manage?

This is a book about pain written primarily by philosophers, psychologists, and neuroscientists. It is not a book intended for clinicians to use to resolve clinical concerns for their patients in pain. It is a book that is best read when having long blocks of time to read, reread, and contemplate. It reviews historical facts, offers first-person interpretation of the significance of those facts, and provides peer commentaries on the writings of other authors. Several chapters provide much insight about the nature of pain by defining it through the first-person experience of the sufferer, addressing the difficulties clinicians have understanding pain in others and what pain means in a multidimensional construct involving sensory input, response to sensation, interpretation, and motivation. This is not an easy book to read, and yet it is written much the way university professors teach imponderable concepts, through a series of logical steps leading to inescapable conclusions. Bit by bit, arguments are put forth in the book, with lines of reasoning playing out until the reader “gets it,” thereby provoking for the reader a desire to question basic assumptions, rules, and strategies about pain.

I believe that the purpose of this book is to challenge the reader to set aside all existing beliefs and conceptions about pain and to explore the outward contradictions that make understanding pain so difficult. Working from subjective interpretations of perceptual experience, the authors weave their own feelings, ideas, and thoughts into the essays and commentaries. The authors create definitions for the terms and concepts they use, then employ rules of debate to weave their arguments first around everyday occurrences (quite literally work environments and office furniture) and later around people, bodily changes, and pain itself. This style of argument will frustrate some readers by not just giving them simple answers, while fascinating and stimulating others to think through the experience and meaning of pain.

The book certainly achieves its goal of forcing readers to critically think about the very nature of pain, what we experience as painful, and what it means to live a life in pain. It does not prepare readers to be better clinical diagnosticians as much as it develops their skills of critical reasoning. The book does not help practitioners select the proper medication for a specific type of pain. Rather, it encourages clinicians to look past the chief complaint and consider what pain means to people who live and suffer with it. The book provides many lessons that shift the thinking of “left-brain” practitioners focusing only on underlying disease states or treatments needed without exploring the disruptions that pain brings beyond the expected disruptions in activities of daily living.

Interventionists, those pain practitioners who routinely use procedural and surgical skills to manage pain, may have the most difficult time understanding what is written in this book. Behavioral health practitioners who delve into intrapersonal experiences of people in pain may find it challenging if read too quickly. Read more slowly, with time taken for reflection, the book opens doors into a world few ever consider.

I highly recommend this book to academicians, clinicians, and sufferers of pain who are prepared to go beyond the experience of pain and want to begin to master it. I do not recommend it for busy clinicians who need immediate strategies for managing pain. Those in training will be well served by reading it within the context of a seminar or discussion group with a veteran clinician suggesting practical application of the material. Through the use of this book, even the most technical clinician would begin to connect with the humanistic aspects of caring for those in pain. Used as a guide, reading this book may challenge clinicians to better understand the nature of pain and become more interested in the use of behavioral health options. Beyond pills and procedures, the introduction of practical behavioral considerations into operating rooms, surgical centers, departments of radiology, and other highly technical and intimidating healthcare environments will do much to ease pain.

This book has great promise for opening the minds of its readers while sparking debates and discussions among clinicians. Importantly, like courses on professional ethics, it will cause readers to examine their own practices.