

On Borrowed Time

There are patients who I call “the runners.” They move from one goal to another, never staying with anyone feeling or accomplishment for there is always more to do. There is money, power, fame or even doing good. It is all part of a life-long cycle of being juiced up and being ready for the next race that will push them further towards a target that is never reached. They cannot stop as a sense of darkness and fear enters their consciousness. Having people and things to do makes their life meaningful. In the end, there is a dread of death and it is seen ultimately as removal of all existence.

As they get older, occasionally, depression seeps through and they wonder what life is about. They have worked hard, people look up to them, and yet they feel, at times, empty. If they look deeply into themselves, they do not like what they see. They do not feel loveable, in spite of all the people that look up to them. Life is a frantic chase to avoid the pain of the inside. Death, however, becomes increasingly present as one becomes older.

The group that I will present has a very unusual session. No patient is presented but the material becomes a backdrop for their entire case load. Most of them are in their seventies and approaching eighty. The topic of death unfolds.

A member enters the group and appears stunned and cut off. His brother, a person he has not seen for five years, has just been discovered in Bellevue. He has fallen down five flights of stairs and is unconscious. He carries no identification with him but somehow the authorities traced his connection to his only brother. The authorities request that he come down to Bellevue and identify him. He hates his brother and at the same time, feels nothing towards him. His brother has manipulated and cheated him of money and connection to his mother. The patient, as a child, was sent away very young as his younger brother required a good deal of caretaking. The patient's uncle, the parent substitute, was brutal and sadistic and took pleasure in torturing his son. For the patient, the visit was all too long with very little phone contact from the parent. The patient does not believe his mother ever thought of him while he was away and doubted if she held him in her consciousness when he was an infant. A split developed with his younger brother. The younger brother could do no wrong, for the patient was the bad one. The patient was able to pull himself together and became an outstanding student in school. He held a number of different positions, all of which he handled successfully.

The therapist was currently preoccupied with a new career. He resented the energy needed to attend to the details of his brother's impending death. He had been making progress in a belief that his presence mattered and that he had discovered love in his work by being so open and caring with his patients. Perhaps in this way, he discovered a spiritual self. Now however, the picture of his brother with all the tubes kept on coursing his consciousness. *Is this the way he will die?* Once again, he was holding one part of the split of his family. His brother represented somewhere, a piece of him, though he could not fathom or understand this connection. As he spoke, the patient became less dissociated and more emotional in recounting his story. Other members concurred that he had made a profound impact through his love of others.

Then the associations of others in the group kept on tumbling out. A member of the group spoke of nightmares. She felt relieved when she spoke of tracing her experience to an early attachment. She believes that her mother was very cut off from any deep response toward her daughter. Another woman in the group underwent surgery for cancerous growth. Another spoke about her husband failing and she was certain he would die soon. She was pained, saddened and beside herself. Another just lost her husband who gave up wanting to live and one day just faded away and died. She felt released even though she loved her husband. Whatever love there was became muted by his withdrawal into death.

Another member spoke of nightmares. They were full of debris and junk. She had been depressed all her life and she felt somehow relieved when we spoke of tracing her sense of despair to our early attachment, which in her own words, "was less than zero". One other woman just underwent a lobectomy. She was not thrown by the procedure and felt that everything would be fine. If there was anxiety, she kept it under wraps. Another member missed the group because she had the responsibility of taking her husband to a myriad of doctors. One other woman shared that she was much less depressed and felt less frightened of death.

They spoke of cremation. They did not want to be a burden to their relatives. There were gallows of humor as to what to do with the ashes as legally you could not bury them on your property. I wondered to myself whether this was masking the more profound question as to their fear of not being remembered.

I asked myself whether this discussion was helpful or just pushing people further into depression. All of them agreed that the act of sharing with others who felt the same way was a relief. In this session, there was laughter, tears, fear and a holding of one another. No one knew how much time we really had left in this life. There was a realization that every moment felt borrowed for they did not know when it would be taken away. At this moment in time, they recognize their aloneness and their inability

to control what happens. There was some inclination that at least for some, to find a bridge of hopefulness in discovery of a spiritual self was the loving sharing with one another with many spiritual overtones. The deep acceptance and care breeds an atmosphere where one can believe that there is something other than the life that exists here on Earth.

I recognize that I have had my own struggle regarding the place of spirituality in my life. I did not discover anything uplifting or transforming in religion and yet I am aware that I have created in my professional career processing groups on a professional level that ultimately can bring about a deep sense of renewal and hope. Sharing then becomes a way of feeling part of something bigger. I don't use such terms as God or a life hereafter. I simply am much more open to the possibility that we are all part of something universal that goes way past our individual existence.