The Obituary and the Oncology Nurse

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ike many, I have an early morning routine involving prayer and coffee, getting kids dressed, and gathering the inner fortitude necessary for the day ahead. But nestled amidst this routine is the daily ritual of scrolling through the obituary section of the local newspaper. I am an oncology nurse. From flipping through the crisp pages of an actual newspaper to accessing the information within seconds on my smartphone, this observance of mine has evolved during the 13 years I have worked in oncology. While the means have changed, the significance of this ritual remains. The daily urge to keep abreast of those who have passed away is often the mark of an oncology nurse and a ritual to which many of us can relate.

As I peruse the obituaries and see patients I knew, I stop and revel in their pictures, reminiscent of another era in their lives that had not yet encountered cancer. Regardless of how long I cared for someone, I can almost always glean something new from an obituary—a hobby, a career, a passion. Several years ago, I cared for a man named Jack during the last few days of his life. A burly man, he was weakened from prostate cancer that had metastasized to his bone marrow and he required almost total care. We spent a quiet weekend as patient and nurse and I came to know him in the way a nurse does when caring for someone through one of the most important milestones of a life—deeply and yet not at all. My memory of Jack would have been limited to that of a stoic man struggling to maintain his dignity would it not have been for the obituary that referred to him as “a champion for at-risk youth” and noted his love of the sea. It gave me pause. I was struck by how very little we sometimes know of those we care for in their most intimate moments. Discovering the highlights of Jack’s life helped me acknowledge that cancer was but a shadow at the end of a rich life. This gave me peace. Of course there are many mornings when I see an obituary that takes me by surprise and I am left to wonder what happened to the patient and why. Although unexpected and at times jarring, I am still grateful to know and to have that moment to ponder and say goodbye, if only in my mind. I appreciate being afforded a moment to know of the patient’s passing and a bit of his or her life, and remember him or her as a human being instead of an illness. This knowing preempts the feeling that oncology is an assembly line of loss. Although seemingly insignificant, it is a daily ritual of closure.

I have long heard candid remarks spoken in jest about the morbid tendencies of oncology nurses in our proclivity for reading the obituaries, our presumption that a headache means a tumor or that a bruise is a sure-fire sign of leukemia. We chuckle at these idiosyncrasies, but what they represent runs much deeper. We are desperate to make sense of the grief and loss that pervade each day. What may seem morbid to an outsider actually serves as a suit of armor and a means of coping with constantly bearing witness to illness and loss.

Pinned to the bulletin board by my desk at work I have posted photographs clipped from the obituary section of several of my long-term patients now gone. These patients have left their imprint on my soul. A glimpse of their faces through the course of the day inspires me to continue moving forward in caring for others. In the photograph of Millie, she is beaming and toasting a glass of wine to a life well lived. Dave’s stubborn nature, the very one that enabled him to persevere through multiple myeloma for years and live beyond his expected prognosis, shines through in the twinkle in his eye. I am reminded of Grace’s daily emails filled with questions, bits of wisdom, and updates about the size of her spleen, which she had nicknamed Trixie, as I catch sight of her out of the corner of my eye. Tucked into my journal are the folded obituaries of other patients that I chose to keep over the years. These tokens remind me that more powerful than the sadness of repeated loss is that which we have gained in knowing each patient—the reminders that life is fragile and subject to change, the grace with which one can walk through the worst times in life, the true strength of the human spirit. Harnessing these private moments of meaning and closure is crucial to gaining the strength to move on. If we feel as though we are drowning in sorrow, we are unable to embrace the joy and privilege of oncology nursing.

A Chinese proverb contends, “You cannot prevent the birds of sorrow from flying over your head, but you can prevent them from building nests in your hair.” This sentiment is particularly profound for nurses and may be the mantra of the oncology nurse who wants to last. We all have our sacred rituals that allow us to draw meaning from the loss. Being conscious of the role these rituals play is important. And so, amidst the chaos of each morning, I will steal these moments to honor my patients and preserve myself.