

At some point in the day, usually as early as possible while still maintaining sensitivity, I ask if the family would like me to contact pastoral care or their own family religious leader. Throughout the day, I try to find the right moment to ask if the family would like handprints, hair clippings, etc. Some families want pictures taken. I do my best to accommodate their wishes. I bring them juice and glasses of water into the room. Many parents do not leave the unit for any reason, so I just like to ensure that they at least have something to drink.

If the child is small enough, I put them in their parents' arms for as long as they wish, after getting the go-ahead from the attending physician. If the child is too big or unable to be held, I try to make room in the bed for the parents to lie down beside their child one last time. I remove unnecessary equipment from the room to accommodate guests, to give parents a place to lie down even for a brief moment and to make the room appear *less hospital-like*. When the time comes to actually withdraw life-sustaining treatments by stopping inotropes and extubation, the family has already asked and I have explained exactly what will take place. The primary concerns are usually, "Will my child suffer?" "How long will it take?" "How do you know my child is not in pain?" "Are you sure nothing else can be done?" "Have we made the right decision?" "How will you know when they are gone?" Prior to extubation, I turn off the monitor and silence all of the alarms. I remain in the room in a corner or just outside. Throughout the day I try to provide moments of privacy to the family and try to be as unobtrusive as possible, yet I let them know I am there if they should need me in any way.

At the end, when the child has died, I always ask the parents if they want to bathe their child and put clean pyjamas on. Seldom has a parent remained to do this. Most parents ask me to "please take care" of their child. I promise that I will stay with their child as long as I can and this seems to be what parents want to know. They don't want their child to be alone. Parents will ask where their child will go after I have bathed them. I explain that they will be taken to the morgue, but I will make sure that they are in new pyjamas and

wrapped in their blanket. This is when I give the family the bereavement package and tell them that they can call anytime in the future. The bereavement group then receives the information about the child's death, a personal card is left in the ICU for all of the staff to sign and the follow-up is scheduled.

This last day is over.

Book review

The limits of hope

The road

Cormac McCarthy

Random House; 2006

256 pp \$30.00 ISBN 0-30726-543-9

We all, someday, are going to die. About this fact "there is no manner of doubt, no possible probable shadow of doubt, no possible doubt whatever" (W.S. Gilbert, *The Gondoliers*). So too, it seems obvious, some day, all human life on earth will end. And be it 5 hundred million or a billion years from now all life on earth will draw to a close when our sun goes Nova. While it is easy, and perhaps comforting, to imagine life on earth continuing long after our species is departed, in *The road* McCarthy imagines a brilliant reversal of this.

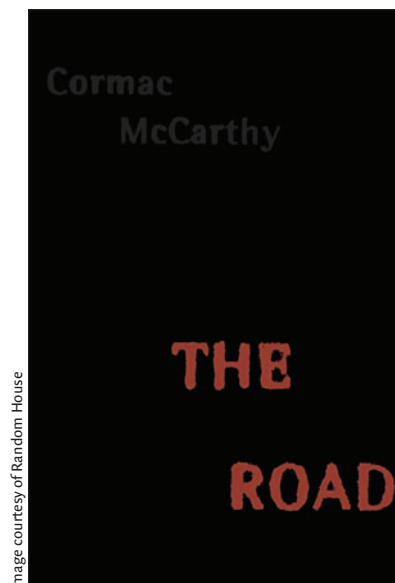
In the near future, an unnamed catastrophe has enveloped the earth. The sky is permanently darkened, the ground coated with soot and dust, fields covered with crumbling stocks of grass and ashen vegetation, and *Homo sapiens* is the last remaining species to walk the earth. The few survivors live off what they can salvage from the rotting stinking ruins, and they live off each other. In this nightmare of darkness, soot, ash and cold, McCarthy has inserted a boy, called simply "the boy," and his father, known throughout as "the man." They wander down a road toward the Pacific coast, travelling through the remains of the past in search of a future that no longer exists. The child is perhaps 6 to 8 years of age; we know only that he was born shortly after the end of the world.

DOI:10.1593/cmaj.061431

Shannon Duncan

Pediatric critical care nurse
Pediatric Intensive Care Unit
Stollery Children's Hospital
Edmonton, Alta.

Acknowledgement: Dr. Daniel Garros, Staff Intensivist, Stollery Children's Hospital, for initiating the idea for this article, and his ongoing support through to publication.



In embarking upon the journey to the coast, a transitional boundary of symbolic importance, the father is maintaining hope and a belief for the future for himself and his son. By virtue of not eating other survivors they are the "good guys, the keepers of the flame." When they see another child in the ruins the boy wants to care for him, to let him come along on their journey. "I saw a boy," he says. "We should help him."

They move on; logistics demand that they leave the desolate child to his fate.

I needed to read this novel twice, as it kept exceeding my capacity and endurance; some sections compelled me to skip over details and paragraphs. In one section I overlooked, as did the man, the vital clues McCarthy lays out for us, resulting in a horrifying and jointly unexpected discovery. The climax of the book occurs shortly after this scene; the father must leave his son alone for several hours hidden in a field. Before he leaves he attempts to ensure that his son can kill himself with the last remaining bullet, if

discovered by their pursuers. “You put it in your mouth,” he reviews. The boy is agreeable, says he knows how to do it, but the man is frustrated and becomes momentarily angry with the boy, who is clearly still too young to be trusted with such an important task, and it is made clear that the man’s anger is ultimately an expression of his love for the boy.

Several times during the journey down the road, the boy is filled to the core of his being with overwhelming terror. After his father blows the brains out of the man about to kill and then eat them, grey matter and blood defile the son’s head. The

father then watches his son doing a “dance of terror” something he has seen him do, perhaps many times, before.

As a father of young sons, I found this book had a visceral impact. It made me step back each day and marvel at the world we live in, at the cleanness of our air, the bounty awaiting me each day in the refrigerator.

Sometimes my 3-year-old jumps from the car and does a little dance, skipping sideways in his trendy new shoes, so proud of their designer decals and his ability to run and jump. He dances with his arms outstretched and his head

thrown back, a dance of pure joy. For this sight I am now even more thankful.

We all live with the certainty that we are going to die, yet the struggle to maintain hope and create meaning comes naturally and fills the lives of many; it is essential to the daily practice of medicine. In stripping from the world all the gifts our planet provides for us, McCarthy has created a study about the essence and limits of hope and hopefulness.

Stephen Workman
QEII Health Sciences Centre
Halifax, NS

Annotations

Grace *in extremis*

His Grace, Charles Lennox, loved animals.

He was born in the 18th century, into the English aristocracy, a world of privilege, duty and honour. At age 25 he was involved in a duel, triggered by a comment about family bravery. His adversary was his commanding officer and the second son of King George III. Lennox fired first and missed. His opponent was magnanimous and fired into the sky. The officers of the Coldstream Guards felt Lennox had acted bravely but with a lack of judgment.

At the age of 42, Charles Lennox inherited his uncle’s titles, including Duke of Richmond, and became the Lord Lieutenant of Ireland. There, he alienated the Roman Catholics but was given top marks for his love of horse racing and lavish parties. The parties very nearly bankrupted him, and when his term ended he could not afford to live on his English estate, Goodwood, which he temporarily closed. He took up residence in Brussels and there, in 1815, his wife gave the magnificent ball where, as a guest, the Duke of Wellington learned of the approach of Napoleon, 3 days before the Battle of Waterloo.

In 1818 the Colonial Secretary, a good friend and relative, appointed Lennox as Governor General of British



The Beaverbrook Art Gallery/The Beaverbrook Canadian Foundation

George Romney (British, 1734–1802), *Charles Lennox, 4th Duke of Richmond, Duke of Lennox, and of Aubigny* (c. 1776–1777). Oil on canvas. 7.6 × 101.6 cm. The Beaverbrook Art Gallery/The Beaverbrook Canadian Foundation (in dispute, 2004). The Beaverbrook Art Gallery, Fredericton, NB.