



DR CHOCHINOV

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Dying with dignity

THE palliative care approach to the end of life is how to help dying people achieve closure with less suffering and more comfort, rather than holding on to hope of a cure.

For people with life-limiting conditions, medical attention is often given to ease pain. But freeing them of distress and suffering should also mean paying attention to their psycho-social, existential and spiritual well-being.

And this is where a new model of palliative care called Dignity Therapy comes in, says Harvey Chochinov, a professor at Canada's University of Manitoba and director of the Manitoba Palliative Care Research Unit.

Dr Chochinov, who was in Singapore recently, says terminal illness is the ultimate assault on a person's sense of identity and dignity. Words like as "I no longer

feel like myself" or "life has no meaning" are often uttered in such circumstances.

A study by Dr Chochinov found that loss of dignity is a major reason why people near the end of their life seek to hasten death. Dignity Therapy – or what he prefers to call "dignity conserving care" – aims to turn the tables by making them feel valuable and worthwhile.

"Kindness, humanity and respect – the core values of medical professionalism – are too often overlooked in the time-pressured culture of modern health care," he says.

As part of this therapy, he invites people, in recorded conversations, to talk about the things they most want known or remembered about them – things that really speak the essence of who they are. These conversations, with edited transcripts, are bequeathed to their loved ones. The process begins with a trained in-

terviewer talking to a patient and asking them about their life – their history, their accomplishments and how they want to be remembered – in a tape-recorded session. When the interview is done, the content is transcribed, edited and shaped into a narrative. This is then read to the patient for any further changes before the final document is given to them and their family.

Dr Chochinov says: "There is a good way to die and a bad way to die. When dying patients are seen, and know that they are seen, as being worthy of honour and esteem by those who care for them, dignity is more likely to be maintained. In turn, caregivers are imbued with the dignity rendered by their actions, better enabling them to provide care and comfort to those nearing death."

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