The Left Atrium

Standing watch

Meeting death: in hospital, hospice, and at home Heather Robertson McClelland & Stewart, Toronto; 2000 352 pp. \$34.99 (cloth) ISBN 0-7710-7562-6



T quite enjoyed reading this book, in which Heather Robertson recounts her experience caring for her dying father in Winnipeg in the mid-1990s. She relates a not uncommon story of fear, fatigue and frustration, much of which derived from a lack of good explanations, clear direction and assistance for her father and herself. This experience prompted her to examine the experience of death and dying in hospital, hospice and at home across Canada. And, to put this experience in a wider context, she visited a hospice facility in Uganda, dropping in to speak with Dame Cecily Saunders, founder of St. Christopher's Hospice in London on her way there.

What she found was what most of us already know: the delivery of coordinated programs for the management of dying patients, including support for their families, is inconsistent across this country. What does exist is often misunderstood by patients, family, health professionals and society as a whole.

Whatever path we travel, we all end up at the same destination: death. Many of us are not going to go quickly or quietly, and the process of our dying may be complicated and difficult. Robertson doubts our society's commitment to ensuring that our final days, months or years are as enjoyable and comfortable as possible. She also questions why so few resources are devoted to making palliative care programs available. Throughout the book she explores her own prejudices toward palliative care, her own fears and concerns regarding her parents and their deaths, and the many complications and changes we all go through in trying to come to grips with our mortality.

Her book relates many patients' unfortunate stories. Often, these are stories of needlessly heightened anxiety and pain, missed or misleading diagnoses or prognoses, a lack of awareness of community resources by patients and families, and a lack of available expertise.

She also describes many places and programs where the delivery of care and provision of support are excellent, but sadly notes that even some of our most well-established programs are being jeopardized by financial stress.

As a family doctor who does palliative care consulting part time, I found that this book reaffirmed my own experience. We need to do a better job as citizens to ensure that our society is educated about the processes of dying and that programs to support patients and families are available and put to good use.

Robertson sums up her feelings as she walks through the door of a hospice:

Why am I here? Because the oncologist's promise to my father — you can die at home - was never fulfilled. [This hospice] is committed to supporting people with life-threatening illnesses within the comfort of their homes and families. I believe in that. I believe that it's cruel and cowardly to abandon the sick, and the dying are sick people who are getting sicker. I believe that all the sick have a right to expert, appropriate medical care, including nursing, for free. I know from experience that family members need instruction, reassurance, and companionship. I hope that if I can be there for someone else, someone will be there for me. I like the nautical term standing watch.

Robertson's journey seems to have allowed her to gain some inner peace. Her book will help readers on their own journey with dying loved ones — not only in making peace with death, but in helping to ensure that "standing watch" is given the societal importance it deserves.

Michael A. MacKenzie Family Physician Antigonish, NS

Popular mythology

Asclepius: the god of medicine

Gerald D. Hart

Royal Society of Medicine Press, London (UK); 2000 262 pp. £17.50 (paper) ISBN 1-85315-409-1



In what clearly stands as a labour of long devotion, Gerald Hart, a well-known Ontario hematologist now living in England, has given us a readily accessible and well-illustrated book about the ancient healing god and patron saint of medicine. Hart, an expert on ancient coins, is particularly effective in applying numismatics to the story of temple healing.

Hart's Asclepius reminds me of Ralph Jackson's Doctors and Diseases in the Roman Empire (British Museum Press, 1988), a book not readily available on this side of the Atlantic. Hart makes appropriate use of this text and of two earlier books about Asclepius and his rod and serpent as a symbol for doctors and the medical profession, namely Károly Kerényi's Asklepios: Archetypical Image of the Physicians' Existence, translated from the German in 1959, and The Rod and the Serpent of Asklepios (1967) by Jan Schouten, a Dutch histo-

rian. These beautifully illustrated books are now hard to find.

So why yet another addition to the Asclepian annals? Hart tells us that he

Aesculapius

hoped "to popularize Asclepius and interpret the present day use of his staff and symbol." As was true for his predecessors, Hart makes extensive use of the monumental work of Emma and Ludwig Edelstein, whose two-volume Asclepius: Collection and Interpretation of the Testimonies appeared in 1945. It would have been helpful to mention that in 1998 the Johns Hopkins University Press brought out a paperback edition of this classic work.

Religious healing, as Henry Sigerist described so well in his chapter on the Asclepian legend in the second volume of his *History of Medicine* (1961), has a very long history that continues to the present. Medicine, like all crafts or callings, has a need to remind its practi-

tioners of their origins and purposes, hence the ever-

present fascination of books such as these. Even if there is nothing startling or very new in his account, Hart serves his purpose nicely by once again making readily available a discussion of the symbols of medicine.

There are a few jarring moments. To use the

term "health care" to refer to ancient Greek or Roman practices is one. In two notes there are errors. Hart fails to mention that the work of Soranus on gynecology is readily available in an excellent translation by Owsei Temkin in a Johns Hopkins paperback edition. And to say that the British-born Elizabeth Blackwell, the first woman to receive a North American medical degree (in 1849), disguised herself as a man is not only wrong but misses the point that her feminine presence had a calming effect on the rude and boisterous farm boys who were her classmates.

All in all, Hart has provided us with a nicely produced and well-presented analysis of the origins and continuing use of the symbols of the healing god of medicine. Asclepius and his staff, with a single snake, are as enduring as medicine itself.

Gert H. Brieger William H. Welch Professor of the History of Medicine Johns Hopkins University

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Lifeworks

Focus on attention deficit

For the third consecutive year, medical students at Dalhousie University have pooled their artistic talents in an exhibition of works that reflect on a medical theme. This year's show explores issues surrounding attention deficit hyperactivity disorder.

"This [exhibition] allows us to speak to the public and provoke thought. That's one reason ADHD was chosen. This disease is often misunderstood," says Jonah Samson, a third-year medical student who originally launched the idea for an annual exhibition with an email to his classmates asking if they were interested in transforming their medical insights into works of art.

This year 38 students accepted the challenge and created installations, photographs, sound pieces, quilts, stained glass and even a diorama for *Focus: Zero In, Zoom In*, which ran for

two weeks in April at the Dalhousie Medical School.

Although the original intent was to nudge viewers into thinking about a particular medical issue and to provide a creative outlet for medical students, the annual exhibit has become a means "for students to learn about medicine in a different way," notes Samson.

In his paper collage, 1280 Right Angles, Samson tried to put himself (and the viewer) in the shoes of a child with ADHD by deliberately making concentration difficult. Brightly coloured squares within squares prevent the eye from resting on any one spot for more than a second. "The overall effect is that you can't focus on any one colour," says Samson, adding that compiling the collage was painstaking and labour intensive.

First-year student Madeline Morris looked at how ADHD affects a child's



Pat Feltmate, *The Methylphenidate Machine.* Digital image, 2001