

An Appointment with Sid  
**DEATH AND DYING WITH DIGNITY**



Loss of independence and dignity in our final years is a fear more universal than the fear of death itself. Ask a random sampling of people who have grown old enough to face their own mortality, and you'll usually get a response that boils down to a quote from Woody Allen: "I'm not afraid of dying; I just don't want to be there when it happens."

All medical schools devote a portion of their clinical years to obstetrics, a field dedicated to promoting a "good" beginning to life. Up to only ten years ago, no medical school in this country devoted time to another basic side of life: death. In medical training, and in the experiences of everyday life, we've been taught that death is "bad;" we must fight it as we would fight any other enemy.

In recent years, however, a relatively few medical teaching centers have begun to devote some attention toward making the end of life a "good" experience. This development is long overdue. Particularly in an era when we can keep lungs breathing and a heart beating after the brain dies, a good ending becomes as important as a good beginning. It permits a continuum of love, an interchange that ties generations together. It allows a loved one to depart peacefully, and permits an aura of beauty to enter that departure. We aren't yet at the stage where we can fully express the value of the "good" death—the holding of a hand, the softness of a voice, the sigh accompanying relief of pain, the empathy of listening, the recognition that it's okay to let go. We're just beginning to emphasize these values over the tortured prolongation of a few more days of life while machines and chemotherapy take over vital functions—until, mercifully, the machines and drugs also give their last gasp.

Here at Piedmont Gardens, where we have continuing care from independent living to end-of-life, we are trying to reach our own goal of a good death. A start, albeit only a first step, has been the formation of our Caring Circle—a roster of residents in the independent living section who have volunteered to visit residents in Assisted Living or Skilled Nursing whom the nursing or social service staff feel are isolated or otherwise in need of an advocate. The response has been encouraging; about forty volunteers are each visiting an incapacitated resident at least twice a week.

The Caring Circle was an outgrowth of the "Three-D committee" (*Death & Dying with Dignity*), which had been established by the PG staff to look into all potential avenues toward a better end-of-life. This committee includes our Director of Volunteers, directors of Skilled Nursing and Assisted Living, our Social Service directors, our chaplain, a Pathways Hospice coordinator, our chief of nurses, the Skilled Nursing program director, and our Medical Director. I am privileged to be the resident representative on this committee. Our goal is to incorporate the departure from this physical world into what should be its natural place in the cycle of life. I believe we're beginning to make inroads.

Sidney Spies, MD