That night I was not able to sleep well. Every time I closed my eyes I saw him. I saw him struggling to breathe, struggling to live. The same as I had seen earlier that night whilst I was standing by his side, trying my best to comfort a dying man. The look he had in his eyes was frightening. The tears I was wiping from his eyes told me that he so desperately wanted to live. He did not want to leave his family behind on earth. He wanted to stay with them and love them as they loved him.

Later, I was wiping tears again, this time from my own eyes.
Being a nurse, you would think that death and dying are part of the normal every day run of the mill jobs that we deal with. That it is something we were taught how to cope with during our studies. That it's common for us.

Well, no.

646 days. 1 year, 9 months and 5 days. That is how long I have been a nurse.

2 patients. That is how many patients I have cared for whose time on earth came to an end on my shift. And it is so hard to keep it together.

But I have to keep it together. I have to remain professional. I have to keep calm as to not let the care of my other patients be below my best. It burns to do this. My eyes, my throat, it burns.

The tears want to find their way to the surface, but that bite on my cheek won’t let them. The lump in my throat wants to make its way out, but I can’t let it. I have to remain professional, composed. But there are times when a tear escapes, when it rolls down my cheek and I try to wipe it away unnoticed.

Death. It is inevitable. It is simply a part of human life. We are created. We are born. We live. We die. Simple.

But not when it is your patient. Not even when it is on your watch. Not even when they have an NFR, a ‘not for resuscitation’ order. Not even when they are palliative.

Why are we affected so much as nurses? We don’t know these patients personally. We don’t know their family. We don’t know their dreams and aspirations. We don’t know their family and friends. We don’t know what their lives entailed. The ups. The downs. We don’t know. So why does it affect us so much?

Is it because we have guilt that we should have been able to do more? That we weren’t the best nurse we could have been that day? That we didn’t do enough? I don’t know how palliative care nurses can do it – day in, day out. People expect us to be able to cope.
Many people see nurses as cold and heartless people who laugh at stupid medical things that others may find offensive and talk about gross things over the dinner table. But often, we are rocked to our core by the things we see each day.

Deep inside we are broken. We see the doctor telling the family there is nothing more that can be done, and we have to take a step back and collect ourselves before we are able to be there for you in the professional way we have to be.

It is not because we don’t care, it is because we need to mentally prepare ourselves. We need to disconnect the idea of this being one of our own relatives, one of our own friends. We have to put up walls and barriers because as soon as we leave you, we have to go to a patient that as been told they are in remission from the aggressive cancer that just stole your loved one. We have to put a smile on and go motivate a patient that feels down in the dumps about having been in hospital for 2 weeks with no sight of heading home yet. We have to carry on with our day knowing that the death of your loved one is part of our career choice. Everything we do, every interaction has a purpose.

Even crying just a little bit for my patient who just passed away, even if behind closed doors.

Nursing isn’t for everyone. It is an extremely tough profession. Not everyone is called. I am proud to be a nurse, despite the struggles.

Maybe he was comforted by my stroking his forehead.
Maybe he was comforted by my holding his hand.
Maybe he was comforted by my telling him it was ok.
Maybe he was comforted by my little prayer for him.

I don’t know. But I know now he is pain free. He has air between his wings when he couldn’t have it in his lungs. He is finally at peace.

Ian Miller