

## ELDER ABUSE: A NEGLECTED SYNDROME

activated, providing adequate assistance in the least disruptive manner with continuing communication between all groups involved. This is the intent with new model laws being developed in the state of Kentucky.

Geriatricians can contribute additionally by identifying gaps and inadequacies in the current system and advocating for change *with the intent of elevating the problem of elder abuse and neglect at least to the level of child abuse and neglect.*

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### CONCISE OXFORD TEXTBOOK OF MEDICINE

**Edited by:** J.G.G. Ledingham and David A. Warrell

**Publisher:** Oxford University Press, Great Clarendon Street, Oxford OX2 6DP, UK

ISBN 0 19 262870 4. 2000

2007 pages. Hard Cover. \$127.95

**Overall Rating:** Very good.

These are tenuous times for 'textbooks' of all stripes, let alone Textbooks of Medicine. Increasing fragmentation of the marketplace and advances of electronic means over print media make it ever more difficult to establish a significant presence. Focus on evidence-based medicine and increasing ease of accessing sources of information from all data bases makes the use of textbooks much less frequent. Medical practice is becoming ever more compartmentalized and sub-specialized. It is evolving faster than ever. Is there a role for a new textbook that takes a bird's eye view of the whole of internal medicine? The answer – a resounding yes indeed.

The editors argue that there will always be a need for a reference that gives us an entry point for any disease that we encounter, that points us in the right

direction when we wish to analyze our patients in more detail, that offers a reasonable grounding in both the scientific and pastoral aspects of internal medicine and that presents a more than usual global perspective of disease and illness. These are the goals that the editors set for themselves, and they achieve these goals admirably the vast majority of the time.

**Target Audience:** The editors identify their audience as medical students, physicians in training, general practitioners and general internists.

**Strengths:** Clear organization, comprehensiveness, and multiple references for further reading when greater detail is desirable. The layout is excellent and each section follows a logical and easily usable outline.

**Weaknesses:** Given the vastness of the area covered, it is understandable that some areas are covered superficially. There are only two chapters focusing on gerontology, titled; 'Medicine in old age' and 'Abuse of elderly people'. Some references for further reading are dated (e.g. 1952); more aggressive editing for this offspring of Oxford Textbook of Medicine would correct this.

**Overall:** A useful tool in a busy family physician's office. Very handy as a quick reference or as a guide for further reading on any subject in the area of internal medicine.

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### **MEETING DEATH: In Hospital, Hospice, and at Home**

**Author:** Heather Robertson

**Publisher:** McClelland & Stewart Ltd., 481 University Ave, Toronto, ON, M5G 2E9.

Published 2000, ISBN 0-7710-7562-6, Hard Cover (Cloth), 300 pp: \$34.99.

**Category:** Non-fiction

**Overall Rating:** Excellent

**Important Feature:** Brings to the forefront the urgent need for increased and focused attention in the areas of Universal Hospice and Palliative Care programs.

**Intended Audience:** General/Health-Care Professionals.

The author has written many Canadian award-win-

ning non-fiction books. In reading this book, I am reminded of a quote by Woody Allan: "I'm not afraid of dying, I just don't want to be there when it happens."

This book is an excellent and informative read. Death takes most of us by surprise, and we never seem fully prepared to accept it. Her factual story, with first-hand accounts, sadly enough is one that is relived throughout both urban and rural Canada, over and over again.

The health-care system is geared to sustain life, and not to encourage a peaceful, nor in many cases dignified death. Quality end-of-life care should not be a hit or miss process. *MEETING DEATH* looks at how the health-care system and health-care practitioners deal with the dying, and the inadequate state of palliative care in Canada. To have it written with style is a tribute to the brilliant writing abilities of Heather Robertson.

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### **CAREGIVING — LEISURE AND AGING**

**Editor:** M. Jean Keller, EdD, CTRS

**Publisher:** the Haworth Press, Binghamton, NY, USA, 1999. 107 pp with index,

ISBN 0-7890-0776-2 (Hard cover: \$39.95 US);

ISBN 0-7890-07991 (Soft cover: \$19.95)

This edited book is a collection of six separate but related chapters, each focusing on caregiving for the aged (mostly within the family). It moves beyond the actual provision of care and discusses how taking on such a responsibility interrelates with other aspects of life and, in particular, leisure. Given that life-expectancy is increasing, one would predict that greater numbers of 'old' people in the future will require some form of care. Couple this with changing lifestyles and unpredictable government policies, then it is imperative that we are informed about the possible impacts of being cared for or providing the care. The message in this book is primarily about the impact on those who currently provide care.

The diversity of content is reflected in the titles of the six chapters: Caregiver Health Behavior—A Review; Recreation Programs for Caregivers; Family Obligation and the Loss of Leisure; Rural vs Urban Caregivers; Leisure Education for Caregivers; and Family and Technological Interventions for Encouraging Leisure. The 14 different authors come from a range of professional backgrounds, which provides for some variation in how the notion of care and the related demands are considered. However, each relates to a common theme: caregiving is a

complex and demanding role and given little credence by society.

Each chapter is written in academic language; some are reviews of the literature while others are based on recent studies and all include a comprehensive reference list. The topic has attracted considerable attention from all sectors of society: researchers, academics, other professionals, community workers and the caregivers themselves. All seem to be searching for ways to cope and deal with what can be a demanding and exhausting role. This book provides positive support for those who are going to or have modified their lifestyle to care for others, be they family or friends. The chapters are aptly illustrated, in a narrative sense, to show how providing care can dramatically impact on the caregiver. Hence, presenting something about the strategies that others adopt as coping mechanisms is beneficial. The authors remind us that not all caregivers cope well and that this can lead to significant deterioration in quality of life.

There are many sound recommendations that warrant further exploration in appropriate settings. The book is an easy read and is useful for anyone with an interest in the topic.

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