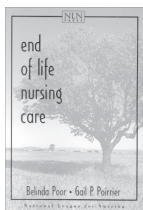


BOOKS

End of Life Nursing Care. *Belinda Poor**, *Gail P. Poirrier* (Eds.). Boston: Jones and Bartlett and the National League for Nursing, 2001, 489 pages, \$32.95.

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Because of growing recognition that nursing textbooks and curricula are inadequate to prepare nurses to deliver quality end-of-life care, authors are attempting to fill the void. This book is designed to meet the needs of both undergraduate and graduate nursing students learning to care for the dying. Chapters are grouped into larger instructional units, including theoretical foundations and holistic models of care; the grief process, responses to loss, and ethical and legal considerations; patient-centered care concepts; communication; management of specific terminal illnesses; issues across the lifespan; pathophysiology of the death and dying process; and caring for the caregiver. The book's editors have compiled a multidisciplinary group of authors, primarily from a small region of the United States.

The editors' intent to provide a comprehensive resource is admirable, given the rapidly growing body of research and clinical knowledge specific to end-of-life care. The strength of this publication is the inclusion of instructional aids for both the teacher and the learner. Each instructional unit includes behavioral learning objectives, critical thinking activities, and suggested teaching/learning exercises that are designed to increase students' understanding of the topic and enhance their decision-making abilities. Many chapters include case scenarios that allow students to evaluate their own decision-making abilities, choices, and outcomes and to employ their new skills and knowledge for the benefits of future patients.

The book does, however, have substantial limitations. Numerous redundancies disrupt the flow of concepts from one chapter to the

next. For example, the basic goals and concepts of palliative care are defined repeatedly throughout the text by a variety of different authors. In addition, many authors repeat similar descriptions of the Kubler-Ross model of facing death and dying within various chapters. The theoretical foundations unit is divided into three short chapters with some redundant material that easily could be condensed into a single, integrated discussion of relevant theories.

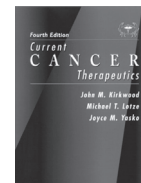
The chapter on ethics and end-of-life care (authored by a non-nurse) includes some unusual observations and advice. The importance of discussion between patients and their healthcare proxies is emphasized by the admonishment that "promises by the patient to return to haunt the agent who does not follow (the patient's) wishes are sometimes effective, but trust in the integrity of the agent is the most effective guarantee" (p. 89). Readers also are advised that "patients and families who are unwilling to give up any medical intervention in hopes of a divine miracle can be reminded that they do not need to put off dying in hopes of a miracle. Within the Christian faith, Jesus raised Lazarus, even though he had been dead for three days" (p. 90). Perhaps a nurse author could have offered more appropriate guidance for managing requests for medically futile care.

In summary, this book discusses a wide variety of topics specific to end-of-life care. Nurse educators who use it as a core resource should be selective in deciding which chapters to assign and should consider supplementing assignments with other articles that reflect state-of-the-art palliative care from nationally known leaders in this field.

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Current Cancer Therapeutics (4th ed.). *John M. Kirkwood, Michael T. Lotze, Joyce M. Yasko**. Philadelphia: Current Medicine, Inc., 2001, 490 pages, \$79.95.

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The rapid introduction of new information about the molecular basis of cancer, coupled with new agents, biologics, and combination treatments, makes cancer management increasingly more complex. This reference is designed to provide a concise overview of current cancer treatment modalities for the practicing physician, nurse, and pharmacist.

The manual focuses on four major topics: agents; specific neoplasms and therapeutic protocols; supportive care; and clinical trials data collection. The section on drugs includes a chapter focusing on each major class of agent or biologic. An introductory overview discusses the pharmacokinetics, approved indications, toxicities, and mechanisms of resistance of each agent, followed by a detailed listing of each agent in the class. Dosage and administration guidelines, as well as patient management information, nursing interventions, and information for patients, make these particularly helpful. The page layout for each agent is the same, making it easy to find needed information quickly.

The section on specific cancers and their treatments comprises the bulk of the manual. An overview of the specific disease type, while brief, is thorough and as comprehensive as space will allow. The writing, while dense, is easily understandable and supplemented by tables and algorithms. A focus on clinical data provides support for treatment regimens, and mention of new treatment strategies gives a glimpse of what is to come. Each chapter is

Ease of Reference and Usability

- 🕒 Quick, on-the-spot resource
- 🕒🕒 Moderate time requirement
- 🕒🕒🕒 In-depth study

Content Level

- ✓ Brief, with more questions raised than answered
- ✓✓ Useful, supplemental resources required
- ✓✓✓ Thorough discussion of topic; can stand alone

Book Size

- 👤 Pocket size
- 👤👤 Intermediate
- 👤👤👤 Desk reference

* *Oncology Nursing Society member*


followed by specific treatment regimens that provide flow diagrams for dosage and scheduling. Bullet points on toxicities, drug interactions, special precautions, and nursing interventions add to the usefulness of the information, yet they generally are kept to one page and follow a format similar to that used in the drug section, adding to their ease of use in the clinical setting.

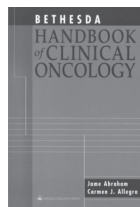
The remainder of the manual is dedicated to supportive care and clinical trials data collection. The format of these chapters is similar to that of prior ones—an overview followed by specific information on a symptom or toxicity. These one-page guides highlight essentials of management in a standardized format. Although not as detailed as texts that are dedicated solely to symptom management, the content is accurate and provides helpful suggestions for managing toxicities that are supported by research when available. From a nursing perspective, the information is adequate but could have been richer if space would have allowed. The clinical trials chapter stresses the need for uniform data collection and reporting and provides examples of synoptic pathology reports that standardize disease reporting.

This very comprehensive manual contains a wealth of information in a relatively small space. At first, it may appear overwhelming due to the density of the written word. The use of standardized single-page flow sheets for each treatment, disease, and symptom adds to its ease of use in the clinical setting. The authors thoroughly have researched each topic and are recognized experts in their content area. They have made every effort to present accurate and up-to-date treatment options in a concise, easy-to-use guideline. This manual is especially suited for use in a general oncology setting where a broad base of knowledge is critical to providing quality cancer care.

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Bethesda Handbook of Clinical Oncology.
*Jame Abraham, Carmen J. Allegra (Eds.).
Philadelphia: Lippincott Williams & Wilkins,
2001, 688 pages, \$39.95.*

   Softcover



This compact paperback manual, coauthored by two physicians, is designed as a quick reference for the clinical management of a variety of cancers and cancer-related complications. The content is presented at an advanced level and would be an asset to the library of many physicians, as well as oncology ad-

vanced practice nurses (APNs). The book is divided into chapters that contain text, as well as tables and algorithms designed for quick reference. The initial two-thirds of the book focuses on overviews of the most commonly encountered solid tumors and hematologic malignancies. The final one-third is devoted to miscellaneous cancer-related topics, such as supportive care, oncologic emergencies, and various oncology procedures. The book concludes with a comprehensive appendix of anticancer agents, including not only chemotherapy drugs but also hormonal agents and monoclonal antibodies. The appendix provides data pertaining to drug action, indications, dosage, pharmacokinetics, and adverse effects, all presented in a concise format.

Although this guide does not discuss specific nursing issues related to cancer care, it differs from many other medically oriented texts because it provides a limited review of topics pertinent to supportive oncology. For example, several chapters are devoted to such problems as nausea, pain, depression, and anorexia, and one chapter is devoted to end-of-life issues. However, common symptoms, such as fatigue and bowel dysfunction, are not addressed. Additional benefits of this manual are its clear illustrations and helpful algorithms for a variety of management dilemmas, as well as a handy anticancer appendix.

Unfortunately, however, this handbook at times becomes too cumbersome because of the amount of text involved. A more straightforward approach may have been to limit the amount of written text and supplement it with bulleted highlights and more concise tables. Additional criticism involves the bulky size of the manual, which would be more convenient in a downsized version to accommodate easier transport from office to clinic.

Overall, this handbook provides APNs with a fairly comprehensive review of common malignancies and information about other pertinent issues related to the complex care of patients with cancer.

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V I D E O

A Celebration of Life: Rising Above Breast Cancer. *Sherborne, MA: Aquarius Healthcare Videos, 2000, 58 minutes, \$150.*

   Video

Hosted by legendary singer Nancy Wilson, this extremely professional production is dedicated to exploring the fact that breast cancer often is detected in a later stage in African-American women. The video examines this

fact and three possible crucial reasons that may lead to this outcome: fear, lack of access, and racial and economic bias. It features the determined efforts of nationwide programs created to educate the public, facilitate health care, and save lives from the inner cities of New York, Chicago, and California to the rural southern regions of the United States. Information is provided about risk factors and the possible implication for late detection.

Harold Freeman, MD, discusses national statistics and those local to New York City. He shows the value of the Harlem Hospital Navigator Program and describes the goals of the North Carolina Breast Cancer Screening Program, which uses the Lay Health Advisor Model to provide access to the community. The video also includes information about the Association of Black Women Physicians' program of reaching out to women in Los Angeles, CA, as well as American Cancer Society (ACS) programs in Oakland, CA. Another program highlighted is the Chicago area's ACS "Stay Beautiful—Stay Alive" program. The video shows healthcare providers in the Chicago program discussing their goals and providing information and education in community beauty parlors and salons. Another segment about Washington, DC, shows patients in a support group setting who have been treated at Howard University. Some of these patients talk about how they have faced recurrence and share the fact that they were able to cope by using the group dynamic process as a powerful tool that allowed them to take charge of their lives.

A Celebration of Life is a well-made production that provides a very unique view of breast cancer in the African-American community nationwide. Suitable for both lay and professional audiences, it would be particularly useful for individuals planning professional education programs dealing with cultural competency. The length of the video (58 minutes) makes presenting it at community outreach events difficult. I showed it to survivors and professionals at our cancer resource center, and each group found it valuable.

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