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Book Review

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Book Review

Review of Cash, Jill C., and Cheryl A. Glass (Editors). Adult-Gerontology Practice Guidelines. Springer Publishing Company. 2015. ISBN: 0826127622. 1112 pages, Price \$110.00 (Paper).eview of Fienup-Riordan, Ann (Editor), Rearden, Alice (Translator). Do Not Live Without An Elder: The Subsistence Way of Life in Southwest Alaska (Bilingual Edition). University of Alaska Press. 2016. ISBN: 9781602232976, 400 pages, Price: \$39.95 (Paper)

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It came as a surprise to me that gerontology is not uniformly taught in all medical schools as a required part of the curriculum (2015 Breytspraak and Badura). The University of Missouri-Kansas City's Consortium for Aging offered the general public a "Facts on Aging Quiz" and pointed out that not all medical students will have exposure to gerontology and geriatric practices during the course of their general medical eduction (2015 Breytspraak and Badura). Healthcare professionals certainly do not have to become geriatric specialists in order to feel ready to care for the baby-boomer generation; however general practitioners could use insight from the field of both gerontology and geriatrics as they begin to take care of older adults in their community health setting. Jill C. Cash and Cheryl A. Glass, both nurse practitioners, offer a comprehensive review book and set of guidelines to inform future healthcare professionals and current practitioners about the nuanced changes in wellness and illness experienced by older adults (Cash and Glass 2015). In their edited volume, "Adult-Gerontology Practice Guidelines" (2015), Cash and Glass seek out to enhance the working knowledge and competency of individuals whose desire is to immerse themselves in the field of gerontology (Cash and Glass 2015).

Since this set of practice-guidelines is highly technical, it is more than fair to say that this edited volume's intended audience are working professionals such as other nurse practitioners and family physicians (Cash and Glass 2015). The sheer detail from this book indicates that gerontology offers nuanced insight that adult medicine could stand to include in its practice settings (Cash and Glass 2015). In "Adult-Gerontology Practice Guidelines", one will find a series of chapters that covers and reviews pertinent information on the different organ systems of the human body of an aging adult (Cash and Glass 2015). This volume covers thematically relevant topics in the chapters, "Healthy Living for the Adult-Geriatric Patient" and "Caregiver and End-of-Life Issues" too (Cash and Glass 2015). The three main sections of the book are divided between general practice guidelines to review and consider for the elderly patient, followed by common procedures used in Geriatric care and finally Patient-Teaching Guides for each chapter that include examples of how older adults may present themselves and their health concerns in the exam room during a medical visit (Cash and Glass 2015).

Since this is a review book, students who have recently completed a full course or training on gerontology would find this volume most useful. However, I have to say that this comprehensive volume shows evidence of how necessary the field gerontology is for social policy and healthcare systems (Cash and Glass 2015). I can imagine this volume being used to make a case for furthering health policy initiatives and educational materials that inform hospitals, clinicians, caregivers and communities about the vulnerabilities that the current and future aging populations will face (Cash and Glass 2015). At the very Anthropology & Aging

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least, this volume contributes to the field of aging studies as both a review guide and an empirical demonstration of the need for gerontology to be taught more consistently in pre-professional programs for healthcare workers (Breytspraak and Badura 2015; Cash and Glass 2015).

If there is one chapter I would like to draw any reader's attention to, whether they are students, graduates, working professionals or caregivers, it is Chapter 24 "Psychiatric Guidelines" (Cash and Glass 2015). This chapter includes a formal consideration of the concept "Failure to Thrive" (FTT); the editors define FTT as:

"an abnormality in which an individual fails to maintain nutritional health. FTT is a manifestation of an underlying problem, whether the problem is mental, physical or psychological. . . FTT in the geriatric population is defined as a deterioration in functional status disproportional to disease burden" (p.759) (Cash and Glass 2015)

While this is an accurate definition of what is meant to be a brief overview of FTT in the practice guidelines book, I would suggest that working professionals pair their review of FTT in their studies with an in-depth piece written by Kim Sue for the academic website "Medicine Anthropology Theory" (MAT) (Sue 2016). This is not a point of criticism for the edited volume by Cash and Glass, but a reminder that their guidelines are only part of the solution to incorporating more consideration of the health problems faced by older adults into medical education curriculum. In her piece, Kim Sue, a second year resident in Internal Medicine, observes how "Failure To Thrive" is a term people do not think too often about; it's a concept that represents the gray area experienced by patients who are suffering but are unable to directly communicate their pain due to the impact of social isolation (Sue 2016). Sue observes that parents are not always comfortable with the diagnosis of FTT in their conversations concerning child health (Sue 2016). Yet, the very symptoms and signs of FTT are now being used to describe elderly patients who suffer from an overall loss in the quality of their life due to multiple factors and not necessarily due to aging (Sue 2016). In other words, the use of FTT to define illness may be declining in pediatrics but is on a steady incline in geriatrics (Sue 2016). Between the holistic and sensitive pieces written by professionals in the field, such as Sue, and the practice guidelines written comprehensively by Cash and Glass, I am convinced that now is the time to commit to including gerontology into medical, public health and nursing education programs because this field will provide more thoughtful reflections to addressing the health needs of aging adult populations for years to come.

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