

# REVIEWS

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## BOOKS

**Textbook of Palliative Nursing.** *Betty Rolling Ferrell\**, *Nessa Coyle\**, editors. New York: Oxford University Press, 2001, 854 pages, \$85.

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Despite the increased attention that end-of-life care has received nationally, remarkably few textbooks are available that provide the theoretical base for the practice of hospice and palliative care nursing. With the advent of graduate programs in palliative care nursing, the availability of appropriate texts for teaching becomes even more critical. The *Textbook of Palliative Nursing* is a turning point in the history of palliative and hospice nursing. The importance of this text is highlighted by the prefaces contributed by three pioneers in the field of hospice and end-of-life care: Dame Cicely Saunders (chair, St. Christopher's Hospice, London), Florence Wald (a leader in founding the first U.S. hospice in Connecticut), and Jeanne Quint Benoliel (professor emeritus, School of Nursing at the University of Washington). The editors themselves are distinguished practitioners, researchers, and leaders in the field of palliative care. The contributing authors also include many who have assisted in improving practice, research, and publication in end-of-life care and, in particular, the assessment and management of physical, psychosocial, and spiritual symptoms as well as the understanding of grief and bereavement. Many are considered to be experts in their area of subspecialty.

The text enlarges the world of hospice and palliative care nursing beyond the United States through a substantial section on international perspectives of palliative nursing. This is a welcome addition to a text of such depth and breadth. Contributions were sub-

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mitted from Africa, Asia, Australia, and Europe; however, none were found from any of the predominantly Muslim countries of the Middle East. Although Canada and South American countries are mentioned, Mexico is noticeably absent.

The strengths of the text lie in its chapters on the assessment and management of specific physical, psychosocial, and spiritual symptoms. Pain and symptom management are the core expertise of hospice and palliative nurses. This topic organization assumes that symptoms arising from different body systems are assessed and managed similarly regardless of the disease process involved. This is true to a large extent; however, nurses practicing in end-of-life care sometimes find it difficult to locate information on the course of advanced disease, especially for noncancer, end-stage disease. Some special populations are covered very well, including the elderly, pediatric patients with cancer, the poor and underserved, and patients with AIDS.

In many instances, the *Textbook of Palliative Nursing* provides detailed information regarding pharmacologic and complementary approaches; in fact, an entire chapter focuses on complementary therapies. As palliative nurses look to pharmacologic interventions to provide relief to patients, they also need to examine more thoroughly the pitfalls of polypharmacy as multiple symptoms are managed simultaneously. This topic should be covered in future texts: How do nurses manage drug-drug interactions and limit the side effects of medications as they try to provide expert pain and symptom relief?

The nature of palliative care involves dealing with the transition of patients from "curative" care to "supportive" or "comfort" care. The chapter on establishing goals and communicating with patients and families experiencing this transition and the chapter on supporting families in palliative care are excellent. The text is unique in addressing the palliative needs of patients such as those in intensive care and rehabilitation units.

The *Textbook of Palliative Nursing* is well worth acquiring, especially for those interested in expanding and enlarging their practice and

understanding and for those who are teaching or orienting hospice and palliative care nurses.

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**Principles and Practice of Palliative Care and Supportive Oncology (2nd ed.)**. *Ann M. Berger\**, *Russell K. Portenoy*, *David E. Weissman*, editors. Philadelphia: Lippincott Williams and Wilkins, 2002, 1,200 pages, \$159.

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*Principles and Practice of Palliative Care and Supportive Oncology* is a comprehensive resource that addresses physical, psychosocial, and spiritual concerns of patients with cancer and their families. With

a focus on palliative care and supportive oncology medical practices, this book includes strategies that support patients from the time of diagnosis until death. The editors have recruited an impressive, multidisciplinary cadre of chapter authors. Although physicians (i.e., practicing oncologists) are the text's targeted audience, oncology nurses will find the content relevant and vital to cancer nursing practice.

The book is divided into six segments: symptoms and syndromes, issues in palliative care, ethical considerations in palliative care, special interventions in supportive and palliative care, special populations, and research issues in supportive and palliative care. Each chapter is concise, yet comprehensive. Numerous assessment tools, treatment algorithms, and tabular information enhance clinical utility. The second edition is even more comprehensive than the first because the editors added new chapters on hiccups, psychiatric approaches to care, bone pain, management of coagulopathies, management of heart failure, cross-cultural issues, models of palliative care, ethics and the law, music and art therapy, and complementary and alternative approaches.

Oncology nurses will find this textbook useful as a resource for daily patient care management questions and palliative care program planning. Although *Principles and Practice* includes all relevant clinical care topics, nurses

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Ease of Reference and Usability	Content Level	Book Size
🕒 Quick, on-the-spot resource	√ Basic	📖 Pocket size
🕒🕒 Moderate time requirement	√√ Intermediate	📖📖 Intermediate
🕒🕒🕒 In-depth study	√√√ Advanced and complex, prerequisite reading required	📖📖📖 Desk reference

may need a supplemental text for additional information on nursing-focused interventions for patients with cancer. For example, the chapter on bowel obstruction presents information on incidence and etiology, diagnostic measures, and surgical and medical management approaches. Not surprisingly, the chapter includes explanations of the roles of nasogastric decompression, surgical resection or bypass, percutaneous endoscopic gastrostomy (PEG), stenting, and palliative pharmacologic therapy. However, the nursing care of patients who undergo such interventions is absent. Nurses will need to consult another resource for information on the clinical care of patients with a nasogastric tube, discharge teaching for patients with a PEG tube, etc. This is not a shortcoming of the text but rather a reflection of the reality that no one book can fill all needs of the multidisciplinary team.

*Principles and Practice of Palliative Care and Supportive Oncology* is highly recommended as a core resource for all oncology nurses. Although expensive, this book is one of the few texts I would suggest nurses purchase for personal or workplace libraries. Regardless of their specialty focus in oncology, nurses will find this book a valuable resource for the many challenges associated with caring for people with cancer and their families.

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**Crossing Over: Narratives of Palliative Care.** David Barnard, Anna Towers, Patricia Boston, Yanna Lambrinidou. New York: Oxford University Press, 2000, 451 pages, \$39.95.

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The authors of *Crossing Over: Narratives of Palliative Care* have taken a unique and engaging look at the area of palliative care. This text is an “ethnographic observation” of the experience of people living, dying, and working in the world of palliative care. These individuals are those who are actively dying and those who care for and about them: family, friends, and the professional and volunteer staff members of the Hospice of Lancaster County, PA, and the Palliative Care Unit of Royal Victoria Hospital in Montreal, Canada.

The authors, including an ethicist, a nurse, a physician, and a doctoral student in folklore and medical ethnography (i.e., the study of culture), describe *Crossing Over* as a “book of stories,” “case narratives in palliative care,” and a “book useful for teaching and learning about palliative care.” The book is the result of a three-year study using the research technique of participant observer, which is seen more fre-

quently in anthropology than in medicine or health care.

The intended audience is general readers with an interest in end-of-life care and palliative care professionals and students. The book is organized in such a way that the narratives, free of commentary, can be read on their own. A chapter on qualitative research is succinct and clearly written, even for general readers. A chapter of commentary and topics for discussion on each case and an index of themes is provided for teachers and students. Twenty-nine themes emerge, including several on communication, the transition from curative to palliative care, existential suffering, growth and transformation, and children as grievers. An extensive bibliography organized to reflect all of the philosophies, interventions, and societal implications revealed or implied increases the book’s practicality.

The authors recognize the limitations of the ethnographic narrative method. They acknowledge, for example, the potential impact of their own biases in choosing and recounting the narratives, as well as the potential influence of their physical presence during the interactions they describe.

The book’s stories discuss the distinctly different existing healthcare delivery systems in Canada and the United States. Canada has long recognized the legitimacy of hospice care and, therefore, the government, at both the federal and provincial levels, is the primary payor for end-of-life care. In comparison, the United States’s Medicare and private insurers remain variable in terms of coverage of particular symptoms and even qualification for hospice care.

This is not a “hospice cures all problems” book. Not all of the professionals and volunteers presented are “saintly.” The stories of people who did not do particularly well in dedicated palliative care settings or whose families remain bitter after their deaths are presented along with those for whom hospice or the palliative care unit have been transformative at the end of life. The authors present their collection of narratives as adjuncts to more technically oriented textbooks, such as the *Oxford Textbook of Palliative Medicine*. Narratives are well suited to portray the physical, psychological, and social dimensions or terminal illness, and the dynamics of the caring relationship. Although acknowledging the important contributions of such well-known authors as Byock, Kearney, and Quill, the authors of *Crossing Over* take exception to the narrative point of view of each of these researchers. They are seen as emphasizing the role of the physician at the expense of other caregivers and for giving insufficient voice to patients and families.

Education for palliative care requires a solid clinical foundation. A variety of textbooks and handbooks that address specific symptom and psychosocial issues have been published in recent years. The process of self-reflection that is inherent in caring for the dying is more difficult to describe. Through the presentation of

the multiple viewpoints of these cases and, more explicitly, through identified themes and case-specific questions, the authors provide a way for individuals and palliative care professionals to explore the fundamental issues of ethics, societal values, and one’s place in the care of the dying.

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## Other Books

**A Time for Everything.** Michael Martinez. Albuquerque, NM: Significant Ties, 2002, 95 pages, hardcover binder, \$28.95.

Authored by a sculptor and business entrepreneur, this unique and thoughtful publication that is part guidebook and part workbook is aimed at assisting readers in addressing the numerous issues, struggles, and tasks that individuals face in planning for their own death and in considering their own legacy.

## W E B S I T E



**Name of site:** Center to Advance Palliative Care (CAPC)

**URL:** [www.capcmssm.org](http://www.capcmssm.org)

**Authorship:** Group: Mount Sinai School of Medicine

**Privacy statement:** present, comprehensive, and easy to find

**Disclosure statement:** present, comprehensive, and easy to find; supported by the Robert Wood Johnson Foundation

**Content highlights:** CAPC is a national initiative available to hospitals and other healthcare settings interested in developing palliative care programs. The Center has resources for physicians, nurses, educators, policymakers, researchers, payors, students, and patients. The Web site offers practical advice on building a palliative care program, including writing a business plan. This site is easy to navigate and fast loading and offers a news section, excellent references, case studies, and an extensive list of resources. CAPC also sponsors regular regional and national meetings designed to assist programs in early stages of development.

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