

**FOR IMMEDIATE RELEASE • AUTHOR AVAILABLE FOR INTERVIEW**

**We spend all our lives avoiding the inevitable meeting with death; Iocovozzi's transformational book, *Sooner or Later*, lovingly, sanely, compassionately and truthfully prepares us for that "moment of truth."**

Suddenly, or more often after a long illness, 7,854 Americans are going to die today. The number is irrefutable: that's the death total in the United States EVERY day. Yet, what we need to know about how to die in peace and with dignity is not discussed. A delusional belief that ignoring it will somehow—miraculously—forestall it, leaves us and our loved ones unprepared for what happens to all of us sooner or later. Our fragmented healthcare system and troubled economy have left millions of Americans uninsured and uninformed about their rights as a patient, further complicating medical treatment and end-of-life care.

In *Sooner or Later: Restoring Sanity to Your End-of-Life Care* (Transformation Media Books, April, 2010), Damiano de Sano Iocovozzi, MSN, FNP, CNS, opens the door and provides essential information for the conversations that families must have with each other and their healthcare providers at a critical time in their lives. "*Sooner or Later* serves anyone, healthy or sick, who wants to live life more in the present moment and without fear," says the author. Iocovozzi, a family nurse practitioner who has worked with the terminally ill for more than 23 years, offers the reader a safe place to help process the turbulent emotions framing the diagnosis, care and, ultimately, death of the terminally ill and elderly. This essential book prepares everyone involved in the process—patients, families, friends and healthcare workers—to remain sane, rational and, most importantly, in control.

Throughout the book, in large print for easy reading, are questions designed to help in those awkward, and sometimes frightening, conversations with physicians and other professionals about therapy and treatment and the effect these will have on one's quality of life as it nears an end. It also provides a self assessment that will help to sort out the too-often conflicting emotions of all involved, ultimately serving to help the patient make sound decisions for the best quality of life. Authoritative clinical studies found:

- 87% of patients say they want as much information as possible.
- Patients want doctors to communicate truthfully with them about treatment options.
- End-of-life discussions decrease suffering and distress for patients and loved ones.
- Hospice patients live longer and more comfortably and usually pass away pain-free in their own beds in their own homes...surrounded by loved ones.

Forty years ago, Elisabeth Kübler-Ross opened this Pandora's Box with her *On Death and Dying* in an attempt to begin the discussion about death. *Sooner or Later* might well be the book she would embrace as the modern-day sequel to her bestseller that she did not live to write.

**Damiano de Sano Iocovozzi** (dom-ee-ano, day-sa-no, yock-o-vozzi), a New Yorker, is a world traveler, linguist and registered nurse. Following years of language study and work in Italy, France and Germany, as well as a tour of duty with the Peace Corps in Morocco, he returned to the U.S. to continue his education and found his life's work in medicine. Damiano is a family nurse practitioner and currently lives in Palm Springs, California.

## **MEDIA QUESTIONS**

### ***Sooner or Later: Restoring Sanity to Your End-of-Life Care***

**by Damiano de Sano Iocovozzi**

1. How will the Health Reform bill affect patients currently in the hospital or in need of hospice care?
2. What is an advance health care directive and do you recommend healthy people write one before they're sick?
3. If I were given a terminal diagnosis with a projected life span of less than six months, do you think I should direct providers, nurses or paramedics to conduct a code blue and put me on a life support machine?
4. What is the percentage of people who actually survive a code blue?
5. Will you describe briefly what is in your book, *Sooner or Later*?
6. In your experience, are there really death panels in the hospitals where insurance companies and doctors determine who gets to die?
7. Why do you think people are so squeamish when they think of their own mortality? Why do you think there's so much stigma attached?
8. Why have you included questions patients and their families should use to ask doctors, social workers and nurses during the opinion phase of a terminal diagnosis?
9. Do you think the line of questions you have provided to patients somehow interferes with the authority of the health care providers?
10. What really happens in a code blue that isn't seen on TV like in ER?
11. Don't you think that allowing a natural death to come for Grandma in a hospice setting is somehow like condoning killing Grandma?
12. For an uninsured patient with no money, can he enter a hospice program? Who pays for the nurses even if he's living at home?
13. Do you think certain physician specialty groups often defer hospice referrals for a longer time so as to maximize profits on the

misfortune of a terminal patient who really cannot benefit from more diagnostics, labs, treatments and rehab?

14. I know it's estimated that about 45 million US born or naturalized citizens have no health insurance of any kind. Would denying expensive, futile care for those Cadillac-insured but terminal patients do anything to improve the care of those uninsured?

15. Are there ways that providers can know in advance how long a patient has to live? What changes are evident as a disease advances?

16. If an ethical dilemma arises, what ways can provide clarity on those issues in a hospital setting?

17. For the terminally ill, what criteria are necessary to enter a hospice program?

18. Aren't physicians, providers and the hospital legally bound to code everybody who wants one, even if it is a fact that death is shortly expected for this patient?

19. Can the providers be sued if the patient dies?

20. Do you think health care is a right or a privilege for US citizens?

21. For late stage Alzheimer's, Huntington's or Lou Gehrig's diagnosed patients, do think a feeding tube should be inserted in the abdomen in all cases?

22. Is the power to make health care decisions ultimately with the patient or the provider?

23. Please explain "high touch, low tech" in regards to the hospice patient.

24. Since Kübler-Ross's *On Death and Dying* and Derrick Humphrey's *Final Exit*, there have not been seminal works for general public reading on the subject of death and dying. How do you think *Sooner or Later* compares to those two books?

25. Should insurance companies be for profit or not for profit?

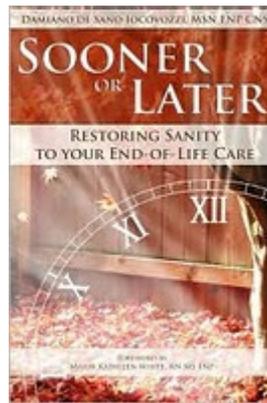
26. Do you think there should be national health care?

# GRIEF HEALING

USEFUL INFORMATION ON LOSS, GRIEF AND TRANSITION -  
FOR THE BEREAVED AND THOSE WHO CARE

MONDAY, AUGUST 2, 2010 © BY MARTY TOUSLEY, CNS-BC,  
FT, DCC

## Book Review - Sooner or Later: Restoring Sanity to Your End-of-Life Care



Given the interest sparked by physician Atul Gawande in his remarkable article in the August issue of *The New Yorker* ( [Letting Go: What Should Medicine Do If It Cannot Save Your Life?](#) ) information to help patients and their families address that very question couldn't be more timely.

If family nurse practitioner and Clinical Nurse Specialist [Damiano De Sano Iocovozzi](#) has his way, we human beings would accept the fact that life itself is a terminal condition. As he points out in his immensely readable book, [Sooner or Later: Restoring Sanity to Your End-of-Life Care](#), we're all going to die eventually (whether by accident, illness or old age)- and we'd best accept that reality now.

Once we've been told that we are terminally ill with little chance of remission or cure, the author contends, we need to know how to use wisely the precious time we have left: that space between diagnosis and choosing an appropriate level of care. [Sooner or Later: Restoring Sanity to Your End-of-Life Care](#) serves as a useful guide, reminding all of us that terminal illness and death are natural and inevitable parts of life, and dying is a process that can be successfully understood, worked with and managed.

Using a workbook-like format, the author lists questions for readers to ask themselves and their healthcare providers as they make their way among the various options offered to them, depending on the forms of disease, the goals of medicine, and their own personal goals, which may change as the disease process advances.

This book provides all the information needed to help newly-diagnosed, terminally ill patients and family members identify their concerns, so they can discuss them openly with one another and with their healthcare providers. It helps them make informed, rational decisions that best fit their needs and goals, helping them to live fully and without fear in the time they have left together. It reassures all of us that, once we accept our own mortality, steps can be taken to make the dying process a rich experience for all concerned.

I've listed this book on the [Articles ~ Columns ~ Books](#) page of my [Grief Healing](#) Web site as one I've read and personally recommend to my hospice clients, colleagues, and visitors. Students in all the healthcare disciplines (medicine, nursing, respiratory care, social work, chaplaincy, music, occupational and recreational therapies) would be wise to read it as well.

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## Sooner or Later Review

I am an emergency physician, formerly at New York's Bellevue Hospital, and now in Toronto, Canada.

In this age of technology it seems that every day we are faced with an unfortunate scenario in the ER: A patient in the final stages of an incurable disease is brought in on the brink of death. Although this is "his time" to pass on, we are prevented from allowing him a peaceful and dignified passing.

The moment his heart stops a chain of events is set inexorably into motion: THE CODE BLUE. The medical team literally jumps on the patient, pounding on his chest, often breaking ribs; a tube is inserted into his trachea, and he is attached to a ventilator, on which he will spend the remainder of his life.

All of this could have been prevented had the patient prepared an Advance Medical Directive stating "DNR" or "do not resuscitate".

In 1969 Dr. Elizabeth Kubler-Ross wrote the classic "On Death and Dying". This outlined the psychological stages of grief upon receiving a terminal diagnosis:

Denial, Anger, Bargaining, Depression, and finally Acceptance. But until now, there has been no book on preparing for and taking control of quality of life towards its close. "Sooner or Later: Restoring Sanity to your End-of -Life Care" by Damiano de Sano Iocovozzi (Transformation Media Books, 2010) is a new practical workbook that addresses these issues.

"Sooner or Later" begins with negotiating the medical system. It walks the reader through specific questions to ask regarding diagnosis, tests, second opinions, prognosis, and appropriate vs. futile treatments, etc.

Then it moves on to different scenarios: eg. what life is like in the Intensive Care Unit, what a Code Blue entails, the Advance Medical Directive, hospice care in hospital or at home...This is made real and interesting via presentation of actual cases from the author's extensive experience as a critical care nurse, nurse practitioner and medical ethicist. It reads like personal guidance from a wise old friend.

Although we have made great advances in Medicine, cancer has become an epidemic, due to all the environmental carcinogens accumulating in our bodies over the years. Consequently, there is a growing population, often not elderly, facing terminal illness and the final chapter of their lives. "Sooner or Later" is an excellent tool to assist people to live out their final days successfully. It is written with warmth, grace and sometimes even humor.

I believe it is a "must read" for Palliative Care recipients and providers and should be on the curriculum of Nursing, Social Work and Medical Schools.

*Sheila David MD, CCFP, ABEM*

*Dr. Sheila David is a staff physician in the emergency department in Toronto, Ontario. She is also a faculty member at the University of Toronto School of Medicine. Dr. David lives in Toronto, Canada.*

## **The Thomas Edwin Walls Foundation**

by Damiano de Sano Iocovozzi, MSN/FNP/CNS, founder

The Thomas Edwin Walls Foundation (TEWF) is a nonprofit organization whose mission it is to provide scholarships to deserving medical, nursing, social work and respiratory therapy students. TEWF receives profits from the sales of my book, *Sooner or Later: Restoring Sanity to Your End-of-Life Care* (Transformation Media Books, April, 2010).

Through interactive internet study, potential recipients of scholarships will learn biomedical ethics, how to recognize earlier signs and symptoms of a person's dwindling health and how to advocate earlier hospice placements for those people who have exhausted every medical avenue for a cure or remission.

Following promotion of *Sooner or Later* and the launch of TEWF, another similar book focusing on terminally ill children and teens will be published. The mission of TEWF is to teach the next generation of health care providers how to avoid the present pitfalls of offering futile treatments to those patients who cannot benefit from it. It is our goal to ensure that those deserving patients receive an appropriate level of care in a hospice situation, be it in-patient or at home.

At the present time, we find that nursing, medical, respiratory care and social work students do not receive adequate education advocating hospice placements sooner, consequently continuing to pursue a plan of futile care for the terminally ill for such reasons as: fear of broaching the subject, little understanding of medicine's limits, the stigma of dying and death issues, reluctance of the health care team to disappoint the patient and their families and fear of lawsuits. In fact, many providers still irrationally believe they can be sued if a patient actually dies of a terminal disease process.

Another noble goal of the TEWF is to educate lawmakers about hospice care as part of health care reform. Studies from the 1990's reveal that from 25%-35% of health care dollars are spent on futile end-of-life care. (Unfortunately, no studies have been conducted since then.) Expensive treatments, consultations, diagnostics and medicines are foolishly spent on people who have no hope of cure or remission. It is our goal to never have intensive care units (ICUs) be utilized as high tech hospices, nor should people with less than six months of life ever be coded or resuscitated.

The madness one still sees in the ICUs continues to exist, even when the providers know full well that these treatments are usually futile and, shamefully worse, often harmful. Our desire at TEWF is to teach lawmakers how to reform health care in order to maximize the health care dollar so that all are entitled to hospice care when further treatment options are considered futile.

In much of the U.S., the uninsured do not get coverage for hospice nurses, in-house hospice care or housekeeping to remain in their homes. We believe at TEWF that we can change how future providers advocate for the terminally ill. We believe that lawmakers also should include a provision to cover those uninsured, terminally ill patients who find themselves with only a six-month lifespan remaining. We believe that hospice care is both eminently appropriate and logical, and, far more importantly, it compassionately preserves the dignity of the patient and their family.

**AREA NATIVE PUBLISHES BOOK ON END-OF-LIFE CARE**

By Stephanie Sorrell-White

Evening Telegram

NEW! Thu Apr 22, 2010, 01:53 PM EDT

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Frankfort, N.Y. -

In both his professional and personal life, Damiano Iocovozzi has seen many people face an end-of-life diagnosis. So in his first book, Iocovozzi decided to write about dealing with a terminal or debilitating disease called “Sooner or Later: Restoring Sanity to Your End of Life Care.”

“It’s kind of a road map,” he said during a phone interview from Palm Springs, Calif., where he currently lives. He said the book “helps the reader to process all of the turbulent emotions during the diagnosis phase and the opinion phase.”

The large-print book is divided into eight chapters covering what questions patients should ask their doctors when faced with a terminal illness and about decisions when it comes to Hospice care. On the book’s Web site, [www.soonerorlaterbook.com](http://www.soonerorlaterbook.com), people can read the foreword, the introduction and the first chapter of the book.

Iocovozzi, 58, grew up in Frankfort and graduated from Notre Dame High School in 1970. He went on to study languages in France, Germany and Italy and became a member of the Peace Corps. He was working as an international tour director in San Francisco when he decided to go into nursing after seeing many of his friends suffer from the AIDS epidemic in the 1980s. Iocovozzi graduated from Samuel Merritt University with a post-Master’s certificate and started a 23-year career in the nursing field. He also taught at Samuel Merritt and at Summit Hospital in Oakland. He also has worked in a number of small clinics in primary care and cardiology in Palm Springs. He currently operates the Thomas Edwin Walls Foundation, a non-profit organization that provides scholarships “to deserving medical, nursing, social work and respiratory therapy students,” according to its Web site. The goal of the foundation is to “teach the next generation of health care providers how to avoid the pitfalls of offering futile care treatments to those patients who cannot benefit.” Proceeds from the book go towards raising funds for scholarships.

The book was published on April 2 by Transformation Media Books. Ginny Weissman, Iocovozzi’s publisher, said in an e-mail, “It is the first book to offer questions to ask specialists to find the appropriate level of care and make good decisions to maintain the best quality of life.” She also said the large print and the style of the book is written so that everyone can understand it. She said the book provides readers a safe place for people to deal with end-of-life emotions while “remaining sane, rational and in control.”

Iocovozzi said he has done several radio interviews about the book since it has come out. The book is on sale on [www.amazon.com](http://www.amazon.com) where it has a five-gold star status from its reader reviews.

## End-of-life decisions difficult, but important

April 19, 2010

Forty years ago, Elizabeth Kubler-Ross opened a Pandora's box with her groundbreaking book "On Death and Dying" (Scribner, 1969) which at least started a conversation that desperately needs to be continued.

The conversation needs to be continued because 7,854 Americans will die this very day; the same number will die again tomorrow and the day after that too. That number is irrefutable, because that's the daily death toll in the United States.

Yet, we don't spend much time, if any, discussing how to die in peace and with dignity.

We all seem to be engaged in a form of delusional belief that says that death is something that happens to other people, not to us. Somehow and some way, maybe we think that if we ignore it and don't talk much about it, we can miraculously forestall it.

Yet, when we do this, it leaves us and our loved ones unprepared for what happens to all of us sooner or later.

And to complicate matters more, our fragmented health care system and troubled economy have left millions of Americans uninsured and uninformed about their rights as a patient, which complicates end-of-life care even more.

I recently interviewed Damiano de Sano Iocovozzi, MSN, FNP, CNS, a unique gentleman who has a tremendous amount to share on this topic. I think

Kubler-Ross would agree that it's way past time to continue the discussion she started and that she'd be pleased with this author's work.

Iocovozzi is a family nurse practitioner who has worked with the terminally ill for more than 23 years and has written a new book titled "Sooner or Later: Restoring Sanity to Your End-Of-Life Care" (Transformation Media Books, 2010). You can hear our interview Sunday morning on Newsradio 710 KEEL or anytime on [www.strategiesforliving.com](http://www.strategiesforliving.com) under Featured Podcasts.

If we haven't already, I think we all need to have

conversations with our families and with our health care providers about what will indeed happen to all of us sooner or later, and this book helps us get the conversation started, at the very least in our own minds.

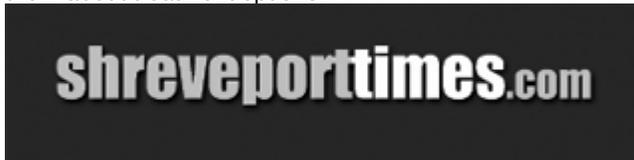
Throughout this important little book, printed in large print for easy reading, are questions designed to help get us through the awkward and sometimes frightening conversations with physicians and other professionals about therapy and treatment, especially regarding the effects on one's quality of life as it nears an end.

There's a self assessment that will help sort through the often conflicting emotions of all involved, ultimately helping the patient to make sound decisions for the best quality of life possible.

Clinical studies have found that:

87 percent of patients say they want as much information as possible.

Patients want doctors to communicate truthfully with them about treatment options.



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End-of-life discussions can greatly decrease suffering and distress for both patients and their loved ones.

Hospice patients live longer and more comfortably, usually passing away pain-free in their own beds at their own homes surrounded by loved ones.

Iocovazzi recommends strongly that we all become familiar with Advanced Healthcare Directives, which vary state by state. A good source for current directives in all 50 states can be found at <http://www.caringinfo.org>, the Web site for Caring Connections, a program of the National Hospice and Palliative Care Organization (NHPCO), a national consumer and community engagement initiative to improve care at the end of life.

On the bottom right corner of their home page, you'll find a link where you can download the information for Louisiana or any other state's unique advanced directives. Advanced directives place us in control of what happens when life is

coming to a close.

Many of us are familiar with the term "code blue," especially through television shows, but locovozzi is concerned whether we really understand what it is that happens to us and the likely results.

To that end, there is an entire chapter graphically describing the reality of what happens during a code, and gives sobering information and statistics that certainly help us think through what we really want and how we wish to be cared for during this very special time in life that will be an opportunity for all of us, sooner or later.

In the end (no pun intended), this is really a book about living well. If a human being has a life expectancy of about 72 years, we get about 26,000 days in our lives, a few more if we get lucky and a few less if not.

When you look at the stark reality of those numbers, doesn't it make sense to maximize the quality of life to the extent possible in each and every one of those days? Don't you want to be the one making the decisions, if possible, about how you will spend each of those days?

I promise you that this interview and this book will make you think.

It's not going to feed you any answers, because that's for each of us to decide individually and with our families, but it will give you current and accurate information so that you can make wise choices.

At the very least, let's begin a conversation that can pay rich dividends for each of us, sooner or later.

Marriage and family therapist David McMillian can be heard on "Strategies for Living" any time at [www.strategiesforliving.com](http://www.strategiesforliving.com) and from 9:05 to 9:45 a.m. Sundays on Newsradio 710 KEEL. E-mail your questions to [deardavid@live.com](mailto:deardavid@live.com).

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