
This “how to do it” text authored by noted palliative specialist Dr. Janet Abrahm is a nicely organized, thoughtful, thorough book that should be on the shelf of all who care for cancer patients.

The book is logically organized, with Part I addressing unique concerns of cancer patients and their families, including the delivery of bad news, through treatment, and on into the end stages of life. In each of these chapters pragmatism is the rule, with patient vignettes used to emphasize certain important points. Bold boxes called “Practice Points,” containing practical, bulleted issues, are nicely intermingled with the text. An excellent example is found on page 19, titled “Discussing advance care planning.” These boxes highlight and emphasize particular aspects of the chapter.

Part II of the book deals with specific pain and symptom management issues. Again, this section is logically organized, with assessment coming first. Next, pharmacologic and nonpharmacologic pain management strategies are explored. The next chapter explores managing other distressing symptoms. Finally, the chapter titled “The Last Days ... and The Bereaved” addresses practical management of the dying patient and care of the family during this period.

Pharmacologic management of pain and other bothersome symptoms is handled with superb precision and excellent background research, in addition to the practical “how to do it” knowledge. One notable deficit in the pharmacologic section is the lack of in-depth information on methadone dosing and conversion to methadone. This is likely due to the recent (post-publication) upswing in the use of methadone for analgesia in cancer pain, and I am certain future editions will address this thoroughly.

Dr. Abrahm coverage of the anesthetic/surgical techniques, including neuraxial infusions, nerve blocks, and neural ablation, is very thorough and well researched. She provides a nice overview of the role of these therapies in refractory pain syndromes, with an in-depth description of each technique with the indications and evidence for these modalities. I have not previously encountered such a logical, easy to understand, precise, and accurate description of the techniques that I often use in my own practice.

It is rare to find a readable, useful juxtaposition of well-referenced scholarly background research and pragmatic “how to do it” knowledge. This book nicely combines these two often-exclusive domains. The “how to do it” portions will be most useful for the palliative medicine, oncology trainee, hospice or supportive care nurse, and others in this field. The more experienced clinicians in the field will appreciate the depth of research, extensive references, and the very helpful detailed explanation of how the author handles various problematic issues. The title suggests that this book is expressly for physicians, and I would suggest modifying the title in future editions, as many advanced practitioners, nurses, and family members would benefit from this well-written text.

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