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**To Philosophise about Dying**

**Abstract**

*One of the founding fathers of philosophical practice, Pierre Hadot, defines such a practice as a spiritual exercise in learning how to read, write, live and die. In this paper, I want to focus on dying. How to philosophise about dying? I will approach this question from the point of view of a philosophical counsellor who meets the topic during the consultation, and I will give several examples of such consultations. I will approach the topic along the lines of the ancient Stoic tradition and distinguish the physics, logic and ethics of dying. The facts will limit and define the appropriate form (i.e. logic) and content (i.e. ethics) of the philosophising during a consultation. I will argue that we can and have to develop an attitude suiting our death. Philosophical counselling can help in developing such an attitude.*

**Keywords**

philosophical practice, philosophical consultations, death, dying

*You cannot choose your death, but you can choose the way you die.*

**Introduction**

One of the founding fathers of philosophical practice, Pierre Hadot, defines such a practice as a spiritual exercise in learning how to read, write, live and die.<sup>1</sup> In this paper, I want to focus on dying.<sup>2</sup> How to philosophise about dying? I will approach this question from the point of view of a philosophical counsellor who meets the topic of dying during a consultation. My focus will be on a natural cause of death, not on accidents, suicide or euthanasia in the case of incurable suffering. Most people will die of a natural cause of death and have to deal with this as a fact of life. Also, my focus will be on dying, i.e. the process, not on death understood as the state of not being. An early example of such a process in philosophy is Socrates's death as pictured in Plato's dialogues *Crito* and *Phaedo*. Fundamental thoughts about death and dying are expounded. Remarkable last words are captured as Socrates reminds *Crito* to offer a cock to Asklepios, the God of medicine, in order to pay him trib-

1

Pierre Hadot, *Philosophy as a Way of Life. Spiritual Exercises from Socrates to Foucault*, trans. Michael Chase, Blackwell Publishing, Malden – Oxford – Carlton 1995. Cf. "I am afraid that other people do not realize that the one aim of those who practice philosophy in the proper manner is to practice for dying and death." – Plato, *Phaedo*, in: Plato, *The last days of Socrates: Euthyphro, Apology, Crito*,

*Phaedo*, trans. and ed. Christopher J. Rowe, Penguin, London 2010, 64a.

2

So not death as a state, distinguished from being alive. I think, like Pierre Hadot, that philosophical practice is an exercise in dying and that facilitating such an exercise should be a competence of every philosophical practitioner.

ute, in my opinion, for facilitating a comfortable death process.<sup>3</sup> Nowadays, the process of dying seems medicalised and governed by legal procedures. However, the dying process is practical by nature and therefore, a subject of philosophical practice too. To philosophise about dying, I will follow the ancient Stoic tradition and distinguish the physics, logic and ethics of dying. Physics holds the foundation and boundaries of philosophising with a specific form (i.e. logic) and content (i.e. ethics). The physics of dying has changed very much since ancient times. Therefore, it is time to update the content of the stoic scheme and its application in philosophical consultations.<sup>4</sup> The text blocks will illustrate philosophical consultations about dying and give some considerations to be addressed during such consultations.<sup>5</sup>

### The Physics of Dying

In order to deal with the topic of dying, a philosophical counsellor has to master some facts about the physics of dying so that speculations or irrational thoughts can be avoided. In a modern industrialised country, like the Netherlands, about 140.000 persons die each year.<sup>6</sup> Most of them (about 95%) die a natural cause of death, i.e. of a disorder or disease. About 5% of the persons die of an external cause of death, i.e. of (traffic)accidents, homicide or suicide.<sup>7</sup> Since 2013, the data of Statistics Netherlands contain information on the way of dying. In about 40% of the cases, the certifying physician describes the direct cause of death.<sup>8</sup> These cases show several different ways of dying (see *table 1*). About one-third of the persons die because of dehydration or cachexia (i.e. they stop eating or drinking). It concerns (very) old persons in a nursing home with a poorly understood physiology who can stand without food or drink for quite a while. They get into a serene state of being, gradually lose consciousness and die calmly and quietly. The decision to stop eating and drinking is taken deliberately and seems in accordance with the person's physiology. We might say such persons listen to their body. The change in physiology by not eating or drinking changes the composition of bodily fluids and the accompanying consciousness suits the dying process. In some sense, nature takes care of us.<sup>9</sup> In the Netherlands physicians allow such a process to occur. They treat pain or discomfort but do not try to alter the process as such. This policy sometimes surprises other, notably south European countries, such as Spain, where dying of cachexia or dehydration is considered bad treatment, and fluid or food is supplied by infusion till the person dies in another way. The tradition of death by stopping to eat or drink can be considered common to northern European (i.e. protestant) countries where people die gradually in cachexia, which reminds us of the protestant way of life: sober and strict.

In south European countries, delirium is most often reported as a direct cause of death.<sup>10</sup> People die in a state of wonder and exaltation, which reminds us of the catholic way of life: abundant, intense, in the close presence of the supernatural. The terms "Catholic" and "Protestant" (may) serve as a metaphor to understand the qualities of the dying process. They do not suggest a determination of the process by the corresponding religion. Thus, an atheist may die in a Catholic or Protestant way, a Catholic in a Protestant way or vice versa. Despite an extensive secularisation in the Netherlands, there is still a clear demarcation between "former" Protestant and Catholic regions concerning risk factors, diseases and mortality.<sup>11</sup> The terms designate a lifestyle with under-

lying (implicit) moral principles, regardless of the membership of a religious group. Recognising such a lifestyle and reflection on underlying principles is part of philosophical consultations on death.

During a consultation, a client told me about her fear of dying.<sup>12</sup> We decided to investigate the topic. I gave her some information about the facts. We talked about the acute, sudden death, and she admitted she was not afraid of that. She thought of it as going to sleep; suddenly, the light goes out. Actually, she preferred such an acute death above the gradual process of dying because of the physical pain the last-mentioned might bring about. I informed her that nowadays, in modern medicine, pain treatment brings comfort when dying gradually. She admitted the facts in order to conclude that both possibilities could not be reasons for fear. After some deliberation, she admitted that the fear was not for dying, but for death as such and the non-existence it might bring about. I posed her the question of what “non-existence” is, inviting her to define this concept.<sup>13</sup> Thus our focus of philosophising shifted from fear of dying to the meaning of non-existence by an elaboration of facts.

3

“Crito, I owe the sacrifice of a rooster to Asklepios; will you pay that debt and not neglect to do so?” – Plato, *Phaedo*, 118a. The debt can be read as being paid for facilitating the death process.

4

We are living in an “update society”: the internet of things offers us updates almost all of the time. We do not ask for them, but are forced to follow them in order to keep on using our laptop, personal computer, cell phone, car, navigation system, refrigerator or even our doorbell. It is the mechanism of neo-capitalism. We are forced to consume in order to enjoy the thing. The update concept was transferred from IT to news, politics, science and – philosophy. It became a part of our common language. The application of the term to dying and use of it in the title of this article can be considered irony.

5

My method is reflexive/cyclic, a (repeating) sequence of questioning, interpreting and understanding. Cf. Peter Harteloh, “The Diagnosis in Philosophical Practice”, *Journal Humanities Therapy* 4 (2013), pp. 59–73.

6

The data was taken from “Cause-of-death Registry” by *Statistics Netherlands*. For complete data, please contact the author.

7

Euthanasia is considered a natural cause of death as in most cases of a natural cause of death there was a medical intervention like pain, sleep or anxiolytic medication to facilitate dying. So the concept of a natural cause of death is not grounded on the medical/human intervention, but on the origin of the process that (eventually) leads to death.

8

In 60% of the cases, the certifying physician only reports the underlying cause of death.

Persons with the same disease can die in a different way. For example, a person suffering from lung cancer can stop eating and drinking and die in a stoic way, but can also die of a sudden cardiac or respiratory arrest. We have to be prepared for different ways of dying.

9

Cf. David Hui, Rony Dev, Eduardo Bruera, “The last days of life: symptom burden and impact on nutrition and hydration in cancer patients”, *Current Opinion in Supportive and Palliative Care* 9 (2015) 4, pp. 346–354, doi: <https://doi.org/10.1097/spc.0000000000000171>.

10

Matías González *et al.*, “Delirium: A predictor of mortality in the elderly”, *The European Journal of Psychiatry* 19 (2005) 3, pp. 165–171.

11

Cf. Johan Mackenbach, Anton E. Kunst, C. W. Looman, “Cultural and economic determinants of geographical mortality patterns in The Netherlands”, *Journal Epidemiology and Community Health* 45 (1991) 3, pp. 231–237, doi: <https://doi.org/10.1136/jech.45.3.231>.

12

For reasons of privacy these cases do not present consultations as such. They are a compilation of fragments from real consultations suiting our discourse on dying.

13

“Why should I fear death? If I am, then death is not. If Death is, then I am not. Why should I fear that which can only exist when I do not?” – Epicurus, “Letter to Menoeceus”, in: Diogenes Laertius, *Lives of Eminent Philosophers*, trans. Robert Drew Hicks, Harvard University Press, Cambridge 1972, p. 189.

About one in four persons die suddenly of cardiac or respiratory arrest as a direct cause of death. Death comes as a surprise to such persons and their family and is not under the control of the will or external treatment. Dying is not a process anymore, but a sudden stop of bodily functions with a definite disturbance of homeostasis as a consequence. Usually, this kind of death occurs in hospitals independent of the kind of underlying disease. People dying of old age (about one in ten) also suffer from a definite homeostasis disturbance, although they gradually develop this morbid condition. About 7% of the people die of liver or renal failure. This can be considered a classical death, already recognised by Hippocrates. When the liver or kidneys do not function well, metabolic waste products poison the blood. The breath exhibits the typical ammoniac odour. The poisoned blood causes a state of consciousness, which facilitates dying and eventually leads to coma. It protects the dying person from fear or pain. It can also bring the person in a state of delirium, i.e. experiencing supernatural phenomena. Such a state of delirium can be one of intense fear and anxiety or one of intense happiness, according to the personal history of the dying person. The way of life resembles the way of death here.

Direct cause of death	Percentage	Qualities	First philosophy
Dehydration/cachexia	37%	Strict and ascetic, gradual, intentional	Stoic: mentally balanced and autarkic
Cardiac arrest/failure	26%	Sudden (acute), non-intentional	Epicurean: material-atomistic preparation
Respiratory arrest	12%		
Old age/senility	8%	Gradual, non-intentional	
Renal failure (Uremic)	5%	lyric, exalted, or gradual change of consciousness, “(sub)intentional”	Existential: intense fear or happiness
Liver failure	2%		
Delirium	1%		
Other	9%	-	-

**Table 1:** the physics of dying.<sup>14</sup>

With respect to the physics of dying, we can distinguish three dominant qualities: (i) strict and ascetic, (ii) a non-intentional acute or gradual degeneration of bodily functions, and (iii) lyrical and exalted (see *table 1*). Each quality can be linked with a first philosophy to be further explored in a philosophical consultation. The quality of being strict and ascetic reminds us of the Stoic way of life. In order to achieve peace of mind, Stoics resign from physical stimulations as much as possible. The appearance of these qualities during the dying process allows the dying person a peaceful resignation from life. A non-intentional (acute or gradual) death refers to Epicurean philosophy. When the person is there, death is not, and when death is there, the person

is not. As the death process does not leave enough time (for example acute deaths from myocardial infarction) or a capacity for conscious reflection (for example gradual deterioration of the personality in dementia), a contemplation of the Epicurean thought during philosophical consultations might serve the preparation for death. The person and his mind are marked by intentionality. The lyric, exalted way of death expresses an intensity reminding us of the way existential philosophy approaches experience. A quality of fear or joy expresses the uncompromised surrender to experience during death. Contemplating experience during philosophical consultations might enable a dying process suiting the dying person. In this way, *table 1* gives suggestions for applying a particular philosophy in the context of discussing a particular kind of death. As a philosophical consultation can never be a fixed recipe, a format of applications, the suggested philosophy has to be explored cyclically during the interaction of the philosophical counsellor and the counselee in order to test or achieve satisfaction.

### The Logic of Dying

Philosophising in general and philosophical consultations, in particular, follow the laws of logic. Different kinds of logic can be applied, and a good counsellor always looks for the logic suiting the client best. Which kind of logic suits the topic of dying? We cannot choose a specific natural cause of death, i.e. to die of cancer, cardiovascular events or dementia. It happens to us. However, there is an inherent paradox here. As death is part of our personal life story, it is also a unique event, in such a way that we can speak of *our* death: *a* death is *my* death. This death is inevitable. We cannot avoid it. We must die. Modal logic, therefore, seems to be in place. We have to contemplate a necessity as complementary to possibilities.<sup>15</sup> Dying is possible at every moment of life.<sup>16</sup> Heidegger speaks of being in order to be death. Dying is a possibility of life.<sup>17</sup> In between life and death lies an opportunity of choice. We cannot choose our death, but we can choose the way we die, i.e. we can choose an attitude towards dying by philosophising in an appropriate way. The criterion of appropriateness is not fixed but varies according to our lifestyle. Therefore, the philosophical counsellor will have to use an interpretive and understanding way of philosophising to explore the possibilities against a background of a

<sup>14</sup>

The data was taken from “Cause-of-death Registry” by *Statistics Netherlands*. For complete data, please contact the author.

<sup>15</sup>

“By death, Epicurus did not mean the process of dying which may be very painful, and thus, bad for us. He also did not mean the moment of death, of which we may or may not have an experience and which may be good or bad for us, but of which we have no experience until that moment. And, then we are no more. What he meant was, being dead. If we accept the metaphysical implication that we no longer exist and that we no longer have sentience when we are dead, then his argument is sound.” – Mark Lindner, “Epicurus’

death argument”, *Spirare* (31 January 2015). Available at: <https://www.spirare.name/epicurus-death-argument/> (accessed on 30 May 2020).

<sup>16</sup>

Cf. Arthur Schopenhauer, *Die Welt als Wille und Vorstellung*, vol. 1, *Vier Bücher, nebst einem Anhang, der die Kritik der Kantischen Philosophie enthält*, §16 – vol. 2, *... welcher die Ergänzungen zu den vier Büchern des ersten Bandes enthält*, §41, Suhrkamp, Frankfurt am Main 2004.

<sup>17</sup>

Martin Heidegger, *Sein und Zeit*, Max Niemeyer Verlag, Tübingen 1967, § 49–51.

necessity.<sup>18</sup> Exploring the logical connection of the facts with philosophical concepts might be useful as the qualities of the dying process resemble or point out philosophical ways of thinking and their corresponding attitudes (see *table 1*). Such an attitude is not restricted to the dying process. A person can explore, choose and practice an attitude during philosophical consultations. Suitability of the attitude for dying is an extreme test for the suitability of the attitude to the personal identity of a person. As folk wisdom teaches: “(eventually) the way a person dies tells us how he really was”. Death can reveal the person as coward or hero, attached or free, complete or incomplete, caring or selfish, prepared or surprised, calm or emotional. These opposition pairs pop up and are explored during philosophical consultations. Death is an attitude test. By practising a suitable attitude during life, the person is prepared, and death is transcended by not being located as a specific moment in time (our date of death), but by being part of every moment in life. The logic of dying points out the necessity to develop an attitude towards death. Philosophical consultations can help in developing such an attitude.

During a consultation, a client told me she was bothered by the fact that she would/should die. She was in good health, but could not get the thought of being death out of her mind. We contemplated the inevitability of death. All living creatures die. Life is not endless. We questioned this fact. Why is life not endless? What is a lifetime? What is fading away with death? Our identity? Looking at the questions, we noticed that our focus shifted from death to life. We reformulated the theme as a quest for the meaning of life. The theme raises questions that cannot be answered with certainty. However, we cannot deny the sense of these questions either. We can only try to live with them and living with a question (not with its answers) is an art. So we tried to consider ways of living with questions that cannot be answered. Thus, our focus shifted from thoughts about dying to thoughts about a way of living.

### **The Ethics of Dying**

Nowadays, death and dying are technical, i.e. medical issues, embedded in procedures and institutions. However, dying cannot be left to politicians or doctors. Dying is always *my* dying, as death is always *my* death. No one can take my place in the dying process. There is always a possibility, but also a necessity to shape this process. How can one do that? Some persons struggle or fight. They die in rage, anger or sadness. Others leave this world in ecstasy, with vivid visions and a state of bewilderment. Dying is an expression of the way we live. Unfulfilled acts, attachment to family, friends or possessions, dealing with injustice, all these themes show themselves (again) in the dying process. The way they show depends on the body's physiological state, and the reflection on the life lived. The death of Socrates is an important example of a philosophical practice. Socrates lives in accordance with his principles, not only during his everyday life but also during his death process. He is rational, thinks, restrains his fear and reflects on his life. This is not something new, provoked by the approaching death. It is an attitude developed and practised during his life. In the end, he reminds us to offer Asklepios, the God of medicine, a cock. I think this is, contrary to common interpretations, in honour of the technique, the chemical composition of the poison cup he has to drink. It enables Socrates to die without pain, gradually, in a rather comfortable way. It facilitates the form of the death process. Socrates himself determines the content. Socrates dies a well-considered death, reasoning as the person he was, in harmony with himself and authenticity he practised his life. The death of Seneca is another example of dying to philosophical practice.

His death is an example of Stoic ideals like a balance of mind and feelings, and an autarkic way of thinking. Death does not disturb his peace of mind, and by the way he dies Seneca shows himself independent and untouchable by his ruler's, Nero, will and orders.<sup>19</sup>

During a consultation, a client posed the question about the good death, i.e. way to die. We often wonder about a good life (*ars vivendi*), but is there also something that can be called a good death (*ars moriendi*)? I first asked her to identify the most important concept in this question. The client could not choose. She considered “good death” as one concept. I asked her if there is a “bad death”. She said yes and talked about overwhelming anxiety, pain or struggle taking the person outside himself during the dying process. That was not considered to be a good death. Being or staying oneself in the dying process seemed to be her criterion for a good death. This depends on the attitude of self-consciousness and the exercise in developing such an attitude during life. The attitude is not limited to dealing with death and the dying process but seems more generally aimed at dealing with life for the better and the worse. Death is to be valued according to the quality of life. Thus, our focus of philosophising shifted from questioning the good death to defining an appropriate attitude during life.

The examples of these philosophers teach us above all the appropriate attitude towards inevitable and dramatic occurrences in life, such as dying. Such an attitude determines the quality of the dying process. The ethics of dying is not defined by rules or morale, but by an ethos, i.e. an attitude, in the most authentic sense of the word. Not everyone can enter death so rational as Socrates did. The three most frequent ways of dying all harbour their own ethics. The stoic attitude of balance and *autarkeia* suits the case of stopping to eat and drink, and a gradual wasting away. The rational reflection suits the readiness to the sudden death of cardiac or respiratory arrest, and the intense fear or happiness of the delirium an existential experience. The moral of these examples: with respect to death, persons should practice and choose the attitude suiting their lifestyle.

Some philosophical considerations on death that might be recognised in consultations are the following:

- Death is the beginning of philosophy (Plato), an urge to think about life and existence.
- Death is not here, when I am here (Epicure).
- Death is the only absolute certainty in live (Heidegger).
- Human beings are the only living creatures sentient about the fact that they will die (Schopenhauer).
- The distinction between *my* death and the death of the other (Sartre).<sup>20</sup>
- We know death by the death of others, but cannot image our own death experience (Schopenhauer).
- Being is an ever ongoing way of dying (Schopenhauer).
- Being conscious about death defines life (Heidegger).
- Death is not a moment in time, marking the end of life or the end of personal biography, but it is a process of conceptual clarification. Explicit contemplation of this process constitutes an experience of being (Harteloh, following Hadot).

18

In contrast to analytical, phenomenological or speculative philosophical activities/methods.

19

Lucius Annaeus Seneca, *Dialogues and Letters*, trans. Charles Desmond Nuttall Costa, Penguin, London 1997.

20

Sartre would say that since he has not experienced death, he does not know what it is. The

concept is best understood by persons in a hospice who find that their comrades in death often understand them better than their families or those who do not understand their own finite nature. Cf. Jean-Paul Sartre, *Being and Nothingness*, trans. Hazel E. Barnes, Routledge, London 2003.

## Philosophising about Dying

Given the current global Corona crisis, philosophical consultations on “the” good death are vital. Nowadays, the dying process is embedded in legal and ethical procedures. It is subordinated to medical protocols for palliation or euthanasia. A good death is defined by form, not by content. The search for content is left to the person themselves, although the person might not always be fit for such a search. Philosophy investigates the idea of death from a rational point of view (see the following block). Different philosophical ideas might “pop up” in philosophical consultations, used implicit and not knowingly by the counselee. The philosophical counsellor should be able to recognise them (“a philosophical diagnosis”) and use them to explore the counselee’s attitude towards death.<sup>21</sup>

Some philosophical considerations on the good death encountered in philosophical consultations

- We cannot choose our time of death, but we can choose the way we die.
- Death may come unexpectedly. So we should be prepared.
- Death may come suddenly, or death may be a process (physics of dying).
- Rational approach: conducting one’s own death, dying accompanied by a personal idea of death (Socrates, Seneca).
- Affective approach: undergoing death accompanied by an experience of (being part of) a greater whole (Christ) or natural ground plan (Epicurus).
- Eliminative approach: by eliminating the personal ego during life, we eliminate death (Schopenhauer, Buddha).

In a consultation on the dying process, the distinction between facts, logic and ethics of dying should be taken into account. As the examples show, such consultations can take the client from deliberations on dying to considerations of living and to developing an attitude during life that is also suitable for the art of dying (*ars moriendi*). The facts show us there are three ways of dying. Firstly, we can die gradually and intentionally by stopping to eat or drink. Consciousness is clear. The personality unaltered. Death is anticipated and arrives expectedly. Secondly, we can die suddenly and non-intentionally because of cardiac or respiratory arrest. Death is not expected and comes as a surprise. There is no dying process. Thirdly, because of an underlying disease, our consciousness will change and prepare us for death. Because of liver or kidney failure, we will become delirious and (eventually) get into a coma. Death is expected but may come suddenly. We can fight the change of consciousness, but will not be able to change it, for example, as is in dementia. These facts of dying imply that we cannot choose our way of dying, but the logic of dying points out an important possibility. We can choose to develop an attitude suiting our death. Philosophical counselling can help in developing such an attitude.

In my practice, three kinds of reactions prevail. Firstly, there is a rational approach, much like that of Socrates or Seneca. Counselees develop an idea about death, varying from ideas about after-life preserving the soul to material decomposition and non-existence, and conduct their dying process accordingly. In the case of a sudden death they conduct their funeral ceremony according to the leading idea on death in advance. In case of a gradual dying process, the thought should be leading in reaching an attitude of calm acceptance. Secondly, there is an affective approach. Counselees reflect on feelings of grief and farewell. Peace of mind is found in the experience of being part



of a greater whole, for example, the body of Christ, the spirit of Allah or the material order of the universe. No rational thought or reasoning is underlying such an experience. It is the experience as such, accompanying the reflections during philosophical consultations. Thirdly, there is what I call the *eliminative approach*. Like in Buddhism, death is linked with the (material end of the) ego or personal identity. Eliminating the ego will eliminate death. For accomplishing this, the ego has to become an illusion.<sup>22</sup> Philosophical consultations help the counselee by a critical investigation of the ego and its seemingly unique characteristics.

This eliminative approach is not restricted to Buddhism, but can also be read in the sayings of Epicurus and Schopenhauer (see the block above). My examples from philosophical consultations show that the shift of focus from dying to living is important in counselling on dying. (Wild) Speculations have to be avoided by looking at the facts. Themes like “a good death”, “fear for dying” or “the necessity of dying” and concepts like “(un)expected”, “(non) intentional”, “gradual” or “sudden” death should be addressed and linked with different kind of situations in life, so that death can be seen as a part of life. In this way, philosophical practice is a true revival of an ancient practice of philosophising as an exercise in dying. Current knowledge about the physics of dying has to be taken into account. As the examples show, the facts are loaded with concepts that may serve as an object of reflection. So when the facts change, the concepts of reflection will change. The reflection as such still remains philosophical, so that philosophising about dying during philosophical consultations is an important tool for an individual to discover, shape and live his personal *ars moriendi*.

**Peter Harteloh**

### **Filozofirati o umiranju**

#### **Sažetak**

*Jedan je od osnivača filozofijske prakse, Pierre Hadot, odredio takvu praksu kao duhovnu vježbu učenja kako pisati, čitati, živjeti i umrijeti. U ovom se radu želim usmjeriti na umiranje. Kako filozofirati o smrti? Pristupit ću ovom pitanju sa stajališta filozofijskog savjetnika koji se s tim pitanjem susreće tijekom savjetovanja i dat ću nekoliko primjera takvog savjetovanja. Približit ću se temi u skladu s drevnom stoičkom tradicijom i razlikovati fiziku, logiku i etiku umiranja. Činjenice će ograničiti i odrediti prikladni oblik (logika) i sadržaj (etika) filozofiranja tijekom savjetovanja. Argumentirat ću da možemo i trebamo razviti stav prikladan našoj smrti. Filozofijsko savjetovanje može pomoći u razvoju takvog stava.*

#### **Ključne riječi**

filozofijska praksa, filozofijsko savjetovanje, smrt, umiranje

21

Cf. P. Harteloh, “The Diagnosis in Philosophical Practice”.

7 (2016), art. no. 124, pp. 1–12, doi: <https://doi.org/10.3389/fpsyg.2016.00124>.

22

Cf. Yung-Jong Shiah, “From Self to Nonself: The Nonself Theory”, *Frontiers in Psychology*

**Peter Harteloh**

## **Über das Sterben philosophieren**

### **Zusammenfassung**

*Einer der Begründer der philosophischen Praxis, Pierre Hadot, definierte diese Praxis als eine spirituelle Übung, um zu lernen, wie man schreibt, liest, lebt und stirbt. In diesem Artikel möchte ich mich auf das Sterben konzentrieren. Wie lässt es sich über den Tod philosophieren? Ich gehe an diese Frage aus dem Blickwinkel eines philosophischen Beraters heran, der im Rahmen der Beratung auf diese Frage stößt, und nenne ein paar Beispiele für eine solche Beratung. Ich werde mich dem Thema in Anlehnung an die uralte stoische Tradition nähern und zwischen Physik, Logik und Ethik des Sterbens unterscheiden. Die Fakten werden die geeignete Form (Logik) und den Inhalt (Ethik) des Philosophierens im Laufe der Beratung einschränken und bestimmen. Ich werde argumentieren, dass wir eine Einstellung entwickeln können und sollten, die im Hinblick auf unseren Tod gebührend ist. Die philosophische Beratung kann mithelfen, eine solche Einstellung herauszubilden.*

### **Schlüsselwörter**

philosophische Praxis, philosophische Beratung, Tod, Sterben

**Peter Harteloh**

## **Philosopher sur la mort**

### **Résumé**

*L'un des fondateurs de la pratique philosophique, Pierre Hadot, a défini une telle pratique de la même manière qu'il a défini l'exercice spirituel d'apprendre à écrire, lire, vivre et mourir. Dans ce travail, je souhaite me consacrer à la mort. Comment philosopher sur la mort ? J'aborderai cette question à partir de la perspective du conseiller en philosophie qui est confronté à cette question lors des consultations et je donnerai quelques exemples de ce genre de consultations. Je me rapprocherai du thème en accord avec la tradition ancienne stoïque qui différencie la physique, la logique et l'éthique de la mort. Les faits délimiteront et détermineront la forme appropriée (logique) à adopter et le contenu (éthique) de l'acte de philosopher durant la consultation. Je soutiendrai que l'on peut et que l'on doit développer une attitude appropriée envers notre mort. Le conseil philosophique peut aider à développer une telle attitude.*

### **Mots-clés**

pratique philosophique, conseil philosophique, mort, mourir