

## **Journal Entry #1**

### **Brain Death: Jahi McMath**

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When is a person dead? When are they really dead? Are they considered deceased when the brain can no longer perform any normal, daily processes on its own? Or are they dead when the heart no longer pumps blood on its own, the lungs no longer inspire Oxygen, and blood no longer flows to vital organs? Where do we draw the line between the living and the dead? Should family members be permitted to ignore the quality of life considerations and keep their loved ones alive on machines just because they are unwilling to accept the diagnosis of brain death? Will this entire journal entry be in question form?

The circumstances around the case of Jahi McMath are tragic and heartbreaking. It is painfully unfortunate anytime someone undergoes an operation, particularly an elective one, and suffers from complications or dies. It is especially sad when it is a child. As a parent, one hopes never to have to experience the untimely death of their children. They bury you. That is how it is supposed to work.

Jahi was healthy. I imagine her to be a fun-loving, happy, free-spirited a13-year-old. She had been diagnosed with obstructive sleep apnea. Rather than using a CPAP to sleep at night, she and her parents decided to have the pharyngeal surgery that ultimately ended her otherwise normal life (Truog, 2018). The parents must have been overwhelmed by guilt. They could have decided against the surgery, and she would still be alive. Undoubtedly these emotions clouded their judgment, and they were determined to do anything they could to save their baby.

The ethical dilemma encountered by this situation is: what was her quality of life? She could not breathe on her own; she could not eat on her own; she could not run, jump, play or do anything

else children her age could do. Is that living? It is not easy to imagine taking a child off of life support and letting them go as a parent. However, to live and suffer is not living.

As a future nurse, situations like these will undoubtedly be difficult for me. I would feel immense pain for the parents, yet as an advocate for my patient, I have to stand up for what I feel they wanted. While I feel that Jahi would have wanted to live, I imagine she would not have wanted her parents to struggle, suffer, and change the focus of their entire lives to keep her alive biologically. Especially considering the slight possibility of her recovering neurologically. As her nurse, this is a point I would have tried to relay to Jahi's parents. Set aside the guilt and the pain and focus on what Jahi would want if she could still express her thoughts. What an impossible position!

I consider brain death to be an appropriate time to accept biological death. The person in question is no longer alive. Only the bodily shell that carried them is alive. The brain can no longer keep the body alive, and that person will never again function as they were before. As difficult, and painful, and impossible as it may be, you must let go for their sake and your own. However, I also have learned that others will not share my thoughts, emotions, and morals. While nurses must realize and accept their convictions, it is also paramount that we do not try to impose those convictions on our patients or their guardians. Even when we believe they are wrong.

### **References:**

Truog, R. (2018). *Lessons from the case of Jahi McMath*. Hastings Center Report.