

Living with Loss

The editors of *AFP* welcome submissions for Close-ups. Guidelines for contributing to this feature can be found in the Authors' Guide at <http://www.aafp.org/afp/authors>.

Close-ups is coordinated by Caroline Wellbery, MD, Associate Deputy Editor, with assistance from Amy Crawford-Faucher, MD; Jo Marie Reilly, MD; and Sanaz Sara Majd, MD. Questions about this department may be sent to Dr. Wellbery at afpjournals@aafp.org.

A collection of Close-ups published in *AFP* is available at <http://www.aafp.org/afp/closeups>.

My husband died of heart failure, and then, six weeks later, our 37-year-old daughter died of pneumonia. She had developed encephalitis as a toddler and was in a wheelchair and didn't talk, but she sang and smiled, and she loved my husband. After retiring, he became her main caregiver. In the weeks after my husband died, when I was caring for her by myself, I was always anxious about her health.

When she was admitted to the hospital, I'd stay with her until 9 p.m. and would sleep at home with the phone on my nightstand. I'd call at 6 a.m. to see how her night was and then go back to the hospital by lunchtime. After she died, I couldn't go near the hospital for a year. I still have flashbacks about my husband and daughter both passing away there. I try to avoid using the road the hospital is on.

I still can't believe they are both gone. I'm so lonely and sad without them. The cemetery where they now rest is across the street from the adult day care where my daughter went every day. I find comfort in passing by there on my way to and from work, because I get to say good morning and then good night to them again. I visit their grave site often.

I have a picture of them on my computer at work as my screen saver, and I still talk to them all the time. Some days I'm okay, and some days I cry.

My other children are very supportive, and I can talk with them, but it has been very difficult to keep going. I go to work every day, but otherwise, I am content to stay at home. I'm having a difficult time going to church every week. I never missed Mass before, but now I don't feel like getting out of bed to get ready for it.—P.O.



COMMENTARY

Grief is a complex response to loss that encompasses physical and emotional reactions. Even when surrounded by friends and family, grieving people often feel isolated and out of touch, and their grief may last longer than Western culture deems appropriate. Many people can grieve and formulate a new way of living after six months, but it may take several years for others. Family physicians can offer support and a listening ear, as well as focus on the physical and emotional aspects of health. It can be challenging to distinguish between the symptoms of grief and major depression in the months after a significant loss. Previously, the *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed. (DSM-IV) criteria precluded a diagnosis of major depression within two months of the death of a loved one. The latest edition,

DSM-5, has removed this bereavement exclusion, highlighting the need for close follow-up for grieving patients to distinguish the two conditions. Referral to support groups (through local hospices or hospitals) and counseling may be helpful.

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RESOURCES

The Compassionate Friends
<http://www.compassionatefriends.org>
GriefNet
<http://www.griefnet.org> ■