International Shinto Foundation, Inc.

Focus Area: “Long-term palliative care”

Theme:  "Long-term spiritual self-palliative care"

 Remarkable  evolution in medical technology  has  enabled  to offer a variety of treatments to be selected even for patients of severe stage of disease  to prolong their lives.    There has been, however, a general tendency of paying attention solely to the “quantity” (length) of life in medical policy,  which has led to such circumstances as missing out the whole picture of pains that the disease is affecting to the patient.   Nevertheless, now, there has arisen a movement throughout the world that  focuses on the “quality of life” of elder patients and their treatment should be not only for the cure of the disease, but also a “holistic care” including  their physical, mental, social and even spiritual aspects.

 In such holistic care, a team consisting of a doctor, nurse, social worker, clinical psychologist, chaplain and nutritionist, is allocated to each patient for palliating symptoms of terminally ill patients including those suffering from sickness incurable.  The staff of the team reports to each other  his/her views on the patient and his/her family and their needs, in order to complete the patient’s whole image from every angle and aspect.  This system intends not only to alleviate the patient’s physical pains, but also to offer a holistic palliative care embracing his/her mental, social and psychological issues.  As a part of holistic care,  here, however, we would like to propose a new way of life for patient’s side, not the carer’s, because we believe that rather than specific medical treatment or method to cure sickness,  the patient’s mindset how to accept the sickness and how to live the rest of his/her life would be of much greater meaning for his/her happiness and satisfaction.

Even if his/her illness is incurable, or he/she recognizes to be  going closely to death, it is not impossible to foster hope through a moment of feeling connected to family members or close friends, tasting exquisite foods, enjoyable chatting with carer, creative pleasure through artistic activities and casual communication with staff etc.    We human being can rectify our lives even just a day before our death.  We might not be able to find the meaning of our lives until the last moment, so should not give  up until the end.

  Nobody would like to fell ill and grow weak, and  any preventive method possible against them had better be  taken.  However,  it is a reality that very few people are exonerated from it.  If so, we should change our general and probably unconscious mindset that human being should have normal physical functions and five senses.  In other words, we need to psychologically prepare to include sickness as a part of ourselves, which embraces both, seemingly, positive and negative aspects.  Sickness is not definitive unhappiness, but is just a state of physical or mental conditions and does not necessarily be negative or bad.  It is not rare that sickness makes us be of greater caliber, mature and attractive human, and often makes arrogant people unbelievably modest.   It is usually difficult to be truly modest when we are enjoying perfect health  and everything is going well.  Some people find their new way of life in the midst or after suffering from sickness – a girl hit by car  to become paralyzed below waist made up her mind to dedicate her life to wheelchaired people by starting charity business, or a tuberculosis patient having had been hospitalized over four years reviewed his life to become a doctor etc.  To live patiently with defective physical body could be an effective way of self-improvement.  If we make the most of sickness, we could be even happier that before falling ill.

Death is not desirable, but will come for everyone.  We should not keep our eyes off this undesirable in order to overcome it.  By accepting and embracing our death in our mind we would be able to find naturally how we should live until the end.  According to a renowned immunologist, aging mechanism is still not fully known or clarified to such a level as the biological embryology or differentiation.  In short , it is not scientifically proved in detail yet. Nonetheless, we may tend to consider aging in very simple form as a sort of stereotyped illness, such as we are going to have a dementia and die as we age, etc.    If aging is still not well known, then it would be a valuable way of thinking to challenge aging through one’s own way, by not considering the aging a sickness like an escalator toward death, rather enjoy it by trying to explore the path toward it.   Considering and accepting sickness and aging in this way,  it would be able to maximize the benefit and positive aspects of sickness and minimize pains and negative ones it causes.