Extending Life or Extending Death? Halakhic Approaches to Tza'ar and Chayei Sha'ah

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Question:

My mother who is a cancer survivor, and is in advanced stages of dementia, has been diagnosed with a recurrence of cancer. The cancer is terminal, with a prognosis of no more than a year. Chemotherapy may extend her life by a few months at most. The original chemotherapy treatment was traumatic for her. The thought of putting her through that pain and suffering again when she cannot understand what is happening is haunting me.

Choosing how to proceed is causing strife between my brother and me. My brother feels that if I don't allow the doctors to treat my mother, I am in effect killing her. He says that in Judaism one must always choose to extend life. I also worry whether choosing not to treat means I am transgressing the *mitzvah* of *kibud horim*, honoring one's parents.

Answer:

You have a very difficult burden to bear; making life-determining decisions for your parent who is physically but not cognitively present. It is upsetting and confusing. Unfortunately, with longer life expectancies and modern medical care, your situation is becoming more and more prevalent.

This question has multiple levels. Must one always choose to extend life? Or is there a stage where one is only prolonging suffering? Does *halacha* allow for personal decisions in a case like this? Does the *mitzvah* of *kibud horim* affect your decision regarding your parent's treatment? What is your role in determining what your parent would have wanted?

The sanctity of life is a central tenet of Jewish law. Every moment is seen as having inherent value, giving one the opportunity to "Make the name of Heaven beloved".[1] A person suffering from any ailment is obligated to seek medical treatment because of this value. Those who refuse to seek any reasonable medical intervention are considered stubborn and foolish.[2]

Many authorities maintain that although the value of life is paramount, it is nonetheless not an absolute value.[3] There are times when other considerations take precedence. The fact that the sanctity of life is inferred and understood rather than explicitly stated enables halacha to navigate between the value of life and other important values.[4] This is expressed in the words of Rav Kanievsky: "In my youth, I too heard of the principle that one must do everything possible to prolong the patient's life even if only for a moment. I did not know of an authoritative source for the principle. But it seemed to me that the idea requires further consideration…Only actively

[1] Yoma 86a
[2] Rambam, Commentary to the Mishna, Pesachim 4:7
[3] Avraham Steinberg, Halachic Basis of "the Dying Patient Law", ASSIA - Jewish Medical Ethics, Vol. VI, No. 2, October 2008, pp. 30-40
[4] ibid.

hastening death is prohibited. If so, refraining from action (in a case where active treatment would increase the patient's suffering) would seem to be permitted. … All this requires more thought"[5]

Rav Kanievsky's words highlight the delicate balance that needs to be preserved between shortening a life and prolonging a death. The concept of recognizing that there is a time for death is not a new one in Judaism. Kohelet 3:2 states, "a time to be born, and a time to die." The Tzitz Eliezer uses the concept of "a time to die" in a halachic framework. He explains that Kohelet's words were written to teach us an important halachic idea: "It is not within the scope of man's authority to extend a life when it is apparent that the person is in a state of 'a time to die'."[6] Rav Kanievsky and the Tzitz Eliezer are reminding us that there comes a time when one must allow the soul to leave, while acknowledging the difficulty of losing a loved one.

There is a broad spectrum of halachic opinions on the correct course of treatment in end of life cases. At an extreme of the spectrum there is an opinion that requires that any and all life extending measures must be taken.[7] This appears to be the stand your brother is taking. On the other end of the spectrum are those who allow patient autonomy in certain terminal cases.[8] There are nuanced opinions between these two extremes which further limit patient autonomy in certain medical situations, ranging from lenient to more stringent. All authorities would agree that one has an obligation to alleviate the suffering of others.[9]

There are various halachic components which need to be examined in answering your question.

TZA'AR

Tza'ar, suffering, is recognized by *halacha* as a legitimate consideration in end of life decisions. The Talmud discusses the many different ways *tza'ar* can manifest. *Tza'ar* can be caused by physical illness, emotional suffering or mental distress. In addition to the *tza'ar* caused by the illness, there are times when the treatment is the source of the *tza'ar*. One of the central roles of the doctor and medicine in general is to prevent, remove or at least alleviate pain and suffering, even in the case where one is not able to cure.[10]

The Story of Rebbi: Knowing when to stop praying for life

In various places throughout the Talmud the Rabbis put an emphasis on pain and suffering as a *halachic* consideration. The dilemma of extending life at the cost of prolonging suffering is addressed by the Talmud in *Ketubot* 104a. The Talmud narrates the story of what happened on

[5] Rabbi Yaakov Yisrael Kanievsky, Karyana de-Iggerata, 190
[6] Tzitz Eliezer 13:89:11
[7] Tzitz Eliezer Vol. 10 25:6
[8] Igrot Moshe HM 2:73. Shevet HaLevi 6:174
[9] Prof. A. Steinberg, Encyclopedia of Halacha and Medicine, second edition, vol. 4, s.v. yissurim
[10] ibid.

the day Rabbi Yehuda HaNasi (Rebbi) died. Rebbi was dying from a protracted illness. His students refused to accept the reality that he was dying, and continued to pray for his recovery.

At first, Rebbi's faithful and knowledgeable handmaid[11] went up onto the roof and joined in the students' prayers for recovery. However, as she saw Rebbi's continued anguish and pain, she realized that extending a life of suffering was wrong. Understanding that the students' prayers were preventing him from dying, she made a distraction by throwing a jug off the roof. They were momentarily startled by the noise and ceased their prayers. At that moment Rebbi died. Realizing that with the cessation of their prayers, their teacher may no longer be alive, they sent one of the students, Bar Kappara, to check on him. Bar Kappara returned and stated, "The angels [*erelim*] and righteous mortals [*metzukim*] both clutched the sacred ark. The angels triumphed over the righteous, and the sacred ark was captured." Thus, Bar Kappara indirectly informed them of Rebbi's death. By emphasizing that Rebbi's death was not an end, but a transition to *olam haba*, the world to come, Bar Kappara's statement becomes one of *tzidduk hadin,* affirmation of Divine judgment, and reorients the students to focus on Rebbi's release from pain and suffering rather than their loss. By bringing the story, the Talmud not only expresses approval of Rebbi's handmaid's actions, it also creates a teaching moment for both the students and the readers[12].

The Ran[13] in his gloss on the Rif in *Massechet Nedarim* states, "There are times that one must pray for HaShem to grant a merciful death for the patient who is suffering tremendously and has no hope for recovery." In other words, there are times when a person is dying and his suffering is such that it is permissible to pray that death should come. He bases this on the story of Rebbi. There comes a point where one is no longer prolonging life; one is extending death.[14]

The story of Rebbi illustrates the conflict that one has when confronted with a relative in pain and suffering from a terminal illness. On the one hand, we aren't ready to part from our loved one, yet we also don't want them to continue to suffer. While the story of Rebbi and the handmaid is not an example of medical intervention, it does reflect Chazal's attitude regarding end of life situations.

Reish Lakish and Rabbi Yochanan: Recognizing emotional Tza'ar

The gravity of emotional *tza'ar* is addressed in the Talmud in *Bava Metzia* 84a in the story of the deaths of Reish Lakish and Rabbi Yochanan, two of the greatest *Amoraim* who were inseparable study partners. After Reish Lakish's death, Rabbi Yochanan was inconsolable. He shouted, "Where are you son of Lakish?" until he lost his mind. Seeing his suffering and anguish, the rabbis prayed to God to have mercy and take Rabbi Yochanan's soul, and he died.

[11] (as seen in Megillah 18 and in other places in the Talmud)
[12] Igrot Moshe CM 2:73
[13] Ran Nedarim 40a
[14] Tendler, Moshe D., and Fred Rosner. "QUALITY AND SANCTITY OF LIFE IN THE TALMUD AND THE MIDRASH." *Tradition: A Journal of Orthodox Jewish Thought* 28, no. 1 (1993): 18–27.

Here the rabbis are in the role of Rebbi's handmaid, sensitive to Rabbi Yochanan's emotional *tza'ar*, and not wanting to prolong it.

Chanania, Mishael and Azaria: When Tza'ar is worse than death

The Rabbis acknowledge that in some situations the person himself might choose death over suffering. In the Talmud in *Ketubot* 33a-b, there is a debate about the level of severity of different court administered punishments. Citing the story of Chanania, Mishael and Azaria, who refused to bow down to an idol and were subsequently thrown into a furnace, Rav states that had they been tortured instead they would not have been able to withstand it and would have worshiped the idol. In the Ritva's gloss[15] on this story, he states that there are times when death is preferable over suffering.

Pikuach Nefesh: How far does one go to prolong life

The principle of the sanctity of human life in Judaism means that there are different ways of intervening on a person's behalf. In the above Talmudic stories we have examples of intervention for a person who is going through prolonged suffering. There are also times when even *safek pikuach nefesh*, the possible preservation of a human life, can override Shabbat. In Yoma daf 85a the Talmud deals with the situation of a man who is trapped in a rockslide on Shabbat. Although the moving of rocks is prohibited on Shabbat, the Rabbis permit their removal, even in a case in which the injured person is dying but his life can be slightly extended. The obligation of *pikuach nefesh* overrides the laws of shabbat in order to extend his life even if only for *chayei sha'ah,* a brief period.

Tza'ar in the Halachic Sources

Following the ruling in Yoma daf 85a, the Shulchan Aruch[16] in his laws on Shabbat rules that in a situation such as this, even though the man will not live for long, we may violate Shabbat in order to extend his life. In his gloss, the Rema does not add or comment on the Shulchan Aruch, indicating his agreement with this ruling.

In the section regarding deathbed practices, the Shulchan Aruch in Yoreh Deah Siman 339, lists a series of actions, which one is prohibited from doing as they actively hasten the death of a person whose death is imminent, *gossess*. This list is based on the Rif[17]. The Rema here adds that while one is forbidden to hasten a person's death, one may remove any impediments which are preventing him from dying. The Rema attempts to clarify the difference between actions which hasten death versus actions which remove impediments, by listing several examples. The Rema's list originates from the Sefer Hasidim.[18] The Sefer Chasidim[19], in discussing deathbed practices, writes that one is forbidden to attempt to obstruct the process of death when it is inevitable, as doing so will only extend the suffering of the person.

The Shiltei Giborim, a commentary on the Rif, likens the dying person to a flickering candle. One is forbidden to extinguish the candle by touching it. However, indirectly affecting the

[15] Ritva Ketubot 33a
[16] Orach Chayim Siman 329
[17] Rif Moed Katan 16b
[18] Sefer Hassidim 723
[19] Sefer Chasidim 234

candle's flame, by opening a window, for example, is permitted. The actions which the Shulchan Aruch and the Rema list as forbidden are direct interventions. The actions which the Rema added are permitted because they are indirect.

We find the application of the passage in Yoma to medical intervention in end of life situations in the responsa of the Beit Yaakov[20]. He extends the prohibition of obstructing the process of death to include the administration of medical treatment "which will only cause harm by delaying the soul's departure". The Shvut Yaakov[21] qualifies the Beit Yaakov, saying that if one is not knowledgeable in medical practices one is certainly forbidden from treating the dying person, "but one who is knowledgeable is surely permitted, *mutar*."

Rav Shmuel Wozner[22], author of Shevet HaLevi, was asked if one may choose not to treat a terminally ill patient. He quotes both the Beit Yaakov and the Shvut Yaakov in his answer. Rav Wozner focuses on the Shvut Yaakov's statement "but one who is knowledgeable is surely permitted, *mutar*" regarding medical treatment for a dying patient. He points out that the use of the word permitted shows that there is no obligation to heal. His novel explanation of the Shvut Yaakov teaches that in the case of a terminally ill patient one has a choice: one is allowed to treat but is not required. He concludes by limiting this permission to terminal cases where treatment does not cause additional suffering. To cause extra suffering to a patient who is dying "is not what the Torah commands us."

Rav Hadaya, in his responsa Yaskil Avdi[23], introduces the concept of *shev v'al taaseh*, being passive rather than active into the discussion. He forbids treatment which will actively cause suffering and slow the death of a dying patient. He points out that the Shvut Yaakov would agree with the Beit Yaakov, that in a case in which a treatment adds suffering it should not be administered.

Rav Shlomo Zalman Auerbach[24] expands this concept even further. He explores the idea that in a case where a life-saving procedure will cause enormous mental anguish, it is possible that one has the halachic right to refuse treatment, and that *shev v'al taaseh* is the correct choice. He references the story of Rebbi and the Ran's comment on Nedarim that where there is extreme suffering a person has the right to pray for his own death or the death of another.

Having traced the concept of *tza'ar* from the Talmud to the modern sources it would be simplistic to say that Judaism always chooses to extend life in every situation. It would perhaps be better to state that while Judaism respects the sanctity of life, the quality of life is also an important consideration which cannot be ignored. The concept of recognizing that there is a

[20] Beit Yaakov 59
[21] Shvut Yaakov 1:13
[22] Shevet HaLevi 6:179
[23] Yaskil Avdi 7, Yoreh De'ah 40
[24] Minchat Shlomo Part II Siman 82. Rav Auerbach here emphasizes that he is not issuing a psak; he is only bringing this to people's attention.

time for death is not a new one in Judaism. Kohelet 3:2 states, "a time to be born, and a time to die."

CHAYEI SHA'AH

Quantifying Chayei Sha'ah

How does Halacha define a terminal illness? Chazal used two terms when describing life expectancy - *chayei olam* and *chayei sha'ah*. *Chayei olam*, while literally meaning eternal life, indicates a normal life expectancy. The term *chayei sha'ah* indicates a limited life span.

The concept of *chayei sha'ah* is not defined in the *Gemara*. Rashi[25] explains that the Gemara is speaking about one who is expected to live for only a day or two. The Ran[26], Nimukei Yosef[27], and Rabbi Yonatan of Lunel[28], among others, follow his opinion. Sefer Hasidim writes "a few days, *me'at yamim*[29]. Others see Rashi's definition as a general comment, not binding halachically. The *poskim*, halachic authorities, throughout the generations have debated the best definition of *chayei sha'ah*.

It is only in the later *achronim* that the discussion and development of the wider definition of *chayei sha'ah* occurs. Rabbi Shlomo Eiger, in his Gilyon Maharsha[30] on the Shulchan Aruch, qualifies *chayei sha'ah* as "some time" (*zman mah*), which isn't long, but clearly longer than a day or two. Expanding on the idea that chayei sha'ah means more than a day, Rabbi Chayim Ozer Grodzinski, in his responsa Achiezer[31], writes that the simple logic is that there is no difference between *chayei sha'ah* as defined as one or two days, or a few months. This opens the door for the definition of longer periods as *chayei sha'ah*[32]. Rav Shlomo Kluger[33] and Rav Moshe Feinstein[34] limit *chayei sha'ah* to no more than a year. The broadest definition is in the Mishpat HaCohen[35], the responsa of Rav Kook, who writes that any person who is diagnosed with a fatal incurable disease belongs in the category of *chayei sha'ah*.
In this article we will follow the opinion of Rav Moshe Feinstein and Rav Shlomo Kluger that anyone who will not survive twelve months is considered to have a prognosis of imminent death.

Adding treatment during Chayei Sha'ah

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[25] Rashi Avodah Zara 27b s.v. Chayei Sha'ah
[26] Ran on the Ri"f Avodah Zara 8b
[27] Nimukei Yosef, Avodah Zara 27b s.v. Chayei Sha'ah
[28] Rabbi Yehonatan of Lunel on the Rif, Avodah Zara, Rif: Chapter 2 8b
[29] Sefer Hassidim 234
[30] Gilyon Maharasha YD:155
[31] Shut Achiezer 2 YD: 16
[32] Lev Aryeh 2:35
[33] Chochmat Shlomo 155:1
[34] Igrot Moshe CM 2:75
[35] Mishpat HaKohen 144:3

Our case is one in which the terminally ill patient is offered a treatment which will only extend their *chayei sha'ah* and will not give them *chayei olam*. In the situation where the treatment would give the patient *chayei olam*, the halacha is different.[36] Therefore, in our situation, where there will be no cure, but only an extension of *chayei sha'ah*, is it permissible to choose not to undergo treatment?

Chazal examine the topic of *chayei sha'ah* in light of two sugyot in the Talmud. In Avodah Zara 27b, there is a discussion about the relative value of life when we know that the patient is close to death and has a limited life expectancy. If there is a treatment which has a small chance of extending his life significantly, but has a large chance of ending his life prematurely, do we concern ourselves with the loss of the limited life expectancy? The gemara concludes that one may risk his *chayei sha'ah* if there is a chance that he will be cured and live a normal life. In this case, the gemara rules that we don't concern ourselves with the possible loss of *chayei sha'ah*.

The Tosafot on this daf[37] refer us to the sugya in Yoma 85a, which we looked at above and which deals with the man trapped in the rockslide on Shabbat. The Tosafot point out the contradiction between these two sources. While the source in Avoda Zara, allows one to risk *chayei sha'ah*, the source in Yoma requires that we do whatever is necessary in order to prolong *chayei sha'ah*. The Tosafot resolve the dilemma by making the distinction that in both cases, one is concerned with doing what is best for the person whose life is in danger, whether it is prolonging life or not.

The Tiferet Yisrael[38] questions this conclusion, based on the stories of Rebbi and Chanania, Mishael and Azaria. He wonders why we would extend the life of the trapped man. The removal of the weight of the rocks crushing him will slow his death prolonging his suffering. He explains that in the case of the person crushed in the rockslide, it is to his benefit to remove the rocks, preventing the agonizing death of being crushed. The Tiferet Yisrael's focus is not on extending *chayei sha'ah*, but rather on lessening the Tza'ar.

Similarly, the Chazon Ish is quoted in an article by Rav Ferbstein[39], who said that one is not obligated to prolong a life of suffering. Regarding whether or not to treat, the Lev Aryeh[40] comments that one does not need to trade the chayei sha'a which the patient has (the current situation, which is terminal) for a slightly longer chayei sha'a (still terminal) which will also include suffering. Rav Sternbuch says: "We do not find any obligation for a person in intractable pain to undergo painful treatment when the chances are that his condition will not improve." [41]

[36] Igrot Moshe CM 2:73
[37] Tosafot : s.v.: Chayei Sha'ah
[38] Tiferet Yisrael Boaz Yoma 8:3
[39] Assia 77-78
[40] Lev Aryeh 2:35
[41] Teshuvot V'Hanhagot 859

Rav Moshe Feinstein dealt in depth with questions regarding end of life care decisions. In his responsa Igrot Moshe[42] He discussed a case regarding extension of life in a terminal cancer patient. He noted that one is only substituting one *chayei sha'ah* for a slightly longer one which involves pain. He ruled that without the patient's consent to undergo treatment, one may not treat in order to extend a life of pain. In such a situation, the physician's role changes from that of a curer to that of a carer.[43]

It is important to note that we are not speaking about a treatment which will cure the disease completely. The situation where a complete cure is possible, even with pain and suffering, poses different issues, both halachically and medically.

REGARDING CAPACITY

Medical decision-making capacity is the ability of a patient to understand the benefits and risks of, and the alternatives to, a proposed treatment or intervention (including no treatment). Capacity is the basis of informed consent. Patients have medical decision-making capacity if they can demonstrate understanding of the situation, appreciation of the consequences of their decision, and reasoning in their thought process, and if they can communicate their wishes.[44] A crucial aspect of your question is the fact that your mother no longer has capacity.

Rav Moshe Feinstein[45] addressed what happens when one cannot ask the patient what he wants. He referred to the story of Chanania, Mishael, and Azaria[46] and concluded that one can assume that most people would prefer death over suffering. Therefore, in a situation where the patient is *non compos mentis* and there is great suffering involved, we must assume that the patient would not want treatment and thus there is no obligation to treat.

Your mother's lack of capacity is a result of her dementia. Dementia is defined as a fatal neurological disorder involving progressive loss of memory, judgment, language, and other aspects of cognition, and usually results in death within a decade of diagnosis. In its most advanced stage, the affected individual loses the capacity to communicate.[47]

Unfortunately, your mother is in advanced dementia, and there is no chance of reversal. Your mother's dementia has rendered her disconnected from reality and unable to express her wishes or opinions. This type and level of the disease has given her the halachic designation of shoteh. According to the Rambam[48] a shoteh is "anyone who is mentally deranged with the

[42] CM 2:75
[43] Tendler, Moshe D., and Fred Rosner. "QUALITY AND SANCTITY OF LIFE IN THE TALMUD AND THE MIDRASH." *Tradition: A Journal of Orthodox Jewish Thought* 28, no. 1 (1993): 18–27.
[44] Evaluating Medical Decision-Making Capacity in Practice, Am Fam Physician. 2018;98(1):40-46
[45] Igrot Moshe Choshen Mishpat II 74
[46] Ketubot 33b
[47] End of Life Issues in Halacha: DNR, Feeding Tubes, and Palliative Care
Rabbi Y. Dovid Kaye
[48] Hilchot Edut 9:9

result that his mind is constantly confused with regard to some matter, even though he converses and asks questions to the point with respect to other matters."

As we have seen above, in a case like your mother's where the treatment causes great *tza'ar* and will not take her out of the designation of *chayei sha'ah*, the choice to treat or not to treat would be hers. Rav Moshe Feinstein, in his Igrot Moshe,[49] wrote that in this situation the patient must be informed of the prognosis. The patient can then decide if he prefers a longer life with suffering or to allow death to take its course. Had your mother been *compos mentis*, she would have the choice to treat or not to treat her cancer. Because communication with her is not possible, the weight of the medical decisions has fallen on the children.

KIBUD HORIM

The complexity of facing these choices for oneself is difficult enough. In this case, your parent is lacking capacity and cannot make the choice for themselves. The burden has fallen on you, the child, to make the medical choices. Does the mitzvah of *kibud horim* influence the decision you must make?

The biblical obligation comprises both *kibud,* honor, and *yir'ah,* reverence, of the parents. The Talmud Bavli in Kiddushin elucidates the requirements in fulfilling these obligations. The *baraita* at the bottom of 31b defines the elements of both *kibud* and *yir'ah*. Both *Yir'ah* and *Kibud* are positive commandments. *Yir'ah* demonstrates reverence for one's parents by avoiding actions which detract from their status. *Kibud* demonstrates honor for one's parents by acting in a positive manner to ensure they have daily care if they are unable to care for themselves.[50]

It is impossible for a simple list to encompass the complexity of a relationship such as that between parents and children. The Talmud frequently uses parables and narratives in order to illustrate, deepen and broaden the parameters of the topic being discussed. These narratives help us further understand what is required or expected of us and build a framework and guidelines. In the words of Rav Soloveitchik, "*Kibbud* equals welfare service, *mora* equals observance of proprieties. However the subjective aspect of *kibbud u-mora*, the inner experiences, elude strict interpretation and classification." [51]

The Yerushalmi explores the subjectivity of this *mitzvah* with the puzzling statement: "One might serve his father fattened meat and inherit hell. One might bind his father to the grindstone and inherit paradise."[52] The statement teaches through the use of two examples. In one, a son feeds his father expensive delicacies, but treats him despicably, saying: "old man, eat and shut up just as dogs eat and are silent." Despite the fact that his actions seem to show care for his father, it is his obvious contempt which condemns him to hell. In the second example, the father

[49] Igrot Moshe Choshen Mishpat II 75
[50] Aruch HaShulchan YD 240:8
[51] Family Redeemed, Rav Soloveitchik p.132
[52] Yerushalmi Peah 1:1

has been drafted into the army. His adult son offers to take his place, so that his father won't suffer the indignity, but this requires that his father has to replace his son at the mill doing manual labor. Here, the hard labor of the father is the result of the son's reverence for him. This is why this son merits paradise. Interestingly, the aspect of *tza'ar* is a component of both stories, in the first emotional, and the second physical.

Rav Yigal Betzalel Shafran in his article on medical care for elderly parents[53] interprets *kavod*, as we have seen, as taking care of physical needs. He interprets *yir'ah* as having a proper attitude. Thus, the reason the Talmud and the Shulchan Aruch place *yir'ah* before *kavod* when describing the obligations a child has to a parent is because what determines the quality of your actions (*kavod*) is the attitude with which you perform them, *(yir'ah*). The Talmud teaches us that the mitzvah of *kibud horim* is not based on the child's actions, but rather on his attitude. On an objective level, the son who fed his father delicacies was observing *kibud horim*, while the son whose father took his place in the mill was not. However, the motivation of the first child was wrong--he had no yir'ah. This means that *kibud horim* actions are viewed subjectively, in this case based on the way the child respects or does not respect his parent.

While the classification of positive actions remains highly subjective, the parameters of what one is not allowed to do is far less flexible. Chazal examine many different parent-child relationships and question if *kibud* and *morah* are always applicable. There are times when a troubled relationship between the parent and child may exempt one from performing certain acts of respect. However, a prohibition which remains constant is causing a parent *tza'ar*[54]. Rav Ahai HaGaon in his She'iltot[55] writes that one is never permitted to cause *tza'ar* to a parent. Building on this thought, the Maharam Shik writes that one who causes *tza'ar* to a parent actively negates *kibud horim*.[56]

This prohibition of causing *tza'ar* to a parent is important in the case before us. Undergoing chemotherapy will cause your mother both physical and emotional anguish. We have seen that the mitzvah of *kibud horim* is fulfilled not only through actions but also through the intent directing the actions. Although your actions may not extend your mother's life, your intentions are to spare her suffering.

CONCLUSION

While Judaism believes in the innate sanctity of life, it also shows compassion when suffering impacts the quality of life[57]. Halacha gives weight to both the mental and the physical *tza'ar* of a terminally ill patient. It recognizes that human nature will often cause a person to prefer death

[53] Shafran, "Care for Elderly Parents Against their Wishes", Techumin volume 14
[54] Ran Kiddushin 13a, Piskei HaRosh Yevamot 2, Shach YD 240
[55] She'iltot of Rabbi Ahai Gaon, Parshat Mishpatim 60
[56] Maharam Shik on the 613 commandments, mitzvah 33
[57] Tendler, Moshe D., and Fred Rosner. "QUALITY AND SANCTITY OF LIFE IN THE TALMUD AND THE MIDRASH." *Tradition: A Journal of Orthodox Jewish Thought* 28, no. 1 (1993): 18–27.

rather than to suffer greatly. A terminal patient has autonomy to choose to undergo a treatment where great *tza'ar* is one of the side effects, even if all he is doing is slightly extending his lifespan. However, he is not required to do so. When the patient is unable to express his wishes, one can assume that he would not choose to suffer *tza'ar* when there is no cure nor any real quality of life added. Ultimately, the decision must be what is best for the patient, and not about what others want or need. The story of Rebbe's death may help provide guidance when faced with the reality of losing a parent and how to prioritize the parent's needs over those of the child.

Your mother, if she had been *compos mentis*, would have had the right to choose if she wanted treatment. If you were the medical proxy of a *non compos mentis* patient, you would have the authority to make medical decisions based on your understanding of the patient's wishes . As your mother's children, you have an additional consideration. The *chiyuv*, obligation, you have under the guidelines of the mitzvah of *kibud horim*, specifically, the prohibition to cause your parent *tza'ar*, gives you another halachic argument which reinforces your decision to choose not to treat her cancer. Forcing your mother, who is unable to comprehend what she is going through, to undergo chemotherapy would only increase her *tza'ar*. Your and your brother's *chiyuv* as her children now falls under the heading of *kibud* as defined in the Talmud[58]: ensuring her daily care. In your situation, it means doing your best to provide your mother with the best quality of life possible now. By ensuring that your mother has appropriate palliative care, is comfortable, can eat food she enjoys and can enjoy her surroundings as much as she is able, you are observing the commandment of *kibud horim* as the halacha throughout the generations has defined it.

[58] Bavli Kiddushin 31a