

*This is a resident case log of a patient encounter in which an “Aware Medicine topic” was central.*

### Physician to My Dying Father

In the middle of my first year as a doctor, I very briefly and suddenly became physician to my father in the days before he died. My twin roles as physician and son were well paired; each brought out the best in the other. Without a doubt, this experience forever changed my life as a physician, as a son and as a human being.

Before my father became my patient, he had spent several years passing away. His working life passed away with a large cerebellar stroke about 7 years earlier. However, he was able to reclaim his ability to walk, to speak, to enjoy conversation and to spend long hours listening carefully to the other-than-human world of the oak savanna around his home. One year ago he passed much further away with a major heart attack, followed a week later by a massive embolization of his right middle cerebral artery. He was no longer able to walk or feed himself, but he still enjoyed simple conversations despite his growing difficulty in understanding. He and my mother spent a difficult year seeking various forms of rehabilitation, looking for suitable living arrangements and fighting infections. He started having seizures. He was found to have MRSA endocarditis from his pacemaker. It was after a prolonged seizure that his ability to communicate through speech passed away, and his doctors transitioned his care to palliative.

After the first night at my now mute father’s bedside, I saw that in order to be a good son I would need to regard him also as a patient. Having made the transition to palliative care in a large urban hospital, he seized for over an hour as I tried to tactfully explain my family’s beliefs to residents not unlike myself. I explained that by seeking to treat his seizure we were not trying to prolong his life but rather to preserve whatever of his mental clarity we could in order to prepare him for his dying process. My family believes that the process of dying is very important. We feel that death is a great opportunity to begin a transition to the next place “on the right foot.” By claiming my role as a physician to my father, I was able with medication to abate his seizure and to prevent him from having any further seizures. Despite his inability to speak, he remained conscious and communicative up until his final breaths. This was as he had wished it to be.

My family brought my father home for 3 nights and 4 days during which I slept and sat at his bedside. My personal beliefs in the sacredness of the human being drew me to ask how I could best serve a man who had served me beyond any reciprocation. This belief also drove me to make myself vulnerable to his dying process. This belief collapsed the separateness of my medical knowledge and absorbed the façade of medical professionalism. Although the technical challenge of providing comfort was minimal, the challenge of providing explanation, confidence and compassion to my family and dying father shook me to my very soul. The care for my father was the most powerful, precise, intimate and emotionally connected I have ever provided.

While a slow death is obviously far from favorable, my father’s passing now seems a gift. Although far from ideal, he had a great death, at home, among family and friends, with uplifting thoughts and sounds, in an old farm house, surrounded by a beautiful forest, in a divine valley. My family and I are humbled by the experience of helping to manifest such a death. We supported one another exquisitely through a vast continuum of emotions. The love I felt for my father brought out the best physician in me, and I have no regrets. I now feel that as advised by at least one millennia-old medical tradition, one’s patients are best regarded as kin.