Books as therapy

Over the years I have lent books to patients to read in order for them to understand more about what they are experiencing with their illnesses. I tell them that if they do not return the books, I will hunt them down and kill them, but I notice, despite my threats, that my library has quite a few gaps on the selves. I can never remember to whom I have lent them and I usually lose the slip of paper on which I have written their name and the book title.

First I try and assess whether the patient is a "reader" and is suitable for the task. In the book *The Little Paris Bookshop*, the main protagonist is Mr Perdu who is a bookseller and whose bookshop is called *The Literary Apothecary*. He assesses his customers' character and will not sell a book to clients, if he does not think it will be suitable for them. If clients choose something unsuitable, he advises them to choose something else that he usually recommends to them.

Interestingly, my most lent books are three books by the same author, the Oxford and Princeton academic, A Alvarez, who attempted suicide after his first marriage ended. The first book is called *The Savage God* in which he writes with extraordinary power about depression from both a personal and literary point of view. The second is called *Life After Divorce* and, in a similar vein, draws on literature and conversations with many divorced people to present a compassionate account of the experience. His third book is called *The Biggest Game in Town* and is for the very few patients that one finds suffering from that most secretive of obsessions, compulsive gambling.

My back-up for patients after a divorce is a chapter in the book *Trust Me* by the American novelist, John Updike, and is called *Death of Distant Friends*. Another helpful book by John Updike is called *Self-Consciousness* and is where he describes his life-long struggle with psoriasis in the chapter called "At War with My Skin".

Another enigmatic illness, anorexia nervosa, is well described by Jenefer Shute from the perspective of the patient and is an essay called "Life Size". These texts and many others may help the isolation that some patients feel when faced with illnesses that are difficult to understand and allow them some consolation and support from fellow sufferers.

"Books are more than doctors," says Mr Perdu. "Some novels are loving, lifelong companions; some give you a clip around the ear, while others are friends who wrap you in warm towels when you've got those autumn blues".

So I need to know the patient reasonably well as booklending is not a first consultation affair. There are now thousands upon thousands of self-help books available on every conceivable illness and malady known to man. I find that by reading the preface of most of them you have read all the ideas or advice that is in the book and it usually repeats the same stuff about diet, exercise, sleep and vitamins.

There is also a huge variety of religious literature available, but here one has to be careful not to impose one's own likes and beliefs on the patient and some judgment is needed in this respect.

With family members living with people with personality disorders, I sometimes lend *Stop Walking on Eggshells* by Mason and Kreger, and for adult patients with ADHD there is *The Edison Gene* by Thom Hartmann who proposes that ADHD sufferers are hunters living in a farmer's world.

I have also (and you are not allowed to mention this to anyone) *The Australian Cannabis Cook Book* by Sinton and MacCullum, which may be useful for, amongst others, chronic pain syndromes. It has excellent recipes for chicken corn and cannabis soup, as well as ganja stir-fry and spaced-out muffins.

For your middle life crisis there is *The Middle Passage* by the Jungian psychologist James Hollis, which deals with the questioning and psychological turmoil during the male and female menopause.

"It is a common misconception," reflected Mr Perdu, "that booksellers look after books. They look after people. I wanted to treat feelings that are not recognized as afflictions and are never diagnosed by doctors ... feelings and emotions no therapist is interested in, because they are apparently too minor and intangible: the feeling that washes over you when another summer nears its end; or when you recognize that you haven't got your whole life left to find out where you belong; or the slight sense of grief when a friendship doesn't develop as you thought, and you have to continue your search for a lifelong companion. Things like that."

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ADDENDUM: Readers might like to write to the editor to suggest books that they find useful for themselves or for their patients. Go to www.safpj.co.za then to new submissions then to Letters to the Editor.