CONTEMPORARITY OF THE DEATH OF IVAN ILITCH TO RETHINK NURSING CARE

CONTEMPORANEIDADE DA MORTE DE IVAN ILITCH PARA REPENSAR O CUIDADO EM ENFERMAGEM

CONTEMPORANEIDAD DE LA MUERTE DE IVAN ILITCH PARA REPENSAR EL CUIDADO EN ENFERMERÍA

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ABSTRACT

Objective: to reflect on the contemporaneousness of the book "The Death of Ivan Ilitch" for nursing care. **Method:** qualitative, descriptive study, from the book "The death of Ivan Ilitch", making possible the extended reflexive approach. After the analysis and reflections, the results are presented in three thematic axes. **Results:** we sought to analyze the context of the book, and its timeliness, in the following axes: Axis I - The experience of being cared for; Axis II - The demands and care from the perspective of Nursing and Axis III - Contemporaneity of the work to rethink the care and training of nurses. **Conclusion:** the contemporaneousness of the work leads to a rethinking of the care demands, mainly to people in palliative care, the humanized care and the necessary skills of the nurse. In addition, it raises the need for the realignment of the pedagogical projects of the Nursing courses, in order to favor the construction of the nurses competences to know how to act responsible, in a dynamic that implies knowing how to mobilize, integrate and transfer resources, knowledge and skills in a context determined professional. **Descriptors:** Nursing Care; Humanization of Assistance; Hospice and Palliative Care Nursing; Nursing.

RESUMO

Objetivo: refletir acerca da contemporaneidade do livro "A morte de Ivan Ilitch" para o cuidado em Enfermagem. **Método:** estudo qualitativo, descritivo, a partir do livro "A morte de Ivan Ilitch", possibilitando a abordagem reflexiva ampliada. Após a análise e reflexões, apresentam-se os resultados em três eixos temáticos. **Resultados:** buscou-se analisar o contexto do livro, e a sua atualidade, nos seguintes eixos: Eixo I - A experiência do ser cuidado; Eixo II - As demandas e o cuidado na perspectiva da Enfermagem e Eixo III - Contemporaneidade da obra para repensar o cuidado e a formação do enfermeiro. **Conclusão:** a contemporaneidade da obra leva a repensar as demandas de cuidado, principalmente, a pessoas em cuidados paliativos, o cuidado humanizado e as competências necessárias do enfermeiro. Além disso, desperta para a necessidade do realinhamento dos projetos pedagógicos dos cursos de Enfermagem, a fim de favorecer a construção de competências do enfermeiro para o saber agir responsável, numa dinâmica que implica saber mobilizar, integrar e transferir recursos, conhecimentos e habilidades num contexto profissional determinado. **Descritores:** Cuidados de Enfermagem; Humanização da Assistência; Enfermagem de Cuidados Paliativos na Terminalidade da Vida; Enfermagem.

RESUMEN

Objetivo: reflexionar acerca de la contemporaneidad del libro "La muerte de Ivan Ilitch" para el cuidado en Enfermería. **Método:** estudio cualitativo, descriptivo, a partir del libro "La muerte de Ivan Ilitch", posibilitando el abordaje reflexivo ampliado. Después del análisis y reflexiones, se presentan los resultados en tres ejes temáticos. **Resultados:** se buscó analizar el contexto del libro, y su actualidad, en los siguientes ejes: Eje I - La experiencia del ser cuidado; Eje II - Las demandas y el cuidado en la perspectiva de la enfermería, Eje III - Contemporaneidad de la obra para repensar el cuidado y la formación del enfermero. **Conclusión:** la contemporaneidad de la obra nos lleva a repensar las demandas de cuidado, principalmente, las personas en cuidados paliativos, el cuidado humanizado y las competencias necesarias del enfermero. Además, nos desperta para la necesidad del realineamiento de los proyectos pedagógicos de los cursos de Enfermería, a fin de favorecer la construcción de competencias del enfermero para el saber actuar responsable, en una dinámica que implica en saber movilizar, integrar y transferir recursos, conocimientos y habilidades en un contexto profesional determinado. **Descriptor:** Atención de Enfermería; Humanización de la Atención; Enfermería de Cuidados Paliativos al Final de la Vida; Enfermería.

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INTRODUCTION

The decision to make the connection between the book "The death of Ivan Ilitch", novel of the nineteenth century, and the nursing care has, by justification, the similarity of the conditions of health experienced, the trajectories in search of a better treatment and the gaps in care experienced by Ivan Ilitch with that of the sick in palliative care, from the experience in the clinical practice of researchers as nurses. From the analysis of the text to the context, the relevance of Nursing to people in palliative care and their families is reiterated, and the need to rethink the nurse's education to deal with these people, whose demands and needs are increasing, and the contemporaneity of matters that are dealt with in said work.

In this approach, we sought to analyze the context of this book and its actuality in three moments: the experience of being cared for, care in the perspective of Nursing and the contemporaneity of the work to rethink the care and training of nurses. It is worth mentioning that the work has already been published or adopted in different areas of knowledge, such as Law ¹ and Anthropology, ² and in Nursing, its use is still incipient.

The book "The Death of Ivan Ilitch" was published in 1886 by Leon Nikolayevich Tolstoy, who was born in 1828 and died in 1910 in Russia.³ Ivan Ilitch is a fictional character, a judge living in Czarist Russia, second half of the 19th century.⁴

The book addresses the process of illness and death seen by the main character, considered a distinguished person in the social and professional environment for his intelligence and his competence. At the height of his career, he is plagued by a fall that marks a milestone in his life, as he forces him to move away from professional activities. It is affected by severe pain in the right side of the belly, which motivates it to trigger therapeutic resources, with several professionals, in search of treatment and cure. The pains, in the course of time, increased their intensity and medical treatments of the time did not ease their pain, which makes you become aware of the severity of the disease. Fear of death has settled and, along with it, intense suffering.⁴ His experiences are marked by isolation, as his work friends treated his illness with irony and his wife blamed him for it, for conflicting family interpersonal relationships, and for lack of humanized care.

Ivan Ilitch found support during his moments of suffering only in the chambermaid Guerassim who, in the face of the researchers' perception of this work, was the nurse, who gave him the right to speak and be heard and, by touch, softened his physical suffering and existential, in the face of the imminence of its terminality. He helped him carry out his daily activities and, through conversations, helped Ivan face his illness and his irrefutable death. The work ends with the death of Ivan Ilitch, who came to see it as the relief of all his suffering.⁴

It is relevant to mention that in the text the importance of the role of the chamberlain to help the other to overcome the difficulties of the illness and the stages that pervade the process of dying is apprehended in the text. Thus, when there is no prospect of healing and the person is headed towards the end of life, it does not mean that there is nothing else to do, on the contrary, it is at that moment that care can be offered, both for the person and for the your family members.⁵

Thus, care must be clothed with inherent knowledge, sensitivity, values, intuition, and moral principles.⁶ They are basic skills of caring for compassion, competence, trust, conscience, and commitment to the other.⁷

Still in this reasoning, in the assistance dimension of the nurses' work process care, is the object of work arising from the needs of individuals, families and the community.⁸

It is also worth noting that Nursing seeks to achieve care in its full conception, consistent with the human condition, and aims to contemplate the basic skills of this practice, aiming to improve the quality of life, with the purpose of building a space conducive to farewells, preparation for the departure split and reflection for those who will survive.⁵

OBJECTIVE

- Reflecting on the contemporaneity of the book "The death of Ivan Ilitch" for Nursing care.

METHOD

A qualitative, descriptive study consisting of a reflexive approach to the book "The Death of Ivan Ilitch", seeking to understand his contemporaneity about care, mainly by people in palliative care, humanized care and the nurse's competences. For the preparation of the study, we opted for the previous reading of the book "The death of Ivan Ilitch" and for a narrative review of the literature. After analysis and reflections, the results

were presented in three analytical axes: Axis I- the experience of being cared for; Axis II- demands and care from the perspective of Nursing; Axis III- contemporaneity of the work to rethink the care and the formation of the nurse.

RESULTS

♦ AXIS I- The experience of being cared for

The novel reveals the experience of sickness and death from the perspective of the patient. Throughout history, Ivan Ilitch is aware of his illness and the severity of his illness and the commitment of the biological, social, cultural and emotional dimensions is realized. In his illness, Ivan Ilitch lives with the pain as reproduced in the following narration:

The pain, that dull, muffled pain that did not stop for a second, seemed to gain, with the doctor's dubious words, another and more serious meaning. Ivan Ilitch now paid attention to her with a different and painful feeling [...].^{4:24}

In this way, constant pain, of intense intensity and that does not respond to treatment implies unbearable suffering and leads to loss of control over the way of life, as well as the loss of autonomy due to physical and functional incapacity.

Coupled with his physical suffering, there is his psychic suffering, as the routine of work, games with friends and family life is threatened by the severity of his illness. Thus, the people with whom Ivan Ilitch maintained social relations are distancing themselves and he begins to experience solitude and social isolation.

Ivan encounters his finitude and begins to live the torment of death. For him, it is inconceivable to think about his own death as a natural process, and this can be portrayed in the passages:

"[...] I will cease to exist, but what will be afterwards? Anything. So where will I be when I no longer exist? [...]"^{4:30} and:

"[...] he was getting tired and despair would not let him down. Deep down in his soul, he knew he was dying, but not only did he not get used to the idea, but he did not really understand it-an absolute inability to understand it [...]."^{4:31}

What displeased him most was the fact that his loved ones regarded his illness as treatable and curable and did not see the gravity and proximity of death, as depicted in the following passage: *"What Ivan Ilyich suffered most was the lie, that lie accepted by all, he did not know why, that he was only sick and not*

dying, and that it would be enough to stand and follow the treatment strictly. to arrive ... "4:36 and" [...]. And the lie tormented him by the fact that they did not want to admit a thing that all saw clearly, including him and, brazenly lying, compelled him to participate in that farce^{4:36}

Faced with this situation, people ignored the worsening of his illness. As a consequence, he felt deprived of venting and externalizing his suffering. In the face of all events, Ivan Ilitch goes through various emotional stages, such as denial, anger, bargaining, depression and acceptance of his condition, according to Kubler-Ross⁹, as can be seen in the following sections.

"[...] The pain did not subside, but Ivan Ilitch did his best to persuade himself that he was improving. And he was able to deceive himself, while nothing disturbed him ..."^{4:24} *It is perceived that the character went through denial, which is more common at the beginning of the illness and in situations in which the patient and his relatives are informed about of the diagnosis. Usually does not last long, however, there are some cases where the patient can not overcome this stage.*

"[...] And he was possessed with the misfortunes or with the people who provoked and murdered them, for he felt that the anger was killing him, without being able to avoid him ..."^{4:25} *Anger can be of impotence and lack of control over one's own life. Faced with the interruption of daily activities and the limitations that the disease brings, the feelings that were previously of anguish turn into anger.*¹⁰⁻¹¹

"[...] 'It is enough that I take it regularly and do not recklessly, I am feeling better, much better.' [...]"^{4:29} *The analysis of the passage resembles the bargaining phase and is characterized by negotiation. The reasoning involved is that, through good behavior, will be rewarded and, with this there will be an improvement of their condition.*

... He only waited for Guerasim to leave the room and, uncontrollably, to burst into tears. He cried for his impotence, for his terrible loneliness, for the cruelty of men, for the cruelty of God, which left him ..."^{4:44}

The phase of depression may arise during the terminal phase. The patient is aware that his condition is severe and that previous attempts have failed (denial, anger and bargain) then can no longer deny his illness. The characteristic clinical picture involves: discouragement, apathy, sadness, crying and disinterest.

"[...] 'How good, how simple,' he thought, 'And the pain?' He asked inwardly. 'What end did it take? Where are you, my pain?' And he listened. 'Oh, there she is! And? It's letting her hurt. Is the death? Where is he?' He sought his usual fear of death and did not find [...]."^{4:51} *It is seen that Ilitch experiences the acceptance, the last*

stage. It can be reached more easily in patients who have lived the disease and had support, is evidenced by tranquility, serenity and ease in expressing emotions and disappointments.^{9,12}

The character surpasses death, as can be observed in the passage "[...] He was no longer afraid, for Death had also disappeared from his face. Instead, she saw the light. "So that's it!" He suddenly exclaimed aloud. "What a joy!" [...]",^{4:52} but, this favorable outcome was only possible because, along the way, he found a figure who gave him emotional support, someone who listened, with whom he could talk about death, his chamberlain Guerasim.

♦ **AXIS II - the demands and care from the perspective of Nursing**

The character Ivan Ilitch suffers from loneliness, as the people around him seem not to understand what he is experiencing, which demonstrates incommunicability with his neighbors. The doctor's a priori concern, with the diagnosis of the disease and the prescription of the best treatment is evidenced. The wife and children feel a sense of pity when they witness their illness, at the same time they saw it as uncomfortable and pretended not to see the disease worsen.⁴

This scenario is reconstructed and reconfigured with the presence of Guerasim, the chamberlain, appointed to assist the boss in the activities of daily living, since the loss of autonomy and dependence resulted in increasing needs requiring care. By being attended, not only to physical needs, Ivan can feel more supported and with space to verbalize his fears and anxieties.⁴

Thus, the generosity of Guerasim creates, a bond between the two, that gave rise to the execution of care practices that helped him in his process of illness and finitude, as a space for listening, advice, touch and positioning of the leg of the patient who allowed the pain relief.

Although Tolstoy's book was published in 1886, the contextualization of care was expressed in a way that should be rescued today by the relevance of light technology in care, especially with people in palliative care.

Health care is influenced by the "cure paradigm", a strong imposition on care focused on technique, with great appreciation of technology and forgetting its relational aspect. The excessive valuation, with a focus on procedures and interventions, leads professionals not to see other means of care when the technological possibilities are exhausted and, in this context, patients end up acquiring an isolation posture when there

is no possibility of cure, being the moment in which patient and family need more support from health professionals, including Nursing professionals, due to attentive care and with respect to the process of loss.¹³

Faced with these conceptions, there is a need to rescue and value care, since it brings the subjects closer together in their moment of fragility. Caring is the professional tool of the nurse, who is responsible for developing a practice that involves ethical commitment and, above all, social responsibility.¹⁴

It should be noted that the terminality process involves care, which includes the control of the physical, emotional, spiritual and social suffering of the person who is sick and of his family, from diagnosis to death. It is usually, the nurse who is close to the patient, and this has the role of listening and understanding the needs of each person, offering them support, understanding and affection in coping with the disease and in the patient's terminality.¹⁵

With this, the humanization of care means ratifying the human in action, since the human being is the only one capable of caring in an integral, that is, naturally and concomitantly conscious way, associating sensible and rational components.¹⁶ Humanization implies also in the use of light technologies during the care process that take place through fostering, bonding and autonomy.¹⁷

Humanization, in a hospital setting, must surpass technological power, so that the client and his family are not modified as an object of care and profit for health institutions, which leads to the loss of their personal identity.¹⁸

The commitment to human rights is what involves humanization, in which part of the ideals that make up the principles of the Unified Health System (UHS), especially that of integrality, that should be the guiding axis for the training of health professionals. Thus, there is a need to discuss and implement the training of health workers in the construction of more appropriate curricular proposals.¹⁹

Faced with this, it is fundamental that nurses should be aware of their responsibility for humanization because they are the care professionals and have all the tools to perform them. It should be based on public health policies, strengthening mainly aspects of integrality, since care needs to be fostered to the client in a holistic and integral way, enabling the practices of humanization.

♦ **AXIS III - the contemporaneity of the book "the death of Ivan ilitch" from the perspective of Nursing care**

Leo Tolstoy's book has a contemporary character in regard to care, for representing the attitudes of the chamberlain Guerassim, to the boss Ivan Ilitch, which refer to the practices of humanization and the use of light technologies.

The use of this technology belongs to each professional and is fundamental to the care process, providing the production of bond, autonomy and acceptance.²⁰ From this perspective, the role of Guerassim approaches Nursing care, since it uses these technologies in care to the boss. The following excerpt explains the interaction between the two.

[...] Ivan Ilitch ordered Guerassim to sit down, holding his legs, and engaged him in conversation. Curious, he had the impression that he was feeling considerably better while Guerassim held his legs high. [...].^{4:36} Although the customs of the place where the work is carried out are different from those of the present time, it is possible to note the link between the master and the chamberlain, which will grant autonomy and protagonism to the patient.

Concurrently, this practice carried out by Guerassim is considered as promotion of measures of comfort and, in this sense, this practice is inherent to the nurse and indispensable to the provision of humanized and quality care to the client, promoting hope, support, solace and encouragement and, mainly reinforcing the establishment of trust and bond between nurse and client.²¹

♦ **The sensitivity of Guerasim is exemplified in one of the extracts of the work, as follows:**

[...] *Guerasim was willing to do this willingly, with such simplicity and kindness that Ivan Ilyich was moved. The health, strength, vitality of others offended Ivan Ilyich, but the vigor and energy of Gerasim, far from mortifying him, soothed him.* [...].^{4:36} In this context, when the nurse identifies the needs of the person, after checking the available means, he is able to exercise the care properly and this should be provided with interaction, conversation, touch, listening, interest, availability and acceptance.¹⁶

When the person is ill, he is usually in a period of fragility, which allows him to rethink his previous attitudes and reflect on different postures that he could have exercised. In these moments of vulnerability, the client needs, in addition to scientific and

technological resources, comfort and hospitality.

Often, these needs are supplied by the nurse practitioner, which establishes a closer relationship with this client, making him autonomous, protagonist and co-responsible for the process of health production.²²

Thus, the nurse's object of study is care in all its dimensions, biopsychosocial and spiritual, and, at the time of illness, the professional to take a holistic approach, favoring the understanding of the situation experienced by the patient.²³

Such a placement is in line with the passage from Tolstoy's work:

[...] No one had mercy on him, because nobody tried to understand his situation. Only Gershans understood him and felt sorry for him. And that was why Ivan Ilitch felt good in his company.[...] ^{4:37}

This ratifies the relevance, also, of the nurse understanding the client's emotions, so that it fosters the care to be provided.²⁴

CONCLUSION

Tolstoy's work demonstrates his contemporaneity to rethink the demands of care, especially by people in palliative care; the humanized care and the necessary skills of the nurse, in view of the changes in national demographic and epidemiological profiles, marked by the increase in life expectancy and the high rates of chronic degenerative diseases, that require multiprofessional assistance to patients facing diseases that threaten the life.

The analysis of the work awakens us to the realignment of the pedagogical projects of the Nursing courses, in order to favor the construction of nurses' competences in order to be able to act responsibly, in a dynamic that implies knowing how to mobilize, integrate and transfer resources, knowledge and skills in a particular professional context.

In addition, it demonstrates the vulnerability and frailty of the sufferer that requires professionals with strong interpersonal skills, clinical knowledge, technical competence and respect towards individuals. It validates, then, the importance of creating a nurse-client-family bond, in order to promote a quality care, comprehensive and humanized care.

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