



What Seems to be the Trouble? Stories in Illness and Healthcare

Trisha Greenhalgh. [Radcliffe Publishing Ltd](http://www.radcliffepublishing.com) (Oxford), 2006. ISBN: 184619122X. Contains 128 pages. Price GBP 19.95

This book shows the importance of descriptive narrative (storytelling) in healthcare. Professor Greenhalgh finds stories everywhere, from patients and their carers, within hospital organisations, and even in the process of systematic review.

With great expertise, and drawing on diverse authorities ranging from Aristotle to websites, she analyses and then weaves the stories into a common theme, demonstrating their importance in everyday patient management, in teaching, in effecting change in healthcare organisations and even in protecting future research against ever-burgeoning bureaucracy. It is an undoubted tour-de-force.

Each chapter is heralded by a brief narrative, which is then analysed and used as a starting point for developing more general concepts. A simple example discusses the pregnant patient's fear of taking insulin, necessary to treat her diabetes, which becomes understandable in the light of the story of a close relative having died of complications shortly after starting insulin. No randomised double blind controlled trial will ever identify these issues, of crucial importance in management.

Such trials may help identify the best insulin regimen, but evidence-based medicine is only part of good care and is firmly put in its place. Another example looks at the annual UK National Confidential Enquiry into pregnancy deaths, which has traditionally been illustrated by case studies told by doctors and nurses about the people who died.

It was recently decided to remove these as part of a drive towards more 'evidence-based' healthcare. Anecdotes are unscientific and would introduce the reader to bias. But these stories have great emotional impact and are the most interesting part of an otherwise dimly dull document. The teenage girl frozen to death in the grounds of a hospital after being discharged late in the afternoon following a miscarriage cannot be reduced to bullet points. Stories embrace complexity and are of much greater impact.

For the more casual reader, some of the book is hard going. But it is well worth the effort. It's a rare and brave book that battles successfully against the overwhelming impression that good medicine means the exclusive use of evidence-based data, trials, protocols, and audit.

Especially in secondary care, it is so easy to treat the disease (as defined in our textbook) rather than the sick person defined by their story, and Professor Greenhalgh corrects the balance. She provides a rational basis for the importance of anecdote without which medicine is not just dry but, more importantly, very incomplete. She recognises the importance of stories at many levels and in ways not obviously evident. She even shows you how it may help get your application approved through the ethics committee!

My eyes have been opened to new ways of thinking from reading this book, something I hadn't expected from its cover. Buy it!

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