

# What is the Endpoint in Trying to Save a Patient's Life?

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## Understanding and Accepting Death

For understanding death, we should be clear about a simple fact of our existence on this planet. The being is the unconsciousness and is the reality of existence. The body is collected in the womb first and then throughout life till death. The being occupies the place in the fetus inside the womb and that being leaves the body when the person dies. The being doesn't die with each cycle of life and death. It will be alive and free for long time before it occupies any other womb. You are a being and the body is something you have collected; the body is not you. So at the moment of reading this article, understand yourself as a being inside the body. And as you will leave this body at the time of death the being will persist and the body will perish. This is just like undressing yourself, just assume it as undressing the whole body. This might seem awkward at the moment but this will start making sense when you start becoming aware. Considering that cycle, can you imagine that each one of us has lived somewhere in between 100-10,000 lives, repeating this cycle again and again. Doesn't it feel boring to do that over and over again? What is the point?

At the time of death, a person is no longer so much connected to his body, his family members, his wealth, his possessions, his qualifications, etc. You can understand this if you have stuck in fearful situations in life, where you no longer care for anything that you possess, your degrees, your wealth and even the people around you. In those times, you just want yourself to be safe and at ease. Death is a kind of an extension of an experience like that. You must have heard stories of fearless people; some of them might be quite fearful and attached to materialistic things in life, but just one near-death incident makes them fearless. They give up all their possessions and switch to a basic lifestyle. The famous book titled, *The Monk Who Sold His Ferrari*, conveys a similar message.

Just by understanding the simple concept of death as a very important part of life, you might start to think about the importance of death in our existence and stop running from it. The corollary can be day and night, happiness and sorrow, sleep-wake cycle and many more. Do you think night, sorrow and sleep are the important parts of existence? Definitely yes! But

there are some ignorant out there, who do not understand the real meaning of life, and those are the people who feel there should always be happiness, no sorrows. Can you live in places where there are very short night times? Some work alcoholics feel there should not be any sleep. But in the case of death, people think that is the end of existence. It is not so. What if we know that your long life span of seventy years is just a pop-up phenomenon and then we each one of us will be dead for a very long time before we're alive again? Existence is like that only: life-death-life-death-life. The cycle goes on with an increasing level of consciousness with each life and death cycle until the moksha is achieved. Looking at life with this viewpoint, death doesn't seem that bad.

Is there anyone out there who is willing to accept death? Very few. Most of us are not even willing to lose our mobiles, forget about life. But from a spiritual and psychological view of life, acceptance in life is one of the major factors that help one to go through the tough times. The treating doctor, relatives of the patient and the patient himself; all of them have a different perspective on how they look at dying. Well, most of the time, we feel the patient's relatives are often the worst affected and relatives think for the physician as it is like any other dying patient for the doctor. Doctors can understand how the relatives feel because all of the doctors have their loved ones, but relatives can't think like doctors. Amid all this emotional drama, we never really think for the dying, we just consider his physical and emotional pain as his suffering. Here comes the role of an aware medical professional who understands death, accepts it as the real possibility of our existence of the planet, and can become a "bridge" between the family and dying. An aware being can do a lot for the dying which is well beyond the imagination of an unaware being.

What are we trying to achieve by putting in more and more resources and avoiding death? What are we aiming for? Are we trying to fight nature and conquer death? What is the endpoint in trying to save a patient's life? We are constantly pushing our boundaries of death as science is advancing. Why is that we're not ready to accept death? Should we start accepting deaths? What is right and what is wrong? Should we stop trying to save every life? We need to find answers to these questions and decide on a case

by case basis as to where it will be the right step to put in the effort, energy, and resources, and where it is a waste and all the efforts will just prolong the morbidity and extend suffering.

In the real case scenario, there is no definite answer to these questions. But it can be concluded that there are a majority of patients that can be treated without any second thought and some of which we're sure of the mortality. The middle area of the grey zone is one that gives a challenge to the clinicians. In some of these cases, we might need to give in some days to understand the disease, body and the life within and decide when it is the right time to stop. This is where we need to choose what the right approach is. This will demand awareness of the physician in analyzing the situation as to how it is rather than how it looks like.

I can give an example of my personal experience here. There was a two years old child with a malignant liver tumor with extensive involvement of the liver. Surgical resection was not possible and liver transplant was the only option available. Mother didn't match the blood group with son and father who had the same blood group as that of the son, refused to donate a segment of the liver for his son. The patient was listed in the cadaveric graft waiting list. While waiting, we completed neoadjuvant chemotherapy and in the meantime, father agreed to become a donor. Serum markers and CT scans showed a good response to chemotherapy. As we planned for the operation, the baby developed cough and fever and lost some weight. So the patient was declared unfit for anaesthesia and we questioned if we will ever be able to transplant him. We worked on to give him more of comfort, and peace, rather than lots of medical interventions. Idea was to assess if the body is good enough to support the life within or not. If the body isn't able to support the life, it will leave soon. So we decided to observe the child over a week to ten days, so we know how he's doing, without much intervention. We treated cough, fever, gave him high calorie, high protein diet so as to give a last attempt to look if we could do something better for the child while at the same time getting prepared for the fatality. Parents were explained and consent was taken for no resuscitation in case of a fatal event. Everything was going on well, but one morning after 5 days later, the patient's mother informed that the child is a bit lazy.

His serum levels of alpha feto protein were out the same day and were highly elevated. I counselled the parents to take the baby home and give him palliative care. But just a few hours after that, the child aspirated while the mother was giving sips of water. The child was not resuscitated, no attempt at intubation or cardio-pulmonary resuscitation was made.

How do I see this death? The most unusual event was that life within the body left perfectly at the time when we stopped trying. This means we tried until the right time. As soon as we realized that he might not be able to tolerate the operation, we tried to keep the baby in as much comfort as possible. Also, by not doing a cardio-pulmonary resuscitation, we didn't prolong the suffering of the child. The parents were satisfied that they tried their best, the baby didn't suffer, and I as a clinician felt so fulfilled from inside to take the right decision at the right time. I am not saying that this was the only right decision for the baby. There could be many decisions depending on the circumstances. But as per my understanding of the circumstances at the time, I feel we did the right thing for the child. Life is a learning process, we should always try to decrease the pain and suffering of ourselves and everyone around us. I could do a little help for the child and relatives. In the future, maybe I would grow more and help more. Just keep trying!

If we come to terms with the realization of the simple fact that healthcare workers are only human beings and medical science has not reached a level beyond the creator of the universe, acceptance of reality is much easier. Understanding and awareness of death by the clinician is very helpful. An aware clinician will be able to judge when to start the treatment and when to stop trying. His awareness will also be very helpful for the colleagues and his patients. He will never think of death as his failure. It is always the intention and the efforts which matter. No human being has ever been or will ever be able to conquer death!

#### **Suggested Reading:**

1. Death, an inside story. A book for all those who shall die. By Sadhguru.
2. Inner Engineering: A Yogi's Guide to Joy by Sadhguru
3. The Monk who sold his Ferrari by Robin Sharma

**“ Death is not a calamity, it's a natural process of life. ”**

*Sadhguru Jaggi Vasudev*