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Reflection

Even Houses Burn in the Rain

Mona Tareen MD.MS.FAAHPM.

Cleveland Clinic Abu Dhabi.

Introduction

In many South Asian families, decisions regarding end-of-life care are rarely centered around a single person. It is a complex mix of unspoken understandings that involve interwoven family dynamics and love. For my father, his reluctance, his hesitation around the delivery of end-of-life care was not due to uncertainty around medical choices; it was a moment of profound, considerate reflection. He was not afraid of death itself, but worried about letting down the daughters he had devoted his life to safeguarding. He had accepted that he was living with end-stage cancer and was able to express his goals clearly. But it was the transition, from knowing to living that reality, that became the most challenging part.

As a palliative medicine physician, I was always taught to honor patient autonomy, dignity, comfort, and truth. Yet as a daughter, I was confronted with another vivid reality: in some cultures, preserving harmony can matter more than easing suffering. My father knew his body was nearing its end. He understood the direction of his illness, but he also understood the weight of expectations, to hold on for us, to not appear as though he had chosen to let go. To "fight the fight".

Even within my own family, my palliative profession was misunderstood. I have spent years explaining that palliative care is not about giving up—it is about patient-centered care, preserving dignity, alleviating pain, and allowing the truth to be spoken without fear. Yet when it was my father, even those closest to me hesitated to trust it. If my own family struggled to understand palliative care, how could I expect the public to do so?

A well-supported end of life can be soft, intentional, even beautiful. I have seen it—hands held without panic, breathing quietly and calmly, love settling gently over the room. But for my father, it was more complicated. Not because love was lacking, but because love insisted on holding tightly even as his body released its grip.

In those final days, his body began the natural transition toward death. The skin cooled and mottled. Swallowing

faded. The scopolamine patch prevented the secretions from pooling in his throat. I have taught this to medical trainees, reassured families through it, and documented it countless times. But when I watched it in my father, his breathing shallow, consciousness slipping, it was no longer clinical. It was piercingly personal. I wanted his suffering to end. I wanted him to pass peacefully and was ultimately able to do so towards the end with scheduled opioids at home in beautiful Bani Gala.

I stood beside him, as a physician and a daughter, silently negotiating.

Before we left his bedside and before he transitioned, my mother asked him to recite a verse. His voice was thin but steady, carrying a grace that none of us could. In Urdu, he said:

“Main badnaseebiyon ka qa'il nahin, magar main ne barsaat mein ghar jalte dekhe hain.”

“I am not a believer in misfortune, but I have seen houses burn in the rain.” This quote is widely circulated but apocryphal, it’s true origin is uncertain. With my father, this was not surrender. It was a different kind of strength,

one that chose peace over struggle, truth over denial. It was recognition, that grief can exist inside love, that suffering can coexist with faith, that even in the rain, houses can burn.

It is the quiet work of holding space when the body is failing. It is listening when there are no more answers to offer, only presence. It is adjusting pillows, moistening lips, lowering the lights—not because these acts change the outcome, but because they speak: you will always matter.