**BOOK REVIEW**

**Melbourne: Therapeutic Guidelines Limited; 2016. 393 pages**

**Also available online at www.tg.org.au**

A practical and up-to-date Australian palliative care text for all healthcare professionals, particularly those working in primary care, is vital. The revised (4th edition) Therapeutic Guidelines: Palliative Care continues to provide good advice from expert clinicians on a range of practical issues, including symptom management, communication guidance and support for deprescribing.

Advance care planning is a significant component of palliative care and a new stand-alone chapter on this is welcomed. While the advance care planning guidance is general in nature, clinicians will appreciate the text’s practical suggestions of approaching conversations about death and dying. These practical examples continue throughout the text, including ‘Loss, grief and bereavement’ and the revised chapter on ‘Terminal care: care in the last days of life’. Clinicians will welcome this.

A palliative approach to care often necessitates changes in the way comorbidities are managed.

The new chapter ‘Managing comorbidities and deprescribing in palliative care’ provides general advice on management. While abrupt withdrawal of medicines is discussed, specific recommendations for managing this situation are lacking.

The revised version sensibly lists resources within each chapter, rather than as an appendix. Furthermore, the online version provides hyperlinks to web-based resources. At first glance, the hyperlinks to the Australian Pharmaceutical Benefits Scheme (PBS) appear helpful, however they take the clinician to pages that may be irrelevant to the specific indication, patient group, route of administration, and formulation or dose provided within the prescribing guidance. In fact, the drug may not be subsidised by the PBS. This will frustrate clinicians as it affects a number of drugs, including midazolam, gabapentin, glycopyrrolate and fentanyl.

This updated text contributes to the contemporary multidisciplinary practice of palliative care within an Australian context. It will appeal in particular to the needs of clinicians working in primary care.

---

**Paul Tait**
Palliative care pharmacist
Southern Adelaide Palliative Services
Adelaide

*Aust Prescr 2017;40:110*  
http://dx.doi.org/10.18773/austprescr.2017.032