

## The unexpected consequences of new life

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October 7, 2015

It was the summer of 1991. I was 27 and doing my best to get through an intense unit of Clinical Pastoral Education at a large Boston teaching hospital.

During my very first weekend on call, I was summoned to help a new patient's wife. Ben, the patient in question, had been flown to Boston to undergo an evaluation for a possible heart transplant. He was around 40 and had been dealing with serious heart disease for a number of years. There wasn't any hope for his own heart. He needed a new one, or he would die.

Ben was dealing with the sudden trip to Boston, and his stay at an unfamiliar hospital, with remarkable equanimity, despite his failing health. His wife, on the other hand, was barely able to hold it together. She knew that her husband needed a new heart, but the prospect of the process was overwhelming. In addition, she was worried about their young son, whom they had left with family at home, many miles away.

We spent much of that afternoon talking, about their lives and what they were facing. I found their story compelling and I was immediately drawn in. Even though my areas of focus for CPE did not include transplant patients, I decided, in consultation with my supervisor, that I would continue to follow Ben when he was at the hospital.

After a few days of assessment, Ben learned that he had the most rare blood type, among other issues. But, he was on the list. He was sent home to wait.

A few weeks later, I learned that Ben was back in the hospital. His health had deteriorated so much that he could not stay at home any longer. He was admitted to the hospital—where he would receive a transplant or die.

I got the news near the end of my shift. Instead of going to see him right away, I went home—to think. Along the journey in the med school shuttle, I came to the realization that to spend time with Ben and his wife and sit with them in prayer

meant praying not just for the death of another, someone who would die suddenly with an otherwise healthy heart, but also for a family to have the wherewithal to donate the heart, and perhaps other organs, during a time of unimaginable grief. I was unsure of how to proceed.

The next day began with a lecture for all of the CPE students in the program—another way of delaying my visit. When I emerged from the lecture hall, one of my colleagues, who had been on call the night before, grabbed me and pulled me aside, telling me that he had been looking for me.

Ben had received a new heart overnight. His wife had been asking for me. I rushed to see her, finding her in a surgery waiting area. Just after I sat down next to her, the surgeon arrived and told her that Ben was doing well. The surgery had gone as planned. The surgeon also shared the news that Ben's new heart had come from a teenage boy who had died in an accident.

Ben's recovery was, for me anyway, nothing short of astonishing. It didn't seem to take long at all for him to be up and around. I suspect he hadn't felt so great in a very long time, perhaps for all of his life. His tall frame found new vigor. His face was bright and cheerful.

Good news all around.

Until, that is, I started to take more notice of his wife. Though she tried to hide it, she continued to be shaky and apprehensive. It seemed clear to me that while she donned a smiling face of a happy woman, she was anything but. She knew that she was supposed to be happy—happy with the new heart, happy with her husband's recovery.

But, she was not.

During a long chat over tea in a quiet corner of an otherwise bustling hospital, I learned that Ben's wife was truly struggling. She wanted to be happy, but just couldn't get there. She had grown accustomed to her life as caregiver. She had got herself settled in her life with an ailing husband and as primary parent to their young son.

Now she couldn't keep up with her husband. Ben, literally, experienced new life and all that came with it—energy, excitement, a life to live with purpose with the

extraordinary gift of a teenage boy's heart. His wife, though, struggled with the unexpected consequences of new life.

As they prepared for Ben's discharge (about a week before my 11-week program ended), I strongly encouraged Ben's wife to seek out support at home—to find a church, a therapist, a group, perhaps all of those options. It seemed clear enough that she couldn't handle the struggle by herself.

I don't know what happened to Ben and his wife and their son. But, I think about them often. I think about the lessons that I learned from traveling that journey with them, and I often think about those lessons in relationship with the church I lead.

That congregation, Old South, like other churches, says that it wants to grow, that it wants new people, that it wants to experience new life. I suspect that those wishes are genuine. But, I also sometimes wonder if the church finds ways of undermining these oft stated goals. New life has consequences after all and, truth be told, we are not always so excited about those consequences, even though we know we should be.

As Ben's wife discovered, new life has an energy and movement of its own. It takes us away from our comfort zones and pushes us out of those places where we've settled into familiar routine. New life can be hard to keep up with. It's impossible to control and manage.

We say that we want new life, new people, new energy, yet do we also find ways to resist that new life, to keep it at bay—simply because we don't feel prepared, emotionally or intellectually, to get pulled into what new life brings? It's easy to say that we want new life. Perhaps, we even know that it's something that we should be saying. But, do we really want it? Are we prepared to welcome it? Are we willing to let it capture us, to push us out of our settled, comfortable routines?

I often wonder about this. We gather in worship week after week and praise the God who brings new life, but are there limits to that praise and limits to what we say we want?

*Originally posted at [Hope in the Wilderness](#)*