

Dying At Home--A Good Way To Go

My father died recently at the age of 77. He had been diagnosed with metastasized cancer six months earlier after already having his bladder removed a year before this new diagnosis.

From the early days when he learned of his imminent fate, he knew that he wanted to die as easily and comfortably as possible. He planned, with his new palliative care doctor at St. Boniface Hospital, to die at home and I'm happy to say he succeeded with the caring support of the local palliative care unit here in Winnipeg.

Mom and Dad had a tough time the last six months, each in their own way; Dad coming to terms with his failing health and approaching death, Mom in the role of caregiver, doing all she could for Dad while trying hard to look after herself but also preparing herself for Dad's leaving. They had had 53 wonderful, rewarding years together during which they each accomplished many goals, shared many joys and sorrows, and nurtured close relationships with scores of people. In this, they were very fortunate.

The death of a younger person is undoubtedly much different, but dying at home might be an attractive option for a person of any age. To encourage people to experience it is what motivates me to write, because for my family and me, and in particular for my Dad, it was a wonderful process even though saying good-bye was difficult.

Dad had been in hospital for assessment just previous to his coming home to die and he was given options to prolong his life right up until the end even though his doctor knew what Dad wanted. The care on the palliative care floor at St. Boniface Hospital was very efficient, caring and respectful of Mom and Dad's wishes, but when he already had tumors in his bones and internal organs, then went into renal failure, Dad was very sure he wanted to be home.

Without hesitation, the home care coordinator responded to his request and his three children were called from BC to come see him before he lost consciousness. To their credit, the professionals arranged to get Dad home later that same day, three days before he died. Although he was very ill, my Dad was so happy and relieved to be in his familiar surroundings, in his own bed, and in a situation where people could be in the home with him, yet in the bedroom just a few at a time.

We all kept saying how much harder it would have been for us to regulate visitors if he was in hospital. At home, the immediate family, including grandchildren, felt supported and comforted by close friends and extended family who dropped by the house for just that purpose. When Dad was awake, he was able to enjoy the hugs and last conversations with many people who loved him in the quiet comfort of his own bedroom. The quality of these interactions both in the bedroom and the living room were charged with love and shared sadness. The Kleenex was out and well used, but nobody felt alone. If they did, there was a comforting hug available on the spot.

Throughout the process of dying, Dad (and Mom) had very attentive, honest care by numerous attending health care professionals, a testament to the success of our marvelous Canadian public health care system. At home, a palliative care nurse visited twice a day and was always on call when we needed someone. All our questions were answered and our experiences were validated with understanding, compassion, and relevant anecdotes about other deaths. Drugs were provided to help make Dad comfortable in a form that family members found easy to administer. Every possible manner of necessary equipment was efficiently provided by delivery or pick up. Considering all the people and outlets that were involved in Dad's care, we found it amazing how smoothly everything was looked after. At no time did we feel frustrated or unsupported by 'the system'.

In the end, following the medical advice we received, we gave my father increasingly stronger drugs to keep him comfortable and minimize the physical pain he was experiencing. He gradually slept more and more so that on the last day, as Mom rested beside him, he slipped away from us in his sleep...so gently. It was so sad and so beautiful at the same time. About fourteen family members were visiting quietly in the living room as my parents rested that afternoon. When Mom came out of the bedroom to say that she thought Dad wasn't breathing, we were all there together to cry and hug and continue to be with Dad if we wished. Drinks, food, and phones (including many cell phones) were immediately available as needed, and we all felt shrouded in the intimacy of the profound private experience we were having together, undistracted by the environment and routine of a hospital.

For our family, my father's decision to die at home was a wonderful, albeit sad, life experience. We are comforted in the days after his death to know that he died the way he wanted to and that he received the best care possible in his situation. Being with him right until the end, helping directly with the care he needed, helped us feel useful and needed at a time when in the face of death we might have felt so powerless and alone.

If a family has an option to help their loved one die at home, on behalf of my family, I would highly recommend it. Not only can it be a more comfortable way to die for the ill person, it is an enriching healthy experience for those that grieve the loss. We are ever grateful to the 'system' and to the individuals working in it who made this experience possible.

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December 18, 2002

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