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Narrative Medicine: Enhancing End-of-Life Care with Literary Stories

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Funding: No specific funding was received for this work.

Potential competing interests: No potential competing interests to declare.

Abstract

This manuscript presents a method to aid those facing end-of-life challenges, utilizing three carefully chosen literary works to facilitate emotional and psychological support. Based on Andrew Papanikitas's innovative approach, it introduces narrative medicine and bibliotherapy as tools for healthcare professionals, especially 'end-of-life doulas', to better assist patients in accepting death. The authors, leveraging their experience in hospice and clinical settings, highlight how these narratives can improve patient care, offering insights into managing fears and anxieties related to death. This condensed approach aims to enrich palliative care practices, proposing a reflective and compassionate model of healthcare that integrates the power of storytelling into patient support and care.

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Keywords: death, end-of-life doula, bibliotherapy, indirect psychotherapy, hospice, palliative medicine, novels, narrative medicine, health care, philosophy.

Introduction

Typically, it is challenging to communicate a novel and significant message to a specific audience. It is rare for one's way of thinking to change due to the arguments presented. Nevertheless, certain beliefs are crucial as they influence people's actions, including behaviors vital to their well-being and health.

There are various ways to communicate opinions, beliefs, and arguments. Apart from personal influence achieved through conversation, discussion, and setting an example, important opinions and arguments are conveyed through mass media, movies, articles, textbooks, and novels.

Many healthcare professionals realize that various cultural creations can be used as auxiliary tools in counseling or so-called indirect psychotherapy. There is an extensive scientific literature on so-called bibliotherapy ^{[1][2][3]}. Being aware of this situation motivated us to publish several articles on enhancing personal impact through known, existing cultural artifacts ^{[4][5][6]}

Among the available literature on using specific works of art, specifically novels, we noticed a unique, distinctive approach proposed by Andrew Papanikitas ^[7]. This author suggests a paradoxical methodology, consisting of recommending only three novels, which are so selected that their content concretely and precisely defines how to solve a specific difficulty. Contrary to appearances, despite the intentional narrowing of the proposed methods for resolving a burgeoning problem or even an impending catastrophe to a few, specifically three specific actions, this represents the potential power of the proposed method. Andrew Papanikitis assumes that such, and not another composition of recommended readings, stems firstly from the life experiences of the "advising author" and constitutes the most accurate definition of the proposed remedy. Thus, the proposed way of solving the problem, in light of such a methodological approach, is necessarily very concise, coherent, and is the result of many years of reflection, taking into account the entirety of the education and life experiences of the "advising author".

The structure of the article, developed according to the method discussed here is simple. The "advising authors" first introduce themselves, and then only briefly discusses the proposed three readings, emphasizing the significance of the complementary messages contained in those three works. The mental transformation occurs only in the minds of readers who will use the recommendations of the "advising authors" and familiarize themselves with the proposed works of art.

Unlike various other methods of conveying certain opinions, it is not the author of the short article who takes on the effort to convince the reader. This effort is in fact made by the authors of the recommended novels and the reader who believed in the quality and purposefulness of the "author's advice".

We believe that Andrew Papanikitis's approach can be generalized and transferred to various areas of problematic issues. In this article, we propose applying the method to common human feelings concerning perhaps all of us, as they are related to fears, anxieties, and the acceptance of one's own death. The message is based on three selected literary works [\[8\]\[9\]\[10\]](#).

Are we competent?

As the first author and advocate of the idea, presented in this article, it is important for me to emphasize that I have been working in hospice care for several years. I also consider myself an 'end-of-life doula.' A doula, drawing upon not only professional knowledge but also personal experience and beliefs, guides the dying to a new dimension of existence. Many readers would likely refer to this as a better world, or heaven. A doula attends to every detail crucial for the comfort of the dying person, striving to make their final moments as they part from the current world and present reality peaceful, blissful, and free from fear, regret, and despair. I am convinced that my professional nursing experiences, coupled with my spiritual attitude, have enabled me to carefully select and propose three literary stories.

As the second author, it is important for me to emphasize why I engaged in collaborating on the content of this article. It is less important that, as a long-time clinical doctor, I have also witnessed the death of many individuals. More significant, however, is that the first author made me aware of new concepts for me, named as "death doula" or "end-of-life doula," while also speaking of the aforementioned "new dimension of existence." Coincidentally, for several decades, I have been publishing supplements and extrapolations [\[11\]\[12\]\[13\]\[14\]\[15\]](#) to the theses formulated by Frank Tipler in his book titled: "The Physics of Immortality: Modern Cosmology, God and the Resurrection of the Dead" [\[16\]](#).

What the proposed three stories can make you realize

(1) "The Collected Regrets of Clover" by Mikki Brammer

Mikki Brammer, the author of the novel, introduces us to the life story of the main character, Clover. The loss of her parents in childhood developed in her the special traits of someone who decides to become a doula. Clover becomes exceptionally empathetic, attentive, composed, yet somewhat detached from the reality around her. She meticulously records the confessions, that is, the last words of her clients. She writes them down in separate notebooks, which she labels with words like regrets, advice, confessions. Only her last client, an elderly woman named Claudia, becomes for Clover a teacher who helps her discover her own identity. Their relationship, that of a young professionally acting doula and an older ailing woman, is somewhat of a reciprocal transaction, as both gain something important. Mrs. Claudia, by confessing her dreams and receiving their explanation at the end of her life, dies reconciled and at peace, while Clover

opens herself to love and recognizes a different meaning of life.

(2) “Oscar and the Lady in Pink” by **Éric-Emmanuel Schmitt**.

The novel "Oscar and the Lady in Pink" portrays a touching relationship between ten-year-old Oscar, who is battling cancer, and the warm, wise Mrs. Rose – a mysterious hospice volunteer. On her advice, Oscar writes letters to God. Some of these letters involve his imagined scenarios. Writing them turns out to be a form of self-therapy, helping him come to terms with his impending death. Readers are given insight into the development of trust and the process of becoming open to the advice of a close confidant. This is key to understanding the significance of dying and death. It is important to note the setting of the novel - a hospice that provides special care for children. The main character is only ten years old. The actions and advice of Mrs. Rose teach a different understanding of dying and death. They point to the meaning and possibilities of experiences even just before inevitable death. We also become acquainted with the existential situation of cancer patients.

(3) “Folk Tales of Mother's Death” by **Ana Cristina Herreros**

The author of the book, Ana Cristina Herreros, has collected forty-four fairy tales from around the world, in which death is portrayed as the most important companion of life. These stories are not just colorful descriptions of death, but often also attempts to answer questions about where we come from and where we go after death. The reading induces a serene mood. This effect is the result of diminishing the fear of death, which often stems from religious interpretations. Tales from India and Tibet advocate the belief that death is the beginning of life in another dimension and is necessary for the recurrence of life's cycles. Folk tales about the mother of death remind us of the primal meaning of death, its presence accompanying us from birth, treating everyone equally, and offering rest when life becomes burdensome. Death is presented here as fair, sometimes even friendly, and linked with the phenomenon of love.

Discussion of practical conclusions

The content of this article may interest everyone. It could serve as an introduction to contemplation when we fall ill, suffer, and death approaches. It may also inspire volunteer work or employment in facilities such as hospices, oncology wards, and palliative medicine units.

However, the article is primarily directed at nurses, doctors and other members of the staff already working in such facilities. In this context, the text can be treated as a kind of specific instruction for the staff of these institutions. So, it is not necessary for patients to read the article. It is however essential, for the nurse or doctor to trust us and recommend the novels briefly discussed here to those individuals whom they believe will benefit from them.

At the same time, we assume that nursing students and professionally working nurses and medical caregivers will be interested in reading the three stories mentioned here, enabling potential conversations with patients. As noted in the introduction, the messages of the authors of the mentioned novels should have a positive effect. If one were to briefly define the reasons for this positive effect to occur, in our opinion, it can be attributed to certain emotional and mental

impacts.

As the cited stories suggest, a dying person expects the presence of someone with whom they can establish an emotional bond and feel accepted in their illness. Sometimes there is a need to articulate one's biography, thoughts, dreams, acts of will, and decisions made. The dying person would like to receive encouragement in a warm, kind, and empathic emotional contact. A person fulfilling the role of a doula can make the dying view death as a natural stage, and sometimes, as per expectations, as a moment of "transition to another dimension" of a better life, free from pain, suffering, tears, conflicts, as a passage "through the gates of heaven." A nurse taking on the role of a doula, can achieve this through a calm voice, gentle gaze, delicate handhold, and focusing attention on the present moment. She can also point to the possibilities of fulfilling the patient's spiritual needs.

Fear of death also has rational causes. Here, slightly different concerns of followers of monotheistic religions should be distinguished. The message of these faiths assumes that the fate after death depends on the assessment of their conduct in life. Such fears are also present among believers in the idea of reincarnation. Agnostics and those identifying as non-believers, on the other hand, may be terrified by the complete erasure of their subjectivity. It turns out that the literature available and recommended by us provides arguments that relativize these listed fears. Perhaps even to so-called non-believers, some comfort is brought by literary sources explaining that both concepts of incarnation and individual as well as mass reincarnation are not dismissed by contemporary philosophical and natural, cosmological inquiries [\[16\]\[17\]](#).

By presenting a selected, specific tool of influence useful for those fulfilling the role of an "end-of-life doula," we may have interested some readers in the essence of this function as presented in objective scientific literature. There are already many such publications [\[18\]\[19\]\[20\]\[21\]\[22\]\[23\]\[24\]\[25\]](#). However, the aim of this article is different. We wish to draw attention to a few interconnected phenomena. Namely, we want to interest nursing staff and those who have an inclination to care their peers in the possibility of acquiring "end-of-life doula" competencies, simultaneously promoting a tool that will facilitate them in undertaking and performing such a mission. This is also a message to families present in the environment of a person nearing death, emphasizing the contemporary possibility of employing individuals who already possess such competencies.

We are convinced of the validity of Andrew Papanikitas's postulate that it is better to indicate only three pertinent literary works instead of burdening nurses and patients with an excess of literature. Nevertheless, for those professionally interested in the issue of conversations with terminally ill patients contemplating their impending death, it is worth pointing out other known works useful for the purpose discussed here. We define them in the list of literary references [\[26\]\[27\]\[28\]\[29\]\[30\]\[31\]\[32\]\[33\]\[34\]\[35\]\[36\]](#).

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