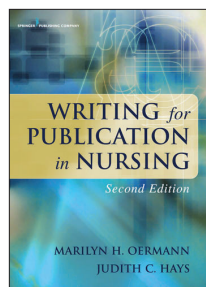
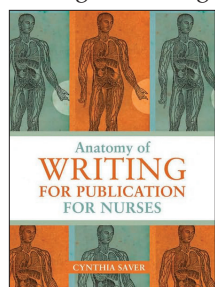


BOOKS

**Writing for Publication in Nursing (2nd ed.).** Marilyn H. Oermann and Judith C. Hays. New York, NY: Springer, 2010, softcover, 361 pages, \$55. **Anatomy of Writing for Publication for Nurses.** Cynthia Saver. Indianapolis, IN: Sigma Theta Tau International, 2011, paperback, 342 pages, \$35.



Writing for publication is the focus of both books reviewed. These texts are written for nurses at any education level from associate degree in nursing to doctor of philosophy and can supplement a general curriculum that usually does not foster basic writing. In *Writing for Publication in Nursing*, Oermann and Hays focus on taking an idea and ending with a publication: preparing to write; types of articles, books, or chapters; the writing process; and submission through review at a selected journal. In *Anatomy of Writing for Publication for Nurses*, Saver includes all of the same parts with an expanded discussion of the preparatory work necessary before starting the writing process.



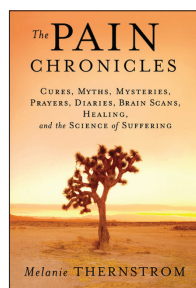
Each book is well written but aimed at a slightly different audience. *Writing for Publication in Nursing* is for nurses who have some level of familiarity with publication. Topic presentation is thorough but succinct. On the other hand, *Anatomy of Writing for Publication for Nurses* provides information in a simpler, step-by-step format. *Writing for Publication in Nursing* would be appropriate for a graduate scientific-writing course, whereas *Anatomy of Writing for Publication for Nurses* would be suited for an undergraduate course. Tables and figures are clear in each book and helpful in directing nurses through the process of scientific writing. Appendices in both books present some noteworthy “how to” information: unnecessary words, parts of speech, checklists for

proofing, and submission of documents. Either text would be an extremely helpful resource for nurses wanting to be published and for clinical and university educators.

Many potentially good manuscripts and writers have not been published, often for lack of understanding the process involved. These two books are designed to help nurses produce well-written manuscripts that contribute to the body of nursing knowledge and would be useful additions to a personal library.

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**The Pain Chronicles: Cures, Myths, Mysteries, Prayers, Diaries, Brain Scans, Healing, and the Science of Suffering.** Melanie Thernstrom. New York, NY: Farrar, Straus and Giroux, 2010, hardcover, 364 pages, \$27.



Thernstrom has written a book worthy of its all-encompassing title. *The Pain Chronicles* is an epic tale of a deeply personal subject: chronic pain. The chapters are short and readable, but their length does not disguise the book’s depth. The five sections masterfully and comprehensively develop the content: Pain as Metaphor explores the book’s meaning, Pain as History traces the discovery of anesthesia and religious models, Pain as Disease outlines current treatment and research, Pain as Narrative relates successful and unsuccessful treatment experiences from the patient’s perspective, and Pain as Perception attempts to explain the difficulties encountered in trying to understand pain.

Woven throughout is Thernstrom’s own experience with pain in excerpts from her diary. She eloquently describes becoming a patient and the hours-long wait that accompanies that role: “To have a medical problem is to be cast out of the realm of busy people (like the doctor). The sick have no schedule, their time is of no value” (p. 52).

Thernstrom’s thesis is best understood in her own words. “Chronic pain is a specter in our time: A serious, widespread, misunderstood, misdiagnosed,

and undertreated disease . . . sometimes defined as continuous pain that lasts longer than six months, yet chronic is not ordinary pain that endures, but a different condition, in the same way an alcoholic’s drinking differs from that of a social drinker. It is not the duration of pain that characterizes chronic pain, but the inability of the body to restore normal functioning” (p. 6). Only recently have researchers and clinicians appreciated that chronic pain is not merely a symptom of disease—chronic pain will eventually rewrite the nervous system if untreated, causing pathologic changes and more pain. Pain can have a life of its own.

Historic anecdotes are peppered with the truly bizarre, such as concussion anesthesia involving a blow to the jaw and occasionally a wooden hammer. Also of interest is an 1812 letter written by a Parisian to her sister describing her mastectomy—horrific, without anesthesia or analgesia. Indeed, anesthesiologist E.M. Papper recognized that anesthesia only could have been discovered in America; a democratic society was needed to understand that the pain and suffering of the masses mattered, just as oncology nurses understand today.

Thernstrom is not prescriptive but explores pharmacologic and nonpharmacologic interventions. As the book concludes with some modern-day technological advances, readers must ask, how close are we to understanding and treating chronic pain? Pain physician Daniel Carr responds, “Pain is an aspect of consciousness, and consciousness is not neurons firing. The gears of a watch rotate and keep time, but the turning of the gears is not time. Functional imaging is a picture of a mechanism associated with the experience of consciousness, but it is not consciousness” (p. 328). Healthcare professionals who study and manage pain still have much work to do.

In *The Pain Chronicles*, oncology nurses will find basic pain information that they have learned from other sources. However, the book’s value lies in uncovering the pain experience from personal and professional perspectives.

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