

Now Let Our Souls*Thomas Gibbons (1720–1785)*

Now let our souls, on wings sublime,
 Rise from the vanities of time:
 Draw back the parting veil and see
 The glories of eternity.

Born by a new celestial birth,
 Why should we grovel here on earth?
 Why grasp at transitory toys,
 So near to heav'n's eternal joys?

Shall aught beguile us on the road,
 When we are walking back to God?
 For strangers into life we come,
 And dying is but going home.

Welcome sweet hour of full discharge,
 That sets our longing souls at large:
 Unbinds our chains, breaks up our cell,
 And gives us with our God to dwell.

To dwell with God, to feel his love,
 Is the full heav'n enjoyed above;
 And the sweet expectation now,
 Is the young dawn of heav'n below.

ΤΩ ΚΡΟΝΟΥ ΚΑΙΡΩ*In the Nick of Time***A Long Goodbye: Part One***Don Odens*

I stood at the pulpit to present a tribute and the funeral sermon for the love of my life, my wife of fifty-three years, on July 18, 2018. Later, people asked how I could do that. The answer is a combination of God's grace, long pastoral experience, and a desire to honor Gloria. In addition, a long road led to her departure from this world into eternity, what I think of as a *long goodbye*. I did not have to deal with the shock of an unexpected, cataclysmic death. Deep relief and settled hope in God's goodness, power, and promises provided an element of joy amid the sorrow.

During our dating relationship, Gloria spoke occasionally about the death of her father due to complications of kidney failure. Later, two of her sisters learned that they inherited from him the genetic condition known as polycystic kidney disease (PKD). Gloria was diagnosed with PKD in 1983. That intensified our interest in the disease and generated personal research and participation in support group meetings and conferences. PKD became a significant factor in our lives. It is the result of a genetic mutation which may be passed to successive generations. Each child born to a parent with PKD has a 50/50 possibility of inheriting it at conception. That stimulated concern that some of our children may have inherited the genetic mutation.

It was during that time that Gloria and I began to walk through "...the valley of the shadow of death," the path where the specter of death became a factor. Her father died of the disease at forty-two years of age. Hemodialysis was in the experimental stage and available to a very limited number of renal patients in the 1960s. Organ transplantation as a therapy for renal failure was also in its infancy. We became increasingly aware that PKD introduced end of life considerations.

Gloria connected with the solid tissue transplant program at the University of Minnesota Hospitals and Clinics under the care of a leader in the field of kidney transplantation. She underwent frequent consultations and tests. In 1996 it became evident that she would need an organ transplant within the next 18-24 months, so we made changes in our lives in preparation. Two of our children volunteered to serve as donors.



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www.centraseminary.edu | info@centraseminary.edu
 900 Forestview Lane N, Plymouth, MN 55441 | 800.827.1043

By mid-1998, Gloria's kidney function deteriorated sufficiently that she became a candidate for transplantation. Because she was physically tiny and the cysts on her native kidneys filled and expanded her abdomen, surgeons removed both organs. She underwent hemodialysis three times each week until her body healed from the surgery. The transplant occurred on September 10, 1998. Simultaneously, my wife was in one operating theater and my daughter (the donor) was in another. I prayed fervently while waiting in the family lounge!

Hours after surgery doctors determined that Gloria was experiencing a hyper-acute rejection syndrome. Her immune system was trying to eliminate the transplanted organ. The solution was to administer OKT3, an immunosuppressant so powerful that it may cause cardiac arrest or other allergic reactions which threaten the life of the patient. Gloria was taken to the Intensive Care Unit for the procedure. Our daughters, two long-time friends, and our pastor and his wife joined us in ICU. We prayed and sang songs of faith and hope with tears on our cheeks. Death cast its shadow, but God protected and sustained Gloria.

Organ transplantation is a life-saver, but also a life-changer. The patient is dependent on immune-suppressant and other forms of medication. End of life issues are always on the horizon. Though Gloria followed dietary restrictions and took numerous prescription medications faithfully, her health began to change noticeably in the summer and autumn of 2010. She lost weight and much of her natural vitality. By late autumn, I was deeply concerned that I was losing her. Once again, the shadow of death loomed over us.

Gloria was experiencing end-stage renal disease (ESRD). Her nephrologist gave orders to begin hemodialysis, a process in which a machine performs some of the functions of native kidneys to filter impurities and excess fluid from the blood stream. Hemodialysis is life-extending, but is only about 10% as effective as native organs. It has negative effects on the patient's body even as it extends life. When Gloria had been a dialysis patient for approximately five years, she asked her nephrologist about the life expectancy of dialysis patients. He indicated that it is less than three years! I left pastoral ministry on June 30, 2015, in order to care for her.

The most difficult part of our journey came in 2017-18, but by 2016 we were making frequent trips to Emergency Departments. Occasionally, I joked that our social life was primarily in clinics, dialysis units, emergency rooms, and hospitals.

Several months ago, Gloria said, "My life is hard." I replied, "It is hard. It is very hard. However, you can choose how you will deal with it. You can allow the difficulties to make you angry and bitter, or you can choose to be thankful for the good things." I was not preaching. I simply tried to encour-

age her. Some minutes later she approached me and said, "I choose to be thankful." Her unwavering faith in Christ, her grounding in God's promises, and her indomitable spirit helped her face the many challenges. As a couple, we were frequently reminded of our shared mortality. The long goodbye was underway.



This essay is by Don Odens, Professor of Homiletics and Expository Preaching at Central Baptist Theological Seminary. Not every one of the professors, students, or alumni of Central Seminary necessarily agrees with every opinion that it expresses.
