When is the end of life?

By Steve Woolley
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My friend Bill died recently. A brilliant scholar, he had suffered a number of strokes, and was being cared for in a facility that catered to patients with dementia and brain injuries. He decided that it was time to let nature take its course. He refused most food and medications, and died in short order, but he died fully confident in the resurrection life that lay ahead.

A few weeks later I was in the ER with a man in his mid-to-late nineties who had also suffered from a number of strokes. He was surrounded by family who pressed the staff to do whatever they could to not let him die. The last I heard he was still in the hospital being kept alive, but with no hope of recovery in any sense of the word that makes sense.

Our medics responded recently to the home of a 98-year-old woman who appeared to have no pulse but did not have a DNR order that anyone knew about. Her caretakers were emotionally agitated, urging that she not be allowed to die. The medics did what they had to to get a pulse and transport her to a hospital, where, connected to all the available contraptions, she died. By then a son had been located who affirmed that there was a DNR, but he was the only one with a copy and lived hundreds of miles away.

Most of us in the Tuesday morning clergy group I'm part of are over 70, and one of us is 87. We got into a discussion about end-of-life decision making: how we need to get our paper work up to date and have those difficult conversations with our children. We need to do it, but life keeps getting in the way and we tend to put it off until tomorrow, or the day after that. Sitting here writing this article I realize that I don't have a clue about who in town handles the File of Life kits that were once available through the Red Cross, when we had a staffed and active local Red Cross chapter. Each clinic and hospital has its own version of an advance directive, and, as far as I can tell, none of that is shared information. HIPAA, you know. It gets in the way of common sense sometimes.

Here's the odd thing. Our Tuesday group (Episcopalian, Presbyterian, Methodist, and Lutheran) stumbled over the theology of end of life. We enthusiastically affirmed that, as followers of Christ, we believe in "the resurrection of the body and the life everlasting," but at a very deep emotional level, not yet. It was an eerie echo of Augustine's famous prayer to be granted chastity, but not yet. We were uncertain about when end of life might actually be. We were agreed that there is a difference between medically aided recovery to the enjoyment of life, and medically induced prolongation of life in a body trying its hardest to die. But where is that boundary, and how permeable is it?

Living in a rural area with limited medical care, my grandparents and their friends became elderly at an early age. End of life was a normal event that happened naturally in due course and surprised no one. Grief was still grief, but no one was shocked that nothing could be done to keep grandpa from dying. My parents were elderly by the time they reached their mid seventies, but a better life with better health care meant that there was doubt about what end of life might mean. I'm 72; I'm young (no snickering, please). Being old and being at the end of one's life are not the same thing, but being old brings each of us predictably closer to the end of life, and it would probably be a good idea to talk about it.

If talking about it is complicated for clergy who are comfortable with God's promise that "happy from now on are those who die in the Lord! So it is, says the Spirit, for they rest from their labors," and "to your faithful people, O Lord, life is changed, not ended; and when our mortal body lies in death, there is prepared for us a dwelling place eternal in the heavens," consider how complicated it is for those whose faith is less, or not at all. Medically aided recovery from illness or injury, prolonging life, and having a life, are all different things, but they are all related. And so is God's promise of new life for those who are willing to receive it. It's time to talk.

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