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**Book review**


*Terminal Illness: A Guide to Nursing Care* is a very informative and easy book to read. The author has a very inviting writing style that engages the reader throughout the text. The book is well organized and is divided into four parts: Psychosocial Care, Pain and Symptom Management, Advanced Cancer: Metastatic Spread, Common Symptoms, and Assessment and Management of Other Terminal Illnesses. Each chapter begins with the identification of key points or pertinent information to be found within the chapter. This is the second edition, with revised and updated information and references for palliative care. This book is very appropriate for nurses who work with terminally ill patients and for educators who need a comprehensive text for students at an upper-division or graduate level.

When first leafing through the book, many nurses will automatically go to the second section, Unit II: Pain and Symptom Management. However, they will need to go back to Unit I or they will miss a very important part of the foundation of caring for terminally ill patients. The first chapter is a basic overview of hospice and palliative care, of interest for a novice entering the field and for beginning students. In hospice and palliative care, the patient is never cared for in isolation, but as a “unit” with family members and friends. Chapters 2 through 7 envelop the essence of psychosocial and spiritual care. It is obvious that Mr. Kemp is in tune with the hesitance of many nurses in meeting psychosocial and spiritual needs, but more so with spiritual needs. Kemp defines spiritual care as follows:

“...in terminal illness [spiritual care] may be thought of as going with a person on a journey through a sometimes fearsome personal landscape. Going with (or watching with) means being there to help, but not guide, the exploration through the fears, doubts, failures, mistakes, regrets, and feelings of abandonment that are part of many lives.”

Kemp identifies barriers that stand in the way of nurses addressing spiritual care issues and gives practical “tips” on how to provide spiritual care to patients and families. Chapter 5 reviews basic beliefs on death and dying of the major religions: Judaism, Christianity, Islam, Hinduism, and Buddhism. Kemp defines the information in this chapter as a “caveat,” however. It includes the major tenets, aftercare, and funeral and burial practices. This section concludes with chapters on grief and bereavement care, ethics, and the issue of stress and health care providers.

Unit II, Pain and Symptom Management, including chapters 10 through 21, is well written and also contains a great deal of information to assist nurses in providing compassionate care with end-of-life issues. Kemp states “managing symptoms is the sine qua non of palliative care.” Chapters 10 through 12 address basic principles of pain management, provide an overview of types of pain, pain syndromes, and assessment techniques, and also discuss techniques of pain management. Chapter 12 is a very comprehensive review of pharmacologic management of pain. This chapter includes discussion of the World Health Organization’s three-step analgesic ladder, adjuvant medications, use of opioids, and more. Chapters 13 through 21 include symptom management and a discussion of imminent death, or the last 48 hours. For the latter, Kemp is very descriptive in “painting” the dying process and emphasizes the need for family education. All of the chapters in this section are comprehensive and helpful.

Units III and IV contain excellent material for nurses who have minimal clinical experience in oncology nursing. Chapters 22 through 26 review cancers of the major organs. The tables in each of these chapters are extremely good, easy-to-follow reference guides.

Another strong point of the book is that it includes coverage of terminal and end-stage illnesses other than cancer. Chapters 27 through 30 address AIDS, degenerative neurologic disorders (e.g., MS, Parkinson’s, ALS, and myasthenia gravis, Alzheimer’s, and end-stage cardiovascular and pulmonary disease).

Overall, I thoroughly enjoyed this book. Any nurse (or non-nurse) working in hospice and palliative care or on a general medical or surgical floor would benefit from the book.

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