


Spring 5-2012

Palliative Commitments

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PALLIATIVE COMMITMENTS

A Capstone Experience/Thesis Project

Presented in Partial Fulfillment of the Requirements for

the Degree of Bachelor of Arts with

Honors in the Major Graduate Distinction at Western Kentucky University

By

Leo J. Buser

Western Kentucky University

2012

CE/T Committee:

Professor David LeNoir, Advisor

Professor Melanie Autin

Professor Justin Litke

Approved by

Advisor

Department of English

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2012

ABSTRACT

This project is a speculative fiction novel. The focus of my project is a futuristic palliative care treatment. The intended use is for terminal patients, and it can also be considered an alternative to terminal sedation. The theme of this project mainly came from Biomedical Ethics. This project is also influenced by economics and dreaming supplements. A section explaining the academic influences to the story is provided.

Keywords: Biomedical Ethics, Dream, Palliative, Hospice, Speculative, Novel

Dedicated to my family, friends, and my WKU mentors

ACKNOWLEDGEMENTS

My novel would not have been completed without my CE/T advisor, Dr. David LeNoir. He was my English 100 and English 203 professor, and he didn't hesitate to say yes when I asked him to be my advisor. From that point on, I always had breakthroughs by rambling about my ideas in his office. Without his suggestions and comments, I probably would have dropped my CE/T. Of course, I also owe him thanks for all of the hours he has spent editing my chapters.

I am also thankful for Dr. Melanie Autin's advising because she didn't hesitate to be my second advisor even though the novel is not related to Mathematics. I consider myself very lucky to have met her because I always felt welcomed to discuss my ideas.

Lastly, I would like to thank the Honors College for letting me pursue a CE/T unrelated to my major. I greatly appreciate this academic opportunity to express my creativity.

VITA

April 27, 1990.....Born – Louisville, Kentucky
2008.....Graduated Saint Xavier High
School, Louisville, Kentucky
Spring 2011.....Phil 322: Biomedical Ethics
March 19, 2012.....Mathematics Leadership
Award

PRESENTATION

March 24, 2012.....WKU Student Research
Conference

FIELDS OF STUDY

Major Field: Mathematics

Minor Field: Finance

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INTRODUCTION

This CE/T is a work of fiction and is a result of my passion for writing and of my influences from knowledge I learned here at WKU. During the first seminar I attended from the Honors College, I was told that as an Honors Student I have the option to create a CE/T that does or does not relate to my major. From that point on, I knew that I wanted to write a novel. The idea for my novel began with my curiosity about dreams. I felt that too many pieces of fiction had used dreams as scapegoats. As a result, I knew that I wanted to write a novel that incorporated dreams but did not use them as a cheap surprise.

As my thoughts developed, I wanted to make the novel timeless. Therefore, I had to keep the main character, Owen, from living a mainstream life. My goal was to make Owen a hermit that tries his best to avoid the current news and media. Owen assumes that the end of the world is near, but his hermitic lifestyle takes away most of his credibility.

This novel focuses on a fictional palliative treatment. My grandfather died in Hospice care when I was a senior in high school. I was comforted by the Hospice care system because my grandfather died in peace. I believe that watching my grandfather die peacefully in Hospice care eventually inspired the idea for the palliative treatment in this novel. As previously mentioned, I am curious about dreams, and the idea to incorporate them into a palliative treatment became the foundation for my novel.

UNIVERSITY EXPERIENCE

In my first semester at WKU, I took the university experience course, and we were required to read *Freakonomics*, [1]. In one of the chapters, the authors suggested that there is a correlation between an increase of abortions and a decrease in crimes. The authors believed that if unwanted children were not aborted they were likely to become criminals. The idea of removing lower class people from society to decrease crimes inspired the antagonist for my novel.

BIOMEDICAL ETHICS

PHIL 322 biomedical ethics helped shape my novel more than any other class I have taken at WKU. Prior to that class, I only knew about Hospice care and assumed that my fictional treatment was closely related. However, from the required textbook, *Ethical Issues in Modern Medicine: Contemporary Readings in Bioethics*, I learned about the broader notion of palliative care and the legality that surrounds it.

From that class, I learned that in the United States physician-assisted suicide is only legal in Oregon, Washington, and Montana. As a result, I knew then that my novel would take place in Seattle. I realized that Washington is an ethically progressive state in the field of medicine and since Seattle is the biggest city in those three states, I decided that it was the best setting for my novel.

Although physician-assisted suicide is legal in Washington, there are five restrictions: a doctor must give the patient the means to kill themselves, the patient must be terminally ill with six months to live or less (with two doctors confirming this), there has to be two witnesses (including one non-doctor who is unrelated to the patient) that confirm the patient's request, the doctor must check for a sound state of mind by waiting fifteen days to confirm their request, and the patient must be a resident of the state [2].

The treatment in this novel is an enhanced form of terminal sedation, sometimes called palliative sedation. Terminal sedation is legal in all states and does not have any restrictions because the treatment does not shorten the life of the patient, [2]. Even though

terminal sedation is free of controversy, my intention with this novel was to introduce a terminal sedation treatment that could cause controversies.

SUPPLEMENTED DREAMING

My curiosity about dreams led me to a book called *Advanced Lucid Dreaming: The Power of Supplements*. This book is a thorough guide about summoning lucid dreaming by the use of non-prescription and legal supplements. There are four categories of supplements that improve dreaming: those that increase memory, those that increase focus and attention, those that increase motivation, and those that improve mood, reduce stress, and increase quality of sleep. The first three categories are essential for a dreamer to have lucid dreams. However, the hope of having lucid dreams only comes after a very complex schedule and combination of supplements. Therefore, I never imagined the treatment in my novel to have that effect. As a result, I was interested in the supplements that improve mood, reduce stress, and increase quality of sleep.

5 – HTP (5 – Hydroxytryptophan) is the predecessor of serotonin and is more effective than simply increasing serotonin levels because 5 – HTP crosses the blood brain barrier, while serotonin does not. The blood-brain barrier is a filter that only permits certain substances to pass from the blood into the brain. 5 – HTP will give the dreamer a more vivid and calm experience. Therefore, nightmares will not occur. One side effect is that the dream might be harder to remember. Melatonin is closely related because it comes from serotonin and can increase the amount of REM sleep.

L-dopa is naturally found in Mucuna Prurien beans, and is the predecessor of dopamine. L-dopa crosses the blood brain barrier, while dopamine does not. L-dopa will increase the dreamer's confidence and creativity, [3].

Although I do not know a great deal about creating a drug, I do not think the treatment in my novel is farfetched because of the supplements listed above.

PROCESS

During my freshman year, I mostly wrote down ideas for the novel and roughly developed the characters. With *Freakonomics* inspiring my antagonist, I partially knew how I wanted to end the story but struggled with where to begin. During the fall semester of my sophomore year, I took a creative writing class. Dr. David LeNoir was my professor, and as part of the final assignment, I wrote the history of the treatment's creator, Daniel. The section mostly focused on the death of Daniel's wife which ultimately led to his desire to commit to his own treatment. Eventually, I decided to cut out this section from the novel.

In the spring semester of my sophomore year, I continued to develop the characters, and I slowly started to work on the plot. In the fall semester of my junior year, I took the CE/T proposal course. Although the course is intended for students who don't know what they want their CE/T to be, I took this course to keep the novel on track. During this time, I made an outline for each of the scenes in the seven chapters.

In the spring semester of my junior year, I took the biomedical ethics course. I wrote the first three chapters of the novel during that semester and continued to update the outline. When I wrote the first three chapters, I was focused on the action and skipped over some dialogue. At that time, I was very afraid that the novel would be boring. By the end of 2011, I wrote chapters four and five. During my last semester at WKU, I wrote the last two chapters and began to edit the novel. In terms of corrections, the worst

chapters were the first three chapters. I spent most of the semester fixing and expanding the dialogue in those chapters.

INTENTIONS

Overall, my intention with this novel is to expand the reader's imagination. That is why I was determined to include a couple of dream scenes. I want the reader to daydream about what their experience would be like if they committed to the treatment. I also want the reader to think about what would have to happen to make them want to commit to the treatment. However, I know that some readers would never consider the treatment. For those readers, my intention was to make them think about what they would do to stop rising crime rates.

With respect to biomedical ethics, my intention was to create a treatment that could cause a controversy. The key to the controversy is non-terminally ill people demanding the treatment.

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