

BEDSIDE MANNERS

Forrest Church

April 6, 2008

According to T. S. Eliot, April is the cruelest month. I find it, instead, to be the most puckish: variable; inconstant; in alternative measure promising and discouraging. What we know, on faith and in fact,, is that Spring is here. Spring—the season of changes.

I love Spring. Its early bite and surprising balm, its quicksilver changes. As the world around us comes alive again, we too awaken, or can, to receive life as a gift, not a given. Nature's sympathetic urgings play their changes on our starched fabric. We melt into the first warm day. Our guard goes down. We flow with and not against the weather.

This particular April, as many of you know, I'm undergoing a strenuous course of chemotherapy to hold my cancer at bay, which can hold me at bay as well. I try to resist the temptation to crouch in a defensive posture. After all, odds are that this will be my last Spring and I don't want to let it slip by unnoticed. I wish to honor it with my wonder. I wish to revel at its strangeness and glory. I don't want to miss my last Spring.

The chemo's going well, by the way. My tumors are shrinking. Time is being bought. The cancer is incurable, but it can be held at bay and the wonderful people at Memorial Sloan-Kettering Hospital, whom All Souls own Dr. Martee Hensley introduced Carolyn and me to a year and a half ago, are doing just that. They have renewed my lease on life for at least another season, for which I am immensely grateful. There are days when it feels as if we are destroying the village in order to save it, but most of the time, I'm happy to report, I feel very much myself. Your love and support have meant the world to me. In fact, I can't imagine being any luckier in my choice of companions along life's way.

I did finish that book I promised you in February, when I reported that my cancer had returned. It's called *Love & Death: My Journey through the Valley of the Shadow*. It's in production as we speak. Beacon Press is rushing it into print and copies will be available this June, in time for the Unitarian Universalist General Assembly. It's amazing really.

How did I do it, you ask? There are three answers. First, I'm not a perfectionist. I've always taken a ready, fire, aim approach to life, and this book is no exception. Second, in it I sum up everything I've learned by heart from you over my thirty-year ministry at All Souls. You have been such splendid teachers, especially during your own times of trial. So I simply had to transcribe my heart's familiar pages. It wasn't difficult to do. Not at all.

But there is a third secret to my success in writing this book so quickly. Please don't tell the Commissioner of Religion, because She might suspend me from the game. That's right: Steroids. Every week the good folks at Memorial pumped me full of steroids to help me tolerate the poison they were pumping into me to kill the cancer. For two or three days after every treatment, I was flying. No wonder Roger Clemens didn't lose anything on his fastball. I could write all day and night. I haven't been so high since the late sixties!

Anyway, now that you know my secret, I shall share with you a little of my book. I have a chapter in it called "Bedside Manners," offering advice to hospital visitors. It's my Miss Manners moment in the book, but I thought it might be useful to share the ABC's of hospital visitation, given that we all find ourselves in the position of visiting friends and loved ones in the hospital and often feel inadequate and off balance when we do. So here's my little primer on hospital etiquette, adapted from my new book, Love and Death.

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In November, 2006, within a month of my diagnosis, I awakened in the intensive care room at New York Presbyterian Hospital following successful surgery to remove my esophagus. Having never spent a day in my life in a hospital, I had to fight back my fears as I entered the unknown. As with so many of our fears, the reality of recovery proved less daunting than my dark fantasy had been. I woke up in recovery to be greeted by my wife and my colleague, Galen Guengerich. From the outset of my illness, Carolyn has turned to Galen for pastoral counseling. You should all know, he has proved a wonderful strength and boon to us both throughout our time of trials.

I didn't tarry in the hospital any longer than I absolutely had to. By marching around my floor thirty-six times the evening before my doctors gathered to make their decision on my dismissal, I escaped the hospital in seven days, the minimum projection for my stay. I marveled at the care I received. And I was buoyed by the uptick in my odds for survival.

I shall spare you the details of my recovery. Beyond my vanity in boasting surprising valor in meeting most of my trials, they don't signify much in the whole scope of things. I shall take this opportunity instead to offer a few tips for hospital visitors, the value of which became real to me during my weeklong stay. In the realm of sickbed etiquette, there are few available guideposts. Here are mine.

Apart from health professionals, I know of almost no one who doesn't find hospitals forbidding. In large part, this anxiety stems from fears concerning our own mortality. Everywhere we look we are faced with reminders of pain, sickness, and death, all the more haunting in the context of a hospital's imposing impersonality. Yet, someone we care about is ill. We are bringing ourselves as gifts. When we arrive at our friend's bedside, we must break through this veil of impersonality and our own protective armor to ensure that our discomfort doesn't prevent us from bringing aid.

We skirt our direly sick or dying friends for a second reason as well. We are mortified that we won't know what to say and, therefore, will make some fatal gaffe. Driven away by our fears, we absent ourselves from pain's table, just where our presence might be most welcome.

Let me try to defuse this problem for you. You don't really have to say much of anything. Just showing up speaks volumes. It takes few words to console another—to be with her in her aloneness. “Can I get anything for you?” you ask. “Can I help you move your pillow?”

To comfort another—to bring him your strength—requires more practice, in large part because it requires you to be more comfortable within yourself. Break through the invisible barrier estranging you and your life from him and his death, and you will be halfway there. Find little ways, anecdotes and stories, to assure him of your love. Extol your favorite ball teams. Recall the most significant passages of your friendship. Remind him of what he's taught you. Tell him that you will always be there for him. Bring him your strength.

Soon, before you know it, you will be commiserating. Commiseration is the deepest form of succor. All barriers broken down, your friend's misery will have tapped the source of your own and you will enter effortlessly into the language of empathy. Not, “I know how you feel,” because you don't (“I know how you feel” trivializes the patient's solitary journey), but “I can almost feel your heart beating in mine, you seem that close to me.” Because he is that close to you. With commiseration all false barriers between well and sick come crumbling down, and we are truly one. We cry together, laugh together, feel together whatever must be felt at such a sacred time. We experience communion.

There are several simpler, yet very useful, points of hospital etiquette. First, once you have greeted the person you are visiting, please sit down. Pull a chair beside her bed, or perch on the end of it. If you remain standing, it appears as if you're poised to leave. Besides, since you don't stand when visiting a friend in her living room, pay her a like courtesy here. Not only will this make your visit more relaxed, but you will be at eye level with your friend. All day long, people hover over her bed, looking down on her. Even if you are going to stay for no more than five minutes (often a good call, by the way) give her a break. Have a seat. Greet her eye to eye.

Second, be sure to touch her. In hospitals, touch is often invasive. It hurts. Touch is the probing of sensitive organs or the insertion of an IV. For this reason, nothing soothes like the loving touch of a friend. Smooth her brow, run your fingertips down her arm, hold her hand.

Third, don't tell her how good she looks, even if you are surprised to see her looking better than you had feared. This courtesy won't fool her, only make her feel less real and more self-conscious. In fact, don't come in planning to tell her much of anything at all. Let your friend set the tone and subjects of your conversation. Try question statements such as "It really must be difficult?" This will permit her to lead the discussion wherever she chooses.

Fourth, if your friend is seriously ill or in considerable discomfort, don't stay too long. Five to ten minutes, sitting down, holding hands, talking quietly, is just about right. The quickest way to wear out your welcome is by lingering to prove how much you care.

Finally, if she seems fated not to get better, don't tell her that you know everything will turn out fine, that she'll be her old self again in no time, up and dancing around. Such feel-good banter may make you feel better; fooling ourselves almost always does, at least for a spell. But, tragically, it may set her up for failure. When she doesn't get better, she will feel as if she were disappointing all those who have been cheering her on. The cruelest trick we can play on someone who's dying, unless she begs for it for reasons all her own (which must be respected), is brazenly to tell her that we know that she is not dying. Far better to hold her hand and tell her, whatever comes, that all will be well. Tell her how much you love her. Let her see you cry. Tears water the soul. Tell her that wherever she journeys, she will always be with you. In fact, apart from false bonhomie, there is almost nothing you can say that will make things worse, as long as your words are inflected by love.

I have one last gentle hint for you. Be kind to the nurses. For one thing, you may very well be in their way, and they have a job to do. But there is another, more important, reason. Your kindness to them will help remind them that what they are doing is more than a job; it is a ministry. All of us who have had good hospital stays have been blessed with good nurses. With their smiles and gentle touch, even when they are obliged to hurt us, they remind us that there are people in our bodies. Nurses are heroes. Thank them for caring so kindly for your loved one. It will break through the grim routine of their work and remind them of how truly special they are.

So there you have it. I hope these little hints will ease your way a bit the next time you have the privilege of visiting a friend or loved one in the hospital. And, believe me, having learned so much at your own bedsides, I know what a grace-filled honor such visits can be.

Amen. I love you. And may God bless us all.