Neural Therapy has been a vital addition to my pain practice for a number of years. Developed in Germany over 75 years ago, its theory and practice have evolved considerably since the Huneke brothers first coined the term.

The field of neural therapy began with the realization that procaine had beneficial effects that far outlasted its duration of action. This clinical experience led to a new understanding of the autonomic nervous system. The reader discovers that the contents of Neural Therapy are really a tool, easily learned, which allow detection and treatment of dysfunctions of the autonomic nervous system including those related to pain.

The one major text on Neural Therapy translated into English (the 11th edition of Peter Dosch’s Manual of Neural Therapy According to Huneke) is now over 20 years old. Unfortunately, the publisher has decided against an updated English edition.

This makes Canadian Robert Kidd’s work even more valuable as an English reference on Neural Therapy. Dr. Kidd graduated from McGill in 1970 and initially practiced emergency medicine. His quest for answers to untreatable problems in allopathic medicine took him down a course of discovery in manipulative medicine, osteopathy, homeopathy and naturopathy. Although the text is intended as an introduction to neural therapy for the average general physician, it has application to the practice of anesthesiology. The text is concise and its twelve chapters logically flow through the scientific basis and practice of neural therapy to factors, which limit its effectiveness including nutrition, dentistry and toxicology. These additions to the practice of neural therapy, not seen in Dosch’s text, are invaluable and add to the efficacy of this therapeutic technique.

Chronic pain is experienced by up to 50% of patients following such surgeries as thoracotomy, mastectomy, and limb amputation. Recent literature suggests hyperalgesia after surgery can occur either due to nervous system sensitization by surgical nociception or as an effect of anesthetic drugs (narcotics and inhaled agents). Such limitations prompt the search for new approaches to managing pain. Neural Therapy: Applied Neurophysiology and Other Topics presents to physicians in North America what is considered by many to be an alternative, integrative or complementary approach to treating pain. Regardless of whether or not our practice of anesthesia involves pain clinic work, Neural Therapy presents options for the care of our patients in and out of the Operative Room. Unfortunately, this is only an introductory text, leaving the reader with unanswered questions if looking for more detail. Additional resources are listed but are minimal as this is a relatively new therapy in North America.

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