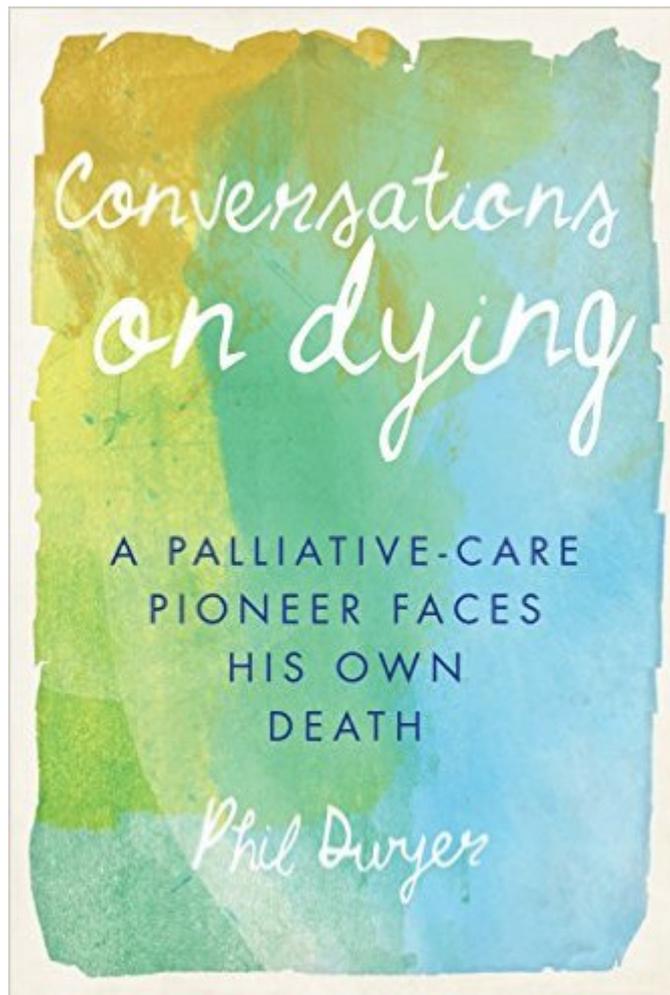


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# Conversations On Dying: A Palliative-Care Pioneer Faces His Own Death



## Synopsis

The story of the end-of-life experience of a palliative care physician who helped thousands of patients to die well. We all die. Most of us spend the majority of our lives ignoring this uncomfortable truth, but Dr. Larry Librach dedicated his life and his career to helping his patients navigate their final journey. Then, in April 2013, Larry was diagnosed with terminal pancreatic cancer. Unlike the majority of us, Larry knew the death he wanted. He wanted to die at home, surrounded by his family: his wife of forty years, his children, and his grandchildren. He did. He was peaceful and calm at the end. Larry proved that the "good death" isn't a myth. It can be done, and he showed us how. Ever the teacher, Larry made his last journey a teachable moment on how to die the best death possible, even with a pernicious disease. As hard as it is to guide patients toward dying well, it is far harder to live those precepts day by day as the clock ticks down to one's own death, but Larry, together with author Phil Dwyer, chronicled his final journey with courage and humour.

## Book Information

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## Customer Reviews

Given the main message is that we spend far too little time talking about death, you might reasonably expect that this is not a book with much appeal. In fact, there is much to commend it. Not just the skillful, straight-forward writing and the sensitive tone, but the sheer depth of the research. You come away feeling well informed about the event none of us can avoid. A superficial appeal rests with the main premise - a leading Canadian expert on death and dying shares intimate details of his own demise from a fast-acting cancer. But once you get past that headline-writer's

dream, you find the narrative framework of the doctor's last months are well upholstered with insight and statistics, colour and spirituality. In fact, the exact details of his death are not revealed. There was a limit to access gained by the author. He wasn't there to report the death rattle, assuming there was one. However, we get a pretty good idea of what must have taken place from a gruelling description the writer's brother provides of the last moments of their older brother's death in a grim nursing home in England just a short time before. One of the key messages is that despite advances in medical science, there is still a wide chasm separating the way most practitioners handle a life's ending and the wishes of patients and families. This story helps - if you're up to contemplating something that for most people is too ghastly to think about.

*Conversations on Dying* (Dundurn, 2016), by Phil Dwyer is a necessary book. Although its subject matter, end of life and palliative care, is difficult, *Conversations on Dying* is not. The intertwining of clinical fact, personal anecdote and the conversation of the title with a pioneer of palliative care brings to the subject a rare humour and humanity. A wonderful book to begin the conversation with, if you find yourself already in the midst of the discussion, *Conversations on Dying* is the friend who has been through it before and will help you on the journey. - Full disclosure - I read the book in an early version as well as the published one. It only became better with each reading. I wish that I had *Conversations on Dying* when I went through the long process of death with my grandmother.

I bought the book partly because, full disclosure, Phil and I worked together 15 years ago, but also because I'm interested in hospice and palliative medicine topics. I'm glad I read it. I'm the digital director at an ad agency with a number of health care clients, and I do some work with palliative care and hospice care providers. It can be a struggle for me because my priorities are usually arranged to generate new patient volumes - "commerce" - whereas palliative care physicians (more so than most physicians) seem averse to viewing what they do as a commercial enterprise. We talk past each other, a lot. *Conversations on Dying* does a lot to provide a history and a context for palliative care in Canada and the UK, and it helped me connect some dots about how it works in the US, where I live. I think I'll do a better job of communicating with palliative physicians in the future, and that alone justifies reading the book. But the book does a lot more than that. Phil does a great job of presenting Larry Librach as a vibrant person with an important legacy. Larry's dying, of course, and dying is sad. The book conveys the distress so many (including Phil) felt at Larry Librach's death - "the process of his dying" - and it is emotionally powerful. I have a habit of reading books in bars and more than a few times, sitting on a stool at a bar, I had to clench and

unclench my jaw to keep the tears at bay, because it's one thing to read a book at a bar but quite another to cry at a bar. So, bottom line: I liked it. It was worthwhile and touching. I'll probably read it again in a few months.

Informative and deeply moving, Dwyer weaves stories of his brother's harrowing end of life with lessons and insights from a pioneer in palliative care who faces his own untimely death. In asking what constitutes a good death, Dwyer provides an engaging and elegant examination of the challenges we face, both as individuals and as a society, while deftly illustrating how palliative care possesses the tools and skills to relieve suffering for a humane, respectful passing. The urgency of this issue is undeniable. For example, despite forty-two years of formalized, quality palliative care in Canada, only 15% of Canadians who need it are lucky enough to receive it. This is a stark reality, where ignorance, lack of political will, and outdated health-care models deprive the dying of what should be a fundamental and guaranteed human right: the right to a humane, dignified, and gentle end of life. *Conversations on Dying* provides a compelling, insightful, and timely contribution to this crucial issue that all of us will face.

Excellent

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