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CRITICAL REVIEW

Patient blinding is a critical feature of double-blind placebo-controlled randomized controlled trials (RCTs). Yet little is known about practices for assessing and reporting blinding in chronic pain trials. This report examined rates and predictors of assessing blinding and its success in pharmacological RCTs. The results indicate that blinding is rarely assessed and often fails. Some study characteristics were associated with lower rates of assessing blinding and its success, such as pharmaceutical sponsorship and side effects. The authors recommend that all researchers conducting RCTs for chronic pain assess and report on the status of patient blinding when reporting the trial outcome.

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ON THE COVER

Paclitaxel-induced peripheral neuropathy (PIPN) and associated neuropathic pain are the most common and serious adverse effects experienced by cancer patients receiving paclitaxel treatment. These effects adversely impact daily activities and consequently the quality of life, sometimes forcing the suspension of treatment. The results of this study conclude that retigabine (a clinically available medicine) can be used to attenuate the development of paclitaxel-induced peripheral neuropathy, as shown by both morphologic and behavioral evidence. See Li, et al, page 528.

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