

**The Book of Jesse:  
A Story of Youth, Illness, and Medicine**

by Michael Rowe. *The Francis Press, Washington, D.C., 2002, 352 pages,  
\$17.50.*

In this memoir, Michael Rowe recounts the life, illness, and death of his son, who succumbed to complications of a liver transplant at the age of 19. The focus of the book is Jesse's final 3 months in hospital in 1995, but Rowe supplements the chronological accounts of the hospitalization with flashbacks to Jesse's childhood. Each of the 14 chapters also contains an original sketch by Jesse, who was an aspiring artist. The sketches serve as points of departure for Rowe, first as a frightened father looking for windows into the mind of his gravely ill son, then as a grieving father hoping to capture glimpses of meaning after his son is gone.

The author is honest, perceptive, and forthcoming in his tale. Readers expecting a well-choreographed story, with the stock characters of the bravely suffering patient, the quietly grieving parents, and the magnanimously hovering medical staff will be disappointed. This is no *Death Be Not Proud*, a lyrical, majestic elegy to a fallen son. This is a postmodern story, where coherence is fleeting, events are chaotic, and interactions are truncated by unspoken thoughts and demanding schedules. There is beauty here, and heroism too. But it is of an unpredictable and ephemeral kind. Rowe's guilt at leaving work to be with Jesse, or vice versa, is a vivid portrait of a father in conflict, frustrated at his impotence. When Jesse becomes violently nauseous, and no one can seem to find an emesis basin, it is his stepmother who cups her hands underneath his chin so that his vomitus won't soil his clothes. Each of Jesse's 4 parents finds a way to remain family, pooling resources to try to rise to an occasion that is unthinkable—the death of a child.

For all its poignant snapshots, I found the book to be deeply frustrating. The author's jolting style, a stream-of-consciousness more akin to the frenetic pace of MTV than to Faulkner's flowing run-ons, prevents the reader from grasping any real sense of the direction of the story. As a character, Jesse is presented as aloof, mysterious, and unknown. He is not easy to root for, and the reader is ever wary of the shifting teams of physicians and surgeons, who alternately seem to hold omnipotence and powerlessness in one collective, imperfect conglomerate of human foible. The conclusion of the book is unsatisfying, and not just because the hero doesn't win. We feel we never knew the hero at all.

Despite this sense of incompleteness, or perhaps because of it, I feel that clinicians who care for pediatric patients or for patients who have ill children would benefit greatly from reading *The Book of Jesse*. Rowe said that most of all, he wanted to "tell Jesse's story." I think that he accomplished just that—he tells a contemporary tale, where good doesn't necessarily win the day, where fathers long to know their sons but feel they must keep their distance, and where families struggle to find meaning in a world that sometimes has no immanently discernible pattern. Having never faced serious illness in one of my children, I cannot quibble with Rowe because he did not give me an uplifting and inspirational book. I must praise him for giving me a true one.

**W. Clay Jackson, M.D., Dip.Th.**  
Family Medicine  
Munford, Tennessee