The Second Edition of Oxford Textbook of Pediatric Pain offers pediatricians and specialists a comprehensive, evidence-based review of pediatric pain. Contributions from a diverse, international group of over a hundred and thirty clinicians, academics, and researchers make it appealing for both the general pediatrician and specialists. It is devoted to a broad range of topics from the basic sciences to clinical sciences and the implementation of evidence-based practices in pediatric pain.

The book is exhaustive, and includes recent advances made in pediatric pain, including the application of epigenomics to pediatric pain. This new edition also bridges the knowledge-to-practice gap through strategies to mobilize individuals and organizations to implement pain evidence to practice. The text is at times esoteric but the information is organized, with a quick review at the beginning of each chapter. A case discussion with perspective ties the concepts with clinical practice.

Section 1. Introduction: This section describes the history, prevalence, distribution, and evolution of pain management after the discovery of the long-term effects of pain and injury in early life and the predisposing, correlating, and prognostic factors responsible for this phenomenon. The last chapter focuses on the development, prevention, and management principles of acute and chronic pain.

Section 2. Biological basis of pain: Pain pathways and age-related changes in nociceptive signaling in the spinal cord and periphery are delineated. A brief synopsis of the interactions between pain and immunity, particularly during the neonatal period and its long-term complications, including chronic pain, is given. It addresses the development of central nociceptive processing in the young brain, infant, and child pain experience and the genomics of pain.

Section 3. Social and psychological basis of pediatric pain: Biopsychosocial model of acute and chronic pain and resilience risk model is described. The complex and multifactorial effects of culture, the role of families, and the impact of pain on families, social relationships, and school are summarized. Gender differences in pain and mental health problems associated with pediatric chronic pain and the treatment of sleep disorders have also been detailed.

Section 4. Pain in specific pediatric population and disease: Most extensive section of this book, covers procedural, postoperative, cancer, sickle cell disease, inflammatory, neuropathic, special needs children, chronic pain, and many common pain problems in the outpatient and emergency department. Case discussion and perspectives highlight clinical implications. Assessment scale and scoring systems for various diseases and procedures are included. Quick access to information is provided with supplemental tables and diagrams.

Section 5. Measurement of Pain: Various pain assessment and quantification tools, scores, measures, and markers, including self-reporting, behavioral, physiological, and contextual measures, biomarkers, brain responses to pain, measurement of physical and psychosocial function, have been discussed. All the pain measurement tools have been supplemented by tables that provide a concise and quick insight into the section.

Section 6. Pharmacological interventions: This unit describes the pharmacokinetics and pharmacodynamics of opioids, drugs for neuropathic pain and age-based differences. Clinical opioid dose regimens with easily accessible tables and interventional techniques for chronic pain management, topical anesthetics, and sucrose are also included. A new chapter on the role of cannabis in pediatric pain management has been added.

Section 7. Psychosocial interventions: This unit provides an overview of psychotherapy tools, including cognitive behavioral therapy, and includes a helpful table on its use for procedural and chronic pain. Distraction techniques for pain associated with common pediatric procedures like immunization, venous access, burn debridement, and cancer treatments are also elaborated.
**Section 8. Physical interventions:** The chapter on occupational and physiotherapy discusses occupational therapies in both infants and youth, passive (manual, photobiomodulation, thermal therapy, therapeutic ultrasound, electrical stimulation) and active physiotherapy. Case discussion lays out these strategies for a child with quadriplegia cerebral palsy. The chapter on mother care for procedural pain in infants addresses the evidence for and effectiveness of breastfeeding, kangaroo care, and maternal presence.

**Section 9. Special topics:** This unit discusses many timely issues, including complementary and alternative medicine in children, knowledge translation, and digital health technologies. Essential organizational strategies to improve quality and pediatric pain curriculums are summarized. The ethical challenges in pain management and practical advice are offered. The chapter on sociodemographic disparities lays out the impact of race, age, sex, and access to health insurance have on the pain care children receive.

In summary, the Oxford Textbook of Pediatric Pain is one of the few books for pediatricians, solely dedicated to pediatric pain management. Digital access is included with the print version. It is an essential reference book for all units treating pediatric pain and looking to implement evidence-based practices in their clinical practice.

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