DEATH: A MAJOR LIFE MILESTONE
To the Editor:

As senior nursing students, we took a great interest in the article “Nurse-Patient Advocacy and the Right to Die” by Susan C. Ball, MNSc, RN, APN (December 2006, Vol. 44, No. 12, pp. 36-42). We know this is an issue we will likely be presented with early on in our careers, considering the increasing aging population. We applaud the author’s ability to convey the true importance of this issue.

The real-life examples of patients and their families who had legal and ethical issues surrounding their deaths helped identify and expand the meaning of the nurse’s role in advocating for the patient. The responsibilities of the nurse in similar situations were clarified by describing the importance of ensuring that patients and their families are fully informed of their options regarding their care and their right to an advanced directive.

We agree with the issues at hand but would also like to comment on the importance of death as a major life milestone. Although different circumstances prevail, families are just as likely to remember the care their loved ones received during their final stages as they are to remember any major life moment. Understanding the importance of involving family members in these final stages and ensuring that the needs and requests of the patients are met is essential. We understand that death is to be experienced by everyone, but it should still be seen as a very personal experience. As nurses, we have a unique opportunity to make it so. In support of this, as stated in the Journal of Multicultural Nursing and Health, “during the inevitable decision making process, nurses need to proudly accept that we are invaluable to our patients” (Todd & Baldwin, 2006, p. 55).

The nurse’s role surrounding the process of death and dying is something that must be fully understood before death can be given the respect that it deserves. It is the nurse’s responsibility to see that patients and their families receive the most competent care and comfort during such difficult moments. We would like to extend our appreciation to the author for her informative and compassionate article.

Reference

Kristin Nason
Emily Thompson
Milton, Massachusetts

SERZONE SEMANTICS
To the Editor:

Why in the article “Managing Common Side Effects of SSRIs” by Robert H. Howland, MD (February 2007, Vol. 45, No. 2, pp. 15-18) is reference made that nefazodone (Serzone®) can be prescribed? The drug has been off the market since 2004. Information such as this lends less credibility to the Journal.

Kathleen Lord, RN
Caro, Michigan

Response:

Generic forms of nefazodone have been and continue to be commercially available in the United States and other countries. Although Bristol-Myers Squibb ceased the production and marketing of their brand name “Serzone” form of nefazodone, the name Serzone is still commonly used by professionals and lay people in reference to nefazodone. For this reason, I included the name Serzone when mentioning the potential clinical use of nefazodone. My article should have perhaps clarified this for readers.

Robert H. Howland, MD
Pittsburgh, Pennsylvania

We’re waiting to hear from you!

Send your letters to the Editor to: Karen G. Stanwood, ELS, Executive Editor, Journal of Psychosocial Nursing & Mental Health Services, E-mail: kstanwood@slackinc.com

Please include your full name and mailing address. Letters may be edited for clarity and length, and may be sent to the article authors for a response.