

**Hilarion G. Petzold**

**GESTALT THERAPY WITH THE DYING PATIENT:**

*"To die means: to bring life to a close. Therapy with the dying means helping someone to reach a closure with life. First of all, this kind of therapy means creating almost an 'inner room', in which life is free to be completed and come to a close. Secondly, therapy with the dying provides guidance to facilitate inner growth."*

*(E. Ansohn, 1969, 157)*

I would like to briefly report on a rather recent experience of mine. The brother (36 years old) of a friend of mine was dying of lung cancer. My friend could no longer cope with the situation, because she had to support both of their elderly parents, who had completely broken down. She had asked me to accompany her to the hospital from time to time. That I did. The brother, whom I will refer to as Lutz, was in a very poor state of mind. He knew that he did not have much longer to live. The doctors had given him only a couple of weeks to live. Lutz was constantly torn between despair, hope that perhaps everything would still be fine, and anger towards the whole world. When we visited him, he spoke as if he were to be released within the next few weeks. Then he suddenly began to cry and said that he knew that he must die, but he simply could not cope with it. His sister became more and more silent and withdrawn with each of these remarks. She was totally helpless.

I had worked with terminally ill patients many times before, as well as with a number of elderly people while they were dying. Thus, the situation was not strange for me. In my own therapy I had dealt with the theme of death, with my own mortality, and having worked it through I thought that I had discovered my position on the subject. Aging, death and dying had occupied me for a very long time. I had led a number of projects and had done some writing on the subject (Petzold, Bubolz, 1976, 1979). However, Lutz's situation perplexed me in an exceptional way. At the time, Lutz was my age, had a similar occupation, was successful, cheerful, and full of plans. I experienced how I pushed my own feelings of uncertainty aside by escaping into the role of the expert, and tried to deal with the situation as "professional." The Kubler-Ross stages of dying shot through my mind, and I became aware of how technically I was talking to Lutz, as though I had stepped aside. I had barely realized what I was doing, when my thoughts took another professional

twist. "Aha", I thought, "now you are defending yourself against your feelings of uncertainty". And directly following: "How awfully technical you are". The next thought: "But technique is a very legitimate way of dealing with fear. It was clear to me: I was afraid, the fear of seeing Lutz dying; the fear of having to talk to Lutz about his dying; the fear of his questions, fearing that I would have no answers: fearing that I would have to speak at all. For the moment, I decided not to show any of this fear, to stash it away.

In retrospect, I think that that was exactly the right thing to do: simply admit to myself that I was afraid, not trying to use the technique of "self-disclosure" to get a handle on my fear. Today, I think that my own anxiety, which has always been aroused while working with the dying, cannot be reduced by handy techniques and pious sayings, but must be acknowledged and endured. Only then is there a chance that the situation may change within myself and between myself and the dying patient. For me, fear and anxiety go hand in hand with every intensive and personal contact with the dying .

I then told Lutz that I could come often, if that were agreeable to him. I also told him that it was important to me to relieve his sister some, who simply could not take it anymore. I felt uneasy after saying that, and I regretted having said it: *"Now you are implying to him that you only came because of your friend, because of the sister. You're saying that he doesn't really matter."* That thought was not accurate. There was suddenly a hint of understanding between Lutz and me, and I was touched to see that a person, who was so close to dying, could recognize and accept the limits of his fellow human beings, friends and relatives. We agreed that I would visit Lutz twice a week, if he were up to it.

The first visit was characterized by an uncomfortably tense, and at times, hostile atmosphere. In contrast to our former contact, Lutz looked emaciated and yellow. During the course of working with Lutz, these changes in his face, expression and behaviour were burdensome and most difficult to bear - one time he would be pale, yet still alive, awake and full of hope, and the next time, perhaps only a day later, he would be pale, drawn, marked by death, a person who had given up.

I had pulled up a chair, and sat down next to the bed.

H: "Hi."

Lutz was silent. I waited for an answer.

L: (after a while) "I'm not feeling well today."

H: "I can see that."

Again, silence follows.

H: "I brought you something to read."

L: "I don't read anymore!" A pile of books were lying on his night table.  
"You came to watch me die! Interesting, isn't it?"

I had the impulse to say, "*If I bother you, and you're not feeling well today, maybe I'd better go,*" but I repressed that statement.

L: "You don't know what to say to that, do you?"

H: "No, it wouldn't have been easy for me to anyway."

L: "Who cares? Nothing matters anymore. Can you tell me what counts anymore?"

H: "No. We could talk about it. I don't have anything brilliant to offer either. I think you're preoccupied with your situation, and maybe talking about it would help."

L: "Nothing and nobody could help me. The doctors can't, you can't, dear God can't."

H: "But maybe it could clear up things for you," (feeling very defensive.)

L: (very aggressively) "Clarify, clarify, what is there to clarify? That I have to die? That's been clear to me for ages. That's obvious. (softer) You know, I would really like to know why me, why does it have to be me. Why not you, why not just anybody? And I also don't know why everyone is lying to me, pretending. They are hiding my true condition from me. They must think I'm stupid - a complete idiot. As if I didn't know what was wrong with me, that I only have a couple of weeks or a couple of months left."

I am astonished and confused.

H: "I know. Nobody really knows how to deal with these situations. Most people, both the patients and the people who are in contact with them, just file it away, removing themselves from it. Perhaps the only thing to do is to talk with one another. At least something may become clearer. Maybe not always."

Lutz has grown quieter. Exhausted. He had sensed my insecurity, and his aggressiveness disappeared.

L: "Maybe you're right. I don't know what to do either. I simply don't know what to do . . . (Begins to cry). I'm tired now. Please go now. And . . . please come again."

I squeezed his hand, as if to make that promise. I went home feeling very dejected, and I could not get out of that depressed mood for the rest of the day.

I tried to get in touch with myself again, by going into a gestalt dialogue with myself:

*"I am your depression. I have settled in your bones. I have gotten under your skin. I have penetrated your core, making it fuzzy."*

*"Leave me alone. I will not let myself be overwhelmed. I won't give you any room. You can't get the better of me."*

*"You can't avoid me. No one can avoid me. Your mortality is unavoidable and that depresses you. With that I will knock you down. I'll knock you down into the grave."*

*(Rudely) "I know that I have to bite the dust. I don't need to be reminded of that."*

I feel a powerful rage growing inside me - and sadness. These feelings shake through my body in quick succession, shaking the depression out of me. And I know that I can escape being sucked in by my depression, if I admit to my anger and my fear and my sadness. I also notice how my body becomes loose and the tension that had stayed with me since I had entered the hospital room, subsided.

Anyone who works with the dying, and remains genuine while dealing with them, treats them not as mere objects, strangers or dolls, but learns to admit one's feelings, one's fears, one's pain, one's powerlessness, one's anger. Otherwise, a person must become removed, become hard, in an unhealthy routine manner. People then lose some of their humanity, and must armour themselves, to suppress any arousing emotions.

During the course of these sessions, I found that I had to take the risk of being open to my feelings and allowing them to be; this conviction was stronger now than it had been previously in similar working situations. At first, I experienced this as being very straining, yet as time went on, as relieving. Particularly the tension and physical discomfort did not occur anymore. The next contact, two days later, went much smoother.

L: "I was pretty difficult with you last time. Today I'm feeling weaker. It's not worth it."

H: "Are you ever cynical today?"

L: "It's O.K. Cynicism is the only weapon against death."

H: "That's not much."

L: (laughs, without bitterness) "There's no cure for death! You know, sometimes I get the feeling that there is and then it goes away again . . . Certainly, everyone must believe that sometime or other. And sometimes, when the pain is eating me up, I wish for that cure. But most of the time fear and hate and indignation keep me confused. At least today I feel clear. But I'm incredibly weak. It's as if life is somehow draining out of me. Like an hour-glass that has a hole in it." (Silence.)

H: "What is going through your mind right now?"

L: "This image of an hour-glass."

H: "What does it mean to you?"

L: That my time is running out. I'm trickling away. My juice is running out. Somewhere inside of me. There, my lifetime is trickling away. (Cries a little.) So much lifetime wasted."

H: "What are you thinking of now?"

L: "Of all the wasted years. Of wasted hours. Of all the fighting. Of all the work - I had to work much too much. I had much too little time for myself. You know, I planned to do so much; travel, raise children, take time to listen to music. I planned to do all that. (Cries more intensely.) It's much too early."

H: "Who are you saying that to?"

L: "Surely not the dear Lord. To Life or to myself. I would say it to Death, if I could talk to him."

H: "If you could talk to Death, what would you say to him?"

L: "That's difficult . . . a person has to die . . . I don't know."

H: "I'd like to suggest that you simply write down what you would say to him, if you can put a finger on it. In a short piece of prose or poetry. Just to get your thoughts and feelings written down at all."

L: "Yes, I really want to document my death. Retain everything. I don't want to forget anything. But I feel too weak to do it. You know, I'm so foggy so much of the time. The medication and the pain and in general. I really want to do it, and yet I know that I don't have the strength to do it. Right now I feel incredibly tired

and weak. As though my strength were all gone. It's nice that you're here."

I stayed with Lutz for another quarter of an hour, while he fell asleep, exhausted.

The next contact came two days later. Lutz was not feeling well at all. We spoke little. He had written two poems, which he showed to me at the beginning of the visit. Then he reached for my hand and asked me to just sit by him today, since he could not and had no desire to talk. I read the poems and inside I wept.

*I am drained out.  
And it is not the living ocean, that is soaking in.  
I am drained out.  
And my soul leaks out like oil.  
Dirtying.  
Oilspill.  
You too shall die, you seagulls.*

*My death is black, oily,  
I am dying  
Myself  
A seagull.*

The second poem reads:

*I am gray like the sand in the hour-glass.  
Ancient sand,  
That has not grown old.  
It measures the time of death.  
Each granule,  
A piece of dying.  
Sand from my skeleton  
Sand in me  
My remains  
Trickle out of me  
Grain upon grain  
Into nothingness.*

L: "The poems are very dismal, I think."

H: "Yes, I find the first one depressing. The second not so. Time is running out for me grain upon grain . . ."

L: (forcefully) "For me it was awful. I arrived at the image, because I had such terrible pain in my bones. Every grain came from my bones. As if someone were drilling the marrow out of me, scraping

away the bone. You know, I don't have a peaceful death. I won't be having a peaceful death, either. I am dying agonizingly, brutally."

H: "Like the seagulls in the oilspill."

L: "Yes. I experienced that one time in Brittany. Thousands of them in little black clumps. You know, it's not a natural death. And that's what makes me so angry. So furiously angry, that I am dying so unnaturally, not a normal death: cancer.."

H: "What do you feel when you say it like that?"

L: "Offended, a horrible feeling of being wronged. Of mischief, of destruction, and somehow degraded. Everything here is degrading. You are degrading, how you watch me. Let me just die."

H: "It makes you angry, that I am alive and well. I can understand these feelings, too. It's not fun to watch what is happening to you, and sometimes I almost feel guilty for being healthy."

L: "And why do you do this then?" "Why do you come here then, and why are you writing all this down and keeping a record of it?"

H: "I've often asked that myself. Not only with you. I've sat through it with others. Mostly old people. Maybe that's my way of dealing with my fear of dying. Be as close to it as possible, then a person knows how to handle it when it's his turn. It's not only that, I think. Being old has always intrigued me. All of my teachers in therapy training were great old men. I often thought that I would learn from older people how they had succeeded, since their successful life was more or less behind them."

L: "Then I'm probably the wrong subject to study, I guess."

H: "Dammit, your cynicism is really getting on my nerves! Why are you so offensive? Sure, now you're the one who's been hit, but it will get me too, just like everybody - you can be **dead** sure of that."

L: "Sorry. Sometimes I can't come to grips with it any other way. I think it's good that you are writing all this down. Really. You are documenting it for me. I sure can't do it anymore. Really, I envy you for what you are doing. I should have done it too. I should have done so many things. So much of what I did was superfluous."

H: "If you like, we can take a look at that. From what I know of you, that isn't true. You did a lot of things that were important. More than some other people do in the same amount of time. Your eyes are closed now, does a thought or a memory come to mind?"

- L: "Yes, I see images from my childhood, from the village . . . a valley, very green . . . lots of trees and bushes there. We used to play there, collecting tadpoles and fly's eggs. There were always three of us, Karl, Rolo and I. We always had an incredibly good time together. I'd like to go back there sometime. I haven't been back there in ages. Four years ago, nothing had changed there. Usually everything else changes so quickly."
- H: "What are you thinking of when you say it like that?"
- L: "About the village. It's awfully changed. Even back then, whenever I came home from boarding school. Every year something new was being built."
- H: "Did you attend a boarding school the whole time you were in high school?"
- L: "Yes, everything else was too far away. Couldn't drive either. It wasn't so bad at boarding school. I was always the best; they liked you there, teachers and students. Actually, everything came easily to me."

We went through a few more childhood and young-adult memories as they appeared in his imagination. They were always positive in character. After a while, Lutz said that he wanted to stop, since he was getting tired. We talked a little more. Lutz said, "I think some kind of balance is of utmost importance to me now. I'm going to do more of that for myself, and when you come again, we can do it together. There are a couple of more things that I don't want to look at alone."

To achieve a sense of balance at the end of one's life - regardless of whether it concerns a young or an old patient - is of crucial significance. It brings about a closure to the gestalt of life. Scenes from a person's life must all fit together. The final act must be acted out, keeping the whole play in mind. The significance of achieving this sense of life-balance was first pointed out to me by my teacher, Vladimir Iljine, (see Petzold, 1979.)

With dying patients and friends, he worked through the scenarios of these people's lives with them - often working together for months at a time:

*". . . to make it possible for them to reach a sense of balance in the face of death, leaving no role and no actors out . . . so that past life can come alive again." (Iljine, 1963)*

To my knowledge, he was also the first person to systematically use the dying patient's images of situations and scenes, while working with them. Butler



(1963) reported on his "life review therapy", which was a similar innovation in the treatment of elderly people, (see Lewis, Butler, 1974). However, with Butler there is no systematic way of working through events. Unlike the common ministerial style of conversing with the dying so that they may achieve some kind of balance, the work of Iljine uses an experience-activating procedure. A conscious effort is made to almost "act out" whatever surfaces in the imagination.

*"The drama of the thoughts is brought 'out' through conversation, is communicated, and is no longer acted out in fantasy and reflected upon alone. The dying person becomes author and observer simultaneously, when he allows his life to pass before him; as it passes before him, flooding his thoughts, he is unable to turn it off. This agonizing double role is all the more distressing, because he has been the author all along. The play is finished, no longer at his disposal. The only thing left now is to be author, actor and observer of the last act." (Iljine, 1963)*

The role of the therapist is to become an observer to the scenes that pass in the course of the patient's achieving a sense of balance with life. The dying patient is no longer alone in his drama, he/she can exchange ideas with the additional observers while looking at specific acts, scenes and roles. In this manner, the patient is more able to observe things from a distance, which is a prerequisite for achieving a sense of balance. The gestalt method incorporates an additional element: the dramatization of the scenes through dialogue, which the patient engages in with specific people or things that emerge in his fantasy. Gestalt therapeutical identification techniques make it possible to reown the events of the past. By "reowning", integration is accomplished, facilitating and promoting a sense of balance.

After writing down this last segment, in the way I am usually writing an article, I am aware that it serves the function of removing me from it. I notice that the interpretation of the material, the transcripts and records still affect me, and again it poses the question: "What have I left unfinished with this work?" For the moment, I do not have an answer to that.

In a number of sessions with Lutz, I tried helping him to reach a sense of life-balance, which meant his reowning of forgotten or denied scenes in his life, and enabling him to work through arguments that he had avoided and wanted to be finished with. I will pick out a scene from this material, which illustrates this kind of work.

L: "A couple of things are really weighing me down. When I think about it, I would have done some things differently - better."

H: "Yes, perhaps there is something that comes to mind."

L: "My sister. Actually, I always lived at her expense. I was always favored, and I always used that to my advantage."

- H: "If you close your eyes and try to picture your sister, what do you see?"
- L: "Right away, I see a scene with report cards. Mine is naturally first-rate, hers is pretty mediocre. Everyone is pecking at her, including me. Now another image comes of me helping her with her schoolwork. I really tortured her, really showed her how dumb she was."
- H: "What are you feeling now?"
- L: "Shame . . . and sadness."
- H: "Imagine that you could tell your sister what you are feeling now."
- L: "Marita, I'm sorry. Later on it got better between us, but I always stayed on top, and I always let it stay that way. Now the tables have turned, now I'm on the bottom, and you're on top. I'm really ashamed of myself."
- H: "What do you think Marita would answer?"
- L: "Oh, she would play it down: 'I never took it that seriously', or 'It's all over with anyway'. She was always real fair with me, most of the time, anyway. Now another scene comes to mind of while I was studying. She was often broke, but when she did have money, she always gave me some. I did the same, but there was always such a big deal made about it. I don't know, I probably treated her like my mother and father. We never talked about it."
- H: "But maybe you could talk to her about it sometime. When she comes to visit you again."
- L: "She'll just be in an awkward position again. Now she can't really discuss things with me, (bitterly) you have to be careful with me, you know."
- H: "But maybe it is important that she hears it for once, and that you can say it to her."
- L: "Maybe. I'll think it over, and if I feel up to it, I'll address it. At any rate, I feel more relieved having talked about it. I'm glad, too, that she has made it. I'm really glad for that. (Softly) I notice that I love her very much. Maybe I should tell her that sometime. That's enough for today."

Besides writing down emotions, thoughts and feelings in the form of prose, words or poetry, I suggested that he express what was moving him in colours, (Bubolz, 1979; Petzold, Orth, 1979.) I had brought him some crayons and a pad of paper, and he felt attracted to that medium.

L: "Drawing relieves me. Sometimes it distracts me, and sometimes I can draw the pain right out of me. This picture for instance, (he shows me a picture, that is only drawn with shades of red - spirals, spaces, lines, nothing concrete), I was in tremendous pain. Then I took the crayons. At first I felt increasingly weak, and then I drew the pain right into the colour, and smeared it onto the paper, as piercing and burning and biting as it was. It was strange how the pain flowed out of me into the red on the paper. After that I slept very well."

Another picture represented a meadow, trees, a stream, the scenes from his childhood, his favorite place to play. The next picture depicted a sun setting behind the mountains, only half peaking over the mountain-tops; the clouds were violet, orange, and the black night was approaching. A single star shone in the blue-black wall that crept into the picture from the left. Part of the landscape, trees and small houses, already stood in the shade, some still in the light. The picture was appealing to the emotions, and Lutz was very pleased with it.

L: "Drawing is beautiful. I haven't done any since I was in school. Too bad, really. A person should really do more of it."

In a gestalt-therapeutic way, I tried to exhaust the contents of the picture with him.

H: "What do you feel when you look at such a picture?"

L: "It's very peaceful. The sun doesn't have much strength left. It warms only a little bit."

H: "Maybe you could take the role of the sun for a while."

L: "I am a setting sun. I shone upon the earth, I made grass and flowers blossom, and now I am going to rest. Behind the mountains."

H: "Maybe you can let the mountains speak."

L: "I am the mountains. No one knows what lies beyond us. We are hiding a secret. We constitute the border between the land of the living and the land of the dead. We protect our border well. We are impassable."

H: "What does the sun say to the mountains?"

L: "I may be sinking behind you, but I'll be coming up again (becomes sad.) I'm not a sun, and I won't come up again. The dark night is enveloping me."

H: "Let the night speak!"

L: "I am the dark night, I cover the land when the sun is gone. I am soft and dark, obscurity. I am approaching the sunset."

H: "What does the sunset say?"

L: "I look forward to the night, retire behind the mountains, gilding the mountaintops with gold, greet the evening star in the darkness ... I am the evening star, I glow in the darkness, I sparkle from afar, from the wide universe, from inconceivable distances - like a glimmer of hope. (He turns to me.) Maybe there still is something like hope left."

H: (I nod.) "I hope for that sometimes too."

L: "Hoping for hope . . . strange, but it somehow makes sense to me."

We looked at the picture a while longer, and I let it affect me. A verse from a song from my boy-scout days came to mind, and I sang it for Lutz:

*"Behind the mountain-tops, the setting sun is brown,  
Enveloping the freezing, heated only for a while.  
As the night comes back around."*

L: "I know that one too, that's a long, long time ago."

We parted peacefully.

I could not come for over five days, because I had to lead a seminar. When we had said goodbye, I had promised to call or write to Lutz in the meantime. I learned from our contact by telephone that he was feeling increasingly worse. Upon visiting him again, his misery jumped out at me; his yellow, sunken face, his eyes sunken deep in their sockets, and I got a tight feeling around the heart. Suddenly and very existentially, I realized the meaning of the expression: "marked by death."

L: "Things are coming to an end, no doubt."

H: "You are looking worse. I brought some clay with me, thinking that we could make something out of clay. But that would probably be too strenuous for you."

L: "That's O.K., I can at least try it."

I had real soft, supple clay with me; I kneaded it well and handed him a small clump. Lutz held the clay feebly in his hand, and slowly began to form a ball, by rolling the ball back and forth between his hands. His eyes were shut and he then began to model the clay. After a while, he made a sunken human face out of it. The face was fragmented and yet easily recognizable. He smoothed the surface with his thumb. He looked at the clay face and stroked it again and again:

L: "That is my face. A tired face, as cool as the clay, and smooth. I am the face . . . very peaceful, really, when this torture is over with. My face is made of earth . . . a strange thought, that my face is made of earth. (He turns to me.) How many faces went into the earth to make this clay? I'm tired now. (He strokes the face) ... not as bad as it was a couple of weeks ago . . . really!"

Lutz fell asleep while stroking the clay face.

When I came back to the clinic two days later, agony had set in. I stayed with him, along with his sister. He was unconscious. We held his hand or his head, and spoke softly into his ear, telling him that we were with him and would stay with him. Around two o'clock in the morning, he suddenly opened his eyes, like a moment of recognition; a look that comes from very far away, reaching us and yet seeing through us, lost in space, beyond reach. We were both very quiet, depressed and yet somehow relieved. I took Marita home, and when I got home, I fell asleep, somehow empty and exhausted.

The next day, I got caught up in the usual workday. I dove into my work and in the course of the morning, I discovered that I was as though washing something away in all my haste; I realized that I still had some mourning left to do. It wasn't grief for an old friend or a close relative, but grief for a person who had shared his death with me, who had taken away some of the fear of my own death for me, and had given me some hope.

### **Summary:**

This is a report on death-therapy with a 36-year old cancer patient, using gestalt therapy and working with creative media (clay, poetry and colours), in order to facilitate an integration of life and to give the person a sense of balance with life. The author tries to communicate his personal thoughts and feelings as they were during the course of the therapy, to show that counselling the dying means to walk along a stretch of the path together. The companion/

therapist cannot avoid his own perplexity and confusion, by simply falling back on his professional role. Once he has become involved in an interpersonal relationship he does not treat the patient as some kind of object. With the aid of transcripts taken from tape recordings, the integrating effect of using gestalt dialogue, fantasy work, constructing with clay and colours, becomes evident.

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