

The art of dying

reviewed by [Henry G. Brinton](#) in the [May 19, 1999](#) issue

Handbook for Mortals: Guidance for People Facing Serious Illness.

By Joanne Lynn and Joan Harrold. Oxford University Press, 242 pp.

Since most people today die of chronic illnesses such as heart disease, cancer, stroke or dementia, and many live with these diseases for years, this handbook will be enormously helpful for pastors, patients and families. The book gives compassionate and sensible guidance to those seeking to negotiate the difficult spiritual and medical terrain that surrounds the experience of dying.

Joanne Lynn, director of the Center to Improve Care of the Dying at George Washington Medical School, and Joan Harrold, a fellow at the National Cancer Institute, give us a volume better read by lifting out pertinent chapters than attacking it cover to cover. They deal with such topics as living with serious illness, dying suddenly, finding meaning, and forgoing medical treatment. The book is addressed directly to people who are ill. It contains a wealth of practical tips, personal vignettes and provocative quotations.

Although pastors and other religious professionals will find the book's spiritual insights to be rather elementary, they will be pleased by the authors' respect for ministers and religious communities and by their stress on the central role that pastoral care and spiritual direction play in helping people to live fully while dying. Over and over, patients are advised to seek out pastors, pastoral counselors and hospital and hospice chaplains to help them make critical decisions about end-of-life care and prepare spiritually for death.

Most useful for religious professionals is the information on specific illnesses, planning ahead, dispensing with medical treatment and hastening death. The book's excellent descriptions of the courses of various diseases—including heart disease, cancer, lung disease, kidney failure, liver failure, HIV/AIDS and dementia—can help pastors to better understand what their parishioners are experiencing. The answers to various questions about "advance directives" will be useful to those who are asked to give guidance about living wills and health-care proxies.

The difficult decisions about stopping treatment, even tube feedings and intravenous fluid, are discussed thoroughly. I was struck by the authors' insight that we often feed the very ill because "food seems like love" to us, even though most dying people are more comfortable without eating or drinking. Finally, the writers approach the controversial issue of physician-assisted suicide and remind us that many dying people who focus on suicide are depressed (a treatable condition) or in extreme pain (which can almost always be controlled through good medicine). The information provided throughout this handbook can help people to shape a good death for themselves without having to resort to suicide or euthanasia.