



Mortal dread

'So you're telling me there's no cure? That I'm going to die?'

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 ${f F}$ ortunately, most of us don't diagnose terminal illnesses very often. But every so often patients do turn up with some malignant illness for which there is no realistic hope of cure. We tend not to dwell on this unpleasant fact, but move on rapidly to a discussion of what can be done in the way of palliative care. We usually assume the patient has a marked fear of death, but rather than confront this head on we talk about coping with uncertainty. We often advise 'living day-to-day', and make the point that none of us have any guarantee we will be alive tomorrow. By and large we see our role as helping patients to live as best they can until the moment death arrives, rather than helping them confront death.

Is this the most humane, pragmatic response available? Or is it a type of denial, fuelled partly by shame at our therapeutic impotence and partly by our own fear of death? Even if this is true, is denial always such a bad thing? Can we ever hope to profitably understand our own mortality?

Religions of course, have plenty to say on the subject of death. Indeed it's hard to imagine a religion that doesn't come with a guide to the afterlife. The common assumption is that death refers to a bodily event, which may even be liberating for the imperishable and immaterial soul. But while religious belief can be a great comfort in the face of death, it remains a matter of faith – and all but the most pious have moments of doubt.

If we understand death as death of the

whole person, the end of body and consciousness, can we still confront it with any sort of equanimity? Epicurus, the third century BC Greek philosopher, certainly believed that we could. He argued that fear of death was entirely irrational. 'Death', he wrote, 'is nothing to us. For all good and evil lie in sensation, whereas death is the absence of sensation'. Epicurus made the perceptive observation that while we think of death as the ultimate journey into the unknown, it is in fact no different from the time before our birth. Above all, he insisted that we should not let fear of death diminish our enjoyment of life.

His contemporary Epictetus, a philosopher of the so-called 'Stoic' school and coincidentally the philosopher most closely associated with cognitive behavioural therapy, likewise agreed that 'death is nothing terrible... what is terrible is the judgment that death is terrible'. His reasons were slightly different. For the stoics, a good life was one lived in agreement with nature for them a complex concept involving belief in a pre-ordained fate and the idea that all matter was imbued with an intelligent, quasi spiritual force often referred to as 'breath'. Any individual is but a small part of a far greater organism. The task of men, and philosophers in particular, was to emancipate themselves from finite concerns and focus on the eternal - even though this did not include their personal survival. Life was likened to a banquet from which we should

graciously retire at the appropriate time.

Stoic philosophy with its emphasis on calm acceptance of a greater order and the need to focus on death in order to overcome our fear of it was popular with tough minded Romans such as Cicero, Seneca and Marcus Aurelius. For many others it was just too hard a road. Leonardo Da Vinci took a more humanist position when he said: 'Just as a day well spent brings happy sleep, a life well spent brings happy death'. Happy people are not preoccupied with fear of death. Mortal dread has its origins in human misery. Like many enlightenment philosophers, he saw death as a regrettable fact that was unprofitable to contemplate. Dwelling on it won't teach us anything useful, it will only depress us. Fortunately however, while we are engaged in pleasant activities such fears don't bother us.

While many contemporary pragmatists share this view, there are a number of 19th and 20th century philosophers who have reverted to the stoic insistence on regularly confronting death. Unlike the stoics however, they take no satisfaction in death being part of the overall meaningful nature of the universe. For Schopenhauer, the individual self and its ever striving will is destined to live a painful and unfulfilled existence. The only escape is to achieve a state of indifference such as may be attained in aesthetic contemplation. Nietzsche, never one to put away his own will, argued that superior man would live in the awareness of death but not be cowed by it. He claimed that he would not wait for death to creep up on him, but would go proudly to it at the correct time. Sadly he was unable to live up to this boast – already incapacitated by madness, he mutely succumbed to the most ordinary of ends, influenza, secondary pneumonia, and finally a heart attack.

Existentialists, in particular Heidegger and Sartre, also encourage the cultivation of an awareness of death. While the death of an individual is cosmically meaningless and absurd, its contemplation can shock him or her out of the complacency and numbing obedience to conventionality that characterises so much of human existence. Freud made a similar point when he compared life without awareness of death to a Platonic romance, or a card game played without stakes. For Heidegger, contemplating death was essential to achieving individuality. As he points out, 'death is something each of us must do alone'. To try and ignore death is therefore akin to refusing one's individuality and leading an inauthentic life.

Philosophers vary enormously on the subject of death, as they do on most others. The views of Epicurus and Leonardo fit best with contemporary palliative care practice in that they suggest that, while still alive, we should focus on living as best we can and leave death to the dead. While this would strike Epictetus, and particularly Heidegger or Sartre, as a profound 'cop out', unless your newly terminal patient is already a devout existentialist it's probably an inappropriate time to congratulate them on this great opportunity to start leading a truly authentic life.

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Conflict of interest: none declared.

