

Essay/Personal Reflection

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There comes a point in “Lies,” a short story written by the Nobel Prize-winning novelist J.M. Coetzee, where the protagonist, a man named John, confronts his wife with a stone-faced plea.

Dear Norma, there will come a day when you and I too will need to be told the truth, the real truth. Can we make a pact? Can we promise that we won't lie to each other, that no matter how hard it may be to say the words, we will say them — the words It is not going to get better, it is going to get worse, and it is going to go on getting worse, until it is the very worst?

Your loving husband,
John
(Coetzee, 2017)

Reading “Lies” must, in the context of all that has transpired since March 2020, conjure complicated feelings for the palliative care clinician. Published in 2017 in the *New York Review of Books*, the story's major conflict is death: how we dance around the topic, how we interpret its meaning, and how that meaning changes as we — or as others — approach the end.

In “Lies,” John is not only the loving husband of Norma but also a son. His letter to his wife, which comprises the entirety of the piece, recounts a visit to his mother, who has returned to her home from a recent hospitalization. “She cannot walk without her stick,” John writes, and “has not been able to climb the stairs since returning from the hospital.” She sleeps on the sofa downstairs; her papers and books are all on the second floor; her diet consists of bread and cheese. John is struck by the incoherence, the disjointed nature of her life.

“Mother,” he recalls himself saying, “can we discuss your living arrangements? Can we talk about the future?” He reminds her that she has “had one bad fall, and it is only a matter of time before you have another.”

His mother, the only unnamed character in the story, protests that she is safe and that she is not alone. She has Pablo, a man from the local village, who helps in the garden.

But where was Pablo when she fell? John asks. Where would she be now, had she not been able to call the hospital on her own?

“Where would I be?” his mother replies. “You seem to know the answer, so why ask me? Under the earth, being devoured by worms, I presume. Is that what I am supposed to say?”

John does not respond directly to her question, but offers instead a set of explanations for why she cannot live on her own, or with Pablo, anymore. Institutions may not provide an ideal life, he admits, “they may not be heaven, but for someone in your position they are the next best thing.”

His mother flicks her hand. She asks what, exactly, her position is.

John throws his own hands in the air. He asks if she really wants him to “say the words.”

“Yes,” she says. “Just for a change, just as an exercise, tell me the truth.”

“The truth is that you are an old woman in need of care,” he says. “Which a man like Pablo cannot give.”

His mother, unconvinced, shakes her head, asks for “the real truth.”

“The real truth?” John asks.

“Yes,” she demands. “The real truth.”

As is clear from this dialogue, as well as the story's ending, Coetzee is interested in how we communicate about death and dying, and how difficult it is to speak of these experiences with calm and candor. John, before making his final plea to Norma, writes that if he had to tell his mother “the real truth” (which he ultimately cannot), it would go something like this:

You cannot say No to the ticking of the clock. You cannot say No to death. When death says Come, you must bow your head and come. Therefore accept. Learn to say Yes... do not frown, do not dig in your heels. Say Yes. Say, I agree. Say, I am in your hands. Make the best of it.

(Coetzee, 2017)

There is, in this and in much of Coetzee's writing, a focus on the deception and self-deception of human nature and, conversely, a marveling at the ultimate victory of fate. There is also the sense of the ultimate *nature* of that fate — namely death. Coetzee as a novelist is interested in the ancient Greek tragedians, in whose works, as he writes in a separate essay,

lies a question “foreign to the modern, post-tragic imagination”: “what is to be learned from the fate of a man who,” like Oedipus, “did not see until he was blind?” (Coetzee, 2010). His focus on death may serve as a means of asking whether we, as a society, have taken a tragic blindness to mortality — and if so, what the implications might be. That focus has grown only more relevant since the story’s publication.

The notion, for instance, that the avoidance of death leaves us woefully unprepared to die, is only a slight dovetail from the concern, exacerbated by the COVID-19 pandemic, that we have not paid proper attention to end-of-life care among our aging population. It is a reminder to “make due preparation for death,” as Coetzee writes in his 2003 Nobel Prize Lecture (Coetzee, 2003). And the dialogue between John and his mother — and the latter’s sharp offense at being denied what she perceives as “the real truth” — reinforces the importance of honesty in end-of-life care, and the need to communicate openly about our motivations, prognoses, and worries around death. “Lies” is, for these reasons, an important story.

But the story is also important for its distortions. John hardly exudes the warmth, optimism, or encouragement of liberating personal autonomy that any of us would hope for in a palliative care clinician. Paired with the ultimate plea to his wife — about life getting worse, and going on getting worse, “until it is the very worst” — his urging to “to make the best” of death seems the promotion more of a passive sadness than a warm-blooded action. The story abounds with truth, but its tone lacks in love.

Death and dying are often sad, but they are not, in and of themselves, tragic in the ancient Greek sense. Oedipus does not, after all, become blind *in order to* finally see. He blinds himself in agony, unable to bear the pain of what he has done, unable to conceive how he, innocent of intention, could have deserved such a cruel fate.

In nuanced but important contrast, the palliative care physician B.J. Miller, in a recent *New York Times* article, maintains that the COVID-19 pandemic “has awakened us to the fact that we die” in a way that frees us to see clearly, eyes intact (Miller, 2020). He writes of patients who, leaning into cameras and whispering over Telemedicine calls “in hushed tones, say that these times are shaking them into clarity,” forcing them not merely to accept what they had not seen before, but to stare courageously into life’s most crucial questions: “When do you know you’re done? What are you living for in the meantime?”

Such clarity, Miller admits, may indeed “show up as unmitigated sorrow or discomfort,” which often feel like tragedy. But these are not, in the literary sense, tragic. Sorrow and discomfort are “honest and real” and “a powerful sign of life,” reminding us that our lives are limited and that those limitations are, as W.H. Auden writes, “What give life and warmth to / An actual character” Auden (1991). Characters can, of course, also demonstrate nobility, integrity, and strength of will in the tragic worldview. But the awareness of mortality, in palliative care, compels us to action while reminding us that our actions have (unlike in tragedy) real and potentially beautiful consequences for how the story ends. The great difference between Coetzee’s character of John, on the one hand, and Miller or Auden on the other, is that truth is not, for the latter two, an impersonal, almost antagonistic entity. It is a liberating force and a life-giver even, or especially, as death approaches.

The role of the palliative care clinician may thus, at this moment, be to mobilize that truth in the hospital, in the community, in writing and media, and to work passionately so that patients might live for a goal, an experience, a sensation that will invest their lives with meaning at a time when meaning is, for many, hard to come by. Or it may be, at the end, simply to help others find rest.

In either case, it must be to demonstrate that mortality is no mere tragic force to which you say *Yes* or *No*. It is, as Miller concludes, “the force that shows you what you love and urges you to revel in that love while the clock ticks.”

This is the truth, the real truth.

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