

## BOOK REVIEWS

**Coping with Suicide.**  
**Maggie H.**  
**Seldon Press. London.**  
**ISBN 0-85969-871-8**

Maggie Helen is an experienced counsellor, but her knowledge of suicide and its effects extends beyond that of the therapist. Her own mother committed suicide when the author was ten years old, and therefore she understands at first hand its devastating consequences.

'Coping with Suicide' is aimed first and foremost at those who are left behind - the 'suicide survivors'. It is a self help guide, one of Sheldon's 'Overcoming Common Problems' series, but it is not intended as a substitute for professional advice.

In an easily digestible 100 pages, the author deals with a broad range of suicide related issues, including statistical information, risk factors, youth suicide, and the impact of suicide on the family. She addresses the reader directly, drawing upon true stories which, while potentially upsetting in themselves, do aim to lessen the terrible isolation which 'suicide survivors' are apt to feel, as they come to inhabit what one contributor calls 'a completely new universe'. Especially useful is her way of addressing the guilt which is often felt, by emphasising, for example, that no matter what we do, we are not always ultimately able to save a loved one from suicide; that many young suicide victims have enjoyed a happy and settled childhood, and that such a death may remain forever an enigma.

This book is useful for those newly bereaved by suicide, and also for those who are searching for ways to go on with life and face the future. It would also be useful reading for pastors, counsellors, and indeed for any who are looking both for a greater understanding of the issues, and for practical ways to help others.

*Georgina Nelson, chaplain St. John's hospital  
Livingston*

**Procedure-related Cancer Pain in Children**  
**Liossi C.**  
**Radcliffe Medical Press Ltd**  
**ISBN 1 85775 453 0**

The concluding chapter of this practical book includes a sentence summarising the aims of the author. "Children must be adequately prepared for all invasive and diagnostic procedures, from finger-pricks to bone marrow aspirations and imaging scans, and this requires pain and distress prevention to be placed higher up the list of priorities in each child's overall plan of care."

The first chapter introduces the problem by stating the importance of good management of pain and painful procedures to reduce the long-term impact on the child's ability to cope with their illness. Procedure related pain is the most distressing in 50% of patients. There is a review of the physiology of pain as a basis for understanding the interventions discussed in later chapters.

Chapter 2 discusses the assessment of pain as an integral part of the cycle of treatment of a patient. The advantages and disadvantages of various scoring systems are discussed together with non-verbal communication such as drawings. It is important to include an assessment of parental distress and its impact on the child.

The pharmacological approach is outlined in Chapter 3 using drugs to treat various aspects of the painful experience, for example physical pain, fear, memory and awareness. There follow two chapters on psychological approaches in patient management. The first covers methods such as preparation, deep breathing, distraction, relaxation, play therapy and cognitive therapy with practical examples of these techniques. Hypnosis is described in the next chapter, indicating that children aged 7-13 years are the most receptive. It emphasises the importance of the attitude of staff and parents in supporting the child, and provides a review of published evidence for the benefits of hypnosis in reducing both pain and anxiety.

The final chapter on "Integrated Care" brings together the preparatory work of the previous chapters. The importance of a team approach is emphasised and how the various techniques can be tailored to the needs of each patient. The reality of the shortage of psychologists is mentioned but does not detract from introducing the principles into practice.

The book succeeds in providing an integrated approach to the problem, helped by illustrative case histories. It will be a valuable resource for all staff in my unit.

*Dr DJ King, Consultant Paediatric Haematologist,  
Royal Aberdeen Children's Hospital, Aberdeen*

### **Using Information and Communication Technology in Healthcare**

**Tyrrell S.**

**Radcliffe Medical Press**

**ISBN**

This book is aimed at any healthcare professional who wishes to gain an insight, and some explanation, into the information and communication systems, which are accessible to them. The author states that the purpose of the book is 'to assist staff in the health sector to harness health information confidently and effectively'.

It is no mean feat to attempt to write a book in a subject area that is announcing new developments on what feels like a daily basis. However, this book manages to successfully cover the main topic areas in a way that will hopefully prevent it being dated too quickly. The main emphasis is on the principles of information systems, rather than the current market position, and the author effectively utilises health-related examples to aid the reader in the understanding of how such technologies could be applied. The writer's style is easy to read and understand and is aided by a very helpful glossary which explains all the 'techy' terms you'd ever want to know.

This is not a book to be read from cover to cover however, and should be used as a reference guide for specific areas of interest. Nor is it a book for anyone who already has a good general knowledge of information systems. It is however a good gen-

eral introduction for those that wish to know more than just how to work their PC.

*Alison Cowie is Regional Information Analyst,  
Marie Curie Cancer Care.*

### **Health and Social Change - A critical theory**

**Scambler G.**

**Open University Press**

**ISBN 0 335 20479 1**

This is not an easy book. It is densely written in language which may prove inaccessible to those who like me, are not well versed in social theory and it uses concepts and abstractions which are likely to be unfamiliar to non-specialists. Nevertheless it repays the perseverance required to read it. If sometimes I felt like an old-time gold prospector toiling at length through the early social theory chapters to discover only the occasional nugget, the rich seams found in the latter part of the book amply rewarded my efforts.

Graham Scambler, Professor of Medical Sociology and Director of the Centre for Medical Sociology, Social Theory and Health at University College London, writes from a critical neo-Marxist perspective and leans heavily on the writings of Habermas, especially his general theory of the colonisation of the lifeworld.

The central theses of the book are: that health, illness and medicine are affected by social change; that in Britain we now live in a system of disorganised capitalism, and that class, gender and ethnicity are important determinants of health and health care. The issues discussed which are most likely to be of interest to chaplains are: the defining features of post modernism; globalisation; individualisation; health care developments between 1900 and 2000; NHS reform in Britain under Thatcher; the Acheson Report; Clinton's failure to reform health care in the USA; Blair's Third Way; PFI; alternative and complementary medicine; social protest movements; and self-help groups. There are tables and statistics which demonstrate conclusively, if not for the first time, the relationship between poverty, unemployment and mortality. Scambler criticises the GBs (Greedy Bastards), the small capitalist elite, who, he claims, are supported by the state and exercise a malign influence on global and UK health.

Scambler identifies six types of capital flow - biological, psychological, social, cultural, spatial and material and discusses the ways these work to the advantage of some and the disadvantage of others. He introduces the intriguing concept of redemptive transformation and urges those of a like mind (including chaplains and faith communities?) to work together to transform society.

Scambler is clearly a leading medical sociologist but I found his style of writing in places well nigh impenetrable. Words can obscure as well as enlighten. Sentences are long and complex; paragraphs suffer from too frequent use of references - in one alone I counted ten - too many quotation marks, brackets and italics. The bibliography runs to an extraordinary 23 pages! Is it too much to ask that professors and the editors of Open University series be not only experts in their subject but able to communicate their knowledge and insights simply, clearly and in plain English? If, as Scambler suggests, we are to cooperate to build a healthier society, not only the GBs but also academics, chaplains, members of faith communities and each and every individual must face the challenge and the sacrifice of redemptive transformation.

*Stewart McGregor retired in 1998 from the posts of Chaplain to the Royal Infirmary of Edinburgh and part-time Senior Lecturer in the Department of Christian Ethics and Practical Theology at Edinburgh University*

### **Communicating with Dying People and their Relatives**

**Lugton J.**

**Radcliffe Medical Press**

**ISBN 1-85775-584-7**

I was pleased to be asked to review this book by Jean Lugton having been familiar with the author's previous work on communication in terminal care.

The book explores the emotional problems patients, relatives and professionals experience and the support they need when someone is dying. The discussions on assessing continuing needs for information and planning support for the family were very helpful and the examples used demonstrated the problems and uncertainties relatives are regularly faced with.

I was impressed by the readable and user-friendly style of the book. One almost felt compelled to answer and discuss the questions at the end of each chapter because they are so relevant to situations that practitioners are faced with everyday and they encourage the reader to reflect on their own practice.

It was obvious that the author was not simply a theorist; it is evident that her research underpins good practice and one feels able to relate the theory to practice in everyday situations.

The book is a must for nurses as well as other professionals dealing with death and dying, and a very useful resource for teachers.

*Agnes Quinn is Nurse Teacher, St Andrew's Hospice, Airdrie*

### **Faith in Hospices: Spiritual Care and the end of life**

**Murray D**

**SPCK**

**ISBN 0-281-05228-X**

This book is a reflection on a long hospice chaplaincy. After an informed reflection on the Hospice movement you find yourself being led through the different ways in which we can think of hospices: as Church, Home, School, Laboratory. If you are expecting touchy feely chaplaincy waffle you will be disappointed. This is a frank open and honest look at Faith in its broadest sense in Hospices.

The author does not run from the difficult questions, of hospice funding and image, or religious foundations and traditions but reflects on the difficulties and how reality often solves them. There are thoughtful and clear sections on euthanasia, spiritual healing and alternative and complimentary therapies.

The chapter on the Hospice as School gives a real insight into education in hospices and the education of theological students in particular. An example of the down to earth approach of this book and its responses to difficult questions is seen in my favourite paragraph: *Occasionally the hospice has been as irrelevant to 'real ministry'... "Do you confront your patients with eth possibility of hell?" is a question designed to upset hospice chaplains... but when*

*students come on placement the theological difficulties seem to be quickly resolved when real people are encountered.*

This book is an enjoyable and informative read.

*David Mitchell is chaplain at the Marie Curie Centre, Hunters Hill, Glasgow*