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Essay

## Nos Morituri Te Salutamus

We who are about to die salute you

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"Death is the cure for all diseases."

-Sir Thomas Browne, Religio Medici 1643

The room was bright with sunlight; it smelled like lemon and fresh flowers. Small dust particles glittered golden in the sunlight, lazily dancing through the air. The bed was tidy, the blankets tucked under the mattress, the pillow big and soft. A small bronze angel was standing on the nightstand next to a clean glass and a bottle of water. It looked more like a picture from a glossy hotel advertisement than a room in a house of the dead.

"We always prepare the rooms as soon as one of our residents has gone. We are very short on beds and the demand is high. Sometimes a room is reoccupied within an hour. It is a shame that there are just two hundred hospices across Germany", said Schwester Heike. She was a middleaged woman with blond hair and big red glasses on her face. She wore yellow scrubs and had a little flower pinned to her collar. She smiled as she pushed the wheelchair into the room.

"So this is my new room now? I guess there is little I can do about that", said the man in the wheelchair. His name was Friedrich Wilhelm Mielcke. He was 32 years old and the newest patient in the Sankt Marien Hospiz. His face was gaunt and sweat appeared on his brows as he pushed himself from the wheelchair and limped over to the bed where he heavily sat, catching his breath.

"I will leave you now; if you need anything just use the bell and one of us will be with you in a minute", said Schwester Heike. She took the wheelchair and left the room, silently closing the door behind her, leaving behind a small family gathering in the little room.

I first met Herr Mielcke when he had already been in the Hospice for two months. I started a clerkship in nursing after having been a paramedic for the last year and had quite different ideas about death and dying. So far I had only seen death due to trauma or suddenly at home. A typical call would be that someone had not been seen for the last few days and worried neighbours had called the police. When the fire department and the ambulance arrived you could almost always

smell the stink of a decaying body in the hallway. Up to that time, death seemed cruel and relentless to me. I could not imagine how much my perception of death and dying would be changed during my clerkship.

As I walked through the entrance hall on my first day I already felt the contradicting feelings that a lot of people describe when they first step in to a hospice. The mix of religious awe and respect for the service that was provided here combined with the excitement and relief that such places exist. I had done my homework and researched the German hospice system, especially the Sankt Marien Hospiz, which was to be my workplace for the next four weeks. A hospice is an ambulant care home that focuses on the terminally ill, chronically ill or severely ill patient with a low bed count and a high staff number to ensure the best quality care. The focus is definitely palliative and end-of-life care. A terminally ill patient can request a place in a hospice if he has a life expectancy of eight or less weeks. The German hospice system is paid for by the national and private health insurance. There are 214 hospices in Germany that are open to the public 24 hours a day, 365 days a year. The Sankt Marien Hospiz had 16 beds, was the only hospice for a region with 500,000 inhabitants and had an average patient count of 200 a year. It was founded by Dr. Weiss, a local retired GP who had spent his professional life with a focus on research in palliative and pain medicine and now was working part-time at Sankt Marien.

I walked through the entrance hall, past the condolence book and a big burning candle and headed for the staff room where I would be expected for the morning round. The shift began at 6am and there were three nurses taking care of the patients. I was quickly assigned to shadow Schwester Heike.

"I heard you are a paramedic? Good, that means that I can expect you to not be grossed out from most of the things you are going to see. Is there anything that you are scared of or want to know before we meet the first resident?"

"No, I think I'll watch first and ask questions as they come up. But of course not in front of a patient."

"We don't call them patients here; they are residents. Most of them spend the rest of their life here. This is their home now."

"Oh sorry, I will remember that."

"Now, before we see Herr Mielcke and ask what he would like for breakfast I'll show you his file so that you know why he is here and what to expect." Schwester Heike pulled out a red folder, inside were 16 medical files. She handed me the one that said Mielcke on it.

Herr Friedrich Wilhelm Mielcke, born 15 August 1983, married, two children, smoker Diagnosis: nodular malignant melanoma T3 N3 M1, metastatic spread after amputation of the right foot with primary tumor, lymphoedema in both legs

Care Plan: dressing and cleaning of open tumors twice daily, bandaging of both legs, preparation and administration of drugs, help with personal hygiene

Emergency plan: Midazolam and Lorazepam for Haemorrhage, Morphine for pain on request, Lorazepam on request when having difficulties to sleep

In case of death: Frau Claudia Mielcke, wife, wishes to be informed immediately at any time of day

"As you can see, quite the ghastly diagnosis. He is a nice young man., full of hope and good spirit even though he knows that he is going to die. I think it's his attitude that has kept him alive so long. He's always out for a joke."

We knocked on the door and entered the room of Herr Mielcke. He was a small gaunt man, his eyes sunk deep into his skull. The room was filled with the sweet-sick odor of rotting and putrid wounds. As he got out of bed I saw his big swollen legs and the dressings that covered them. He greeted us and started to talk about his night and his plans for the day as Schwester Heike put on gloves and started cleaning his wounds. I watched, horrified, as she uncovered countless smaller and larger skin-penetrating tumors on Herr Mielcke's legs. They looked like little bubbles had pushed out from underneath the skin, purple and black, some of them oozing out a thin stream of yellow pus.

"I'm very sorry for the smell, but my wife didn't buy me enough deodorant", Herr Mielcke said and started chuckling.

"Don't you worry", Schwester Heike said, "once we have cleaned the big one, the smell will subside." She pulled down Herr Mielcke's pants and exposed a tumor as big as a football directly in his inguinal region. A wide cleft ran through its middle and was filled with pus and dried blood. All of a sudden I understood why the emergency plan had contained Lorazepam and Midazolam. If that tumor were to penetrate the femoral artery, there would be no way of stopping the bleeding. Schwester Heike cleaned all the wounds with an antiseptic rinse and then covered them with fresh dressings. Afterwards we took Herr Mielcke's wishes for breakfast and I was sent to the kitchen to prepare the food. When I entered Herr Mielcke's room to serve his breakfast he was sitting in bed, a cigarette in hand.

"I know what you are thinking, how can someone still smoke with such a disease: Well, let me tell you, it doesn't make a difference. I am going to die anyways. It's not like quitting would change that. I see it as one of the few commodities that I still have. It comforts me when I think about death."

I was too perplexed to answer. I just served his breakfast and left his room.

My mind was spinning around what I just heard. I told Schwester Heike during the morning break after all the residents had been served their breakfast. She laughed and started telling me about the life lessons she had learned during her five years working in this hospice.

"Well he is right. Not even a lung cancer patient could change anything about his diagnosis if he were to quit. One thing that you always have to remember: Every person that enters this hospice will most likely not leave it alive. We are here to make their last days of life as comfortable as possible. No one needs to have pain here; the food is freshly prepared and if a patient has a

specific wish we try to make it possible. We take care of them, not just in their medical needs, but we also sit down and talk to them, comfort them as much as we can. And if a patient's family is here, we do the same for them. We talk, we listen, we give strength and courage. This is a difficult time for everyone involved, not just the person diagnosed with a terminal illness. It is sometimes a depressing job because we all have learned a trait in which we were schooled to help people and protect them from dying. Now we only help them to die in peace. A lot of people that arrive here don't know what to expect. They fear that they'll have the same care and restrictions as in a hospital. And who could blame them? Death is a social taboo. You don't hear about hospice care in the media; most doctors even fear to tell their patients about it. This place is related to death and gets shunned by everyone who is not working here. But let me tell you, most people that have experienced the loss of a loved one who has been in hospice care are happy that hospices exist. It is these personal experiences that motivated most of our staff to work here; the daily challenges we face and the rewards we get. Can you imagine how difficult it is to get a simple smile or a thank you from someone who is concerned that he is going to die any day? Try it, try to make the people laugh or smile, see how happy they can be about the small things in life and you will soon understand what I am talking about."

I heard those words and was unable to fully grasp the wisdom in them. I don't exactly remember how I responded; but the conversation stayed with me. The break was soon over and we continued on with the work. I had to wash patients, fetch their lunches, help them dress and clean their rooms. Time flew by and my first shift was over.

When I arrived for work the next day, I was asked if I would like to go get Herr Mielcke ready for the day. I wasn't quite sure if I was at a point of knowledge where I could already be working alone with a patient, but Schwester Heike ensured me that if I were to run into trouble, I could just call her and she'd be there in no time to help. I knocked on Herr Mielcke's door and entered. He was already sitting on his bed.

"Oh is it just a gentleman's round this morning? I like that."

He lay down on his bed and I started cleaning his tumors just as Schwester Heike had shown me.

"You are awfully young to bear those ghastly sights, are you doing a school clerkship?"

"No, I was a paramedic before and I am planning on studying medicine."

"Wow, so young and already a paramedic. You must have seen a lot to come to the house of the dead to gain some experience."

"Well I always wondered how it looks inside. All I saw previously were the patients that we brought here. Excuse me, I meant residents."

"That's alright kid. It doesn't really matter if they call us patients or residents. In the end we are the sanctioned dead. To society we are already dead, even to some close friends and family. I have two young and beautiful daughters, I see them maybe once a month now. I don't want them to see or remember me like this. It is already hard enough on my wife. Can you imagine how it is

having a disease like this that doesn't just kill you but makes you smell of death and look like it before it kills you? It is the epiphany of death in all its glorious cruelty." I fell silent, I didn't know how to respond. How could I answer such a question? I couldn't imagine how it would be, but a simple and honest 'no' seemed a bit rude and queer.

"Don't break into a sweat, it was a rhetorical question. Since you want to become a doctor, are you interested in what a man about to die has learned in his last few days on earth?"

"I don't mean to be disrespectful, but if you are alright with it I would really love to hear it."

"You know, everybody in this hospice listens but for them it is their job. I feel like you are genuinely interested in it. I will let you in on how I perceive this whole situation: After I got diagnosed with metastasizing cancer, every morning after waking up my first thought was 'I'm going to die'. I lived with that for so long that it was a daily ritual. Until I came to a realization: I shouldn't be afraid of death. Instead I should just enjoy life. Carpe diem! You see it written everywhere nowadays, but do you know what it means?"

"Seize the day?"

"Yes, seize the day! But have you ever in your life really seized the day? I don't think so. No one ever has until he finds out how little time on earth he has left. When I realized that, I started to actually seize the day. There is so much I still want to do in life. I called old friends, I had dinner with my whole family and spent a lot of time with my daughters. I can lie in my bed at night, in peace, knowing that I have said my good-byes. I still fight for every day of life I can get, but whenever my wife visits me I say good bye like it was the last time. I am going to die, but that doesn't stop me from living. I had no idea what a hospice was until I came here. I wanted to die at home, surrounded by my loved ones until I saw how difficult it was for everyone. I asked my doctor what I could do and he said I should try a hospice. I am glad I listened. It is a great institution, shunned by the public and even relatives are hesitant when they come to visit. It feels like everyone is afraid to catch death here like it were an infectious disease. Who could blame them? This is the only place where death is not a taboo. Death is welcome here. It's not pretty but at least gets handled openly unlike in hospitals where people die hidden behind doors and no one says the word death. The hospice has helped me overcome my own fear of death. I am expecting it to be like falling asleep. I know I will not feel any pain. If they have to fill me up with drugs, I'm alright with that, I won't feel it anyways. More than anything I want my family to know that when I die I die in peace. Ich bin im Reinen mit mir selbst, I have made my peace. Death can come today or tomorrow; I will enjoy my time, no matter what. Remember, if you want to fight death, you have to fight it with life."

While Herr Mielcke was talking I had finished cleaning and dressing his wounds. I took his breakfast order and the day continued on as usual.

Soon it turned into a routine, I would help Herr Mielcke in the morning whenever I was working and he would tell me about his life and about his thoughts regarding death.

After two weeks I had the weekend off. As I arrived for my shift on Monday morning I saw the candle next to the condolence book burning. As I had learned by now it was a sign that one of

the residents had passed away. The candle was lit as soon as the death had been discovered and would burn for the next twenty-four hours. I stopped and went to the condolence book to see who had passed away:

In loving memory of Friedrich Wilhelm Mielcke. He was a loving father and husband and his smile has lit up the world until his last day. He will be dearly missed by all his family and friends. We thank the team of Sankt Marien for the support and guidance they provided us with during this rough time. Friedrich asked us to send out his last message to the world:

"If you want to fight death, you have to fight it with life. So seize the day." In loving memory, Claudia Mielcke

I was completely shocked. My mind was unable to grasp that Herr Mielcke was dead. I had already though about what we would be talking about today. Out of habit I went to his room and knocked on the door. When I opened it, it was empty and silent, Herr Mielcke was gone. It smelled like lemon and fresh flowers. The sun was shining in through the window and small dust particles glittered golden in the sunlight, dancing lazily through the air. The bed was tidy, the blankets tucked under the mattress, the pillow big and soft. A small bronze angel was standing on the nightstand next to a clean glass and a bottle of water. I realized, this was a house of the dead.