Books by the Stack

**Being Mortal: Medicine and What Matters in the End** by Atul Gawande

A prominent surgeon argues against modern medical practices that extend life at the expense of quality of life while isolating the dying, outlining suggestions for freer, more fulfilling approaches to death that enable more dignified and comfortable choices.

**Why you’ll like it:** *Family and relationships. Society and culture. Reflective. Richly detailed.*

**About the Author:** Atul Gawande is a surgical resident in Boston and staff writer on medicine and science for The New Yorker. A former Rhodes scholar, he received his M.D. from Harvard Medical School. He lives with his wife and three children in Newton, Massachusetts. He has written several books including Complications, Better, The Checklist Manifesto, and Being Mortal: Medicine and What Matters in the End. He has won the Lewis Thomas Prize for Writing about Science and two National Magazine Awards. He won the prize for Adult Non-fiction in the Indies Choice Book Awards 2015 with Being Mortal: Medicine and What Matters in the End. (Bowker Author Biography)

**Questions for Discussion**

1. Have you ever lost someone you care about to serious illness? What is the best way to empathize and comfort those facing serious, life-threatening illness? How prepared do you feel to do and say the right thing when that time comes for someone in your life?

2. What do you think the author means when he says that we’ve “medicalized” mortality? Do you agree? Why do you think that has happened in our culture? How can we shift to a more humane, compassionate approach to mortality?

3. Have you ever seen anyone die or been with someone in the final stages of life? Can you describe that experience? How did the experience affect your wishes for the end of your own life?

4. What did you discover about the physiology of aging? What is your attitude toward aging?

5. The author suggests we aren’t taking advantage of the opportunity to make the experience of aging better. In what ways could we improve aging in our daily lives and as a culture? In what ways could we improve aging in our daily lives and as a culture?

6. Did you read Alice Hobson’s story as an inspiring one, or as a cautionary tale?

7. Even with diminishing capacities, Felix found ways to give his life in a retirement community purpose by helping fellow residents, mentoring younger doctors, and caring for his wife? What activities might you envision doing that would bring you fulfillment in your retirement when you might face some physical limitations?

8. Chapter 4 describes the birth of the assisted-living facility concept (Park Place), designed by Keren Wilson to provide her disabled mother, Jessie, with caregivers who would not restrict her freedom. Key
components included having her own thermostat, her own schedule, her own furniture, and a lock on the door. What does it mean to you to treat someone with serious illness as a person and not a patient?

9. In 1980, an eighty-year-old man named Harry Truman refused to move from his home as Mount St. Helens began to erupt. He told authorities that at eighty years old he had a right to decide his fate. Do you agree? What are the implications for individuals and families when elder adults are given full autonomy over their lives?

10. What realities are captured in the story of Lou Sanders and his daughter, Shelley, regarding home care for an aging and increasingly frail parent? What conflicts did Shelley face between her intentions and the practicals needs of the family and herself? What does the book illustrate about the universal nature of this struggle in families around the globe?

11. A key concept that emerges from the author's interviews is “home.” Much more than just the place where you go to bed at night, home evokes a set of values and freedoms for many as they face old age. As you consider the life you want to lead in old age, what does home mean to you?

12. Reading about Bill Thomas’s Eden Alternative in Chapter 5, what came to mind when he outlined the Three Plagues of nursing home existence: boredom, loneliness, and helplessness? What do you think matters most when you envision eldercare?

13. What can be learned from the medical treatment choices that were made in the final days of Sara Monopoli’s life?

14. What are your feelings about hospice care? When is the appropriate time to introduce hospice in the treatment of those with life-threatening illness?

15. The author writes, “It is not death that the very old tell me they fear. It is what happens short of death,” specially the loss of physical function and cognitive capacity. In what ways do you relate to that fear or not? What do you fear most about what happens short of death?

16. How do we strike a balance between our fear of dying and our hope for a long, healthy life, while still confronting reality?

17. 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. Dawande quotes statistics that show 25 percent of Medicare spending goes to the 5 percent 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?

18. What is your attitude toward old age? Is it something to avoid thinking about, or a stage of life to be honored? Do you think most people are in denial about their own aging?

19. How was your reading affected by the book’s final scene, as Dr. Gawande fulfills his father’s wishes? How do tradition and spirituality influence your concept of what it means to be mortal?

(Questions from the author)