provides an excellent and broad-based distillation of up-to-date knowledge. I imagine that for every open-minded reader it will provide fresh insights and new titbits of knowledge.

I blew hot and cold about the supportive care framework. The first chapter provides a seductive start for those of us who tire of the self-righteous positioning of biomedical and person-centred approaches. It holds out a promise of an all-singing, all-dancing way of ensuring that people with dementia get the services they deserve: 'a complete mixture of biomedical dementia care, with good quality, person-centred, psychosocial, and spiritual care under the umbrella of holistic palliative care throughout the course of the person's experience' (p. 7). But a recipe for something so ambitious is impossible to deliver. The final chapter eloquently summarises the strata of understanding that make up the model, but the third layer, the so-called logistical steps through which the model is put into practice, is sidestepped on the basis that application is context dependent. Frustrating! However, grand aspirations can be infectious and I find myself looking forward to a future volume reporting the improvements in care that have been introduced as a result of applying this approach.

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