

Handouts for Being Mortal Seminar January 2025

Being Mortal Discussion Group

(Subjects heavily borrowed from Atul Gwande's notes)

Tuesdays 1-2:30pm

Getting the Most Out of Elderhood

- As a child, what did you observe about the aging process? How was mortality discussed in your family?
- What does 'aging well' look like for you?
- As you age and have physical limitations and illness, what is most important?
- How willing would you be to accept limitations on your driving and independence? When do you stop driving? Move into independent care, assisted living or long term nursing care?
- How should we and our doctors--- our whole medical system reconcile what is medically best with what lifts us up personally? Should your doctor be "allowing" you to take risks because the risk behaviors are part of what makes you feel alive?
- How do we find Purpose and a Vocation in Elderhood? PIP.
- How do we stay active and engaged with our families and community?

Preparations

- We celebrate birth. Women and families have birth plans. Why don't we have a plan for our deaths?
- In nearly every TV drama characters die. At places of worship death is frequently referenced. Why do we have trouble talking about it?
- What are some euphemisms we use for death: passed, passed on, expired, bought the farm, gone to a better place. Why not use 'dying, dead, death'?
- What does a "good death" look like to you?
- Have you talked to your family about where you would want to die and who you would want (or not want) present? Is there a friend or relative whose death provides some thoughts about what you would want, not want? Have you made funeral preparations? Whose responsibility should this be?
- People often say that they would like to die at home, as long as they are not a burden on the family.
- '70% of people would prefer to die at home' – Dying Matters March 2017.
- 35% die in hospitals, 27% in nursing homes, and only 31.4% at home. Why?
- Have you written an autobiography and how does that communicate your values and legacy for your children and wider family? A document that outlines your values in prose or a story is sometimes called an "ethical will."
- As an exercise, have you written your obituary?
- How do you want to be remembered? Do you envision your family making trips to the grave to 'visit Mom and Dad'?
- Have you thought about making even a cell phone video for your children or grandchildren of you talking about your life and significant events?

- What kind of financial pressures and time pressures for your care do you think fall to your children or other relatives? How do you feel about that?
- How much work will it be for your children to dispose of your belongings?
- Do you have a will or trust? Does it include an advance healthcare directive? What is the quality of that directive? How well does it outline your wishes for care and how well will the agent you have appointed be able to carry out those wishes? Does your agent know they have been appointed?

Medical Matters

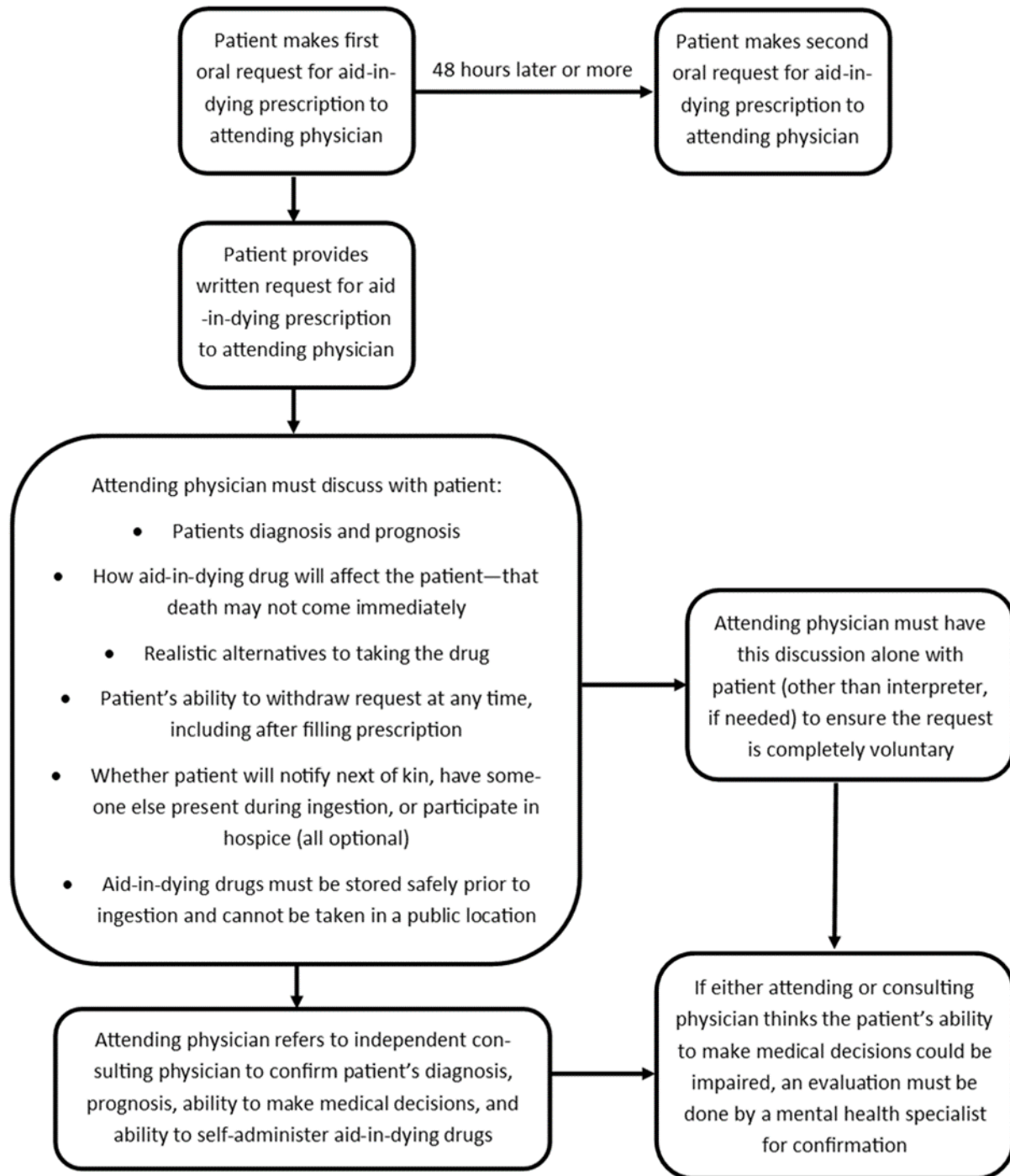
- What causes the end of life and dying to be medicalized? What are the cultural and economic pressures on the healthcare system? Gawande: “As people’s capacities wane, whether through age or ill health, making their lives better often requires curbing our purely medical imperatives”
- Often medical treatments do not work. Yet our society seems to favor attempts to “fix” health problems, no matter the odds of their success. Dr. Gawande quotes statistics that show 25% of Medicare spending goes to the 5% of patients in the last stages of life. Why do you think it’s so difficult for doctors and/or families to refuse or curtail treatment? How should priorities be set?
- How do physicians deal with patients and families who ask them to “do everything”?
- How well do you think your doctor understands your values?
- Do you have an Advance Healthcare Directive and a Physician's Orders for Life-Sustaining Treatment (POLST) where appropriate? Where did you get it and what is the quality of the information in it?
<https://prepareforyourcare.org/en/advance-directive>
 mydirectives.com
- How do you want to be treated if you develop severe dementia? You may have a pretty healthy body for up to 10 years living with dementia. In the face of a severe dementia would how aggressively would you want other life limiting conditions treated? Does your healthcare agent know this? See Compassion and Choices: Dementia Values & Priorities Tool®
[https://www.compassionandchoices.org/resource/dementia-values-priorities-tool-\(fillable-pdf\)?_gl=1*os5gl5*_ga*MTlwNDY2OTQ5Mi4xNzA4MDM2NDc0*_ga_8G12T32VPR*MTcxMDM2NzE3NS4zLjAuMTcxMDM2NzE3NS4wLjAuMA..&_ga=2.240540099.171001697.1710367176-1204669492.1708036474](https://www.compassionandchoices.org/resource/dementia-values-priorities-tool-(fillable-pdf)?_gl=1*os5gl5*_ga*MTlwNDY2OTQ5Mi4xNzA4MDM2NDc0*_ga_8G12T32VPR*MTcxMDM2NzE3NS4zLjAuMTcxMDM2NzE3NS4wLjAuMA..&_ga=2.240540099.171001697.1710367176-1204669492.1708036474)
<https://caringadvocates.org/ironclad-strategy-forms.php>
- In the face of a severe dementia in which you must be hand fed and you don’t seek food, would you want hand feeding to continue, or tube feeding to be started?
- If you had to make a choice for a loved one between ICU and hospice, what would you most want to know from them? Susan Block’s father said he’d be willing to go through a lot as long as he was able to still “eat chocolate ice cream and watch football on television.” What would you be willing to endure and what

would you not be willing to endure for the possibility of more time? How much suffering or debility would you be willing to “pay” (and not pay) for more time living? What are the minimum essential elements you would want in order to feel you still had quality of life?

- Medical Aid in Dying (MAID) is legal in California. Patients with a terminal illness and a 6 month prognosis can self-administer life ending medicines.

Facing Death

- Have you been with anyone who was dying? What was that experience like?
- How do you reconcile living and dying? What is your attitude, as you put it into practice, toward old age? Is it something to deny or avoid, or a stage of life to be honored? Do you think most people are in denial about their own aging?
- How does your spirituality or religion inform your thoughts about the end of your own life?
- What does it mean to “Let go?”
- We can all afford to be thoughtful and cerebral about our dying now. Are you concerned that you may look at death differently, make different choices, when you are actually facing it?
- In order to truly live, must we deny that we will die? How do we make life and death belong together?
- Have you discussed your funeral wishes, and care of your body after you die, with your family?



List of Resources for Being Mortal Seminar
For advance healthcare directive:

- mydirectives.com (Free, and you can insert videos of yourself and free-text comments and other records such as Compassion and Choices form for dementia)
- prepareforyourcare.org (Simple, approachable document)

- [Die Later—Ironclad Strategy Natural Dying—Living Will](#) focus on deciding in advance for care when you have a serious dementia
- Compassionandchoices.org (emphasis on dementia provisions)
- TheConversationProject.org
- endwellproject.org
- Book for purchase: [My Dying Wishes](#), Richard T Beeman

For California End of Life Option, Medical Aid in Dying:

<https://coalitionccc.org/CCCC/CCCC/Archive-pages/End-of-Life-Option-Act.aspx?hkey=04a7598e-71e3-4cb3-bc1a-1337ca6652b4>

Voluntary Stopping Eating and Drinking:

<https://compassionandchoices.org/our-issues/vsed/>

For POLST: (Physician Orders for Life Sustaining treatment

<https://capolst.org/polst-for-patients-loved-ones/>

[Being Mortal: Medicine and What Matters in the End](#), Atul Gawande, MD