

The book does contain an up-to-date review of the literature, which may prove helpful to researchers, but it contains little information that is new and proposes no new treatment methods. Social workers and counselors may choose to suggest the paperback edition to older clients experiencing stress and to caregivers of the elderly. As expected, the book is thorough, well written, and well thought out. *Duty Bound* is theoretically sound and establishes a method for examining a serious issue empathically.

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G. H. Weber and G. J. McCall, *The Nursing Assistant's Casebook of Elder Care*. Dover, MA: Auburn House, 1987. 227 pp., \$15.00 paper.

S. V. Saxon and M. J. Etten, *Physical Changes and Aging: A Guide for the Helping Professions* (2nd ed.). New York: Tiresias Press, 1987. 288 pp. \$11.95 paper.

The premise of George Weber and George McCall's book is that nursing home residents are entitled to as much self-determination as possible. To accomplish this goal, assistants who provide direct care must be prepared to provide psychosocial nursing care. The purpose is to help nursing assistants in nursing homes acquire skills and empathy to work with clients in a more effective and satisfying way. Case studies (105) represent a variety of psychosocial situations: 17 cases concern distress such as loneliness; 18, mental dysfunction; 10, stress between residents and families; 20, special care situations; and 10, the "warm fuzzies" that can occur among assistants and residents when dedication and high morale prevail.

The purpose of the book by Sue Saxon and Mary Jean Etten is implied by its title. The second edition focuses on health promotion and disease prevention in the elderly. The authors suggest that "those who would simply like to know more about aging or how to cope effectively with their own aging, may also find it useful" (p. 6). Organized by major body systems, the book considers the impact of the normal aging process on psychosocial behavior and briefly describes major age-related disorders and diseases. The concise summary of organ system

components and functions at the beginning of each chapter in Part 1 provides a helpful review before discussion of age-related changes. The age-related disorders section of each Part 2 chapter includes disorders ranging from kinesthetic and vestibular sense changes that have implications for mobility to tardive dyskinesia, behavior associated with the side effects of neuroleptic medication. Drawings provide a helpful review of human anatomy.

Included in Part 3 are chapters about exercise, nutrition, and medications, with a few chapters being too brief to cover the material adequately. The inclusion of information on short- or long-term use of neuroleptic medication is helpful. The chapter on homeostasis is at the beginning of the book and provides an important framework for considering age-related changes. Appendixes B and C have been modified. I find Appendix B in the first edition, "Selected Resources Available to the Elderly," to be more reinforcing of Saxon and Etton's statement that the book could be used by aging persons in general. The Epilogue concludes the book on a upbeat note.

A number of excellent points are made using the case study approach in *The Nursing Assistant's Casebook of Elder Care*. Examples include case studies that emphasize (1) complaints being heard and responded to, (2) information being collected prior to action being taken, (3) use of reflection, restating, and active listening to help residents gain insight, and (4) the necessity for basic respect even if it is assumed the resident is disoriented. The case study which illustrates how resident behavior can "get to staff" surfaces the staff need for support, relief, and ventilation and provides excellent modeling of teamwork (p. 88).

Use of the term *resident* instead of *patient* throughout the Weber and McCall text implies greater independence and autonomy. Questions following the case studies focus on the what and how versus the why, given that nursing assistants have a minimum of theory-based training. Although the case studies are developed from the "real world," a few areas are of concern. First, in at least 14 cases the residents' ages are in the 60s. Some cases seem appropriate because a chronic physical or mental condition exists, but others seem more appropriate for a home for the aged or foster home. Inclusion of these cases reinforces the inappropriateness of some nursing home placements. A number of cases concern recent admissions after spousal death. Here, the impact of probable grief and its associated behaviors could be addressed to a greater extent in the case study questions. Another concern is the lack

of simplicity in how questions are phrased and the choice of words. For example, one question reads "Is there any danger that the Home's disposition toward Mr. Gatewood might solidify his chronicity [*sic*]?" (p. 87). The word *delusion* first used on page 40 is not defined until page 86. The nursing assistant may become frustrated without an index or a glossary to help define unfamiliar terms. The discussion of physical restraints and ethics is confusing and does not include the legal ramifications and the documentation that must accompany use of restraints in most states (p. 9). The discussion of "demand rules" is misleading without stating the Patients' Bill of Rights (p. 5). The word *demand* does not seem to fit the social environment this text strives to create in a nursing home.

The case study approach used by Weber and McCall is a practical, effective format for the nursing home environment. Discussion can be short and directed with limited preparation time, which all nursing home in-service personnel will appreciate. Throughout the book, the authors stress the potential of informal communication between assistants as an initial step in problem solving. To suggest that problem solving occurs over "coffee break" is unrealistic and unhealthy and may cause indignation in some assistants reading the book. A nursing assistant's workload is usually intense, and a real break from the stresses of resident care is needed. In two case studies, proper-name use is mixed up, making the cases confusing (pp. 136, 189). Overall, the book's contribution to the affective education of assistants is excellent. I plan to use it in our teaching nursing home to stimulate informal discussions. I would recommend it as required reading for any faculty member or student planning a clinical placement in a nursing home. The book provides an orientation to the nursing assistant role and that role's impact on the quality of the nursing home resident's life.

Physical Changes and Aging: A Guide for the Helping Profession is a practical book for novices in gerontology. The information is reliable and up to date and provides depth without using technical terms to excess. Disease presentation subtleties in older adults are given attention after typical symptoms are described. The health promotion section lists specifics for implementation.

These two books together provide comprehensive information applicable to the development of a quality nursing-assistant training curriculum. Career paths for nursing assistants employed in nursing homes are being explored and implemented in some places as a retention

mechanism. The journey along the path requires additional education. These books provide the content and format (case studies) for a career path nursing assistant's course.

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B.A. Kratcher, *Prescription Drugs: An Indispensable Guide for People Over Fifty*. New York: Atheneum, 1988. 358 pp., \$22.50.

Part 1 of this book is a superficial overview of the "pharmacology of aging." The seven pages of narrative on how and why drugs behave as they do in the elderly are inadequate, however. Part 2 consists of 92 monographs on generic drugs often used by the nation's elderly, arranged by subject areas: other names; what the drug is supposed to do; side effects; interactions with other drugs, with alcoholic beverages, and with food; and how age affects response to the drug.

This book is well organized, practical, and succinct. Brian Kratcher's clarity of writing is noteworthy. In a comparison of this book with other self-help, mass-market references focused on prescription drugs, some deficiencies become apparent. The exclusive use of narrative without benefit of tables and figures limits readability and consumer utility. The glossary will help the reader interpret the monographs but is relatively brief. Few reference citations after 1985 are included; most citations are from the early 1980s. The book is well indexed and includes generic and trade (brand) names of drugs.

Kratcher speaks to special considerations of drug use in the elderly but provides little of the more fundamental information relative to guidelines for general use common to all groups (e.g., contraindications, warnings, precautions). More product information relative to trade names, dosage forms, availability, strengths, and relative cost would have been useful.

Finally, the \$22.50 price is an impediment to purchase. Numerous mass-market and trade paperbacks address rational and appropriate prescription drug use in a more comprehensive and graphically appealing way at lower cost.