1. Record Nr. UNINA9910787996303321 Autore Breitbart William <1951-> Titolo Psychosocial palliative care / / William S. Breitbart, Yesne Alici Pubbl/distr/stampa New York:,: Oxford University Press,, 2014 ©2014 **ISBN** 0-19-936633-0 0-19-936634-9 0-19-936632-2 Descrizione fisica 1 online resource (193 p.) Disciplina 616.02/9 Soggetti Palliative treatment - Psychological aspects Palliative treatment - Social aspects Terminal care Lingua di pubblicazione Inglese **Formato** Materiale a stampa Livello bibliografico Monografia Note generali Description based upon print version of record. Nota di bibliografia Includes bibliographical references at the end of each chapters and index. ""Cover""; ""Psychosocial Palliative Care""; ""Copyright""; ""Contents""; Nota di contenuto ""Preface""; ""Introduction""; ""Part I Modern Palliative Care""; ""Chapter 1 Principles of Palliative Care""; ""Chapter 2 A Global Perspective on Death"": ""Chapter 3 Role of the Psycho-oncologist in Palliative Care""; ""Part II Psychiatric Disorders in the Palliative Care Setting""; ""Chapter 4 Anxiety Disorders in Palliative Care""; ""Chapter 5 Depression in Palliative Care"": ""Chapter 6 Suicide, Assisted Suicide, and Desire for Hastened Death""; ""Chapter 7 Delirium in Palliative Care"" "Part III Psychosocial Issues in the Palliative Care Setting"""Chapter 8 Management of Fatigue in Palliative Care Settings"": ""Chapter 9 Psychotherapy and Behavioral Interventions in Palliative Care": ""Chapter 10 Psychiatric and Psychological Interventions for the Control of Pain and Selected Physical Symptoms""; ""Chapter 11 Spiritual and Existential Issues in the Care of the Dying""; ""Chapter 12 Cross-Cultural Issues""; ""Chapter 13 Doctor-Patient Communication in

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## Sommario/riassunto

One of the most challenging roles of the psycho-oncologist is to help guide terminally-ill patients through the physical, psychological, and spiritual aspects of the dying process. Patients with cancer, AIDS, and other life-threatening illnesses are at increased risk for the development of major psychiatric complications, and have an enormous burden of both physical and psychological symptoms. Concepts of adequate palliative care must be expanded beyond the current focus on pain and physical symptom control to include the psychiatric, psychosocial, existential, and spiritual aspects of care. T