Steve's Story*

by Ira Byock, M.D.


Steve Morris was dying hard. When the hospice team met him, Steve was struggling for every breath, unable to walk without gasping for air, yet unable to sit still because of the anxiety that defined his life. He was scared of dying and suffered through every waking moment.

By vocation Steve had been a lineman for the phone company before a heart attack and emphysema forced his retirement. By avocation, he was a real Montana cowboy, living for his horses, winning numerous riding competitions and the affections of many for his willingness to teach horsemanship to any child eager to learn. In appearance and in his life-long smoking habit, Steve was also the prototypical Marlboro Man. He was a man's man, not one to express emotions, or even admit to having them. Often, work and his horses had come before relationships and family.

Now he was at the end of his rope. Specialists had exhausted every hope, including the lung transplant he had desperately sought. Steve was the one dying, but he was not the only victim. His wife Dot was his constant companion, nurse, handmaiden and co-sufferer. If she was out of sight for more than a minute, he would ring his bell or shout in his panicked, muffled voice, "Dot. Dot!"

It took our hospice team two weeks to gain Steve's confidence through a combination of pharmacy, counseling and pragmatism. This included meticulous medication management, carefully selected relaxation tapes, practical suggestions regarding placement of his recliner, volunteers to spell Dot so she could shop for groceries, see her own doctor and get a few moments of rest. These efforts, drawing on the experience and resources of palliative care, helped diminish - at least slightly - Steve's breathlessness and paralyzing fear.

As we learned more of Steve's personal history, we realized that his anxiety stemmed in part from the fractured nature of several key relationships and from his complex, conflicted family life.

One Thursday, while I was visiting Steve and Dot at home, I told them that over the years I'd observed that. "People often value saying four things one another before they say goodbye. Please forgive me. I forgive you – because if this was a significant relationship there will always be some history of hurt. Thank you. And, I love you"
"Those are really good doc." Steve responded with unexpected enthusiasm. "Write those down for me will ya?"

At my next scheduled home visit, Steve was sitting up, awaiting my arrival. He and Dot excitedly related the events of the past weekend. On Sunday their children and grandchildren had come over for dinner. At the table, Steve had announced he had some things he needed to say. He began, "You know the doctors tell me that this emphysema is finally going to get me. And I know I haven't always been the best father, or husband," he paused, gathering breathe and confidence, "but I love you all and there are some things I want to say." With his eyes on my handwritten list, he recited the first four of the four things before goodbye in his own words.

The effect was remarkable. Although his anxiety did not disappear, in the wake of his remarks, its grip weakened. Tenderness and affection was now evident in the family's interactions that had not been present for years, if ever. Steve's life didn't become easy, but it did become less anguished. The quality of Dot's life and their family life certainly improved.

Ironically, as he faced life's end, Steve said he was more happy with himself than he could ever remember being. Paradoxically, in the process of dying, he was becoming well within himself and helping his family to become closer and more openly loving.