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Death

Existence is filled with stresses. When we are young, we feel invincible. As we grow older we come to realize that we are not invincible. All of us have to face our own death and the death of others around us. The scriptures are explicit about death.

"Just as man is destined to die once, and after that to face judgment . . ."
(Hebrews 9:27)

We cannot avoid death. There is, however, no preparation for the emotional stress of watching someone we love die. It is incongruous to me, that I have spent my life studying the neurological and psychological functions, as well as the diseases of the brain, only to have the people closest to me die of brain disease. My father died of a brain tumor. My mother had a stroke to start the deteriorative process that led to her death. Now my brother has the most malignant of brain tumors that will cause his death soon.

My father lived for three years after he was found to have an inoperable slow growing tumor. During those three years he slowly deteriorated. Fully aware of his fate, he would often beg me to end his life. He said to me, "You know how to do it. Don't let me lay here and suffer." My response to him was, "Dad, you know that I can't take your life. I was trained to save lives, not to kill. Besides, God does not give me the right to take a life. The Bible says 'You shall not murder.'" We prayed for God to give him comfort, and he would not mention the subject again for weeks. Then he asked me again. Finally, his speech failed him and I did not have to go through the emotional agony of dealing with his pleas for relief. He did not want to lie there and suffer. He wanted to "go be with Jesus."

With lesions that destroy the brain, and with some forms of mental disease, there is destruction of the person within. None of our family wanted to see dad's personality obliterated as the tumor slowly destroyed his mind. Nevertheless, we had to watch it. Finally, when he could no longer eat, his body rapidly decayed. That, too, was hard to watch. His death brought relief for our suffering.

My mother's death was somewhat the same. She, like my father, was quite old. Dad was 89 when he died. Mother was 95. She was mentally clear until a year before her death. Then she had a stroke that resulted in a profound decrease in her mental clarity. At first the confusion was only minimal, but it gradually became worse during the next year. When she died a year later, it was so severe that communication was impossible. As my father's personality died before his body, so did mother's. Complicating the problem we had as we watched her deteriorate was a progressive loss of hearing during her last ten years of life. As

she became more and more confused we could not communicate with her in any way.

No matter how psychologically sophisticated one may be, it is painful to try to relate to and communicate with someone who isn't there. One would think that having worked with the mentally ill all of one's life like I had, that it would not be hard to deal with those you love when they no longer have normal mental function. It is not. The relationship we had with them in the past causes us to expect predictable responses. When they do not occur, we are confused.

A heart rending aspect of work in psychiatry is trying to help the relatives of chronically mentally ill patients come to grips with the personality loss that their loved one has suffered. When a young person develops schizophrenia, it is particularly difficult to deal with. It is equally difficult when someone develops Alzheimers disease. I have known this for a long time, but it only became real to me when my brother became ill. I admit that the consequences of his illness at age 68 are not the same as those that occur in a 17-25 year old patient with schizophrenia. Still, the personality deterioration is similar in many ways. Our response to personality loss is the same no matter what the etiology of the illness may be.

Fortunately, my brother is a Christian. I know that his resurrection body is going to be perfect. He will dwell in that body through all eternity. Nevertheless, God made us to grieve when we lose a person we love. That is an inherent part of our being. My knowledge of his fate will not prevent me grieving. All of us have to grieve. Anticipatory grief is an impossibility.

Years ago I read a medical publication that espoused such an idea. I did not believe it when I read it. I thought that I would have grieved before my parents died. I did not think that it would matter whether they died suddenly or slowly. After all they had lived long and productive lives. I had them longer than most people had their parents. Surely I would be able to accept their death with a minimum of grieving. That turned out to be a false assumption.

When my father died I was very business like. I told mother, and proceeded to notify everyone else who was close to us. As soon as my brother arrived from Florida, we arranged the funeral. I did not shed a tear. At the funeral mother cried, but neither my brother nor I were moved to tears. Since I was unmoved, I felt my presumption was correct. I had already grieved. I told myself I had already released him to the Lord. I did not have to grieve.

In the months after his death, I missed my father, but I did not acutely feel his loss. Three months later I was driving by the nursing facility where he had died. Suddenly I was overcome with grief. I wept and wept and wept. It was then that I realized that Dr. Silverman had been right. You cannot grieve before the death of someone you love. Grief is a normal phenomenon, and has to be expressed.

Even if our relationship with the one we have just lost has been a love-hate affair, we still have to grieve.

What takes place when we grieve is a deathexis of the lost loved one. Deathexis is a word used in psychology and psychiatry. It is hard to find in a dictionary, but it means to emotionally detach ourselves from someone. There has to be an emotional release of the person. This has to occur because there is an emotional installation of that person in us. When we love someone we make that person part of us. They are spiritually installed IN us. They become one with us. Wherever we go they go too, and vice versa. Some people would call this bonding, but is more than bonding.

When the installed person dies, the reverse has to take place. They have to be disinstalled. We have to give them up to the Lord. This is very difficult for people who are not Christians. Their only recourse is to deny their death. Sometimes they act as if the person never existed. This is why we see so much unresolved grief in non-Christians.

There are three reasons Christians handle death better than the unregenerate. First, we have hope for the future. Man is future oriented, and he must have something to look forward to. With promises of a future life far better than the one we have here, we have hope of escaping oblivion. Most of us do not want to live on in our children's lives as some people expect to do.

Second, we know that our redemption has resulted in forgiveness. We do not have to expect to have our sins weighed against our good deeds. Our fate is determined *ONLY* by faith in Jesus Christ.

Third, we have institutionalized and ritualized mourning. Our funeral and memorial services as well as our Requiem Masses, are designed to facilitate mourning. They provide an opportunity to grieve in a socially acceptable setting. We are expected to grieve. This makes it much easier. The service also helps us to look forward to being reunited with the one who dies. We are aware of the possibility that this may not happen because of The Judgment, but it gives us hope that it can take place.

There are other losses that have to be grieved. People have to grieve the loss of a child as a result of abortion or miscarriage. A recent article published in the AMA Journal said that the post-abortion syndrome did not occur. Those of us who have looked for it find it is almost universal in women who have abortions. I am sure that the woman psychiatrist who wrote the article, has either had an abortion or has prescribed many of them. She is using the defense mechanism of denial to avoid the guilt that a person feels when they participate in the destruction of a life. It is hard to miss a post abortion syndrome if one is willing to ask the right questions. When this is done, one encounters some degree

unresolved grief. Abortion is associated with unresolved grief in the parents of the aborted child. The same is true for miscarriages (spontaneous abortions).

Unresolved grief occurs in relatives of a person who has committed suicide. It occurs frequently when they have been murdered. The reason is that the emotions of shame and anger occur when a person commits suicide or is murdered. This may inhibit grieving. The legal events that take place after the persons death delay it even more. Normal grieving frequently does not take place until much later, if at all. I have treated persons who have had these things happen in their families, and seen grief released years after the person has been died. In both instances the death does not have to happen. It is difficult to forgive someone who has deprived us of love by their own hand. It is also difficult to forgive a person who has murdered someone we love. This is why the anger or shame has the effect of blocking grief.

The recent brouhaha about Dr. Jack Krevorkian is also important as we discuss this subject. If you remember I once described our feelings of my wife and I as we toured the Nazi concentration camp at Auschwitz. Both my wife and I were in tears as we walked through the buildings and grounds of this killing ground. No one had to say anything to us. We began to cry as soon as we entered the gates and continued until we left. The Nazis had murdered 1,500,000 people in that tiny place. Dr. Jack, the killer, has murdered only 14, but his crime is just as heinous as the physicians who worked at Auschwitz or Belsen or Regensberg or any of the other Nazi extermination camps.

When the Nazis started their killing program they too began with abortions, then killed the aged, the mentally deficient and Jews, Poles and Russians. They killed not only those they considered non-Aryans, but German Aryans if they were a burden on society. We are already killing 1,500,000 babies a year because we consider them non-persons. Dr. Jack does not think it wrong to kill those who are going to die anyway-if they want to die. We, therefore, have to ask, if Krevorkian is allowed to get away with assisting suicides, how long will it be before others do the same.

Dr. Krevorkian is a pathologist. His whole life has been devoted to the dead. He obviously does not have the compassion that is almost always found in someone who deals with the living. He has a ghoulish outlook on life. I see him as no different from the perpetrators of the Nazi extermination program. They did not kill anyone themselves, but they planned and initiated it. We should all pray that this country will come to its senses and see where we are going. The Netherlands has recently legalized euthanasia. Are we close to legalizing it too? I hope not!

In the last few years I witnessed the death of three people I loved most. I even heard the pleas of my father to end his life. These events caused me great pain. I am intimately familiar with the despair of death the terminally ill suffer. As it is a

spiritual disease, I do not believe it should be treated by ending the persons life. Therefore, I am even unalterably opposed to euthanasia as a "final solution" for those who are terminally ill. I am sure that I am profoundly influenced by my Christian beliefs. Though I do not believe in unnecessarily prolonging the lives of people who are terminally ill, I do believe that the life that God has created is inviolate.

We do not have the right to end our own life or the life of others. God has said "You shall not murder." This is an absolute taboo. Dr. Jack Krevorkian has no right to disobey the commands of God.