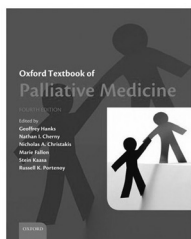


## Oxford Textbook of Palliative Medicine, Fourth Edition

Geoffrey Hanks, Nathan I. Cherny, Nicholas A. Christakis, Marie Fallon, Stein Kassa, Russell K. Portenoy, eds

Oxford, UK, Oxford University Press, 2010, 1,666 pp., \$345, hardcover.



The fourth edition of the *Oxford Textbook of Palliative Medicine* has been republished and updated in 2010 with the participation of four new editors, including Russell K. Portenoy and Nicholas A. Christakis from the United States.

This textbook continues to be the premier textbook in the emerging field of palliative medicine. It is written in a culturally sensitive way so that it appeals to medical students, resident physicians, attending physicians in primary care fields, palliative medicine, and oncology, as well as pastoral care specialists, social workers, and nurses. As a teacher of palliative medicine principles in a family medicine residency, I am aware of the difficulties in influencing young physicians to be team players and sensitive to other disciplines when it comes to patient care. This textbook is written with the unifying theme of presenting new information in this burgeoning field and at the same time respecting the wealth of knowledge that all of the various fields contribute to end-of-life care. I can really see this text being used as a major reference for physicians, nurses, social workers, and pastoral care counselors.

The book is arranged so that the early part of the text gives the reader an overall understanding of the history of the field and its international roots. Subsequent chapters concentrate on giving the reader up-to-date knowledge of pharmacology, new techniques in cancer management, and the management of common symptoms and disorders. I particularly found the section on symptom management to be well written and a “must read” for family medicine resident physicians. The sections on pediatric care and symptom management were presented well, and this important aspect of palliative medicine is not always covered in primary care curriculum.

The authors spent an appropriate section discussing the latest complementary therapies in palliative medicine. This is an area that is not covered in other textbooks in the field and is certainly on the minds of all our patients.

The section on the terminal phase of life included excellent discussions on cardiopulmonary resuscitation, seeking guidance from substitute decision makers, situations regarding decreased oral intake, and routes of administering medications. This is important reading for all primary care providers. The chapter on Sedation in palliative medicine is thought provoking and deals with many of the ethical issues that we address every day in our goal to provide hope and appropriate caring for those that are suffering despite our best efforts.

As an educator in family medicine and in geriatrics, I found the section on Education and Training to be an essential tool. This new chapter addresses curricular and educational issues important in this discipline. An appendix clearly outlines the basic competencies in palliative medicine and gives educators an appropriate structure from which to evaluate and teach our colleagues.

There are two suggestions for improvement for future editions of this text. In some cases, references were not consistently updated in the index so that the references were sometimes one page off from where they were supposed to be in the text. Also, there were some misspelled words scattered randomly in the text. However, these are relatively minor concerns for what generally is a superb addition to every health care professional’s library.

This textbook is the “Bible” in palliative medicine and should be in every primary care residency’s library. In addition, certain sections should be required reading for all of those that are providing end-of-life care or trying to relieve suffering. *The Oxford Textbook of Palliative Medicine* is a “must have” reference book.

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## The Addict: One Patient, One Doctor, One Year

Michael Stein

New York, Harper Collins, 2009, 276 pp., \$25.99, hardcover



Michael Stein is a professor of medicine and community health at Brown University and an internist certified to administer buprenorphine. He has worked with and been fascinated by addicts since he was in medical school. He is the author of

five books, including *The Lonely Patient—How We Experience Illness*. In *The Addict*, Stein explains several concepts about addiction to the lay reader in simple prose.

The intended audience includes primary care physicians and the lay public. The goal of the book is to chronicle the life of an addict as it intersects with treatment—detailing her aspirations and struggles. It examines office treatment with buprenorphine as an opportunity for the addict to avoid the stigma associated with methadone, noting that the behavior of persons on either drug is likely similar. Stein effectively demystifies outpatient addiction treatment for physicians and potential patients alike; he describes the art of history-taking as well as initiation of a physician-patient relationship to persons naïve to medical care.

This book includes up-to-date information about buprenorphine and methadone prescribing in the United States. The narrative is chronologically arranged in 10 chapters spanning a 1-year timeline with 2 additional years of follow-through. The first chapter introduces the primary patient of the book, a 29-year-old female college graduate who presented unreferred for treatment after 16 years of addiction to various substances, stating “There’s never been a drug I didn’t like.” Next is described a contrast between one addict submitting to

treatment and maintaining a life goal and another wanting to continue using a drug. The third chapter reports on commencement of treatment and stages of withdrawal. Chapter Four documents continued Vicodin use and discusses differences between methadone and buprenorphine therapies for addiction. The next chapter considers how depression could be a co-morbidity, cause, or effect of addiction. Chapter Six notes that deceit may characterize the operations of an addict but likely predate the addiction rather than result from it. The following two chapters review relapse and admission of anxiety predating drug use as well as the ease of relapse. The ninth chapter asks “When is addiction over?” and reviews the use of substances to assuage preexisting guilt. Chapter Ten chronicles successes in addiction treatment and ends with an epilogue.

The book an excellent value, engaging and well-written, and worth the time spent reading. I am unaware of any similar books. I recommend it to students and practitioners of medicine, indeed all who prescribe drugs with addictive potential or who may encounter an “addict.”

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