

*...Jesus went to a town called Nain, and his disciples and a large crowd went along with him. As he approached the town gate, a dead person was being carried out—the only son of his mother, and she was a widow. And a large crowd from the town was with her. When the Lord saw her, his heart went out to her and he said, “Don’t cry.”*

*Then he went up and touched the coffin, and those carrying it stood still. He said, “Young man, I say to you, get up!” The dead man sat up and began to talk, and Jesus gave him back to his mother.  
(Luke 7:11-15)*

---

Dear Brothers and Sisters in Christ,

Grace and peace are yours, from God our Father and the Lord Jesus Christ.

To the reader, the most startling part of this Gospel episode is the raising of a dead man. What could be more astonishing than that?

What if the narrative had ceased just after Jesus’ words to the grieving woman: ‘Don’t cry’? Should we be less impressed with the ending? Should we be less startled that the King of the Universe concerns himself with the sorrow and loss of one anonymous and seemingly unimportant human being?

In this story, words of grace precede a miracle of restoration. Unlike Jesus, the Master of all Creation, we cannot reverse death itself. Yet we can be the sharers—or even, at times, the recipients—of grace and compassion which bring about healing as we sojourn on this earth.

I once cared for a very ill 10 year-old boy in Kenya. He was struck with a severe pneumonia, the cause of which we could not determine. I exhausted every diagnostic test and therapeutic drug in the hospital’s armamentarium. Yet still the boy grew more gravely ill, craved more oxygen, strained to draw breath.

Long days turned into longer nights. In my initial period at Kijabe, when we lacked trained intensive care nurses, I would have to set my alarm in the early morning hours to check the status of sick patients. This boy required a special breathing machine; a tight mask was fitted to his face and powerful pressure delivered through his mouth and on into his lungs. There was much dreaded trudging back and forth between my house and the ward to monitor his progress.

This machine helped—for a while. Still his condition declined, and still I could not find the answer. Frustration and fatigue set in for both of us, and for the patient’s mother, who was always at his side. One morning, when his oxygen level had fallen dangerously low, I tried to re-fit the mask. He reacted violently, perhaps out of desperation or maybe because the amount of carbon dioxide in his blood had risen to poisonous levels. He swung and hit me in the face, knocking off my glasses.



March 2008

Bleary eyed, trembling, and knowing that I was “losing” this battle, I did something of which I am terribly ashamed. I retaliated with harsh words. I hurled an anguished command at that frightened boy. “You **will** wear this mask!” And I forced it back on.

The relief from air hunger was temporary. The next morning not even this respirator was enough to help him. Since I did not know the reason for his illness, and because his lungs were progressively failing, I had decided not to “intubate” him; that is, to put a breathing tube down his throat and into his airways. Now, faced with the imminent death of one so young, I changed my mind. We intubated him, and prayed.

He lived for about an hour. Honestly, I had no more heart, nor mind, to put into the fight. He passed from this life. Completely depleted—physically, intellectually, emotionally—I stared motionless after turning off the ventilator. The thin, worn-out chest did not rise.

I started to cry. First a silent trickle, then in quiet, exhausted, heaving sobs.

“Don’t cry.”

It was the boy’s mother, still serene and composed at his side. Her face betrayed none of the anger and pain that mine must have. “Doctor, don’t cry. You did the best you could.”

Her gracious words flowed over me like the cool water which the rich man, in Hell, must have been longing for from Abraham (Luke 16:19-31). I had been released from the sense of guilt I had for not “fixing” this boy—and for having yelled at him. There would be no resurrection—at least not in the here and now—but there would be healing for the would-be healer.

Thornton Wilder, in his dramatization of John 5 (the healing at Bethesda), “The Angel that Troubled the Waters,” has an angel block the path of a grieving doctor attempting to enter the pool:

*“Draw back, physician, this moment is not for you...Without your wounds, where would your power be? It is your melancholy that makes your low voice tremble into the hearts of men and women. The very angels themselves cannot persuade the wretched and blundering children of earth as can one human being broken on the wheels of living. In love’s service, only wounded soldiers can serve. Draw back.”*

That may be. But how long can one be “broken on the wheels of living”? Even the healer must at times be healed, must experience the wholeness that only the Lord’s grace can provide. We are extremely privileged when God’s love, flowing through His children, touches our lives in this powerful way. It is a gift I certainly did not merit. Yet this was not the only instance when such grace was extended to me.

While an intern I once volunteered to help a busy colleague. A “central line”—essentially a large IV catheter—had to be placed into a woman’s neck. I had done this many times. The patient had a blood disorder and needed better access to her veins.



March 2008

I struggled to insert the catheter. Soon after the procedure the patient's breathing worsened. An x-ray confirmed the worst. The needle I had used had pricked the top of her lung and had collapsed it. She would need a tube placed in her chest to re-expand the lung.

It is said that if you never cause a pneumothorax then you have not placed enough central lines; in other words, it is a common "complication" and "it happens to everyone." This fact did not console me—or the patient—as I stood at the end of the hospital bed and watched the surgeon prepare for the procedure. It would be painful. It could even be dangerous.

I must have appeared terror-stricken, white as a ghost, mortified. Had I been the cause of this? And just before the surgeon made his first cut, the middle-aged woman gazed right at me and spoke the kindest words I had ever heard, before or since: "Don't look so sad. Everyone makes mistakes."

"Silver and gold I do not have, but what I have I give you," said Peter to the crippled beggar (Acts 2:6). As Luther rightly observed, we are all beggars.

"Don't cry." "Don't look so sad." The natural human reaction when wronged—or when one believes he has been wronged—is to retaliate, to lash out, to blame. Perhaps this response is sometimes called for, to send a message, to discipline, or to deter. These two women, in their wisdom and in their gentleness, chose costly grace. It was grace (for me) because it was unmerited and unearned, complete and completely necessary for my restoration. It was costly (for them) because they had to choose not to retaliate, and they were the ones who were suffering. (The woman with the blood disorder recovered.)

My guess—and that is all it can be—is that the widow's acute pain lifted as soon as the Messiah said to her, "Don't cry." Imagine Jesus, the Son of God, resting his very arm on yours and uttering those words! She did not have to wait for the raising of her son to experience God's love. The memory of loss can never be erased for us. Even the widow knew that her son had died once, and would do so again. Grace in a sin-sick world is the great sign of the Lord, a breaking in of eternal life now, and a pointing to that resurrection which will come on the last day. May we be instruments of that grace—and gracious receivers of it.

*May the Lord bless you and keep you,*

*May the Lord make His face to shine upon you, and be gracious unto you,*

*May the Lord lift up his countenance upon you, and give you peace. (Numbers 6:24-26)*

Amen.

Yours in Christ,

Jon