

Death and terminal illness

[Life](#), [Death](#)



There is no escaping death. It strikes without warning. It is never too early to talk about death. It is something not to be delayed, avoided or worst, considered as taboo. While the idea of talking about it could be one of the most difficult ordeal one has to face, we cannot always delay it until later, because no one knows for sure when that later will come, sometimes what we consider later is coming soon than we can ever expect. It is normal to feel threaten on the idea of this topic of conversation, but it is important to know what our loved ones' final wishes are while they are very much able to communicate it.

In the brochure provided by the National Hospice Foundation, the following are suggestions on how to effectively communicate ones wishes at the time of death, as it goes: [It is best to] plan ahead. Let your loved ones know now-when you are still able to effectively communicate – what your preferences for treatment would be if you were confronting a terminal illness. For example, you may want to indicate that if you ever become terminally ill, your preference is to receive hospice care. It would be beneficial in the long run if one has earlier decided what he wants for his own end- of life care.

To make sure that such wishes are granted when the need arises, the foundation suggests that: [One] draw up a living will of written instructions to make known what you want done if, for example, you are seriously ill and the only way you can be kept alive is by artificial means. [It is advisable to] have a durable power of attorney in place that authorizes a person of your choosing (usually a spouse or close relative) to make decisions if you become unable to do so for yourself. Make sure to communicate your wishes

to this person and make sure this person agrees to assume the responsibility.

These and other advance directives can be useful tools for making known your end-of-life care wishes. However, they are not intended to be used as stand-alone documents. It is also important to have detailed personal conversations with your family and loved ones about these issues. [You can always] pick a substitute decision-maker to speak for you in case you can't speak for yourself. [You should] be a good listener. Keep in mind that this is a conversation, not a debate. Verbally acknowledge your loved one's rights to make life choices – even if you do not agree with them.

Sometimes just having someone to talk to is [already] a big help [in itself]. Be sure to make an effort to hear and understand what the person is saying. These moments, although difficult, are important and special to both of you. The website called Fraser Health, reminds us not commit a common mistake regarding our expression of our preferences regarding medical treatment and other matters in the event of a medical crisis when it notes that: Some of us make a will; others also plan their funeral or memorial service; and a few tell their closest relative or trusted friend about their last wishes.

We make some choices and plans for the time surrounding our death. Those of us, who take the time to make these preparations, do so to spare our loved ones the stress of having to guess what we would want when we become too sick to communicate our wishes. Most of us never complete one very important task – telling our families and doctors what medical procedures and investigations we would want if we face a life-threatening situation or the end of our lives and are unable to communicate.

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It is never too late to plan for your medical care and make your wishes known while you are able to make your own decisions. It is wise to discuss your end-of-life wishes as early as possible and not to wait until the crisis calls for it. You can take advantage of occasions wherein the perfect attendance among your family members maybe expected, the likes or birthday celebrations, family reunions, marriages, graduation, death of a family member and the like. Most often than not, expect that the initiative will come from you.

These type of discussion does not exclude the attendance of children, after all, it is a family matter. Other than your family, you doctors and lawyers must also be made aware of your plans as they will be playing a huge role in its implementation when time comes. You should expect resistance on your first try, but don't lose hope, it is just normal for your family members to feel that way.

Reassure them that this action of yours will be beneficial for the whole family, you may want to express your love for them without words(touch of the hand, hug, etc.), just to make them feel better. Discussing about death can really be overwhelming and all the more frightening but it brings with it the much needed peace of mind any bereaved desperately needs to have. By doing so, you can take comfort in knowing that you may be able to have a dignified death. When you love someone, you wanted to give him the best. You want to make sure that he gets what he wants as long as it is for the better. This thought is stretched until the end of life.

When time comes that our last respects are in order, we wanted to give our loved ones only the best, and that best is not just of our own standards but <https://assignbuster.com/death-and-terminal-illness/>

most importantly or the one involved. Let us spare our bereaved of the pain of failure for not meeting our needs and wants for the very last time. Let us make their lives easier by laying it out early once and for all, for them to just follow. In which way, they can be rest assured that we can finally rest in peace that they may so live in peace.