



## Despiritualizing Death: A Comparative Study of Perspectives on Death in Medical Fiction

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### Abstract:

Many cultures venerate the process of dying and view it as a moment of passing into another world beyond what the living can experience with their senses. This perception especially in Abrahamic religions and cultures shaped by these religions is the source of the spiritualization of death. The process of dying becomes a journey of the spirit leaving the body, and it is a journey that needs to be honored. The adoption of Western medicine in the Arab world, however, has shifted these perceptions from venerated spiritualization to being viewed as a strictly biological process of the end of life. This cultural shift is represented in some short stories by the Egyptian writer Yūsuf Idrīs (1927–1991). His narrative might have been an allusion to a secular cultural shift that is experienced by medical staff in the 1960s and 1970s, who found themselves in a liminality of cultures. Yūsuf Idrīs's short stories are analyzed in comparison with *The House of God* (1978) by the American author Samuel Shem (b. 1944). This comparative study of the two authors' texts will examine the representation of cultural tensions in the medical field caused by the shift toward secularism, as these writers focus on how the spirituality of death can be shifted to the body and even sensualized. However, as Seamus O'Mahony suggests in *The Way We Die Now* (2016), in the medical field, dealing with death has become an attempt to control nature. These two representations may also be related to the illusion of control over death in the medical field.

**Keywords:** death, medical fiction, Yūsuf Idrīs, Samuel Shem, spirituality, secularism.

### الفصل بين الروحانية والموت: دراسة مقارنة لوجهات نظر حول الموت في قصص الطب

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### ملخص:

تقدس معظم الحضارات مرحلة الاحتضار وتراها كالحظات تمثل رحلة المرور لعالم آخر لا يتسنى للأحياء تجربته بحواسهم، وهذه النظرة للموت والاحتضار في الديانات الإبراهيمية والثقافات التي تشكلت من هذه الأديان هي مصدر للروحانية المرتبطة بفكرة الموت، مرحلة الموت بناءً على ذلك هي رحلة خروج الروح من الجسد وهي رحلة تستحق التبرُّج، ولكن تبني الطب الغربي في العالم العربي قد غير من هذه النظرة للموت من الروحانية المبجلة إلى كونها عملية بيولوجية تمثل نهاية الحياة، وقد صور الكاتب المصري يوسف إدريس (1927–

(1991) هذا التغيير الثقافي في بعض قصصه القصيرة، فتلمح روايته إلى التغيير الثقافي نحو العلمانية في تجربة العاملين في المجال الطبي في الستينات والسبعينات الميلادية الذين يجدون أنفسهم في مجال مبهم بين ثقافتين، و تمثل الورقة قراءة مقارنة مع رواية أمريكية تم نشرها في نفس العقد بعنوان "بيت الرب" (1978) من تأليف الكاتب الأمريكي سامويل شيم (من مواليد 1944). وهذه الدراسة المقارنة لأعمال الروائيين تحلل الصراع الثقافي في المجال الطبي الذي نتج عن التوجه نحو العلمانية، ولكن النظرة الحديثة للموت في الثقافة الغربية كما يبرزها شيموس او ماهوني في كتابه "كيف نموت هذه الأيام" (2016) تتعامل مع الموت في المجال الطبي كمحاولة لتطويع الطبيعة، وهي نفس النظرة التي تحكم تصوير الموت عند الكاتبين في تناولهما لوهم السيطرة على الموت في المجال الطبي.

**كلمات مفتاحية:** الموت، قصص الطب، يوسف ادريس، سامويل شيم، الروحانية، العلمانية.

## Introduction

Many cultures venerate the process of dying and view it as a moment of passing of the soul into another world beyond what the living can experience with their senses. This perception especially in Abrahamic religions and cultures shaped by these religions is the source of the spiritualization of death (Rowland et al. 281–283). The process of dying becomes a journey of the spirit leaving the body that needs to be honored with rituals like washing the body and prayers. In Islam, for instance, the living bid farewell to the dying with a funeral prayer that includes reading short verses of the Quran and a short prayer before taking the dead to the grave ideally within 24 hours of her/his death (Sheikh 138-139). Entry into the grave is the threshold into the beginning of the afterlife for Muslims or what otherwise could be called “judgment” of what the person did in their life (Rustomji 172). The moments leading to death become essentially a preparation for the journey into the afterlife. These perspectives are deeply rooted in religious thought and doctrine that is shaped by the culture in the Middle East.

The adoption of Western medicine in the Arab world has shifted perceptions of death and dying from a venerated ending phase of the human’s spiritual journey to being viewed as a strictly biological process of the end of life, particularly in medical settings. Muslims prefer to die in their own homes due to the shift away from religion in hospitals (Gatrad 521). Dying in their homes situates them in a spiritual environment that is more accepting of the ending of life to pass on to the afterlife. This is the opposite of the experience of dying in a hospital environment designed to resist death and prolong biological life. What I suggest in this paper is that there is a cultural dichotomy in perceiving the dead and dying people between spiritualized religious perception and the medical one. With the cultural shift toward secularism, the process of dying moves from the acceptance of death, as a journey of the soul into the afterlife, to secularist notions of finality by the end of a person’s existence. This sense of the finality of death creates a need for a higher meaning of the end of life.

To show the cultural shifts experienced by the medical staff, this paper discusses some short stories by Yūsuf Idrīs published in the 1960s and 1980s that reveal the medical situation in Egypt since the 1950s. These short stories are compared with *The House of God* by Samuel Shem (1978), who comments on his novel in an article published in 2019 under his real name. In this article, he points out that *The House of God* is inspired by his own experience as a physician at Beth Israel Hospital in Boston (486). These works by Idrīs and Shem are published around the same decade and tell about perceptions of death by medical staff and how they overcome the cultural liminality between religion and secularism. Both narratives are shaped by the practical experience of the authors in the medical field. However, Samuel Shem was still practicing medicine when he published his work, and Yūsuf Idrīs has already abandoned the practice of

medicine for writing and political activism (Tāhir). The works of both authors represent not only cultural contradictions due to the all-encompassing power of the doctor, created and normalized by the culture of the medical field, but they also reveal the frustration and resistance to this power even from those who are at its center, that is, the doctors.

### **Theoretical Framework**

In his book *The Way We Die Now* (2017), Seamus O'Mahony argues that in the 1960s, death became "hidden" and denied due to "advances in scientific medicine, industrialization and the loosening of bonds that held together traditional communities, the decline in religious belief... Death in modern hospitals was becoming more technical, more 'undignified'" (31). Death is no longer accepted by modern medicine as an inevitable fact of life. It challenges medical advances and the medical industry whose goal is to prolong life. The shift away from religion also contributes to O'Mahony's proposed change in the perception of death.

An author who sought to expose and resist the growing power of medicine is Ivan Illich, who published *Medical Nemesis* in 1975. In this book, he insists that modern medicine has "taken on a mission to eradicate pain, sickness and even death" and argues that these are "eternal human realities" and that medicine cannot claim or seek to eradicate them (O'Mahony 48). An interesting term popularized by Illich is "iatrogenesis" or harm caused by physicians (O'Mahony 48). Using this term, he insists that doctors, in their attempts to control life and death, do more harm than good and hinder the natural development of the human life cycle.

The way O'Mahony reads Illich's work on modern medicine highlights how much he wanted to resist its power and control. O'Mahony writes of Illich's view that "dying was an aspect of life which had been colonized and taken over by medical busybodies. We need to reclaim death from experts, to make awareness of it as part of our everyday lives, to reduce over-medicalization" (4). Illich's passionate call to accept the natural decay of the human body as part of the spiritual and mental growth and awareness with which people must be armed is countered by the insistence of medicine that disease, decay, and death can be controlled and prevented.

### **Narrating Doctors and Death**

The representation of the medical field's shift away from religion and spirituality is indeed apparent in the novel *The House of God*. It is quite clear that religious scholars who work in hospitals signify this void of faith and a firm belief in materiality. The novel's central character is a Jewish-American intern named Roy Basch, who works at a hospital called *The House of God*. The narrative features the character of a rabbi-reformer. When asked about the *Passover Haggadah* and its connection to the death of patients, the rabbi states that it is a "myth" (Shem 321). The rabbi comments on the story saying that "these deaths have to do with physiological facts, not with the whims of deity. Body not soul is what is dying here" (Shem 321). This rabbi's consideration of physiological facts instead of focusing his attention on the spiritual journey toward death, as well as referring to the religious narrative as a "myth", is an allusion to a shift in religious beliefs about death as a physical fact of the human life cycle.

A confused perception of death and dying, especially from old age, is characteristic of the characters named Gomers in the novel. They are sick patients suffering from the consequences of old age, but not in critical condition. A resident doctor in the narrative called the Fat Man comments on these patients by teaching his interns and saying, "Gomers don't die" (Shem 42).

The reason why they do not die, according to the Fat Man, is that doctors in the medical field insist on controlling death. They would not let the Gomers die and they keep reviving them in spite of their misery and pain. Illich's reference to cultural "iatrogenesis," in which the medical field interfered with people's ability to suffer and die, is clearly visible in the depiction of the overmedicalized Gomers. According to Illich, the patient does not want to die on his own. This makes him physically dependent on doctors, but a similar situation applies to older patients. The Gomers in the story are what Illich would call "consumers" of drugs, as they insist on curing and preventing their death. Physicians persevere in serving patients/consumers and strive to avoid their death. Thus, "death becomes an extreme form of consumer resistance" if the patient decides to die while receiving medical (O'Mahony 51). The Fat Man's views on the Gomers' suffering reflect his own resistance to the medicine. Death in old age, according to him, is a right that should not be resisted by doctors.

The rejection of death from the point of view of doctors can be seen in the works of Yūsuf Idrīs. In the short story *Old Age without Madness* (Shaikhūkhah bi-dūn junūn 1971), he shows the doctor's resistance to the idea of dying even in old age. One of the characters in the narrative is an old man who works as an undertaker's assistant. Before the deceased is buried, the doctor must declare their death in medical records after examining the body brought by the undertaker's assistant. The doctor knows him well because he comes to him every day to fill out death certificates. When this old undertaker's assistant dies, the doctor cannot believe he is dead. Moreover, he imagines that the old man is resurrected from the dead and tells him that he really died of old age and there is no malice in his death. He requires the doctor to complete all the necessary paperwork as soon as possible in order to be buried properly. The doctor sees the old man "shaking, getting up" and he "takes off his clothes", trying to prove that the cause of his death is really "old age without madness" ("Ḥādīthā sharaf" 30–37). The doctor's disbelief in his death can be perceived as a denial of death from old age by individual physicians.

In his book, O'Mahony points out that "death in modern hospitals still has a faint smell of industrial accident, medical failure" (9). This idea is reflected in both the American novel and the Arabic narrative. A character named Jo in *The House of God* cries as her patients die despite her attempts to save them. This behavior can partly be interpreted as a hint of female hysteria, but she is a doctor who loves her profession and is unable to help the patient overcome death. At the same time, the central character of the novel, Roy, lives under the illusion of his power as a doctor to bestow life and death on his patients and decides to end the suffering of one of his cancer patients. Outraged that his patient is lying "there in his feces, a mass of tubes and tapes, bruises, rotten skin and empty bones sticking out in the ribs, elbows and knees", Roy decides to finally give in to his pleas for death (Shem 292) and sprinkles poison into his patient's drip. If he cannot give him life, the doctor believes that he can give his patient death through access to medicines (Shem 291-292).

Similar allusions, conditioned by the discourse of medical progress, appear in the works of Idrīs. In his short story *Major Surgery* (al-'Amalīyah al-Kubrā 1970), the operating room is described as the "cradle of revelation", and the chief of surgery is presented as a person who has the right to bestow "life and death" and believes that he is the only authority and source of knowledge when it comes to treating patients ("al-Naddāhah" 82). He schedules an operation to examine the nature of a tumor in the abdomen of one of his patients. However, this patient, who came to the hospital on foot and complained of slight abdominal pain, had to stay in the hospital

for two months. During the procedure, the chief surgeon decides to operate on the patient's tumor, convinced that his work will be a breakthrough in medicine. However, the patient begins to bleed. Her death is rendered meaningless given the experience the surgeon and his staff gained in the surgical breakthrough that can be used to treat others. The illusion of control shifts from preventing her death to preventing a minor mistake from happening again.

When a patient dies, the doctor and one of the nurses have sex on a gurney prepared to transport the dying patient to the morgue. This definition of the dichotomy of life and death is described by the narrator as "bringing the living out of the dead and the dead out of the living" ("al-Naddāhah" 95). This allusion to Quranic verse 19 from sūrah *al-Rūm* emphasizes the belief in the doctor's power to overcome death, even when the patient is dying. This reflects a strong belief in the ability of the medical establishment to find ways to defy death, even though it sometimes looks unethical.

The dying body, signifying the inability of medicine to resist death, becomes a potential space for the doctor's power. In *The Birth of the Clinic: An Archeology of Medical Perception* (1963), Michel Foucault maps the reach of the medical institution and its emergence as a cultural center of power through knowledge and what he describes as the medical gaze. The author comments on anatomy, pointing out that "medicine could gain access to that which founded it scientifically only by circumventing, slowly and prudently, one major obstacle, the opposition of religion, morality and stubborn prejudice to the opening up of corpses" (124). Foucault notes that moral and religious objections to anatomy and the practice of postmortem procedures stand in the way of achieving greater power in the field of medicine. The practice of what O'Mahony describes as a "terrible" postmortem procedure was considered standard in the United States in the 1970s (9). The rites of the burial of the dead body and all aspects of spirituality associated with the rituals of burial are ignored by the need to gain more knowledge about the diseases of the body.

In some narratives, characters oscillate between commitment to their practice and belief in a dead person's ability to overcome death. In other words, the shift toward secularism, which denies the spiritualization of the body, creates an existential problem related to the ability of a dying person to overcome death through heroism. In *Denial of Death* (1973), the American writer Ernest Becker argues that people overcome their fear of dying through "heroic" achievements so "that they outlive and outshine death and decay" (5). The religious idea of continuing life after death is replaced by the idea that a person establishes his value in life through heroic deeds in order to conquer death and avoid sinking into oblivion. In *The House of God*, Roy objects to standard procedure and refuses to perform an autopsy on a cancer patient who was his colleague and idol. Roy's justification for his behavior is that this doctor named Sanders goes beyond the procedures that are usually performed on patients. The sanctity of the dying body is established by Sander's heroism, not by religious conviction.

The secularization of medicine, which replaces the notions of sanctity and transcendence of the hero with religious notions of the dead, is also revealed in one of Idrīs's narratives. In the story *Five Hours* (Khams sā'āt 1954), one of the activists of the movement against King Farouk is shot and ends up in the hospital with chest wounds. The efforts of the medical staff to save his life are unsuccessful. However, the doctor considers him a hero who died for a noble cause. To substantiate his opinion, he describes the deceased as a man distinguished by his "masculinity, which made other men tremble" ("Arkhaṣ layālī" 90). It can be noted that the narrative lacks the Islamic religious discourse of heroism, and the doctor describes the dead body as something

“cold and as a long passage, where destruction and dispersion await at the end” (“Arkhaş layālī” 92). The doctor mourns the loss of a hero but does not reflect on his failure as a medical practitioner. In accordance with his own political views and beliefs, he decides who is a hero and who is not.

### Conclusion

In the stories of Idrīs, the unconditional authority of the doctor in connection with the diagnosis of patients and their death is emphasized, while the religious view of the problem of death remains outside the narrative discourse. Based on the analysis of Shem's novel *The House of God*, it can be assumed that in Western narratives, religious/spiritualized beliefs about death and dying are replaced by secularized ideas. Their authors question the authority of medicine concerning death and dying and raise topics such as resistance to death through medicalization, dehumanization of patients, physician power, and so on. Their narratives cannot be seen as a call to spiritualize death but as an attempt to define an alternative perspective that has colonized death and dying through the power of the medical institution as a territory for the narrative of death and the process of dying.

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