

Another Grape Harvest

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“My mother is staying at a respiratory care center in Chun-Hua. The doctors seemed to have abandoned her. Paramedics said my mother was too old, and this was the best they could do. I think my mother appears to be on her deathbed. I would really like to transfer her to another hospital with better service; but, my religious sister does not want to keep our mother in pain. She does not want mother to live on with a tracheotomy tube or any life-extension procedures, neither does she want mother to stay far away from home. I really don’t know what to do. My mother is still conscious, and I know the older she gets, the more suffering she endures, but I still wish for a better living condition in the final stage of her life. I hope I can transfer her to Tzu Chi hospital. You are my last hope.”

The Tide-Turning 69 Days

Respiratory care units accommodate machine-bound patients. Families are often full of hope that the patient’s condition will improve by transferring them. Some families want to forget what happened in

the previous hospital.

Sometimes families have impractical wishes for their terminally ill family member. This can bring much pressure to the medical staff.

Most of the patients are like candles sputtering in the wind; their lives are ready to be snuffed out at any moment. A lucky few might live without machines and reunite with their families. It is very rewarding when the weary staffs see the patient and their families’ faces break into big smiles.

Last May 16th, Mr. Liu called and expressed his idea of transferring his mother to Tzu Chi hospital. He spoke in an anguished and choking voice. I tried to understand his thoughts, and told him two things: Firstly, the goal of the respiratory care center is to maintain a high quality of life. To patients that are conscious, tracheotomy is a better choice. Secondly, there is only so much the hospital can do in case patients don’t get better.

Sometimes we have to choose to let a patient perish with less pain instead of trying to save them at all costs. For that matter, it is better if the hospital is close to home.

Mr. Liu said, “The doctor here also



Our most gratifying accomplishment comes from patient's improvement and being able to live without the assistance of machines.

said that a tracheotomy is a good choice, but my sister said no. I also worried that a tracheotomy may endanger her life if things go wrong, and my sister would blame me. I know my mother's condition. I just hope to make her last days easier."

Six days after her transfer to Tzu Chi Hospital, the families agreed on tracheotomy. After the operation, the patient could drink water little by little from a milk bottle. She could also go to the Buddha's hall to worship.

Mr. Liu said, "I am glad that we transfer her to the Daling Tzu Chi hospital. It is worthwhile just to see my mother drink water herself. Now we don't need to tie her hands and my sister does not blame me so much anymore."

"The information on the bulletin board and your medical team's thorough explanation enabled me to make a sound decision."

One day, the patient's ECG was erratic. After taking a blood sample, which reviewed a high potassium level and an immediate kidney dialysis was required. Mr. Liu agreed the procedure on his mother with agony.

Several days later, he looked sullen, when asked how he was doing. He answered on the brink of tears, "Last night I almost wanted to jump out the window and kill myself. I feel a lot of pain because my sister blamed me for letting mother undergo dialysis. This process caused mother a lot of pain. For God's sake, I

made this decision for mother's benefit."

I invited him to my office and consoled him while he let his grief out. I explained to him how serious it would have been if we had not run the dialysis treatment immediately. On the other hand, his mother's condition deserved the procedure.

Fortunately, her condition gradually improved, and she did not need a long-term dialysis treatment. She also became independent of the respiratory machine and was doing well. She was discharged from hospital on July 25th. Mr. Liu came with the grapes from his own backyard and when he parted. He said to the doctors, "I deeply appreciate that you replaced our tears of grief with joyful smiles. I will come back to visit you in the next grape harvest."

Quality Living Versus Dying with Respect

Now another year has passed. I vaguely remember the 69 days that turned the tide for patient Liu in the hospital. I also recall another episode of another patient's daughter, Mei, who said to me, "I expect my mother to live through this critical moment."

It has been three years and I still remember the heart-wrenching moment of Mrs. Mei's emaciated hands and failing organs. To the seven children whom she raised single-handedly, Mrs. Mei was a beacon of life. Therefore, they asked the hospital to try all kinds of invasive treatments that were ultimately useless.

Mrs. Mei's last few days turned out to be extremely painful.

Most patients in the respiratory care unit are terminally ill. After being transferred from the emergency ward, the intensive care unit, or other centers, family members often become fatigued, suspicious of any move, and even hostile to medical staff. They jump on every change in a patient's condition, so medical staff must be on constant alert.

In addition to dealing with the patients, staff at respiratory care unit also must ease the frustrations of the family members. They must communicate with family members tirelessly to ease their worries.

Patients' physical conditions are unstable and family members' attitude can influence medical decisions. Medical personnel need to take care of both the physical and the mental aspects in order to foster good public relations.

We assure patients and families for the best possible treatment and we do not give up prematurely. On the other hand, we do not use invasive treatments that bring suffering toward the end of the patients' lives.

On this anniversary date of the Liu's episode, I reflect on the families going through the decisions with love; therefore, we should not prejudge since there is no right or wrong. The value we offer lies in providing good quality care and a peaceful passage with solemn respect.