

Taking Time to Say Goodbye

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The Editors

Little did I know at a “Coping with Death” seminar I covered for the paper that four years later my husband Nahum would suffer from a terminal illness. Home hospice care? End-of-life emotional support? Caregiving? Never having taken care round the clock of the needs of anyone except my babies and young children – and married to a vocational and educational psychologist who counsels others – I thought that some patients are terminally sick and, given painkillers if necessary, die in the hospital.

Little did I, one of the country's most veteran health and science reporters, know at the Jerusalem seminar held by Prof. Ben and Dvora (Phyllis) Corn that I covered for the paper, that four years later my beloved husband Nahum Itzkovich would tragically suffer from a terminal illness. Complications from an autoimmune liver disease appeared, bringing a sudden end to his 30-year vocational guidance career at the Jerusalem office of the Israel Employment Service, that peaked just weeks before as its new district psychologist.

Who would have thought that I, who loves all theoretical aspects of medicine but dreads the sight of even a hypodermic needle, would with our children take care of him at home all by ourselves during the last three weeks of his life? Not many people in the prime of life contemplate their deaths beyond, perhaps, buying life insurance. We didn't either. Although catastrophe can strike at any moment, death is too lugubrious a subject, they would say. Life is short, so why think of such things?

The Brooklyn-born Corns – he the director of radiation oncology at Tel Aviv Sourasky Medical Center and she an occupational therapist who earned an advanced degree in family therapy – think about death all the time, even though

they are the parents of four young adult daughters and are themselves young grandparents. Death is familiar enough for them to discuss it with their family over the dinner table. It is more than an acquaintance; it is a permanent presence.

Together they founded “Life's Door” (*Tishkofet*, or “Perspective” in Hebrew) and manage *Ma'agan*, non-profit organizations specializing in helping individuals and families with chronic, serious and terminal illness and bereavement. For their work, they received early this summer the President's Volunteer Prize from President Shimon Peres. Without the absolutely devoted counseling by Dvora, the organization's executive director, and the backing of Ben, Tishkofet's chairman, I don't know how we would have managed to get through the agonizing nine months since Nahum's illness was first diagnosed.

Ben was 11 years old when his father died of prostate cancer at Memorial Sloan-Kettering Cancer Center in Manhattan, across the bridge in Flatbush, Brooklyn. The father's absence from home was explained away by “frequent business trips,” and the children were never told. That's the way it was in American society. Despite the best of intentions, people simply did not have the tools to deal with such tragedies. Kids weren't even taken to funerals.

Phyllis Kranz (Dvora) lived only blocks away in an observant home. Her paternal grandparents were Holocaust survivors. She was only six years old when her grandfather died of a disease. “We were very close. Nobody talked about it. It was very disturbing and shocking for me as I grew up,” Dvora recalls. “I understood later how much pain my grandmother held on to – so many losses among her family in Europe and then her husband in America. I realized later that she had just wanted to protect us.” They married in Boston in 1982 and lived there for five years. Moving to Cherry Hill, a suburb of Philadelphia, for his residency in radiation oncology at the University of Pennsylvania's School of Medicine, they both trained and volunteered for the Jewish burial society, preparing the bodies of the deceased (she of women and he of men) for the first time. “I saw a cadaver in occupational therapy school,” Dvora recalled. “But preparing a body in the Jewish ceremony of *tahara* is not like seeing a cadaver. The attitude is different. It's an honor to do this work. There is holiness about it. One thinks of the person's soul and even apologizes afterwards to the deceased for any hurt or insensitivity which may have been displayed. You begin to internalize the impor-

tance of how one should care how one acts with people who are alive if one is so careful with people who have died. I got more in touch with life and death, and, surprisingly, I had no nightmares.”

At Thomas Jefferson University, Ben was at 36 the youngest-ever professor. Dvora launched a private group therapy practice in occupational therapy specializing in geriatric and long-term care that blossomed and sold it to a large health care company. Always having *aliya** in the back of their minds, they went to Israel in 1997 for a sabbatical and stayed, settling in Jerusalem. Dvora volunteered at Hadassah University Medical Center’s hospice on the Mount Scopus campus and received a master’s degree in family therapy. Ben worked for five years in a high-tech company, and then Sourasky director-general Prof. Gabi Barbash offered him the job of heading a new department of radiation oncology. Today, Ben has almost attained the age of his father when he was cut down by cancer.

“We were thinking about establishing a non-profit end-of-life counseling organization. There was nothing like it,” Ben remarks. “We thought of calling it Life’s Door based on Bob Dylan’s song ‘Knocking on Heaven’s Door.’ We thought that if people knock, even at such an event, patient and loved ones would be able to live life more fully. Don’t deny it. Use serious illness as a trigger to look into life.”

The couple started the organization with their own funds and continue to be among the many supporters. “But most people we encountered were very put off by the subject. It wasn’t accepted to talk about death. Gradually, these attitudes have begun to change,” Dvora notes. “The United Jewish Appeal-New York Federation initiated spiritual care in Israel for patients and families. Not all had terminal disease; some had serious, life-altering, chronic illness that had an impact on the way they lived. Tishkofet’s flagship program is their “Partners for Life Retreats.” Life partners or two close relatives, one of whom is ill, attend several days of workshops and programs together. Sometimes both are sick. After learning to cope, they return to their world as a team, stronger and with new skills.”

Dvora personally provides individual counseling on serious illness, end-of-life and bereavement for Tishkofet – through which our family received her emotional support during Nahum’s illness. Her assistance when our lives were turned upside down strengthened and encouraged us as we cared for him at home during his last three weeks. I never thought we would be able to do it. When Nahum underwent periodic and painful treatments in a hospital inpatient ward, I witnessed terminally ill inpatients whose families felt they couldn’t handle them at home lie in their hospital beds and cry out for help. A doctor or nurse was not on hand at all times, and when

medical staffers appeared, they inserted thermometers, drew blood and changed infusion bags. I couldn’t bear the thought of my husband ending his life in such a setting. Having Nahum at home, we felt fortunate and privileged to meet his every need, even near the end when he couldn’t make requests or say thank you. His end of life would not be like that of a friend I knew years ago who collapsed and died of a heart attack in the street. By chance not carrying his identity card, the unfortunate man’s family members were not called immediately. They had no opportunity to say goodbye.

We received emotional support night and day from Dvora, and medical assistance was available round the clock, if necessary, from a gentle and kind visiting family-and-palliative-care physician and a male nurse team from a company working for our public health fund. Nahum faced every setback with courage. And seemingly as a reward, Nahum suffered no pain; there was no need for me to add any morphine to the infusion bag. Even near the end, when he could not join us at Shabbat meals and was in a state of reduced consciousness, we ate with him in the bedroom and sang songs. He even smiled. It was a tragic, wrenching but bittersweet end.

It is unfortunate that more families in our situation are completely unaware of the home care option or rule it out without understanding its potential benefits, including intense closeness and a total absence of guilt about not being there or not doing enough. We had also saved the health system a significant amount of money by deciding against end-of-life care in a hospital whose staffers are overburdened and whose wards are packed with patients.

Shaare Zedek Medical Center director-general Prof. Jonathan Halevy – delivering the main eulogy – said that perhaps five percent of the families in our situation provide hospice care themselves at home. There is no doubt, he said, that Nahum was well aware of being surrounded by love.

“There is a spiritual existence beyond our understanding. It is amazing to me that in molecular biology, there are things we can’t see; the spiritual world is the same. I am sure there is something. What happens is not an accident or random. It must be guided by a Spiritual Being. Things happen because they are supposed to happen for better or worse. There is a system that we humans do not understand.”

On average, Dvora counsels a new family every two weeks – and when the patient passes away, she stands with the survivors during the funeral and beyond. The organization has supported thousands across Israel and has begun to provide seminars around the world.

During my husband’s funeral, Dvora was there with us; on that Friday, she had attended another funeral and made a shiva visit as well. “It’s very important for me and others to go to funerals and be part of the family’s journey. Of course, a funeral is sad, but what you hear about the person as he lived can be very inspiring. The connection with the family doesn’t

*Hebrew for immigration of Jews to Israel

end there; it can be forever if need be.” Young-looking and vital, Dvora says: “I don’t take it for granted that I will live forever. I think about the next few months at a time. I plan my life, but in the back of my head, I think what I should be doing with my time. I definitely think of the way I would want to die. Every moment should be informed by this. Don’t waste time. Time slips away.”

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