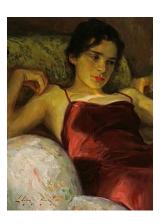
INTERVALOLIBRE

Work of life

María Marinaro Colonna*



"I have not made you celestial or earthly, neither mortal nor immortal, so yourself, freely, in the manner of a good painter or a skilled sculptor, finial your own shape".

Pico de la Mirandola Oratio de hominis dignitate From Opus Nigrum, by Marguerite Yourcenar

The neurologist and psychiatrist Boris Cyrulnik, describes five stages a person experiences in front of a traumatic event: the *denial* of the reality, *isolation* of unbearable emotion, the *headlong rush* to stop feeling anxiety, *intellectualization*, seeking explanations that further control more unbearable emotion, and *creativity* as a lived experience of grace as a reward. Without these resources, the person would not hold the experience, and therefore avoid them would be worse.

Still, the experience of being diagnosed with a serious illness is very subjective, as is the way the person takes the illness. In my opinion, there is no a right or wrong way to do it.

If in the process of healing, people are questioned about their lifestyles, for example, does not mean that this lifestyle is necessarily the cause of the illness. Rather, it appears that the disease reveals individual issues long time neglected.

There are many reports of recoveries adjudicated to changes in attitude towards the disease. What I am proposing is that the disease also confronts us with a review of our attitude towards living.

A very significant aspect in the management of the disease is the giving. No abandonment or despair, but the giving as the act of acceptance of the seriousness of the situation, and the attention directed inward to recognize what is feeling, what is realizing, what suddenly loses importance, what suddenly becomes relevant, what it is really wanted every moment of the day, the little time that is left, and how to use that time.

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In sickness, as in old age, expands consciousness of finitude and death, and suddenly time is important, and so is life, and no longer want to use it wrong. Since the disease itself the focus shifts to the effort to live the present moment, and in many cases the disease is cured, not in others, but in any case, each day is lived more deeply to sustain the very complex paradox of confronting the disease with the desire to live every single day, sadness with joy, pain with relief, and the love of the dear ones with the absence future.

This capability of giving is not present in patients who abandon themselves to the disease and live it as a punishment. This capability of giving implies a not avoidant encounter with themselves. Certainly, a complex experience.

In any case, of health or disease, the work of life, can be deployed creatively even if with our faults we follow the vital energy of our desires, orient ourselves according to the possibilities available to us, cultivate relationships of support and affection, and regulate our vital energy in compliance with the organic and psychological rhythms.

For all of us, the time to start is always TODAY.

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