

癌末病房靈異經驗的隱喻

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摘要

本文視靈異經驗為社會文化之隱喻，意欲瞭解癌末病房中存活期約僅剩半年時間的癌末病人，其周遭親友以及相關醫事人員如何展演靈異經驗。研究者以2000年一年時間，分別在高雄市兩座醫院的癌末病房中進行參與觀察，於2001年上半年進行後續的個案深度訪談。研究發現靈異經驗能反映人、超自然及社會之關係，靈異經驗者與瀕死經驗者同在感官知覺層面有強烈情感變化；靈異經驗為預備後事之前兆；靈異經驗可為人際與醫病關係衝突的伏筆，或抗拒死亡的隱喻；可為喪葬儀式合理化。靈異經驗者的身體知覺雖有非比尋常的變化，但無靈魂脫體，更無瀕死經驗者的全景回顧現象。靈異經驗與瀕死經驗共有特徵，如見到強光、遇見亡故親友，受強光、神明或小天使引導；皆因宗教信仰差異而有不同經驗內涵。靈異經驗缺乏放諸四海皆準的解釋模型，在經歷靈異經驗之後，當事者可能更依賴宗教信仰。醫師少有靈異經驗，若有聽聞多視為病情變化，受環境影響導致幻想或做惡夢。多數護理人員有豐富多元的靈異經驗。護理人員多與病人及家屬傾向寧可信其有，他們相信超自然世界；少數護理人員與醫師皆以科學理性詮釋靈異經驗，他們否定超自然世界。透過本研究足以理解癌末病人及家屬如何及為何在充滿死亡禁忌的台灣社會中，繞彎取道藉由靈異經驗發聲，據此得籲請醫療相關單位重視瀕死過程的呼喚，深思適切的醫療照護，以為生死教育之重要參考。

關鍵字：癌末病人、靈異經驗、瀕死經驗

The Metaphor of Mysterious Experience in Dying Process in Ward's Context

Abstract

This article aims to depict how and why actors (terminal cancer patients, with about 6 months life-expectancy, their families and medical professionals) may perform MEIDP in ward's context. Regarding MEIDP as social cultural metaphor, we try to catch its meaning deeply. Research method is fieldwork during 2000 and in-depth interview with terminal ones, their families and medical professionals from two wards in Kaohsiung City from January to June 2001.

The major findings for metaphor of MEIDP are as follows.

- (1) Interpreting social and supernatural relationship
- (2) Striving out of death fear
- (3) Making near-death announcement
- (4) As afterlife's expectation
- (5) As self empowerment

Some content of MEIDP is same with near-death experience (NDE). All of the subjects embody changeable feeling and consciousness condition, have bright light sight seeing, meet with dead relatives, and are guided by bright light, gods and angels. Their experience is relative with belief. Not any universal theory explains MEIDP and NDE. After having MEIDP and NDE, subjects are more dependent on belief. But the subjects (terminal cancer patients, families and nurses) of MEIDP are different from that (near-death patients) of NDE. MEIDP hasn't out of body experience and panoramic memory, but NDE does. It is different between MEIDP and NDE. Always terminal cancer patients, families, and lots of nurses with MEIDP interpret it in supernatural and social cultural context. They not only believe in afterlife world, but also prepare funeral rites for dying patients. Albeit few nurses like physicians consider MEIDP irrationality not believe in afterlife world and diagnose mysterious experience as deviant behavior, many ones are empathy with patients and families' experience and thinking. It is important to understand the metaphor of MEIDP. The more under voices in dying process we catch, the better strategy to face hidden conflict relationship of patient, families, and medical professionals will be. Then the better care for terminal cancer patient will come true.

Key Words: terminal cancer patient 、 mysterious experience in dying process 、
near-death experience