nerve stimulation) and those which have no evidence, such as the first-choice antidepressant. Unfortunately, the multidisciplinary approach—the classic treatment for chronic pain—was not evaluated.

*An Evidence-Based Resource for Pain Relief* is a very readable book and contains a minimal amount of jargon. The book is not intended as a textbook, however. Rather, it points out which treatment is more efficacious in a particular setting and places emphasis on a new direction in pain relief—that of more science and less art.

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**Manual on assisted reproduction**

*Ed: Rabe T, Diedrich K, Runnebaum B*

*Springer-Verlag Hong Kong Ltd., 701 Mirror Tower, 61 Mody Road, Tsimshatsui, Hong Kong*

HK$75, pp 951, ISBN 3 540 61134 7

*Manual on Assisted Reproduction* encapsulates the scientific, clinical, and laboratory aspects of assisted reproduction. The book is divided into two sections. The three chapters in part I are devoted to reproductive physiology and cover the physiological mechanisms involved in human reproduction (with emphasis on follicular development, sperm maturation, and oocyte interaction), as well as the physiology of the menstrual cycle. This section provides a comprehensive review of the scientific basis on which strategies in the clinical management of infertility are established.

Part II comprises 16 chapters that cover a wide spectrum of reproductive technologies—from conventional intrauterine insemination and in vitro fertilisation, to recent developments in microinjection, gamete cryopreservation, in vitro maturation of oocytes, and pre-implantation diagnosis. The use of gonadotrophins and gonadotrophin-releasing hormone agonists and antagonists in assisted reproduction are addressed, as are matters such as the ovarian hyperstimulation syndrome and the luteal phase. The understanding of the various modalities of treatment is greatly enhanced by reference to the theoretical basis of therapy. Towards the end of the book, two chapters are devoted to reproductive surgery; however, the discussion is restricted to surgical management by the endoscopic and microsurgical approaches. It must be recognised that these manipulative procedures require special training, skills, and facilities that may not be readily available in many centres. The book concludes appropriately with a final chapter on the andrological approach in assisted reproduction, which has given new perspectives in the management of male infertility.

The editors have succeeded in assembling contributions from many recognised international experts, and the practical details featured in some chapters are widely applicable and will be especially valuable to those who are inexperienced in a particular methodology or procedure. However, variations and modifications to the procedures described may be necessary, depending on the circumstances of individual laboratories. All chapters are well and concisely written; they are presented in a consistent format and are appropriately illustrated with clear line-drawings, figures, and colour plates. Salient features and information are summarised in tables and charts; references at the end of each chapter provide a valuable guide for further reading.

*Manual on Assisted Reproduction* is written primarily for scientists and clinicians who specialise in assisted reproduction. The integration of physiological, scientific, and clinical elements into one volume should appeal not only to specialists in the field, but also to non-specialists who wish to have an insight into assisted reproductive technologies.

This manual is highly recommended as an accurate guide to current techniques used in reproductive medicine. Continuous progress is inevitable and revision to take into account the latest advancements may be appropriate in the not too distant future. Considerations may also be given to the inclusion of other aspects such as implantation, assisted hatching, blastocyst culture, and related bioethical issues.

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Management of thin endometrium is a common challenge for patients undergoing assisted reproduction. The objective of this Canadian Fertility and Andrology Society (CFAS) guideline is to provide evidence-based recommendations using the GRADE (Grading of Recommendations, Assessment, Development, and Evaluation) approach. The impact and management of thin endometrium are addressed in detail.

In a 2015 systematic review and meta-analysis of the influence of endometriosis on assisted reproductive technologies outcomes from 36 studies (of 1346 articles), investigators found similar outcomes for live births between women with endometriosis who underwent in vitro fertilization and intracytoplasmic sperm injection and women without endometriosis.