



Pro-life Healthcare Alliance

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PHA Monthly

*Newsletter for the Pro-Life Healthcare Alliance
Twelfth Edition*

Welcome to the twelfth edition of PHA Monthly, the e-newsletter for the Pro-life Healthcare Alliance. This newsletter provides another opportunity for the PHA to share pro-life information about current healthcare issues, PHA events, contributions from members and other relevant information.

Please [share](#) your ideas and suggestions with us.

Visit our website at www.prolifehealthcare.org for more information.

Real Death, Real Dignity

Post written by: David Mills

He was a dignified man suffering all the embarrassing ways a hospice deals with the body's failure as cancer begins shutting down the organs. Dying in a hospice, you lose all rights to modesty as you lose control of your body. Few men could have found the indignities of those last few weeks of life more excruciating than did my father.

The man who was always in control depended entirely on the help of others, most of them strangers, most of them nurses' aides, cheerful young women the age of his granddaughter. The man who was always doing something constructive could not move from his bed. The man who had always made his words count could not speak. The man who was always reserved could hide nothing, keep nothing to himself.

I did not want to see him there. This was what dying of cancer is like, and my father, being the man he was, took it like a man. It was the hand he'd been dealt, and he was going to play it, as bad as it was.

Though he died five years ago, in bookstores I still find myself starting to buy a book I know he'll

like, and thinking as I start to pull it off the shelf, "No, wait," or deciding to ask his advice on a matter great or small, and thinking as I reach for my phone, "No, wait." Every time I feel that sharp burning pain behind the sternum you get when your body panics and floods itself with adrenalin. The world has a hole in it and one that will never be filled in this life.

It is a great blessing to be with your father as he dies, though mercifully a blessing you will enjoy only once. I was sitting in his room at the hospice, my wife and children having run round the corner to get lunch, my mother having lunch with an old friend round another corner, my sister up the road at her job running a thrift store. He had, as far as we knew, as far as the doctors knew, weeks to live.

I had been there for a couple of hours, editing something on my laptop, focused on the work, when suddenly I knew, I don't know how, other than Grace, that he was breathing his last. He drew in a short, hard breath. I knelt by his head and said, "Goodbye, dad." He drew in a shorter, shallower breath, almost a half-breath, and then stopped.

I went to get the nurse, waving my hand toward the room because I could not speak. She came in, listened for a heartbeat, and I stood hoping I was wrong, that I'd missed something, that I was going to be embarrassed, till she shook her head at another nurse who had come into the room behind me.

Being there was, as I say, a great blessing. At least, it is a great blessing to be with your father when he dies if he died the way mine did. He did not die with dignity, as those who promote "death with dignity" define it, which means, in essence, to die as if you weren't dying.

It is not dignified to be undressed and dressed by cheerful young women the age of your granddaughter. It is not dignified to waste away, to lose the ability to speak, to eat, to drink. It is not dignified for your children and grandchildren to see you that way. It is not dignified to die when death takes you and not when you choose.

I can see the appeal of "death with dignity" and programs like those offered in Oregon and the Netherlands, where doctors will help you leave this world at the moment of your choosing, without fuss or bother or pain. I do not want to die and I really, really do not want to die the way my father did. I would find the indignities as excruciating as he did, and I have no confidence I would deal with the pain as bravely as he. I would not want my children to see me so pathetic. "Death with dignity" seems to offer not only an escape from pain and humiliation but a rational and apparently noble way to leave this life. You look death in the eye and show him that you, not he, are in control. All "dying with dignity" requires is that you declare yourself God. Make yourself the lord of life and death, and you can do what you want. All you have to do, as a last, definitive act, is to do what you've been doing all your life: Declare yourself, on the matter at hand, the final authority, the last judge, the one vote that counts.

But you are not God, and, the Christian believes, the decision of when to leave this life is not one He has delegated to you. It is not your call. The Father expects you to suffer if you are given suffering and to put up with indignities if you are given indignities. The Lord gives, and the Lord takes away; blessed be the name of the Lord. And that, as far as dying goes, is that. This is not, from a worldly point of view, a comforting or comfortable teaching. It is one much easier for Christians to observe in theory than in practice, and to apply to other people than to themselves. In practice, we will want to die "with dignity."

My father was an engineer. I'm not sure if he read a theological book in his life. The questions that interested me bemused him. But he knew who he was and what he was called to do, a condition others would put in a theological language I suspect he thought was unnecessary. He was dying. That was his job, and he would do it as well as he could.

Lying in a hospice bed, in the very last situation he would have chosen for himself, my father taught me that to die with dignity means to accept what God has given you and deal with it till the end. It means to play the hand God has dealt you, no matter how bad a hand it is, without folding. It means actually to live as if the Lord gives, and the Lord takes away, and in either case blessed be the name of the Lord.

It's dignity of a different sort than the corruptingly euphemistic slogan "death with dignity" suggests. There is a great - an eternal - dignity in accepting whatever indignities you have to suffer to remain faithful to God and to do what He has given you to do. A man can be humiliated and yet noble, and the humiliations make the nobility all the more obvious. My father died with dignity, though the advocates of euthanasia and the clean, quick, controlled exit might not think so.

Here my father held a line he probably did not recognize, a line that protects the vulnerable. He would never have said this, and would have thought the idea pretentious. But by living as if his life was not his to give up he also declared in the most practical way possible that the lives of the vulnerable are not for others to take. There are only a few steps from declaring that a man may choose to be killed to choosing death for those who cannot choose for themselves. The vulnerable are protected by those who refuse the choice.

The man who chooses the timing and meaning of his own death has looked death in the eye and shown him that he is in control-but only by giving death what he demands even sooner than he demands it. That, presumably, is a deal death will take. My father, lying in the bed by the window in a hospice he would never leave, offered death no deal at all.

David Mills is the author of Knowing the Real Jesus and Discovering Mary and writes a [weblog](#) for Patheos. He has served as the editor of Touchstone and executive editor of First Things. "Real Death, Real Dignity" appeared in the March 2011 issue of First Things.

Case in Point

Jo Tolck, Executive Director of Human Life Alliance (HLA), received a call from a woman from her parish. This woman had been given a POLST (Physician Orders for Life-Sustaining Treatment)* form at her doctor's office when she was there for the procedure necessary to have a prescription renewed. She reported being strongly encouraged to sign the POLST form. However, having read *Imposed Death* and *Informed: A guide to critical medical decisions* (HLA publications), she knew this was not a good idea and was incensed at the pressure being put on her to sign the POLST. The staff member finally asked her to take it home and think about it. The woman gave it to the Respect Life chair at their parish. He made copies of it to warn others and asked HLA to put together an information sheet explaining POLST and advance directives. Barbara Hicks, HLA's graphic designer, created a single sheet which Jo brought to her parish Respect Life meeting on July 17th. It will be handed out at the pro-life booth at their upcoming parish festival.

NOTE: The National POLST Paradigm website (www.polst.org, "What is POLST?") states, "The POLST form is for seriously ill patients for whom their physicians would not be surprised if they died in the next year, not for all patients." Nevertheless, in many states, POLST's reach has been vastly expanded, as illustrated by this woman's experience.

Predicting what one will or won't want or need in the future - even "within the next year" - is guesswork. Informed consent requires that each health care decision be made in the context of a patient's present situation, and be based on truthful and complete information presented by medical professionals in a way that patients and their surrogate decision-makers can

understand. **The POLST form does not foster truly informed consent.** POLST is tilted toward non-treatment and can encourage premature withdrawal of treatment from patients for whom - but for the denial of treatment - death is not imminent.

It is critically important that people be warned about POLST. If you would like a copy of the POLST information sheet, call 651-484-1040 or email feedback@humanlife.org.

*POLST has many different acronyms (e.g., POST, MOST, MOLST, COLST) and names (e.g., in Minnesota, POLST stands for Provider Orders for Life-Sustaining Treatment).

Take Action

In spite of heroic and persistent efforts made by pro-life organizations and individuals, the stark reality is that the healthcare system itself has become an ever-increasing threat to the well-being and lives of the preborn, the young, the old and the disabled and ailing of any age. The PHA is dedicated to renewing reverence for life within healthcare. For some excellent information about current and historical issues regarding abortion, contraception, euthanasia, stealth euthanasia, hospice, advance directives and other pertinent topics, please check out these resources.

[Join the Pro-Life Healthcare Alliance](#)

[Pro-life Healthcare Alliance](#)

[Hospice Patient's Alliance](#)

[Euthanasia Prevention Coalition](#)

[Patient's Rights Council](#)

[Read Stealth Euthanasia: Health Care Tyranny in America by Ron Panzer](#)

Pray for renewal of reverence for life. In particular we have designated Thursday as a special day of prayer for the mission of the PHA.

STAY CONNECTED



Pro-life Healthcare Alliance

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