

## Why a Hanging Man Dances

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Perm J 2015 Summer;19(3):95

<http://dx.doi.org/10.7812/TPP/14-230>

“Do you know why a hanging man dances?” asked Mr B. He was once an intensely independent man, now 80 years old and afflicted with end-stage lung disease. At first observation, he appeared tired, repositioning himself with great effort from lying down and then reclining in his bed. He then shifted to sitting at the edge of the bed, tightly holding onto the bed sheets as if clenching to a life that was slowly escaping him. He positioned his right hand on his chest, gasping for air, and appeared frighteningly distressed. I picked up the nasal cannula and the tubing connected to the oxygen tank sitting beside him. He thrust his outstretched palm towards me and said, “No. I don’t want anything that will make me live longer.” Despite the explanation that the flowing air would help him with the sensation of air hunger, he still refused the readily available oxygen.

He had a furrowed brow. He was clearly trying to catch his breath with his mouth open and mentioned that he was also in pain from a sacral decubitus ulcer. Working through his anguish, he muttered a few bitter words and requested a “magic injection” to end it all. While gasping for air between words, his pauses for rest seemed like minutes. Mr B debated out loud as if answering his own questions, his predicament that his spiritual belief prohibited him from taking his own life and risking reincarnation. To him, rebirth meant inevitably reliving his current situation. That would not be tolerable for him.

... he is looking for something to step on ...

His eyes opened wide. Through the glossy haze of the sclera, his baby blue pupils dilated and held my gaze as he expressed great fear of eternal suffering if he chose to shorten his life. He managed to gather together the energy to reveal that he lived alone at home and did not think he could return there, as this was the beginning of the end.

We discussed symptom management options for dyspnea. He let out a sigh of relief that there were alternatives to suicide but was disappointed that we had not figured out a way to circumvent the dying process. “That is why a hanging man dances, he is looking for something to step on,” he said.

In his agony, Mr B knew there wasn’t much time left and when “see you later” slipped from my tongue as I bid farewell, he responded swiftly that he would not be here the next day but perhaps we may meet in another lifetime. The next day at the hospital, I visited Mr B’s empty bed. I bid goodbye to the unoccupied and neatly made bed where I imagined his last moments.

While I hoped that our meeting was as meaningful to him as it was to me, I prayed for him to be at peace. This encounter left me with more questions than answers. Did he appear frightened and distressed to me because I was? He seemed so comfortable with the notion of death and knowing that it hovered nearby. Perhaps I perceived him to be clenching to life not because he was scared to die but because I was afraid to let him down? Perhaps the one

clenching to life was me, while he had resolved to let go.

I am humbled with gratitude that Mr B unknowingly assisted in making me a better person and a more compassionate physician. When I find myself sitting at the edge of the bed in the early morning, I often think of him and what he must have felt. An asthmatic yearns for air as the chest becomes tighter with each cough; most of us experience transitional dyspnea or discomfort when we are afflicted with the flu or a cold. This heightened sense of awareness used to cause anxiety, but now I can channel it as motivation to improve the delivery of my care and our system for those who need it the most.

Mr B left a mark on my soul as if through the looking glass he gave me another vital glimpse of my own mortality. After all, I will be at the receiving end one day. ❖