Hospice gives not an ounce of cure, but a ton of care - and that care can bring us to healing.

There are essential differences between curing and healing. Stroke victims may be cured of the effects of the stroke, but they may limp for the rest of their lives. If, because of their limp, they feel threatened, singled out, embarrassed or marginalized, they may be physically cured, but definitely not healed. Curing returns the diseased part to functional integrity; healing helps return patients to wholeness and wellness - even though they cannot ever become physically well. Healing helps a person manage the emotional burdens and resolve life conflicts.

The terminally ill need healing to enable them to leave this world and their families without rage, hate, frustration or anger. Hospice realizes that the terminally ill also need suffering control: someone to care for the nuances of their feelings, faith, ideas, and sensitivities. Hospice understands that caring leads to healing.



What Can We Hope for Now?

What hopes can we have at this moment of apparent hopelessness?

• First, even in the throes of death, lingering hope shows its vital signs. Dr. Elisabeth Kübler-Ross wrote that even the most accepting of patients keep hope for a miracle hidden in the back of their minds. Nobody is utterly without hope. The Jewish people has had *tiqvah*, "hope," in the most hopeless circumstances and survived.

- Second, there are hopes, other than living longer, that are hidden in a person's mind. These are hopes for one's children, siblings, friends, the community, even the world. These are hopes that the dying harbor even though they will not live to see them personally fulfilled.
- Third, never do anything that will shut the door on hope. Doctors often close doors because they want patients to understand that there is, in fact, no exit. We must be sure to leave a back door ajar, to allow the stricken to squeeze through whatever hope they can conjure up. We should not permit loved ones to die boxed in closed containers - hopeless and suffocating.
- Fourth, there is a hope that pierces even the veil of death. It is the hope for a life after death. What that life is to be, what we will become, what truths we will discover, what form our consciousness will assume, we cannot divine. It is unknown to us. But this much we know for a certainty: hope is stronger than death.

The first imperative of Jewish life is: Hold on. The final imperative: Let go.

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Baycrest Health Sciences is fully affiliated with the University of Toronto



Jewish Hospice: To Live, to Hope, to Heal

Adapted from *"Jewish Hospice: To Live, to Hope, to Heal"* by Rabbi Maurice Lamm and used with permission from Jewish Lights Publishing





The First Imperative of Jewish Life: Live!

Hold on to life. Live even when life begins to end. Sarah knew this Jewish wisdom intuitively. When the doctor told her the most terrifying sentences anyone can hear, "There is nothing more we can do for you. Now you're in God's hands," her children began to grieve, but Sarah didn't. Instead, she made peace with her plight. She fought when there was a chance to win; now she declared peace. She found that although life was still a struggle, she could discover new meaning in it.

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Sarah decided that she could leave her close family and friends a bequest they would never forget: how to face death. She would close her life with character, dignity, and spirituality. She would thank those who had helped her, apologize to those she might have hurt, and give her family some final words of advice.

Sarah spent the last days of her life with her family. She called relatives and said farewell. People wept, but they were stunned by her courage and overwhelmed by her self-control. Sarah whispered to each of her children about their strengths and weaknesses and about how to conduct themselves. Though her breathing was labored, she felt peaceful and pure. She chanted the Jews' final prayer, the *Vidui*: "Hear O Israel, the Lord is our God, the Lord is One." Sarah died completely at peace. She held on to the people and the things she loved until the very last moment.

Thank You, Hospice

Sarah was fortunate to have hospice-trained caregivers provide for her. The purpose of hospice - not to cure but to care - enables us to live our last months in tranquility, not in agony; to accept the inevitable rather than fight to overcome it. In addition, hospice may enable us to appreciate the spiritually of these moments and to orient our souls as we prepare to return to God. Holding on to life, even while we are dying, is hospice's greatest value. Sarah's last chapter could not have been written without the angelic strokes of hospice care.

Hospice comes in several forms: a unit in a hospital or seniors' home, a freestanding building caring for the terminally ill, or a hospice team that visits the patient's home. All forms of hospice are designed to ease people into the next world. To achieve such a lofty goal requires a professionally trained squad of multi-disciplinary specialists. The medical staff - doctors, nurses, and pharmacists - knows how to manage pain better than most other healthcare providers. The humanist team chaplains, psychiatrists, social workers, therapists, and highly trained volunteers bring compassion and total commitment to care.



Accept the Unacceptable

Dr. Elisabeth Kübler-Ross said that the final stage of a person's dying is often marked by acceptance. During this stage, patients acknowledge that the ultimate decisions of life and death are out of their hands. But, acceptance is different from resignation. Acceptance liberates us from crippling and counterproductive emotions such as anxiety, fear, guilt, and remorse. Acceptance can be a surprising source of serenity and an antidote to months of denying, camouflaging, and struggling against the truth of dying. This explains why some dying patients can be cheerful and even good humored.

There is one caveat: no person accepts his or her fate 100% of the time. Because we are human and intimately tied to life and consciousness, we will deny the reality of death at some time. So we must respect people's denial and allow them to mix acceptance and denial when they must.

Hospice insists that patients be told the truth about their medical conditions. Most times, the truth lets patients cope better, not worse. It enables patients to set their house in order. In addition, truth establishes a bond of trust and reliability between patients and their care providers. In some cases, when the patient is elderly or mentally vulnerable, or in other special circumstances, withholding the truth might be advisable. Jewish tradition holds that we should repress the truth where the patient's knowing could prove harmful.

Healing Even As We Grow Sicker

When cure is no longer possible, and the body begins to surrender, we must recognize our new needs. We need to find tranquility, to tend to our soul's needs, to prepare to slip gently into God's embrace. When we have searched passionately for a cure but cannot find one, we need to look for care.