



HELD  
BY

God

Finding Hope that Endures  
Through Difficult Times  
by Recognizing God's Provision

LORI PHILLIPS AND LYNN WILLERS

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To our sweet Mom,

Your life taught us how to love Jesus,  
and how to trust in God.

We have been encouraged  
by your steadfast example of faith;  
that no matter the struggle, God walks with us.

We love you Mom. See you at the House!

Be joyful in hope, patient in affliction, faithful in prayer.  
Romans 12:12



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## Authors' note:

This is an account of our family's story. In cases where the interaction with non-family members is described, the individuals have graciously permitted us to include them. Some names have been excluded where requested, to protect privacy. Conversations have been paraphrased to the best of our ability to recall them and others have been shortened for the sake of interest and clarity.

The medical conditions and treatment plans described are included to support the topic. We are not physicians and our story is based solely on our own experiences. In no way do we suggest a diagnosis for others based upon symptoms and we do not advocate, recommend or repudiate any treatment of any disease.



## Introduction

Following our thoracic surgeries, we discussed the possibility of writing a book about our experiences with catamenial pneumothorax (CPT). We had learned a great deal about the condition which afflicted us and had relied upon God while struggling through each lung collapse. Although an interesting idea, we weren't sure if we had enough to say or if we had even yet discovered what God had in mind for us to learn. We put the idea on the back burner, knowing that he would provide direction at the appropriate time if that was his plan.

In retrospect, that first book idea was simplistic and naive. While we had experienced some suffering relative to what our life had been prior to CPT, it was brief compared to what awaited us. At the time, CPT was the most painful and uncertain event we had ever endured, and we couldn't imagine anything worse. Unfortunately, life did get worse--much worse. If the Lord had told us then what he had planned to allow in our near future, we surely would have crumbled to pieces. The Bible says *his mercies are new every morning*, and we believe that includes sparing us from all of the details of his plan until we need to know them.

Over the next few years we would continue with our own medical issues and then accompany our mom through the most difficult challenge of her life. Those years were not easy for our family. They were fraught with uncertainty, fear, hopelessness, and anger as well as some significant physical and emotional pain. There were times when the memories of life the way it used to be seemed far away. Sometimes we were overcome with moments of envy when we saw happy people whose carefree lives were filled with fun. Life was hard, and in the midst of our suffering, we experienced despair.

Some people may assert that Christians are not supposed to have feelings of despair or hopelessness. That kind of sentiment is not Biblical nor is it practical. While we do have the assurance of salvation in Christ

and look forward to heaven, we still live here in the meantime, and life on this planet is hard.

At times we found it difficult to keep a hopeful perspective. That didn't mean that we had what some like to call *a crisis of faith*. What it did mean was that we had to make a conscious effort to remember God's truths and to stand firm on his promises. The fact that we belong to Christ doesn't exclude us from experiencing difficult circumstances and heartbreaking emotions. The Bible is full of faithful believers who had bad things happen to them, and, during their times of trial, they experienced the same feelings that we do today. Suffering is a part of life. In fact, Jesus told us to expect times of trial.

“I have told you these things, so that in me you may have peace. In this world you will have trouble. But take heart! I have overcome the world” (John 16:33).

Christ tells us that bad things will happen. However, he also encourages us to remember that in him, our suffering need not overwhelm us. He promises us a measure of peace in the circumstance.

In our situation, God knew we had fragile emotions and were easily distracted by our pain, so he coordinated events to help us. He brought along people to support us. He spoke to us through his Word to encourage us. In short, his promise to provide for all our needs was demonstrated in practical and tangible ways.

## Provision versus Coincidence

In our skeptical society, it is tempting to dismiss any evidence of God's overt involvement in our lives as mere coincidence. In our case, many of the events we experienced were normal, everyday occurrences. However, *coincidence* implies *randomness* which contradicts the belief that God is sovereign and that all events in life are under his control. If we believe that God has a plan for each one of us and is aware of each detail in life that concerns us, then we must assume that there is a purpose in

each event that we experience. A good example of this is found in the story of Job.

Job is a righteous man whom the Lord has blessed. He is wealthy and enjoys good health. He has several children and is well respected in his community. And then for no reason that Job can discern, everything he holds dear is suddenly taken from him. His children are gone. His possessions and property are gone. His prestige, health, and even the good favor of his wife are gone. Perhaps to his friends and neighbors, Job's misfortune might look like random tragedies. From Job's own perspective, he knows of no sin that would have brought God's wrath upon him, but, being a righteous man, he does not blame God for what has happened.

“. . . The LORD gave and the LORD has taken away; may the name of the LORD be praised.” In all this, Job did not sin by charging God with wrongdoing (Job 1:21b-22).

“. . . Shall we accept good from God, and not trouble?” In all this, Job did not sin in what he said (Job 2:10b).

However, being human, Job laments his circumstances as he suffers his loss.

“What I feared has come upon me; what I dreaded has happened to me. I have no peace, no quietness; I have no rest, but only turmoil” (Job 3:25-26).

Obviously, he did not have the benefit we have today of reading the book of Job! We are afforded a perspective that Job could not see. We can read that each event affecting Job was allowed by God for a purpose and that God was still with him, despite Job's feeling of abandonment. We also read that Job's suffering had a time limit on it. Job's perspective of not knowing the details of God's plan did not make the facts of his situation less true.

In Job's story, we see how God orchestrated what we might call the *good things* and the *bad things*, both of which were used by God for his own purposes. While this might seem cruel of God to allow Job to suffer, we also read that God was not sadistic in his purpose. He had a high regard for Job, and, in time, God restored to Job all that he had allowed to be taken away.

The story of Job helped us to realize that the adverse events in our own lives could not be random. God had allowed these events to occur for a reason. If we chose to believe in his sovereignty, then we also had to believe in his promise to provide for all of our needs. We could not discount the incidents where his care was recognized as merely *our good fortune*. If he was allowing the *bad things*, then the *good things* could not be happening just by chance. When we made an effort to look for his care, we saw God's hand and were assured of his presence throughout our time of suffering.

During times of trial, people can feel alone, overwhelmed by circumstances and afraid that God has abandoned them. The fog of suffering may hamper their ability to see when God is helping them and providing for their needs.

It is our hope that you will be able to relate to our story, whether you are a CPT patient, a cancer patient, a health care professional, a parent, a sibling, a spouse, or a friend. We trust that *Held by God* will encourage you to recognize God's provision in the circumstances of your own life.

## Prologue

**I** feel awful today--too much stress, not enough sleep. I don't want to talk to anybody today. I just want to be left alone.

"So, how are you doing?"

*One more person asking me how I'm doing. How do they think I'm doing? Should I tell them the truth, or tell them what they want to hear?*

"Oh, we're getting through." That was all the encouragement they needed.

"I don't know how you do it; how you stay so strong."

*I wonder if they'd still think that if they knew how I really felt. There are some days when I detest seeing the sun come up; another morning, another day of pain and despair. The only time I can get away from it is when I am sleeping. And then there are the people, always asking me how I am doing until I feel compelled to lie to them. I am convinced that after a certain period of time, most people get tired of other people being in distress. I think they want to hear you say, "I'm doing great!" so they can get back to their own lives and stop being concerned about yours.*

"Yes, well, sometimes I do feel a bit like Job. You know, one thing after another..."

*It takes all of my energy to keep going. It takes all of my resolve to maintain hope that this suffering will end. Yes, I can relate to Job. I want to remain strong and faithful, but some days are just really hard. I hang onto hope with tired arms. I feel like I have been swept out to sea, and I am exhausted from treading water. There are times I feel like giving up on the hope that God will intervene and take this burden away.*

*I wallow in misery and despair and can see no purpose in my suffering. Yes, Job and I would have had a lot to talk about. I too, lament my circumstances and lack of understanding. Why is this happening? What did I do to deserve this? Will this ever end?*

My friend continues on, interrupting my thoughts.



“Job still had hope though. Even with all of his losses, he trusted in God’s purpose for his pain, and he knew that his faith would sustain him regardless of how bad he felt.”

This conversation refocused me on my own faith. I had a long history of trusting God in every situation. When times were good, it seemed easier to actually feel what I knew to be true. Now that life was difficult and uncertain, I struggled to stand firm. I needed to be reminded that my faith is a choice, not a feeling. The fact that I feel bad does not change what is true.

Just as the deep roots of a tree hold it securely in the ground while strong winds sway the upper limbs, I knew that my faith would not be uprooted. This storm might last a long time and I might lose some branches along the way, but God had already established a track record of faithfulness in my life. I knew that he would not abandon me in this storm.

Part One:  
Recognizing God's Provision –  
A Legacy of Faith

Train a child in the way he should go,  
and when he is old he will not turn from it.

Proverbs 22:6



## CHAPTER ONE

### *The Roots of Faith Grow Deep*

**D**uring a recent trip to Disneyland, we stopped at an outdoor restaurant on Main Street to have some lunch. Birds are abundant in the park, especially where food is served and where visitors routinely share their lunches. While watching the sparrows flit around tables on the patio, our attention was drawn to one particular bird that had flown back into the planter. The bird had settled into the dichondra grass and we noticed he was busy with activity.

Wondering what he was doing, we both peered over the planter wall to get a better look. We watched as the little bird darted from leaf to leaf of the ground cover. Each time he stopped, he drank the small drop of water held in each bowl-shaped leaf. The dichondra was like a meadow full of tiny cups, holding just enough water to quench the thirst of a little bird. Even though the day was quite warm, this small sparrow was refreshed because of the design of the ground cover foliage. The scene reminded us of a familiar hymn.

. . . for Jesus is my portion, my constant friend is he;

for his eye is on the sparrow, and I know he watches me.<sup>1</sup>

How amazing that God in designing his creation, would consider the thirst of a tiny bird. We were reminded that we can see his hand even in the smallest details of life.

Over the years we have learned that God makes himself known in many different ways. Sometimes he speaks to us through people, sometimes through circumstances, and sometimes through nature as indicated in his Word.

The heavens declare the glory of God; the skies proclaim the work of his hands. Day after day they pour forth speech; night after night they display knowledge. There is no speech or language where their voice is not heard (Ps. 9:1-3).

This is what the LORD says, “he who appoints the sun to shine by day, who decrees the moon and stars to shine by night, who stirs up the sea so that its waves roar—the LORD Almighty is his name” (Jer. 31:35).

While nature declares the glory and the magnificence of God, it doesn’t mean that he is unconcerned with the minutiae. Just as he provides water to sustain the smallest birds on a hot day at Disneyland, he sees us daily and knows our every need. In our fast-paced world, it is often difficult for us to rest long enough to consider God’s involvement in our lives, but we believe that he designed us to do just that. If we stop long enough to *look* and to *listen*, he will give us the ability to *see* him and to *bear* his voice.

These were truths learned during our childhood where a legacy of faith was handed down to us by the Christians in our family tree.

They didn’t just talk about their values; they lived them daily. They weren’t perfect people, but their examples showed us what faith in God looked like. For many years we witnessed how their determination to walk with God was rewarded time and time again by his faithfulness. This taught us that we, too, could trust in him and in his plan for our lives.

Our great-grandparents' large family of ten included our Grandma Catherine, who learned about God from her parents and witnessed their hope of heaven as they lived out their faith.

In the months preceding our great-grandmother's death, Grandma Catherine moved in with her mother to care for her. Great-Grandma always had a passion for flowers and was an avid gardener. A few days before she died, she told her daughter that she could see lights and flowers above the doorway of her room. She asked Grandma Catherine if she could see them as well.

"No, mama, you are looking through spiritual eyes, and I cannot see them."

Great-Grandma reported that the lights and flowers moved closer to her bedside each day and were right next to her bed the day before she lost consciousness.

After a few days, she passed quietly in her sleep. We have no doubt that God granted her a glimpse into eternity and allowed her to see in heaven the flowers she so dearly loved on earth. The story made an impression on us as children. It proved that God was with Great-Grandma, just as he promised he would be. It also showed that he provided exactly what he knew would bring her comfort and peace in the final days before her death, by showing her what was prepared for her in heaven.

Grandma Catherine also had a great love for flowers. As the seasons changed, Grandma faithfully planted flowers around the perimeter of her little yellow house. The doorway was flanked by blue and pink hydrangeas that seemed to be forever in bloom, while the jacaranda trees dropped their fragrant purple blossoms all over the lawn and the sidewalk. The house itself was built by our grandfather when our mom was very young. It had small rooms, heater vents in the hardwood floors, and original fixtures from the 1940's. Her house was a picture of Americana.

During our summer vacation from school, we would spend a week at Grandma Catherine's house. She would take us to the neighborhood plunge, and then to K-Mart for toy shopping. Although Grandma was

more indulgent than our parents generally were, she did not spoil us and actively pursued the same moral standards we had at home.

We witnessed Grandma Catherine's life as a steadfast example of loving God. She routinely woke early to read the Bible or listen to Christian radio. Prayer and hymns were the regular pattern for her life. She made time for God and set an example for us to do the same.

Our mom also lived her faith by example. She worked as an activity director in a nursing home for many years and very much enjoyed her interaction with the patients. Mom understood that though their bodies no longer functioned well, many of the patients still had sharp minds with thoughts, ideas, and feelings that needed to be validated. She sought to bring joy and dignity to their lives, and they appreciated her loving care. Clearly God blessed her with that ability, and "doing for others" brought her much joy.

In our own lives, she was the glue that held our family together, as moms often are. Mom expertly coordinated multiple schedules, helped with homework, sewed together drill team uniforms, and provided transportation to whatever important function was occurring. She was supportive, never failing to be interested in anything that concerned her children. We have always been close to our mom. Only eighteen years separated us, and she was our confidant. Later, when we all moved away and would call home, she would patiently listen to us chatter on and on, only stopping us to ask pertinent questions. Her intention was always for the safety and well being of her family before any concerns about herself. She was the peacemaker in the family, patiently working to smooth out any conflict that arose. We rarely saw her angry. She had a calm, gentle, and kind spirit. However, that doesn't mean that she was a pushover. She had high standards for our behavior and ensured that we always made an effort to exercise self-control. She was strict, but she provided unconditional love.

She felt that the faith of her children was the most important aspect of their upbringing. She and Dad made sure that their three kids were grounded in strong Christian values. And while their early life was not always easy, they did their best to keep the family anchored in God's Word.

Mom was seventeen and Dad was twenty-one when they got married. Shortly thereafter, she became pregnant with twins. We were born two months premature at about 3 ½ pounds each. The fact that we thrived was the first miracle in our lives! Despite Lynn's early breathing problems, God took care of us. In the four weeks that followed our birth, we became the darlings of the nursery, and the hospital staff was sad to see us finally go home. Two years later, Mom and Dad gave us a baby brother, and our little family was complete. With five mouths to feed, and money a very limited commodity, Dad would often help his brother-in-law, our Uncle Bill, with tile jobs to earn extra money.

Uncle Bill and Aunt Joella attended the same church as Grandma Catherine, and they were instrumental in bringing Mom and Dad together. They lived on three acres of ranch land surrounded by tall eucalyptus trees. When compared with the structured order of our tract-home neighborhood, their house seemed like the untamed outback. Full of hills to climb and lush foliage to hide behind, it was a place where adventures were dreamed of and then realized. We kids loved every minute spent there.

Early on Sunday mornings, while the air was still crisp, Uncle Bill would get up early to feed the horses and then go out to get donuts. We would awaken to the smell of fresh coffee and breakfast. After attending church, Sunday afternoons were spent playing outside, eating orange slices with sugar, and hunting down stray golf balls that went missing from the nearby course. Uncle Bill taught us the fine art of laughing, how to ride horses, and how to catch lizards with a grassy weed. That last skill has proven to be a worthy ability which Lori has already passed down to her own daughter, having used it recently to remove a large lizard from her neighbor's kitchen!

Over several summers, we all traveled from California to Minnesota in two campers. Our youngest cousin, Robin, was about the same age as our brother, Danny, and the four of us had wonderful adventures together. Since Dad had an interest in the Old West, we panned in the rivers of gold country and visited old mining towns. We also drove through Death Valley, stood at Mount Rushmore, stepped carefully around



the geysers at Yellowstone, and walked the plain of the Little Big Horn. We remember the grassy smell of Kansas and the smell of diesel as we pulled into yet another truck-stop gas station in the middle of the night.

“Wake up; we’re stopped; do you need to use the bathroom?” With sleepy eyes and yawns, the kids would shuffle across the pavement in pajamas to the sound of big bugs humming in the night. By daylight, we would be at the familiar pancake place we stopped at every year. In Minnesota, the kids were allowed to play with fewer restrictions than at home. Lake City was the small town where Dad grew up. It was a place where neighbors knew neighbors, and no one locked their doors. After a big home-cooked meal, the kids ran through the neighborhood playing hide and seek, while the parents sat around the bonfire on the back patio and talked. Later we would walk to the A&W Root Beer stand to buy root beer for ice cream floats.

Over the years we learned additional truths about God’s faithfulness from our aunt and uncle. Aunt Jo was a prayer warrior and found nothing too small or insignificant that she couldn’t take to God. When we were in grade school, our little dog, Honey, wandered off while we were at their ranch. We called and called for her and were very upset when we couldn’t find her. While everyone took off in a different direction from the ranch to look for the dog, Aunt Jo stayed behind and prayed that Jesus would bring our little dog back. She said that when she opened her eyes, Honey was sitting next to her. When we returned to the house, Aunt Jo told us what had happened. Although a simple story, it made such an impression on Lynn, that she wrote about the incident in her childhood diary as a moment to celebrate God’s goodness. Our aunt and uncle taught us that prayer was effective, and that God hears and answers our prayers. From their continual examples, we learned to pray expecting an answer from God.

Lori had an opportunity to pass along a similar lesson to her daughter Katie. At the beginning of the Iraq war, many Americans watched in horror, the capture of contractor Thomas Hamill. As this story aired on the news, Lori made a point to stop what they were doing and pray with Katie for Mr. Hamill’s safe return. In the weeks that followed Katie would

recognize his face on television and say, “There’s Thomas Hamill!” At bedtime Katie would think of his plight and tell Lori, “Let’s pray for Thomas Hamill.” The day he was recovered, and the news of his miraculous escape reached the airways, Lori made a point to remind Katie how God answers prayer. Katie was very excited to see that Mr. Hamill was safe and exclaimed, “We have to tell Daddy!”

Mr. Hamill’s escape was accomplished through a series of miraculous events that lead to his freedom,<sup>2</sup> not unlike Peter’s miraculous escape from prison as told in the book of Acts. Katie was able to see an example of God’s faithfulness and his ability to answer prayer.

Just as she was learning how to trust God to hear her prayers, we too learned lessons from the faithful women in our family. From Great-Grandma we learned to trust in the hope of heaven. From Grandma Catherine we learned to put God first. From Mom, we learned how to have compassion for others, and from our Aunt Jo, we learned the power of prayer.

During our childhood, we witnessed the intervention of God in our own lives and in the lives of those around us. Learning to recognize God’s provision was crucial to understanding God’s faithfulness. Those times where our needs seemed to have been met by chance were actually moments when we were met by God.

## They are Weak, but He is Strong – A Provision of Rescue

One of the earliest memories we have of God’s intervention happened when we were just six years old. We were walking the nearly one mile to school with a classmate, where we were all enrolled in the first grade (and yes, back then kids did walk to school by themselves). Along with her schoolwork, Lynn proudly carried a glass mayonnaise jar with holes punched into the metal lid (glass + first grader; you can probably see where this is going). Inside was a prized possession. A lime green

grasshopper, named “Beth” was being taken to school for Show-and-Tell time. Lynn recounts the incident as she remembers it:

Walking near the curb, I somehow slipped off the sidewalk falling into the gutter and dropping the glass jar. As I reached out to break my fall, my right hand landed on a piece of broken glass, slicing my palm open. Now on my knees, I turned my hand over and watched in horror as my small cupped palm filled with blood. The blood began to pool and run out of my hand and onto the sidewalk. Fear began to overwhelm me, knowing that both home and school were still several blocks away. I hadn’t gotten past the thought of “oh-no,” when suddenly I felt myself being lifted up. A young man, possibly a middle or high school student, came out of nowhere and picked me up. He carried me to the nearest house and rang the doorbell. A woman in her bathrobe answered the door, and he handed me to her. Meanwhile, Lori ran home as fast as she could to tell Mom what had happened. Back at the neighbor’s house, I remember being held over the woman’s stainless steel kitchen sink as she carefully and gently washed out my bloody hand. I saw my blood pour over the woman’s dishes, and was astonished that the lady didn’t seem to care about getting blood on her dishes. The lady wrapped my hand in one of her dishtowels and waited for my Mom, rocking me in a chair in her living room. A few minutes later, Mom arrived, visibly shaken. While trying to stay calm, I knew that Mom was afraid for me. She thanked the woman for her kindness, took me home, and called our family doctor.

Before leaving for the clinic, Mom prayed with me. She asked God to be with us and help the doctor repair my hand. She also asked that it heal completely without leaving any lasting damage. Knowing that I was right-handed, Mom was afraid that substantial damage would interfere with my ability to write, and, being in the first grade, I was just learning how to do that!

At the clinic, our family doctor completed the sutures saying that if the cut had been any deeper, it would have affected the functioning of my hand.

How the young man came to be there, just when three little girls needed help, is a question only God can answer. I believe God put him

into our path at just the right moment to help us through a scary situation that could have been much worse. We never knew who the boy was, and I don't really know what we would have done had he not stepped in and directed the situation. In retrospect, I don't know if I would have tried to return home or if I would have waited for help, bleeding all over the sidewalk. We might have approached a house ourselves, but I don't know how long it would have taken us to make that decision. The boy was in the right place at the right time, and I will be forever grateful to God that he was.

King David wrote many psalms reminding us that God is our source of protection.

The LORD will keep you from all harm - he will watch over your life; the LORD will watch over your coming and going both now and forevermore (Ps. 121:7-8).

The angel of the LORD encamps around those who fear him, and he delivers them (Ps. 34:7).

You are my hiding place; you will protect me from trouble and surround me with songs of deliverance (Ps. 32:7).

There are several examples in the Bible where God sends angels, or uses other people, to help someone who is in need of rescue. The book of Daniel describes a story of three friends who were threatened with death unless they agreed to worship an idol set up by the king. In obedience to God, they refused, earning them a one-way trip into the furnace.

“If we are thrown into the blazing furnace, the God we serve is able to save us from it, and he will rescue us from your hand, O king. But even if he does not, we want you to know, O king, that we will not serve your gods or worship the image of gold you have set up” (Dan. 3:17-18).

The three friends were thrown into the furnace, but God honored their obedience and kept them from being burned.

Then King Nebuchadnezzar leaped to his feet in amazement and asked his advisors, “Weren’t there three men that we tied up and threw into the fire?” They replied, “Certainly, O king.” He said, “Look! I see four men walking around in the fire, unbound and unharmed, and the fourth looks like a son of the gods” (Dan. 3:24-25).

Whether the fourth person was God himself or an angel, the three friends were rescued in a miraculous way.

Other examples are seen from our own time. In his book *A Table in the Presence*, Lt. Carey H. Cash, a military chaplain, describes vivid accounts of God’s protection of a group of U.S. Marines during the first days of Operation Iraqi Freedom.

A brigade of three thousand Iraqi soldiers chose to lay down their weapons without a fight. While they possessed tanks, anti-aircraft guns, rocket launchers, and artillery, in this instance they used none of their weapons against Coalition forces. What might have been a bloody battle became an unexpected mass surrender.

In another incident, a militant pointed a rocket-propelled grenade at a Humvee filled with U.S. Marines. Suddenly the militant’s expression changed to one of terror as he dropped his weapon and ran away. Other Marines reported seeing rocket-propelled grenades aimed straight for them, suddenly curve and veer away, as if the munitions were being diverted by angelic hands.

Those who witnessed the events believed them to be tangible evidence of God’s divine protection, as only he could have miraculously orchestrated.<sup>3</sup> Just as he has demonstrated in the lives of people past and present, so too, Lynn learned a valuable lesson about God’s divine protection that day, as she watched her small hand fill with blood. It is proof that God watches over us and will send angels or other people to

help us when we find ourselves in need of protection. It is his provision of rescue.

## Learning to Give - A Provision of Gifts Multiplied

When we were young, our parents taught us about tithing and led by example. They regularly tithed and encouraged us to do the same with our small allowance. While part of the lesson was, “we tithe because God commanded us to do so,” there was a secondary reason for tithing. Our parents recognized that sacrificial giving made a difference in other people’s lives, whether it was money or time or effort, and that God saw the attitude of our hearts when we gave of ourselves. By choosing to be generous, we would see God use our efforts, and that in turn would give us a satisfaction that the world could never give us. Lynn remembered a time around high school when this lesson was made apparent:

When we three kids received some inheritance money from a great-uncle, setting some aside for charitable giving was expected. While our parents didn’t insist that we give, they wanted us to do the right thing and be grateful for the opportunity to give back some of what God had given to us. This also gave us the responsibility of choosing for ourselves how we would be philanthropic. It was a wonderfully heady experience to have money to direct toward a cause I cared about. I chose two. Having a love for church camp and knowing there were some kids who couldn’t afford to go, I directed some money to be put aside into a camp fund for other kids. For the remainder, I chose a ministry that I learned about through a woman at my church. She was involved with an organization that supported the local children’s hospital. They worked to raise money to help families whose children were patients of the hospital and to purchase items or equipment that the hospital budget could not afford.

One Sunday, I told her I wanted to make a donation and she said that I could write a check to the organization. The following Sunday, I enclosed the check in an envelope and gave it to her before the service started. After the service, she approached us and told Mom and me how much the donation meant to them.

“This was exactly what we needed!”

She went on to explain that the organization had a specific monetary need which couldn't be met with their current finances. They had been praying that the Lord would somehow provide the funds. With tears in her eyes, she thanked me for being faithful, and said that my check was an answer to their prayer.

God often encourages one person to precisely meet the needs of another. This arrangement blesses both parties by clearly demonstrating God's hand in the middle of the situation. He meets the need of the one, reminding them that he knows and cares about their problem. Then he allows the other to see how he used them to help someone else, thereby being given the awesome privilege to work on his behalf and be a part of his plan.

Anyone can be used by God, even if we feel like what we have to offer is too small to be of any use. God can and will use whatever we are willing to give. The Gospels describe just such an incident where a boy generously gave his lunch.

A great multitude of people had come to hear Jesus speak, and he was concerned about the crowd being hungry. The disciples were worried that they had no means to supply food for all the people.

Another of his disciples, Andrew, Simon Peter's brother, spoke up, “Here is a boy with five small barley loaves and two small fish, but how far will they go among so many?” Jesus said, “Have the people sit down.” There was plenty of grass in that place, and the men sat down, about five thousand of them. Jesus then took the loaves, gave thanks, and distributed to those who were seated as much as they wanted. He did the same with the fish (John 6:8-11).

Jesus took the boy's small meal and multiplied it to meet the hunger of countless others. Although John's Gospel doesn't explicitly say that the boy was joyful about his gift, we can assume that the boy gave the loaves and fishes willingly. God's Word says that the attitude of the giver is important.

Each man should give what he has decided in his heart to give, not reluctantly or under compulsion, for God loves a cheerful giver (2 Cor. 9:7).

It also says that we are blessed when our gifts are given with a generous spirit.

A generous man will prosper; he who refreshes others will himself be refreshed (Prov. 11:25).

The lesson of provision here is that God uses people to minister to other people. He provides for the needs of some through the generosity of others.

## Shake, Rattle and Roll - A Provision of Reassurance

Sometimes, when life becomes unsettling, God uses our memories to extend comfort, taking us back to a time and place when we felt safe. Lynn remembers such a time after college when she lived in an apartment about ten miles from her new job, near downtown Los Angeles:

The building was four stories, the first floor being a parking garage for the tenants. One morning, I was just about ready to leave for work, when the apartment began to shake. With my heart pounding, I positioned myself in the short hallway leading to the bedroom and waited for the shaking to end. It was the Sierra Madre earthquake, measuring a magnitude of 5.8.<sup>4</sup> While I have always been fairly self-sufficient, movement of the ground tends to push me over the edge. Once the shaking stopped, and I detected no damage to the apartment, I proceeded on to work.

Once I got to work however, I was distracted and unsettled and found it hard to concentrate. I felt as though I was “waiting for the other shoe to drop.” Perhaps it was that underlying fear that Californians have about the San Andreas fault. Whatever the reason, I was in need of reassurance. A colleague of mine suggested that a group of us go out to lunch. He offered to drive us all in his new Lexus, and a few of us girls slid



into the back seat. As he drove, I luxuriated in the comfort of the large cool leather seats, making me feel like I was a child again, sitting in the backseat while my parents drove. He put a compact-disc into the player, and I was surrounded by the violins of Mantovani. Immediately I recognized sounds from my childhood. I hadn't heard this kind of music in years! My mom would listen to it on a radio station called *Extra Music*. When I was growing up, this type of music was known as "easy listening," but now I find that people call it "beautiful music." I sunk deeper into the seats and back into my memory.

Instantly, I pictured myself in San Diego, and all was right with the world. I was no longer an adult, but a child whose only goal was to enjoy summer vacation. The burden of responsibility was gone, and it was summer time. I could feel the warmth of the sun on my face and feel the cool ocean breeze as I saw myself at Mission Bay. I could envision the cool water lapping against the soft sand. Palm trees swayed to the tropical music of the Hawaiian Punch Village at Sea World, as we sipped fruity drinks over ice. Someone else was in charge, and I could relax. I felt a sense of peace and tranquility, remembering back to a time when I was safe and secure and knew that Mom and Dad would make sure that all was well. It was a wonderful memory and gave me a real sense of peace on a day that had not started out very peaceful.

When we face moments of anxiety, God can reassure us that he is in control of our circumstances. We do not have to remain in an unsettled state following or during an event that scares us. The disciples learned this lesson while weathering a storm on the Sea of Galilee. In the darkness, the wind and waves tossed the boat like a toy, making them fearful they would not survive the night. Jesus, on the other hand, slept peacefully through the storm.

A furious squall came up, and the waves broke over the boat, so that it was nearly swamped. Jesus was in the stern, sleeping on a cushion. The disciples woke him and said to him, "Teacher, don't you care if we drown?" He got up, rebuked the wind and said to

the waves, “Quiet! Be still!” Then the wind died down and it was completely calm (Mark 4:37-39).

His word brought calm to the wind and the sea and it continues to bring calm to the storms that plague our lives. Peace can replace anxiety.

Do not be anxious about anything, but in everything, by prayer and petition, with thanksgiving, present your requests to God. And the peace of God, which transcends all understanding, will guard your hearts and your minds in Christ Jesus (Phil. 4:6-7).

May the God of hope fill you with all joy and peace as you trust in him, so that you may overflow with hope by the power of the Holy Spirit (Rom. 15:13).

## Holding onto the Promise - A Provision of Joy

We all go through times of trials and uncertainty in our lives. Sometimes the answers will come quickly, but most often the answers are delayed longer than we would like. These times are when we learn to trust that God knows our situation, knows what is best for us, and knows the perfect time to accomplish his goal. God promises not to abandon us, so even when he seems silent in our lives, we know that he is carefully orchestrating events to bless us.

In Genesis, Chapters 15-17, there is a story about Abraham and Sarah. God promised them a son in their old age. This was an unbelievable promise in the midst of an unbelievable circumstance. In fact, Sarah laughed when she heard the promise. How could it possibly come true? Both potential parents were already past child-bearing age. Despite their advanced age and their initial doubts, they decided to take God at his word. As the years went by however, they began to lose hope. Would God really honor his promise? Perhaps he needed a little help, they thought. They did indeed try to “help” God fulfill his promise to them, which did not work out so well. Eventually and according to God’s timing, they were blessed

with a son, just as God had promised. As the fulfillment took longer than they thought it would, Abraham and Sarah had to make a choice along the way. They could choose to take God at his word and trust that the promise would be fulfilled at the proper time, or they could trust in the circumstances and deny the promise.

Early in Lori's marriage, she and her husband Victor faced such a time of choosing. The journey to their blessing was a bumpy ride, and they had to continually remember the promise God had given to them. Lori describes the journey which ended with the fulfillment of God's promise:

Within a year after our wedding, the inevitable questions began.  
“So when are you going to have a baby?”

In the first few years, we did try to get pregnant, but after a while it became obvious that something wasn't quite right, and the testing began. After several months, our worst fears were confirmed: we were infertile and would have to consider other options if we wanted to have a baby.

Advice was received from all corners, whether solicited or not. We decided on domestic adoption and settled on a local Christian agency. By selecting an agency, we would be able to complete the Home Study before placement, allowing us to be the child's guardian while waiting for the adoption to be finalized. There were other ways to adopt, but we wanted to avoid the pain of having the birth mother possibly change her mind after we had already bonded with the baby.

We arrived at the agency with high hopes and began the process with the social worker. She asked us many questions about ourselves including what kind of adoption we would be comfortable with. We were instructed to create a picture album about ourselves and our families, which were used by the birth mothers to help them decide which couples to meet with. Additional questions for us centered on acceptable and unacceptable parameters with respect to birth parents' drug use, health history, and the degree of post-placement contact we would consider. The goal of the agency was to match like-minded birth mothers with prospective adoptive parents, meeting the needs and preferences of both.

As we discussed our hopes for a child, we consistently referred to the child as *she*, which prompted the social worker to ask about our

reference. Being a Christian agency, we felt it appropriate to tell her that we believed God had promised us a little brown-haired girl, whom we had already decided to name after my Grandmother Catherine. Victor's father had a dream about a little girl with long brown hair, and we just felt that God was giving us a glimpse of what he had planned for us. Even our families already considered the little girl a "promise yet to be fulfilled" and affectionately referred to her as "Katie," which was Grandma's nickname. After relaying all of this to the social worker, she seemed to imply that this might be "wishful thinking" on our part. However, she would note our *preference* for a baby girl.

The dream about Katie reminded us that all things were possible with God, and that we could trust him with the desires of our heart. A part of those desires was the hope that Katie might even look a bit like us. Although I knew adoption was the right choice for us, I was also a little sad to think that our child might look nothing like us. I knew it was not important in the grand scheme of things, but it was a prayer I had nonetheless. Also as an adoptive mom, I was nervous about the maternal bond with my daughter, wondering if I would share that same kind of connection with Katie that I had with my own mom.

Many months passed while we waited with no word from the agency. Finally they called. A birth mother had liked our album and wanted to meet with us. We were overjoyed and nervous about meeting the woman who might be carrying our Katie. The birth mother was an outgoing, straightforward, and beautiful young woman. As we chatted, she began to tell us about herself and then added, "I don't know if you want a boy or girl, but I am definitely having a boy." Our joy turned to confusion, as we wondered why the social worker had matched us with this young woman. Although disappointed, we tried to keep an open mind as she continued to talk about herself and the birth father. His health history raised some red flags as did her statement that her pregnancy had been deemed as high risk. She also discussed her desire to remain an active part of her son's life, as she herself was adopted and had regular contact with her birth mother.

Understandably, each person who chooses adoption enters the process with different goals and expectations. Some people are comfortable with an inclusive program in the rearing of the child, while others prefer to limit contact to pictures and letters. We were rather dismayed to discover that we had been matched with a birth mother who had completely different expectations and preferences than our own.

After an uncomfortable meeting, we parted ways. We told the birth mother that we would pray about it and asked her to do the same. Victor and I also agreed not to make a decision right away, but to seriously consider if the Lord had alternate plans that we had not thought of.

The following morning, we discussed the possibility of adopting this child. If we decided to go forward, we would have to begin the adoption process all over again to find our Katie. Neither of us felt that this match was the right one, and I had to make the difficult call to the social worker to inform her of our decision to decline the match. Naively thinking that she would be impartial and understand our decision, I was unprepared for the barrage of accusations that followed. She told me that we should be grateful for any child and expressed how devastated the birth mother would be by our rejection. I felt pretty devastated myself after talking with her.

At this point, I began to question if that which we had hoped for was actually from God at all. Over the next several months I continued to struggle with questions. What if it had been God's will for us to adopt that child? But if it was, why didn't we have the desire to adopt him? Was the social worker right? Should we have been content with any child? And what about Katie? Would God bring her to us in time, or was she just wishful thinking as the social worker said? Although unborn and unknown, she seemed every bit as real to us.

Knowing God's will is an uncertainty that we all have at some point in our lives. The first litmus test is whether our desire lines up with Scripture. Obviously, God is not going to tell us to do something or promise us something that is contrary to his Word. During this emotional struggle, I was reminded of a verse in Psalms.

Delight yourself in the LORD and he will give you the desires of your heart (Ps. 37:4).

This doesn't mean that God grants all of our wishes, but that when we desire his will for our lives, our hearts' desires will align with his will for us. We can then be certain that our desires are the ones he has placed within us.

When Lynn and I were teenagers, we used to think that giving God total control of our lives meant that he would send us off to some foreign country to be missionaries! At that age, living in a jungle full of big bugs was not something we desired to do. However as we got older we learned that wherever God would call us to go and whatever he would call us to do, he would give us the desire and the ability to accomplish it.

Victor and I didn't call the adoption agency for several months after that painful episode and they made no attempt to contact us. However, knowing that we needed to proceed, we set up another appointment to again discuss the adoption parameters. We hoped that the next match would be agreeable to everyone. Once again we prayed, we cried, we hoped, and we waited.

On a brisk January morning, just after my 37<sup>th</sup> birthday, I was about to leave the house to meet Lynn for a day of antiques and tea, when the phone rang. It was the social worker. She had a fifteen-year-old birth mother in her office who wanted to meet with us. Accompanied by her mother, the young girl was due to deliver within two weeks and was expecting a baby girl. I agreed that Victor and I would meet with them the following evening and left the house to meet Lynn. I was torn between excitement and fear. What if she's not the one? After everything that happened the last time, we couldn't decline again. I knew we would be expected to accept this child. As my mind raced, I began to dwell on the fear of the unknown instead of remembering God's promise. I met Lynn at the antique mall, and standing on the sidewalk, I burst into tears. I couldn't contain my emotions and told her of my fears. She reminded me that God was in control of the situation and that we should meet the birth mother with an open mind and to give it a chance.

I walked through the antique mall absent-mindedly; looking at everything but not seeing anything. My mind was whirling with possibilities. I could hear my own thoughts going around in circles, when God seemed to interrupt the conversation I was having with myself.

*“You are denying yourself the opportunity of enjoying this because you are not trusting me.”*

Wow! He was right. I was so caught up in believing that it was *my* job to make our dream of Katie come true, I had forgotten that it was God who gave us the dream, and it was God who would bring it to fruition. I relinquished my efforts to control the situation and trusted him with the outcome. When my attitude changed, so did my level of anxiety.

The next evening we met with the birth parents who seemed just as nervous as we were. But as we talked, we discovered that we all had similar expectations of the adoption process. They told us that they had really felt a connection to us while looking through our album. And also being interested in cars, the birthfather revealed that he especially liked the pictures of Victor’s 1955 Chevy! Although the social worker encouraged them to meet with other prospective parents, they made the decision that evening to choose us to be the adoptive parents for their child.

With only two weeks before the due date, we busily wallpapered and painted the baby’s room. A few days later, the phone rang. The birth mother was in labor. We began the forty-five minute drive to the hospital just as it started to rain.

The birth mother was allowed to have two people in the delivery room with her, and, besides her own mother, she graciously chose me to be present for the birth. Victor and I had been impressed by her maturity during this very difficult and emotional time in her young life. From the first evening she had met with us, she referred to the child she carried as “your baby.” Once she had decided upon adoption, she carefully and purposefully attempted to distance herself emotionally as she made every effort to make decisions that were in the best interest of the child, however painful they might be for her. We were blessed that this extraordinary young lady chose us.

At 6:40 in the morning, Catherine Elizabeth made her debut! I was allowed to re-cut the baby's cord before the nurses took her away for a newborn evaluation. The birth mother had requested to be moved off of the maternity floor for her recovery, and was later moved upstairs to another room. Once the nurses had completed testing, Katie was swaddled and given to me to hold. They showed Victor and me how to feed her with a tiny bottle that reminded me of a little doll's bottle. I sang "Jesus Loves Me" and the "Itsy Bitsy Spider" to her as I held her for the first time. I couldn't believe we had been given such a wonderful gift. The desires of my heart were indeed from God as I gazed at our newborn daughter. She was the one we had waited for. Contrary to our expectations, her physical characteristics resembled her biological grandmother as well as her biological parents. Katie had a perfect blend of Hispanic and Caucasian features which perfectly matched our own. Although she had none of our DNA, she looked like both of us. She sported a beauty mark, which runs in my family and "angel kisses" across her eyelids and nose, which were commonly seen at birth in members of Victor's family. Even though she had no biological relationship to us, God chose to express parts of her DNA that gave her physical traits resembling us and our families. He was in control of the situation from the moment she was conceived. God knew what Katie would look like, but he wanted to know if we would trust him regardless of the circumstances.

We naively asked the nurse when we could come back the following day to take Katie home. To our surprise she told us the nursery was only for babies who needed intensive care, and that generally babies stayed with their mothers until discharge. We were assigned a hospital room, just as if I had given birth myself. Since we had brought nothing with us, Victor quickly drove home and packed an overnight bag for us. He came back with sweats to sleep in and only half of my make-up, but it didn't matter, because we were in awe of our daughter. As I held her that night, she lifted up her little head and looked around. I was amazed at her strength and determination to acquaint herself with her new world.

The next morning the sun shone over the beautiful jacaranda tree outside our window. The rain clouds had gone, and the warm sunshine had



returned. We dressed Katie in her “going home” outfit and waited for the birth mother to meet us one last time to say goodbye. She wanted to give Katie a gift, but she chose not to hold her. Again we were struck by this young woman’s maturity. The final papers were signed, releasing Katie into our custody. In God’s perfect timing, we brought Katie home as our daughter on January 26, 2000, Grandma Catherine’s birthday.

God had given us a promise, and although it seemed to be out of reach at times, he was faithful to bring it to completion. Katie is a provision of joy and a promise kept.

## Miss SoSoft is Missing! – A Provision of Finding What was Lost

Upon her birth, Katie had been given a darling pink stuffed doll. Her face was a stitching of closed eyes and a little smile. She wore a pink satin sleeping bonnet and pink satin slippers. The doll became Katie’s constant companion, especially at bed time. Katie would often fall asleep rubbing the doll’s soft satin feet. The doll was called Baby-so-Soft, so we began to call her “Miss So-Soft.” As time went by, Miss So-Soft became rather worn, but Katie would still insist on bringing her everywhere we went.

One rainy day, Miss So-Soft accompanied us to a popular antique shopping area. Even in the drizzly weather, we enjoyed a day of antiquing and stopping for afternoon tea, as we pushed Katie around in the stroller. After a few hours, Katie became weary of the sights and wanted to settle down for her nap. Lori lowered the stroller seat and tucked Katie’s blanket in around her. As she did so, she realized that Miss So-Soft was missing! That doll was such a security for Katie, and Lori knew she would be hard-pressed to explain why Miss So-Soft was no longer with us. Lori’s heart sank at the thought of Katie’s beloved friend lying somewhere in a muddy gutter or worse, in the middle of a rain-drenched street having cars run over her! Since we had no idea where Miss So-Soft had fallen out of the

stroller, we began to retrace our steps, finally working our way back to the first antique mall we had walked through.

Asking at the front counter, they assured us that no one had turned in a doll. Discouraged, we continued to search. As we walked aisle by aisle, we encountered a dealer stocking a cabinet. On a whim, Lynn approached him asking if he had seen a doll dropped in the aisle way anywhere.

He answered, "You mean a little doll with its eyes closed?"

"Yes, yes!"

He led us to another booth in the mall and pulled Miss So-Soft out from behind the counter. Lori was so grateful, and we thanked the man profusely. When the man had found Miss So-Soft, he put her behind the counter of a booth which was nowhere near where we had been. If we hadn't stopped to ask this man when we passed him, we would have never found Miss So-Soft. We believe that God had arranged circumstances so that the doll would be found and held safe until we came back, and then allowed us to stumble across the only person who knew where the doll was!

It seems like a simple story, yet it shows again how God cares for us so completely that even the simplest things that are important to us are also important to him. As moms, we care about our children's emotional security and know how difficult it is to replace the irreplaceable. As parents, these sentimental items hold an emotional attachment for us as well. They represent milestones in our children's lives. Too soon, children grow up and it is those treasured items which bring back cherished memories. The first toy, the first tooth, and artwork made by finger-painted hands are the items we keep to remember, regardless of how worn out the item becomes from years of storage. When such an item is lost, we rejoice when we find it again.

In a similar way, we are treasured items to God. Life's circumstances can often drop us into a muddy gutter with no hope of rescue. However God knows our circumstances, and, what's more, he cares about us.

In the Gospels, Jesus tells about a woman who lost a treasured item. It was a silver coin. Scholars believe that it wasn't just any coin, but

was part of a wedding dowry and therefore very important to her future. The Bible says she searched her whole house diligently, and then called her neighbors to rejoice with her when it was found. The story serves to demonstrate that God diligently “searches” for each of us and rejoices with the angels when even one of us is “found.”

In the same way, I tell you, there is rejoicing in the presence of the angels of God over one sinner who repents (Luke 15:10).

For the Son of Man came to seek and to save what was lost (Luke 19:10).

When we realize that *we* are the treasured item in need of rescue and we turn to God, he can rejoice over us with singing.

The LORD your God is with you, he is mighty to save. He will take great delight in you, he will quiet you with his love, he will rejoice over you with singing (Zeph. 3:17).

## CHAPTER TWO

### *God Meets Us in Unexpected Ways*

Over the years we've not only encountered God's provision in our own lives but have witnessed or read about his interaction in the lives of other people. Sometimes he answers prayers or meets needs through normal circumstances. At other times, the way in which God interacts with us is completely unexpected. During these encounters, we stand back in awe and watch as he provides for us through the miraculous.

In his book, *A Table in the Presence*, Lt. Carey Cash vividly describes a story about a group of U.S. Marines in Iraq who were protected from enemy fire. During a bout of heavy fighting, a Major in one battalion looked up to see a long line of armored assault vehicles (AAVs) sitting end-to-end along an overpass just ahead of them. The vehicles formed a strategically-placed steel barrier against the onslaught of munitions coming down upon the Marines. What was baffling to the Major was the absence of any unit markings on the vehicles. All military vehicles were required to have large white numbers and letters identifying the unit they belonged to, but these vehicles had no markings at all.

Days after the battle, the Major returned to the intersection where the fighting had occurred. He looked in all directions to see where the AAVs had been, but, to his astonishment, the overpass he had seen wasn't there. He was at a loss to explain how a row of armored vehicles could have been lined up on an overpass that was nowhere to be found. The protection provided to the Marines by the unmarked vehicles was unexplainable.<sup>1</sup>

While some may chalk up this account to the Major's possible confusion as to the precise location of the battle, precedence has already been set for this type of miraculous protection. A similar story is found in the second book of Kings in the Old Testament.

Elisha and his servant find themselves in the midst of a siege. An enemy of Israel has surrounded the city, with orders to capture the prophet Elisha. The servant is terrified at the sight of the army surrounding them. But Elisha knows that the situation is not as it appears to be.

When the servant of the man of God got up and went out early the next morning, an army with horses and chariots had surrounded the city. "Oh, my lord, what shall we do?" the servant asked.

"Don't be afraid," the prophet answered. "Those who are with us are more than those who are with them."

And Elisha prayed, "O LORD, open his eyes so he may see." Then the LORD opened the servant's eyes, and he looked and saw the hills full of horses and chariots of fire all around Elisha (2 Kings 6:15-17).

It is interesting to note that the angels used horses and chariots, to line the mountain top, which were the common modes of transportation in Elisha's day. Could it be possible that God used a similar mode of protection for a group of U.S. Marines, shielding them with "angel-driven" armor assault vehicles? Lt. Cash believes that God arranged divine protection for the Marines and allowed the Major to see the miraculous in

the same way that Elisha's servant had been permitted to see the invisible forces protecting them.

## A Mom with Camel's Knees

Ken Tamplin is a successful singer, songwriter, musician, and producer, who has used his talents to educate people about the genocide occurring in the country of Sudan. His CD project, *Make Me Your Voice*, focused on raising money and awareness for the victims of genocide. Ken's efforts even earned him an invitation to the White House to meet President George W. Bush when the President signed the Sudan Peace Act into law in 2002. However, we remember him best as "Kenny" from church camp, where he shared the story of his miracle with us.

Kenny's life was not always in tune with the plan God had for him. Although he initially made a decision to follow Christ at the young age of six, Kenny spent most of his youth in rebellion. He said that during his turbulent adolescence, his mother spent so much time on her knees in prayer for her family that she must have developed "camel's knees."

At the age of twelve, Kenny was attempting to make a rocket from a spent carbon dioxide cylinder. In an effort to make it go further, he pounded match heads and match powder into the cylinder, not realizing that he was making an explosive device. As he ignited the fuse to launch the rocket, the cylinder exploded and Kenny sustained life-threatening injuries to his stomach, colon, and spleen. Within a few days, peritonitis and a staph infection developed. Taking into account his injuries and the resulting infections, the doctors had little hope that Kenny would survive. Despite the prognosis, Kenny's mother continued to pray. She also asked other people to pray, and she held onto the hope that God would intervene and save her son's life. While reading the Bible during this time, her eyes fell on a verse that read, "Thy son liveth." Kenny's mom saw this as a message from God concerning Kenny's prognosis. She quickly returned to the hospital to tell the doctors that she believed God would intervene. Her newfound hope, however, fell on deaf ears, and they continued to tell her that Kenny's prognosis was very poor. Due to the spread of the staph

infection, the wound had to be left completely open. Kenny reported that the pain was unbearable. At this point of desperation, Kenny prayed for himself. He tried to make a deal with God.

“If you just save me, I swear I’ll never take another drug again as long as I live.”

Several days later, the doctors were amazed to find that the massive infection was responding to treatment. They upgraded Kenny’s prognosis. Over time, Kenny’s condition improved, and the doctors agreed that he would indeed survive. However, because the colon had been severely damaged, they prepared Kenny for the lifetime use of a colostomy bag. This was devastating news, especially for one so young. However, God had something else in mind. To the further amazement of the doctors, Kenny’s colon miraculously fused together. After just six weeks, Kenny was released from the hospital. He had survived the experience, and while he sustained significant scarring, a colostomy was not needed, and his full recovery was expected.

A similar story of miraculous healing is found in the Bible in the second book of Kings. Hezekiah becomes sick to the point of death and pleads with God to save him.

Hezekiah turned his face to the wall and prayed to the LORD, “Remember, O LORD, how I have walked before you faithfully and with wholehearted devotion and have done what is good in your eyes.” And Hezekiah wept bitterly (2 Kings 20:2-3).

God hears Hezekiah’s prayer and sends Isaiah to tell him.

Before Isaiah had left the middle court, the word of the LORD came to him: “Go back and tell Hezekiah, the leader of my people, ‘This is what the LORD, the God of your father David, says: I have heard your prayer and seen your tears; I will heal you. . . I will add fifteen years to your life’” (2 Kings 20:4-5a, 6a).

Illustrated here, are two stories and two prayers. One plea came from a powerful king. The second was uttered by a young boy. These stories show that God hears all who call to him. He is no respecter of persons. One walked with God. The other was running from God, but God saw the contrite hearts of both. He extended his love and grace to provide both with miraculous healings.

Though Kenny had forgotten about God during his adolescent years, God had not forgotten about him. Kenny's healing had given him another chance to "get it right." Kenny's story doesn't end there. In the years that followed, he experienced more evidence of God's love for him, and he eventually rededicated his life back to Christ. Kenny describes how the change has affected his life.

"If you consecrate and relinquish everything to him and get out of the way, it will shock you what God can do with your life."

Kenny reports that his greatest satisfaction comes from seeing how God has changed not only his life, but the lives of his family.

"My whole family is back to Christ. It's miraculous." Noting the countless hours his mother spent on her knees praying for her children, he added, "I attribute that to the prayers of a mother. My mom has camel's knees."<sup>2</sup>

## A Twenty-Year-Old Prayer

The sunset was still hours away when we arrived at the location for our twenty-year high school reunion. The San Diego restaurant overlooking the bay was a perfect location for the luau-themed event. Wearing brightly-colored tropical dresses and fresh orchid leis, we greeted classmates, some of whom we had not seen since we graduated.

Music from the early 1980's played as friends reunited, each summarizing their last twenty years in short sound-bites. Other classmates squealed in delight at finding friends long missed but not forgotten. During these happy conversations we were approached by one of our old friends. He was one we had not kept in contact with once we moved away from



San Diego. After introducing us to his wife, he surprised us with an odd exclamation.

“I’m so glad you’re here because I’ve been waiting twenty years to tell you something!”

We were intrigued. It sounded important. He went on to tell us about his life after graduation. His world became a series of parties, drinking, and eventually, drug use. We were saddened to hear that some of his choices had led him down such a reckless path. He continued.

“One night, I had reached rock bottom. I didn’t know how I could go on living like that. I felt as if my life wasn’t going anywhere and that I didn’t really matter to anyone. I knew that nobody cared about me.”

Our friend told us that in his desperation, he began to pray. He didn’t know if God would hear his plea, so he put God to the test.

“God, if you’re real, show me.”

Apparently, God not only heard his prayer but accepted the challenge. Our friend described the vivid encounter he had with God.

“He literally threw me out of bed and said, ‘Lynn Willers has been praying for you.’”

We were so amazed by his story that we didn’t know what to say other than, “Wow!” What a powerful and direct answer to his prayer. When our friend didn’t know if God was real, he was shown otherwise, and when he thought that no one cared about him, God showed him that he was wrong. Our friend went on to tell us how his life changed after his encounter. He rededicated his life to God. The desire to abuse drugs and alcohol left him, and he married a woman who also loved the Lord. Our friend had been waiting for the day when he could tell us what God had done in his life. His miraculous encounter resulted in a dramatic conversion, not unlike the story of Saul in the book of Acts.

In the early days of Christianity, Saul made a reputation for himself by persecuting Christians. According to the Bible, he had even been present during the stoning of Stephen, an early Christian martyr. Saul was on his way to Damascus to look for more followers of Jesus to imprison when he receives an unexpected visit from the risen Christ himself.

As he neared Damascus on his journey, suddenly a light from heaven flashed around him. He fell to the ground and heard a voice say to him, “Saul, Saul, why do you persecute me?”

“Who are you, Lord?” Saul asked.

“I am Jesus, whom you are persecuting,” he replied (Acts 9:3-5).

During his encounter, Saul is temporarily blinded and has to rely on the Christians he previously persecuted to help him. By the time his sight is restored, he is a changed man with a new mission.

Saul spent several days with the disciples in Damascus. At once he began to preach in the synagogues that Jesus is the Son of God. All those who heard him were astonished and asked, “Isn’t he the man who raised havoc in Jerusalem among those who call on this name? And hasn’t he come here to take them as prisoners to the chief priests?” Yet Saul grew more and more powerful and baffled the Jews living in Damascus by proving that Jesus is the Christ (Acts 9:19b-22).

Saul’s conversion brought a dramatic change to his life and to his purpose for living. The same man, who had previously hunted down and imprisoned Christians, became the great apostle Paul, who went on to boldly spread the message of God’s grace and forgiveness. The change in his life was so profound that it was unexplainable by those who witnessed it.

The same was true for our friend, whose life had taken a 180-degree turn following his encounter with God. Additionally, his conversion became an example of the power of prayer. Not only was our friend’s prayer answered, but Lynn’s prayer as well. Our friend’s story showed that earnest prayers don’t just evaporate once we speak them. God actually *bears* them.

He used Lynn's faithful teenage prayer to affect change in the heart and life of her classmate. He then used our friend to remind us that he hears and answers our prayers, though we may not see evidence of it right away. Even if it takes years before we know how our prayers were answered, we are admonished to pray continually. Our friend saw first-hand how God uses our prayers to reach people he loves dearly.

## Jesus in the Pool

Karla Taylor is a friend and colleague of Lynn's. She and Lynn were hired as criminalists at the same time and started their forensic science careers together. Finding that they had a lot in common, their friendship grew over the years. Karla is also a believer and has proven herself to be the most faithful of friends. Her faith in God is strong, and her example of steadfastness has always been a source of encouragement. A few years ago, that steadfastness was put to the test when Karla and her family struggled through a terrifying incident.

It was a warm July day in Southern California and the family was busy with summer activities. Karla's husband Bob watched their seven-year-old daughter Alyssa and her friend swim in the backyard pool. Although three-year-old son Connor also loved to swim, he was content to watch his sister that afternoon. Connor was dressed for play in his favorite bright orange NASCAR tee shirt and a pair of shorts. Karla attended to the family's laundry, periodically checking on them in the back yard. It was a typical summer afternoon, punctuated with the repetitious sound of the sliding glass door opening and closing. The kids laughed and played. A day of relaxation at home, the family could let their guard down.

In just a few moments, the unthinkable happened. Connor somehow found his way into the pool, unnoticed. Bob turned to see the bright orange tee shirt in the water. Racing toward the pool, Bob dove in, grabbing Connor off the bottom. Laying him on a chaise lounge, Bob checked for a pulse. Connor was blue and was not breathing. By this time, Karla became aware of the commotion and rushed to the pool. As Bob started CPR, Karla called 911.

Within a few minutes, Connor began to cough up water. Karla wrapped him in a towel, and they waited for the paramedics to arrive. Although breathing now on his own, Connor was not talking and while he was no longer blue, his complexion was very pale. The paramedics arrived and quickly evaluated him. They strapped Connor into a full-body backboard, without a cry or any resistance from him. He was conscious, but his unresponsiveness and coloring, as well as the clear sound of water in his lungs caused the paramedics some concern. They informed Karla that drowning was still possible even with just a small amount of water in his lungs. If Connor should go into respiratory distress while en-route to the hospital, there would be very little they could do to save him. They decided to airlift him to a trauma center.

The neighborhood park was a designated landing zone for the rescue helicopter. An ambulance transported Connor to the park, while the family quickly prepared to drive the forty minutes to the hospital. As they left the house and drove toward the park, the arriving helicopter could be seen in the distance. In the park, Karla could see the paramedics unloading Connor from the ambulance. She pushed back tears, as they sped past the park without stopping.

The ride to the hospital was quiet but determined. Bob tried to maintain control over his compulsion to drive faster than the traffic laws would allow, and Karla prayed. She remembers being thankful for a measure of God's grace which strengthened the couple's bond at a time when fear could have easily forced them to turn on one another with accusations.

Meanwhile, Karla's parents were already on the phone. Prayer chains spread like wildfire as the family of God prayed. They prayed for Connor's recovery. They prayed for Bob and Karla's sanity. They prayed for Alyssa's sense of responsibility. As Karla described it, "They prayed for needs that we didn't even know we had." The devotion of friends and family, who immediately came together to support them, made a lasting impression on Karla.

"It was amazing to witness the power of God's family, as he used his children to comfort one another."

Bob and Karla arrived at the hospital. The doctors decided to keep Connor overnight for observation. By that evening Connor was talking and reported that he was hungry! By the following morning, he was well enough to spend time in the hospital play room. Connor was released later that afternoon, disappointed that he would not get to ride in the helicopter again for the trip home! Once at home, Connor wanted to go swimming, and Karla consented, not wanting to promote any fear of the water in him.

After Connor fully recovered, and life went back to relative “normal,” Karla described a lingering burden which pursued her relentlessly. As is the case with most parents, Karla wanted her children to always feel safe, confident that she and Bob would protect them. Since the accident, Karla had allowed guilt to torment her as she played the scenario over and over again in her mind. She thought about the fear Connor must have had as he floated silently downward toward the bottom of the pool. Feelings of guilt would overwhelm her as she imagined her son terrified and wondering why his mother was not there to protect him. Though he’d never asked such questions of her, she wanted provide some answers for her son, and some resolution for herself. Karla gently pursued a conversation with Connor one day when he casually brought up the topic of his accident. He was rifling through his shirt drawer, when he grabbed the bright orange NASCAR tee shirt from the bottom of a neatly folded stack. Although Karla had wanted to get rid of the shirt, she did not want Connor to remember the incident with fear, so she put her own discomfort aside and allowed him to keep it. She did however seem to always place it at the bottom of his shirt drawer. On this day, he found his favorite shirt once again.

“Hey, this is the shirt I wore in the pool.”

“Yes. That’s the shirt you had on. . . Connor, do you remember what happened that day?”

“Uh-huh. I fell in the pool.”

Apprehensively, she continued.

“Were you afraid. . . when you were in the pool?”

Connor’s reply was spontaneous and matter-of-fact.

“No, I wasn’t afraid,” he said. “I saw Jesus.”

It was an unexpected and encouraging response, and Karla used the opportunity to reassure him that Jesus would always be with him, no matter where he was. Not only did God protect Connor from drowning, but he provided comfort in the middle of a frightening situation so that Connor did not experience terror during the incident.

Some people may question the ability of a three-year-old to really know whether or not he actually saw Jesus. However, a child his age would have no reason to lie. Small children have no motive for deception and frequently give innocent and honest answers about what they see and hear. In Connor's case, he instinctively knew that he was not alone at the bottom of the pool, and supernaturally, he knew the identity of who was with him. Connor accepted what he saw without question.

His story is not surprising when we consider what Jesus himself had to say about the awareness of children. On several occasions, he referenced the way in which they accept truth without suspicion or prejudice. He even admonished adults to follow their example of humility.

At that time the disciples came to Jesus and asked, "Who is the greatest in the kingdom of heaven?"

He called a little child and had him stand among them. And he said: "I tell you the truth, unless you change and become like little children, you will never enter the kingdom of heaven. Therefore, whoever humbles himself like this child is the greatest in the kingdom of heaven" (Matt. 18:1-4).

The Lord never found the naivety of children to be annoying, even if the disciples seemed to think that children were not worthy of Christ's attention. Although the disciples probably saw children as messy distractions, Christ did not. On the contrary, he valued their honesty and innocence.

Then little children were brought to Jesus for him to place his hands on them and pray for them. But the disciples rebuked those who brought them.

Jesus said, “Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these” (Matt. 19:13-14).

Perhaps because their attitudes have not yet been tainted by life’s experiences, children are more able to grasp God’s truth in a literal way which many adults find very difficult to do. Jesus himself acknowledged that God grants children an awareness that tends to diminish in adults as “man becomes wise in his own eyes.”

At that time Jesus said, “I praise you, Father, Lord of heaven and earth, because you have hidden these things from the wise and learned, and revealed them to little children. Yes, Father, for this was your good pleasure” (Matt. 11:25-26).

Connor understood the simple truth of God’s presence. Jesus provided comfort and peace during Connor’s ordeal so that he was not afraid. Additionally, God addressed a need of Karla’s in prompting Connor to share what he saw. Her provision was two-fold. First, she was provided insight into the situation which helped to relieve the anxiety she had about Connor’s fear. Second, God reminded her that the presence of Jesus which comforted Connor in the pool was the same presence promised to her each day. If Connor could be comforted, then so could she. If she would relinquish the guilt, fear and anxiety about the incident, God would replace those feelings with the same peace he provided to Connor. Jesus asks all of us to come to him with the faith of a child. Karla realized that it was just as important for her to do that as it was for her son. Connor’s story reminds us that Jesus is closer than we think, and that the truth is not complicated if we approach it with the attitude of a child.

## Remembering God's Provision

*Recognizing* when God steps into our lives, is paramount in maintaining hope through difficult circumstances. However, *remembering* when he does is as equally important. If we recognize but fail to remember, then we are destined to have to learn the same lessons of faith over and over again. While there may be many reasons we fail to keep God's faithfulness at the forefront of our minds, forgetfulness is not a modern day problem. Apparently the Israelites were similarly affected. There are several stories where God delivered his people, provided for their needs, and allowed them victory over their enemies. However, after the initial jubilation, life returned to normal, the mundane set in, and they started to forget. When their level of gratitude waned, they developed an attitude of self-centeredness.

But they, our forefathers, became arrogant and stiff-necked, and did not obey your commands. They refused to listen and failed to remember the miracles you performed among them (Neh. 9:16-17a).

[they] . . . did not remember the LORD their God, who had rescued them from the hands of all their enemies on every side (Judg. 8:34).

You may say to yourself, "My power and the strength of my hands have produced this wealth for me." But remember the LORD your God, for it is he who gives you the ability to produce wealth, and so confirms his covenant, which he swore to your forefathers, as it is today (Deut. 8:17-18).

Daily life distracted them, moving their focus away from God and his faithfulness. Knowing their propensity for distraction and short attention spans, God specifically tells them to remember what he had done for them. In one incident, he instructs them how to do this.



“Each of you is to take up a stone on his shoulder, according to the number of the tribes of the Israelites, to serve as a sign among you. In the future, when your children ask you, ‘What do these stones mean?’ tell them that the flow of the Jordan was cut off before the ark of the covenant of the LORD. When it crossed the Jordan, the waters of the Jordan were cut off. These stones are to be a memorial to the people of Israel forever” (Josh. 4:5b-7).

God wants us to remember his goodness so that we can be grateful for his provision and understand the love he has for us. Remembering also allows us to take comfort in his care, especially in times of hardship. He doesn’t want us to be afraid that we must rely on our own strength to battle our problems. He wants us to rest in his strength with the assurance that he has held us in the past and will continue to hold us in the present and in the future.

Imagine how we would feel if our children woke up every morning afraid that we might not feed them that day, or wondering if we would throw them out onto the street to fend for themselves. What distress it would give us as parents to have to continually remind our children that we love them and that our primary responsibility in life was to see to their care.

What if we had to start every morning with the same conversation?

“Since you were born, I have clothed you and fed you. I’ve tucked you into a warm bed at night and read you stories. I’ve picked you up when you fell down and held you close when you were scared. Doesn’t my faithful care show you how much I love you, and give you the assurance that I will continue to take care of you?”

God feels the same way when we don’t remember his goodness to us.

Again and again they put God to the test; they vexed the Holy One of Israel. They did not remember his power - the day he redeemed them from the oppressor, the day he displayed his miraculous signs in Egypt, his wonders in the region of Zoan (Ps. 78:41-43).

God wants us to remember his faithfulness and to teach our children to do the same.

Only be careful, and watch yourselves closely so that you do not forget the things your eyes have seen or let them slip from your heart as long as you live. Teach them to your children and to their children after them (Deut. 4:9).

Remembering God's faithfulness gives us the strength we need to face the unexpected challenges that life may throw at us. Remembering gives us the courage to face the future without fear.



Part Two:  
Relying on God's Provision –  
When Life Get's Overwhelming

“For I know the plans I have for you,”  
declares the LORD,  
“plans to prosper you and not to harm you,  
plans to give you hope and a future.”

Jeremiah 29:11



## CHAPTER THREE

### *Pneumothorax Twins*

There seemed to be standing room only at the Urgent Care Clinic. Apparently there were a lot of people who also didn't feel well. It was a few days after Christmas and Lynn was short of breath, convinced that a cold had settled into her chest as bronchitis. She sat in the waiting room about an hour before being called back. Lynn recounts what happened that day:

The doctor listened to my lungs with a stethoscope and then measured my lung function with a spirometer. After a chest x-ray was taken, I was ushered back to the examination room to wait for the doctor. Several minutes later he came back into the room and sat down on the examination table next to me. I thought that was very odd. Before I had time to wonder why the doctor and I were both sitting on the exam table together, he cautiously posed a question.

“Did you drive yourself here today?”

Uh-oh, I knew that type of a question could not precede good news. I stated that I had driven myself to the office. With the utmost care he calmly continued.

“Your lung has partially collapsed, and I have called an ambulance to take you to the hospital.”

I was stunned and confused. “What? What do you mean, my lung has collapsed? How could that happen?”

The doctor did his best to stem any panic on my part. He explained that sometimes air can get into the pleural space which is the fluid-filled area between the lung and the chest wall. Much like making an indentation into an inflated balloon by poking it with your finger, the trapped air within the pleural space causes the lung to partially deflate.<sup>1</sup> He went on to explain that doctors can remove the air by inserting a needle into the pleural space and removing the air by aspiration.<sup>2</sup> He assured me that all would be well, and that the emergency room doctors at the hospital were well equipped to perform the procedure. The staff ushered me to another room to wait for the fire department.

The paramedics and firefighters arrived, and the staff pointed them in my direction. They looked at me, looked at my x-rays, looked back at me, looked back at my x-rays and started asking me questions.

They asked if I had fallen down stairs or had some other sort of accident that could account for my condition. I assured them that I hadn't experienced any trauma, but had been short of breath the last few days.

They turned back to my x-rays, and talked among themselves, in the kind of low-toned voices people use when they want to talk about you in your presence. I kept hearing, “100% pneumo.” I didn't know what that meant, but I knew from their demeanor that it wasn't good. They continued to ask me questions, and I got the distinct impression that they were surprised I was conscious. I was helped onto a gurney, given oxygen, and wheeled out past all of those people in the waiting room with whom I had just been sitting a few moments earlier. I still couldn't believe what was happening. I had never been to the hospital before and had no idea of what to expect.

In the emergency room, the doctor confirmed that I had a 90% pneumothorax, which meant that my right lung was 90% collapsed and only 10% inflated. He then explained how they planned to evacuate the air from the pleural space. Unfortunately, it would be a bit more complicated

than an aspiration needle. I was to be given a thoracostomy, commonly known as a “chest tube.”<sup>3</sup> He also explained that only a minimal amount of local anesthetic would be used, because they didn’t want me to stop breathing. I would get two local shots of lidocaine, while they bored a hole between two of my ribs and into my chest cavity. The shots were somewhat successful, and the pain was not as bad as it could have been. The movement, though, was very unsettling. I could feel a lot of pushing and tugging, as they tried to move the tube into the correct position. Once the tube was in place, the doctor told me that they were going to turn on the suction. I had never felt so much pain in my life. As the air was sucked out of the pleural space, the lung re-expanded to meet with the chest wall. Although it happened quickly, it was very painful. Just as my cry of pain started, it was interrupted with uncontrollable coughing. It was very hard to even take a breath in-between coughs. My body felt like it was under siege, and I had no control over it. After several minutes, the coughing subsided, and I was allowed to rest. The staff assigned me to a room, and I was left alone to wait for my family to arrive.

In my medicated state, I took a slow inventory of my surroundings and found that I was attached to something on all sides. The chest tube ran out of my right side and into a rectangular box at the foot of my bed. It contained one compartment for wound drainage and a second area for water and suction. The suction part of the box was attached to a vacuum nozzle on the wall behind my bed. The chest drain apparatus provided a continual vacuum to evacuate air, while allowing scar tissue to form between the lung and chest wall.<sup>4</sup> It made a constant bubbling sound making it seem as though I was attached to a fish tank. To my left was a morphine pump. It was also plugged into the wall, and the intravenous tube had been inconveniently inserted into the middle of my left arm. This required me to keep my arm straight at all times. If I bent my arm, an alarm would sound until I straightened it out again. As a result, I only had use of my right hand.

During the first evening of my hospital stay, I had been asking to use the bathroom. Not only were the multiple bags of saline rapidly clearing through my kidneys, but I had started my period the day before



and was in urgent need of fresh feminine products. A nurse answered the call button and brought me a bed pan which she shoved beneath me before walking out of the room, indicating that she would be back later. Just then a respiratory technician came in, told me that I needed a breathing treatment, put a tube in my mouth (which was also attached to the wall), and he too walked out. I struggled to use the bed pan, change a tampon, and breathe into the tube while holding myself up with one arm, trying to avoid bending the other arm, and trying not to get blood on the sheets. Needless to say, I failed miserably. I was so angry. *How could they leave me to do all this by myself? Did I look like I could do this alone?* I was at the point of completely losing control. I was afraid, uncertain about my future, in the hospital for the first time, alone without my family, in pain, and left to do for myself that which I was obviously unable to do. It sent me over the edge. I took the breathing tube out of my mouth, threw it onto the floor, and began to sob. The stress of the day had finally gotten to me, and I felt unable to cope any longer.

Between my sobs, I heard a sweet little voice calling out to me.

“Honey, Honey, what’s wrong?”

It was not one of the nurses. It was another patient; an elderly woman who was assigned to the bed next to mine. A curtain had separated us since my arrival, so I hadn’t seen her. I don’t know why she was in the hospital, but she had the strength to get out of her own bed and come around the curtain to mine. I sobbed out my frustration and my fears. She expressed her empathy and agreed that I should not have been expected to help myself. She ventured out into the hallway and located a nurse to help me. The new nurse was very compassionate, and calmly said that they would make everything right. She called an aid, and the two of them changed my gown and my sheets and made sure that I was clean and comfortable. She also brought a bed side commode to make it easier for me to use the bathroom without having to call a nurse each time to disconnect me from the wall.

Over the next three days, I was encouraged to use the morphine pump as often as needed. As a result, I was in and out of consciousness, and, except for the bedside commode, I never left the bed. I was nauseous

from the morphine so my food trays came and went, mostly untouched. Depressed, I watched people on television ring in the new year. They were happy and carefree. I was fearful, anxious, and felt as though I had been sent to prison. The only bright spot had been the kindness of my elderly roommate. She reminded me of my grandmother, and I remember how grateful I was for her intervention. Knowing that she could have been assigned elsewhere, I believe God had arranged for us to be roommates, specifically to help me through that first scary night in the hospital. She would be one of many caring people put into my path as I traveled down this new road.

For the next few weeks, I recovered from my chest tube at home. I still could not understand how my lung had collapsed. I had been diagnosed with a spontaneous pneumothorax. It is called spontaneous because the collapse can occur without warning and for no apparent reason. The thoracic surgeon who placed my chest tube told me that sometimes lung collapses are due to the rupture of blebs, which are blister-like appendages on the lung or pleura.<sup>5</sup> He said that it is unclear why some people get blebs or why they burst. This gave me little comfort and left me very uneasy, wondering if my lung would collapse again. My job as a criminalist included using a respirator while responding to field calls. This required me to be re-certified annually and pass a spirometer test. I was nervous about what this incident would mean for my current assignment. I knew that in the short term, I would be removed from the on-call rotation, but what about the long term? Would this collapse adversely affect my job?

Once my family returned to their own homes, I was left alone in mine to contemplate the future. I felt alone and afraid. My world was unstable, and I needed encouragement. I was reminded of a similar state of mind just one year prior, when I was in the midst of a very different kind of suffering.

## Jesus and the Folding Chair

When our world is in turmoil we often cry out to God for help. Sometimes we feel alone because we cannot see him. In our loneliness, we

may talk ourselves into the false belief that he must not be able to see us either. *If only our cries were louder or reached higher, we might be able to catch his attention, and he would listen to our plea.* Our suffering can sometimes cloud our clear thinking, because God *does* hear us and is concerned with every cry we utter.

At a very painful time in my life, my marriage had ended, and I made such a cry to God. I was listening to a song about being enveloped in God's love. It caused me to think that many times it seems as though God is *far away* or *far up above us*.

*When I think about where God is, I look up into the starry night and imagine him in the vastness of space. I feel so small and inadequate. In my mind's eye, I see myself struggling to reach out to him.*

*"Lord, where are you? You feel so far away. Lord, I need you. I can't do this by myself." I am broken and desperate. And then in a moment, I see myself distracted. The voice is calm and quiet.*

*"Shh..look at me. I'm right here."*

*My gaze falls from the sky to my Lord. He is right in front of me holding both my hands in his own. We are sitting on tan metal folding chairs facing one another.*

*"Listen to me, I'm right here."*

The picture was so vivid, it caught me off guard. I know that it was my misplaced focus that caused me to feel that God was far away when in fact, he is always near. I believe that he was reminding me, *"I'm right in front of you. I always have been, and if you will slow down and be quiet, I will talk to you, and you will hear my voice."*

Later, I wondered about the significance of the metal folding chairs. I remember chairs like that from grade school. They were always cold, hard, and uncomfortable, just as life can sometimes be. During his

time on earth, Jesus experienced all of the difficult aspects of human life that we face daily, so he knows how we feel. I believe that Jesus was reminding me that he was sharing my cold, hard, and uncomfortable world at my level. He was not sitting far away in heaven, aloof, delegating his staff to answer my call. He was attending to my needs himself and sat on that cold hard chair to reassure me that I was not alone. I should not have been surprised since he promised he would do just that.

“. . . And surely I am with you always, to the very end of the age” (Matt. 28:20b).

## A Second Pneumothorax Brings Hope

I had been back to work about two days when I experienced a moment of dizziness while sitting at my desk. I walked into the lab encountering two of my colleagues.

“I think I’ve had another collapse.”

“Do you want us to call the paramedics?”

I did not want to be paranoid, but I was also worried that I might be experiencing another medical emergency.

“Yes, call them, and go get Karla.” I went back to my office and sat on the carpeted floor next to my desk.

Karla was at my side almost immediately and promised to stay with me. The paramedics arrived and began their monitoring and questioning. I told them of my prior pneumothorax a month earlier. By now, I was hyperventilating, nervous that I might need another chest tube, and scared that I didn’t understand why this should be happening again. Dealing with an emergency situation at my desk was surreal. My work area is filled with photographs of family, pictures of gardens and other things Victorian and floral, making it a little bit of home-away-from-home. I felt as if I were watching my life disappear while I fell into a deep well. Last month’s bewilderment had now been replaced with panic. “How could this be happening again? What does this mean for my life? What if this won’t stop happening? I will run out of sick time. How will I be able to pay my

mortgage? I could lose my house. . . .” Fear is a terrible cesspool, and once you start spinning around, it is a difficult spiral to escape.

When the situation is overwhelming, we can lose our grasp of what keeps us stable. Our minds run through all the “what if?” scenarios, leaving us desperate for answers and needing assurance that everything will be okay. At those times, our most immediate need is for someone to reach out and stop us from spinning. During my second ambulance ride in a month, my friend, Karla, was the steady hand that pulled me back from the brink of panic. She rode in the ambulance with me and stayed by my side in the emergency room as the doctors determined that I had in fact suffered another pneumothorax. While I was still fearful, Karla kept my mind focused on taking one step at a time, instead of letting my emotions run amok.

The collapse was only 20%, so I was given the option of a Heimlich valve, which is a small portable chest tube that passively allows the air in the pleural space to escape.<sup>6</sup> This meant that I could go home and follow up with my primary care physician in a few days. The tube was placed into my upper right chest using a radiologic fluoroscope.

In the course of several questions, I mentioned to the doctor that in searching the internet after my first collapse, I had read about a type of pneumothorax that coincided with a woman’s menstrual cycle. My first collapse had occurred one day after my period started, and this second collapse had also occurred during my period. He too had heard of that type of collapse associated with menses and left to get some information for me to take to my primary care physician. He returned with an internet document describing a rare condition known as catamenial pneumothorax. He agreed my symptoms were consistent with that condition and suggested I follow up with my doctor for a referral to a thoracic specialist.

At last, a valuable piece of information! In a whirlpool of uncertainty, I had been pulled out and set upon a rock. While not a complete picture, a definite signpost had been revealed. I had a possible diagnosis and a significant lead to follow. I had a course of action, and that gave me a tremendous boost of hope!

He lifted me out of the slimy pit, out of the mud and mire; he set my feet on a rock and gave me a firm place to stand (Ps. 40:2).

With the Heimlich valve in place, I was finally released. The ride home from the hospital was excruciating. The anesthetic from the chest tube placement was just starting to wear off. If I kept very still, the pain was tolerable, but it was impossible to keep still in the car. Every bump in the road sent a jarring pain through my chest. I was exhausted and the pain made tears inevitable.

Finally, at home I was able to take some pain medication and get some rest. Even so, the constant noise from the chest tube was unsettling. The exhaust port for the tube was taped to my chest, so I could hear the air escaping from the pleural space as it evacuated. Between that and the crackling sound my lung made when I inhaled, I began to leave the television on a lot, to drown out those sounds.

Gratefully, I was not alone for the first week. My mom had taken time off from work to care for me. Her constant companionship was invaluable. Mom always came to the aid of her children, no matter what the cost or inconvenience to herself. She ensured that I had meals and medication. She looked after my dogs, my house, and helped me write checks to pay my bills. She drove me to the radiology center and to my doctor's appointments. Mom was with me when I saw my primary care physician to discuss changing my diagnosis from spontaneous pneumothorax (SPT) to catamenial pneumothorax (CPT).

In the interim, Lori and I both scoured the internet looking for information about CPT. From literature abstracts and medical web sites, we learned that CPT was a condition associated with endometriosis. According to the literature, in some cases endometrial implants are not confined to the pelvis but can be found in unexpected places like the on the lung or the pleura. While there is disagreement among doctors about how the implants migrate to other areas, there is wide agreement that they bleed every month just like implants commonly found in the pelvic cavity. The literature states that it is the bleeding into the pleural space that causes the lung to collapse.<sup>7</sup> Well, that made sense! Lori had already been

diagnosed with pelvic endometriosis from a needle biopsy, and we both had similar menstrual issues of severe pelvic pain and heavy periods. Endometriosis seemed to be a plausible diagnosis for me as well.

We also learned that the condition is usually diagnosed after a correlation is made between the timing of the collapses and the patient's menstrual cycle. Since spontaneous pneumothorax is not related to endometriosis, collapses can occur at any time of the month, but because the condition of CPT is so rare, women are often misdiagnosed with spontaneous pneumothorax until the correlation with menses is recognized.<sup>8</sup>

After one week the collapse had not resolved, and my doctor referred me to a pulmonary specialist. The specialist recommended chemical pleurodesis, which is a standard treatment for reoccurring spontaneous pneumothorax.<sup>9</sup> This procedure is designed to chemically burn the tissue surrounding the lung so that the resulting scar tissue will help the lung stay adhered to the chest wall.<sup>10</sup> Although literature was scarce, it did show that when CPT patients were misdiagnosed with SPT, and then given a standard treatment of chemical pleurodesis, they experienced a high rate of reoccurrence. This is because the procedure does not affect the endometrial implants, which continue to bleed every month.<sup>11</sup> Video Assisted Thoracic Surgery (VATS) was the treatment of choice for CPT patients, in order to remove the endometrial tissue causing the bleeding. I shared my newfound knowledge with the pulmonary specialist. He was not quite so enthusiastic. In fact, he flatly dismissed the possibility.

“You couldn't possibly have that. The condition is very rare. You need to have the pleurodesis.” After a terse conversation, I told him that I wanted to discuss treatment options with my doctor.

“Your doctor is relying on my expertise to make the decision for him.”

After I left his office, the pulmonologist proceeded with his plan for my treatment by contacting the local hospital and scheduling me for admission. The hospital called me at home asking when I was going to arrive. I refused to show up at the hospital and called my doctor. My

primary care doctor patiently listened to my concerns as I explained our research efforts and our theory about my condition.

“I would like to talk to a thoracic surgeon to see if I can be considered for VATS.”

After a few moments of discussion he responded.

“Okay, you’ve convinced me. Your theory is reasonable, and I agree that consulting with a surgeon is warranted.”

My doctor cancelled the pleurodesis treatment and arranged to have me admitted to a different hospital where I would have the opportunity to consult with the surgeon about a more aggressive treatment plan.

To his credit, my doctor was caring, open minded, and was more loyal to the needs of his patient than to the ego of another doctor, who was reportedly quite annoyed that his opinion was discounted for that of the patient’s. Within my health plan, my doctor gave me two referrals: one for a thoracic surgeon to evaluate the lung issue and one for a gynecologist to assess the endometriosis issue.

The gynecologist was the first doctor to visit me in the hospital. He had been practicing medicine for decades, originally on the east coast. With his outspoken New York accent and attitude, he said exactly what was on his mind! He had quite a different “doctor demeanor” than I was used to, but his unique personality made him an instant favorite with his patients. His first suggestion for treatment was to use a synthetic hormonal drug to induce chemical menopause. I understood it to have similar side effects to a drug Lori had been prescribed for endometriosis. After receiving just one injection of her drug, she had bled for nearly ten months and became anemic.

“I don’t want to use a synthetic hormone.”

“Well then, you need to have a hysterectomy.”

“That just seems like such a drastic measure. Do I really need to do that? If the implants could be removed surgically during VATS, wouldn’t that be a better alternative?”



“Well I’ll tell you what, do the VATS, and if you find that it doesn’t solve the problem, we can always do the hysterectomy later. It’s up to you.”

“How about we make the hysterectomy Plan B?”

“Okay, that’s what we’ll do.” He left my room, promising to check in on me the following day. Over the next week, the doctor stopped by during daily rounds where his visits were always a highlight of each day. Sometimes he arrived in scrubs, sometimes in shorts and tennis shoes wearing a ball cap. Most of the time, Mom or Lori were also in my room, and the doctor would carry on hilarious conversations with the whole family. All the laughing would jar my chest tube, and, holding my side, I would chide him, “Stop making me laugh!”

One day he eyed my uneaten breakfast.

“Hey, are you going to eat that? I didn’t have any breakfast this morning.” He headed out the door with a mischievous smile on his face, eating one of the pancakes from my tray. The doctor’s quirky sense of humor provided valued moments of levity and a welcome distraction during this uncertain time.

Although I had already talked with the gynecologist, I had yet to discuss my case with the thoracic surgeon. I met him a few days later, and his demeanor was 180-degrees in the opposite direction from that of the gynecologist. While he did admit to having encountered one other case of CPT several years prior, involving a patient with an implant on her lung, his overall approach to my case was reserved and methodical.

He questioned me about my lack of any “official” diagnosis of endometriosis.

“What makes you think you have endometriosis?”

I volunteered that my identical twin sister had been diagnosed with pelvic endometriosis from a biopsy, and that we both had similar menstrual symptoms. To bolster my claims, I also mentioned that we both had periodic incidents of bloody stool, which only occurred during menstruation, indicating possible endometriosis in the bowel as well.

Whoops! Too much information! Note to Self: Don’t tell the doctor something that will most likely lead to a procedure you would really

rather avoid. . . I spent the next several hours prepping for a colonoscopy, all the while trying to convince the surgeon that it was just endometriosis and not something worse. To his credit, he obviously had to rule out cancer as the cause of a bleeding bowel. After my colon received a clean bill of health, I was scheduled for surgery.

During VATS, the surgeon would place two or three tubes between the ribs and into the pleural space. Through one of the tubes (or ports), a small fiber-optic camera would allow the surgeon to view the outside of the lung, the pleura and the diaphragm. Surgical instruments placed through the remaining ports would allow the surgeon to remove blebs or repair damaged tissue. This procedure would be less invasive than a traditional thoracotomy, which involves a much larger incision into the chest and more trauma for the patient.<sup>12</sup> The plan was for the surgeon to look for endometrial implants on the lung and to remove them.

During surgery he evaluated both the lung and surrounding pleura. He did find the pleura quite scarred indicating a history of several smaller collapses which had resolved themselves, but he did not find any implants or blebs. However, when he evaluated the diaphragm he noticed several dark spots. As soon as he touched one of the spots with the probe, it immediately peeled away to reveal a hole in the diaphragm. Because the diaphragm was in need of repair and not the lung, the surgeon had to re-orient the ports in order to get the instruments in the proper positions to reach the diaphragm. To do this, he made an incision between two of the ports, creating a six-inch “mini thoractomy.” He sutured the holes in the diaphragm and performed a pleural abrasion with talc. This procedure is often done during VATS, and is a type of mechanical pleurodesis. The talc is sometimes used to help with the adhesion process.<sup>13</sup> With the surgery complete, he placed a chest tube, and I was sent to recovery.

During my recovery time at home, we went back to the internet and looked for more information about CPT, this time looking for references concerning diaphragm involvement. This second search yielded more information than the first, and we found articles describing diaphragmatic fenestrations or holes in the diaphragm.<sup>14</sup> The diaphragm is the large muscle that separates the chest cavity from the abdominal cavity.

It is also the muscle which moves up and down physically aiding the lungs with breathing. The speculation is that during menstruation, endometrial implants embedded in the diaphragm bleed, eventually causing holes to form. The theory follows that air from the abdominal cavity moves through these holes and into the pleural space, partially collapsing the lung.<sup>15</sup> In some cases, a tissue biopsy of the holes was confirmed to be endometrial tissue. The new collection of literature abstracts also revealed that this manifestation was actually more common than endometrial implants on the lung or pleura. Additionally, the best reported treatment was diaphragm repair.<sup>16</sup> Thankfully, my surgeon had found the holes and had repaired them. We were even more convinced that VATS was the answer to CPT, and we were hopeful that the diaphragm repair would prevent any further collapses. The details of my experience would become vital as a new turn of events began to unfold just a few weeks later.

## Been There, Done That

During the two months Lynn was in and out of the hospital, Lori was making the hour-long drive back and forth. Shortly after Lynn's surgery, Lori began to experience episodes of dizziness and extreme fatigue. Following several months of heavy bleeding from an injection of a progestin, she attributed the fatigue to anemia and exhaustion. However, after a few weeks, shortness of breath caused her to seek medical attention.

Her primary care physician was unable to see her for two weeks, so she went to an Urgent Care facility. Taking into account Lynn's recent problems, she requested a chest x-ray to rule out a collapsed lung. Since the x-ray technician was only on-call on Saturdays, the doctor was less than enthusiastic about ordering an x-ray.

He listened to Lori's breath sounds with a stethoscope, declared they were normal, and adamantly assured her, "There is no chance of a pneumothorax."

She left the office with no x-ray and no answers. By Monday afternoon, her condition had not improved so she went back to Urgent

Care, this time, seeing a different doctor. For a second time, Lori requested an x-ray. Thankfully, the doctor consented. Lori describes her visit:

While I was in the exam room, I could hear the doctors in the hallway discussing my x-ray films. As I overheard “Who saw her on Saturday?” and “pneumothorax,” my heart sank. There was that word again. My mind began to turn over what a collapsed lung would mean for me and my family. The doctor came in and gave me the bad news.

“You have a 60% lung collapse on the right side. You need to go to the hospital where they will re-inflate your lung with a chest tube.”

Diligently I tried to explain to the doctor that what I probably really needed was VATS surgery, but it was difficult to convince him that I had a condition he had never even heard of.

He insisted, “All you need is a chest tube.”

I knew that a chest tube alone would not provide a long-term solution if I had CPT. If this was the cause of my collapse I needed VATS, and chose instead to continue this conversation with the emergency room doctor.

While I waited in the hospital exam room, a kit was set out on the counter in front of my bed. I stared at it and it stared back, emblazoned with the bold letters, “CHEST TUBE.” I remembered how Lynn described her first chest tube insertion in the emergency room, so I knew that being awake for this procedure would be no easy feat. If I needed a chest tube, having it placed during VATS, under anesthesia was my best option. Again, I carefully explained the situation, hoping that the ER doctor would listen long enough to actually consider what I was saying. While his first inclination was to resolve the emergency situation with a chest tube, he did consider my unique situation and agreed to temporarily forgo the chest tube until a thoracic surgeon could be consulted. I met with the on-call surgeon who talked with me about the possibility of a CPT diagnosis.

Because the condition was so rare, the surgeon admitted me to the hospital and arranged for me to see a more senior surgeon the next day to evaluate my need for VATS.

The thoracic surgeon arrived early the following morning. He was a kind and humble man who had been practicing medicine for several

decades. He listened intently while I described all that had happened in the last month. I told him about Lynn's history of collapses, the endometriosis involvement, and her surgeon's surprise at finding holes in the diaphragm. Like Lynn's surgeon, this doctor had also seen at least one prior case of an endometrial implant on the lung. During the consultation, he agreed that VATS was necessary, but was a bit skeptical about the diaphragm involvement. He thought it more likely that blebs were the cause of my collapses. Even so, he did consent to perform VATS and pleurodesis, and assured me that he would thoroughly evaluate the diaphragm during surgery.

This was my first hospitalization and I was understandably nervous. Even so, I could feel that God was with me and I was amazed by the peace he gave me to endure this trial.

The next morning, I was wheeled into the operating room, while Victor and Lynn waited down the hallway. A few hours later, the surgeon met with them, carrying a digital image he had captured during surgery.

"This is amazing! She had holes in the diaphragm, just as she guessed she would!" He showed Lynn the picture. "Is this what your diaphragm looked like?"

"Yes, my pictures looked just like that!"

He was astounded that both twins could suffer the same condition virtually simultaneously. While the doctor was surprised that I had correctly diagnosed myself, we were not. He found exactly what I had asked him to look for, and I was able to obtain the treatment I needed because of the information gained during Lynn's experience.

## A Great Adventure

It was a few months after our thoracic surgeries, and we were still recovering. Breathing was a bit easier, but we still had pain from the incisions and from the pleurodesis. We were low on stamina and had significant progress to make before we would feel normal again.

One day Lori was taking her daughter to pre-school, which was at a local church, and a colorful flyer caught her eye. Women of Faith, a non-

denominational organization, was hosting a two-day women's conference at a local arena. Given all that we had recently been through, we thought the conference would be just what we needed.

While we felt confident about our treatments, there was still plenty of uncertainty with regard to the future. We hoped that thoracic surgery would keep our lungs from collapsing, but only time would tell for sure.

A few weeks later, we were in the arena giving our ticket stubs to the usher. The tickets had an odd designation, so we had no idea where our seats were. The usher directed us to the bowl area, and a second usher told us to follow him. He proceeded down the long staircase toward the center of the arena and when he got to the last stair, we followed him into the floor seating area. He stopped at a small section near the stage and motioned toward two seats in the row. We sat down and looked at one another. We were in the second row from the stage.

“Wow, these are really good seats!”

The music started, and for the next two days we were enthralled. We had never been to a conference like Women of Faith. The speakers were a dynamic group of ladies from a variety of backgrounds. While they were all good at speaking, their openness is what kept our attention and touched our hearts. They didn't set themselves up as women we should emulate. Instead they shared personal struggles from their own lives and described how God met them where they were. They provided real examples of God working in the painful or difficult circumstances of real life. One of the women had suffered from agoraphobia, the fear of open spaces, which confined her to her house for many years. Another speaker had struggled with clinical depression. Another had lost a baby daughter to spina bifida and then a husband to pancreatic cancer. The speakers didn't just talk about how God provides and sustains through crisis, they had experienced his provision first-hand, and they shared those stories with the ladies in attendance.

The theme of the conference, *The Great Adventure*, was summed up perfectly in the opening song by Steven Curtis Chapman. “Saddle Up Your Horses” illustrates how our lives can be an adventure when Jesus is our

traveling companion. We don't have to be afraid of the unknown when Christ is with us.<sup>17</sup>

One of the speakers, Luci Swindoll, shared a story about an outing she took with her father when she was a young girl. They had taken a small boat out onto a large bay. As her father attended to the motor, a squall came up rocking the boat, and Luci was frightened. Her father turned to her, asking if she was afraid. Not wanting to admit that she was, Luci replied that she was not afraid. Her father knew better, telling her, "You don't need to be afraid; this is an adventure. Look at it as an adventure and think about what you'll tell tonight at dinner!" From then on, Luci chose to see life's circumstances as parts of the great adventure of living, and she pointed out that Jesus himself told us of his intention that we should have abundant living in him.<sup>18</sup>

“. . . I have come that they may have life, and have it to the full”  
(John 10:10b).

We had to admit that lately, our life's adventures seemed to be more like misadventures. Marilyn Meberg focused on how we are to trust God with all aspects of our lives. Not knowing the outcome of our circumstances prevents us from embracing life as it comes to us. Trusting God when things are going well is easy, but more difficult when things are not going so well. The only way that we can face the unknown of the future is by trusting God with the outcome. When we place our faith in him, we don't have to be afraid of the future, and life can be an adventure without fear.

Now faith is being sure of what we hope for and certain of what we do not see (Heb. 11:1).

The messages were timely, and we were encouraged. God knew that we needed this spiritual reinforcement and during the lunch break, we realized just how much he had arranged for us to be there.

A woman seated in front of us turned and asked how we had come to acquire our seats and if we were friends with one of the speakers. We thought this was very strange since we purchased our seats in the normal way and used the tickets that were mailed to us. The lady went on to tell us that we were in VIP seating, and that she assumed we must have known somebody associated with the organization. We were stunned and had no idea how that happened. The location of our seats made us realize that we were not at this conference by accident. God had wanted us there, up close, to hear what he had to say to us.

The conference showed us that we were not alone in our struggles. Thousands of other women just like us had burdens, fears, and problems. While we did not know what the future held, God knew, and he promised to sustain us regardless of the events that would unfold. Our hardship was not random. He had a purpose and a plan to use our pain. Could it be that the CPT journey was part of the Great Adventure God had planned for us? Venturing into the unknown is scary if we are alone, but we are not alone on our adventure with Christ. We are safe with him.

## A Ministry of HOPE

We're always amazed when a Bible passage that we've read countless times before suddenly jumps off the page when life's circumstances cause us to see Scripture in a new light. Such was true for us when we encountered the familiar story of the woman in the fifth chapter of the Gospel of Mark.

A woman was there who had been subject to bleeding for twelve years. She had suffered a great deal under the care of many doctors and had spent all she had, yet instead of getting better she grew worse (Mark 5:25-26).

This woman had severe bleeding over many years. She spent all her money, saw many doctors, endured many treatments, and was worse off



than before. The passage doesn't describe her emotional state, but we could guess that she was desperately hopeless.

It couldn't have been more descriptive of today's women who suffer with endometriosis if the passage had read, "*She had pelvic pain and heavy bleeding, so she saw a multitude of specialists, spent hundreds of dollars to go out of her insurance network, and used up all of her sick time at work. She tried birth control pills and other progestins. Now, she bleeds incessantly, has gained thirty pounds, and is constantly fatigued, irritable, and depressed. She feels sick all the time and has lost all hope that she will ever feel normal again.*"

Just as modern women find themselves in desperate medical situations this woman was also desperate for someone who would help her. The Bible describes how she found hope after hearing of a man who could change her circumstances.

When she heard about Jesus, she came up behind him in the crowd and touched his cloak, because she thought, "If I just touch his clothes, I will be healed." Immediately her bleeding stopped and she felt in her body that she was freed from her suffering.

At once Jesus realized that power had gone out from him. He turned around in the crowd and asked, "Who touched my clothes?"

"You see the people crowding against you," his disciples answered, "and yet you can ask, 'Who touched me?'"

But Jesus kept looking around to see who had done it. Then the woman, knowing what had happened to her, came and fell at his feet and, trembling with fear, told him the whole truth. He said to her, "Daughter, your faith has healed you. Go in peace and be freed from your suffering" (Mark 5:27-34).

She was a woman with a menstrual disorder; a woman with whom we could uniquely identify. Only when we were in the midst of catamenial

pneumothorax did we recognize ourselves in her and feel such a strong connection to her.

“That’s us!” we thought, “That woman is us!” And her story was our story. We began to refer to her affectionately as the Mark 5 Woman. Finding that kinship with her gave us hope. We read how personally Jesus had been involved in her story. He knew that the woman had a menstrual condition that needed repair. This was a huge issue in her life, and he showed that he cared about her suffering. Jesus had compassion on her and provided healing because she had placed her faith in him. And after healing her, he praised her for her faith. He singled her out and publically acknowledged that her faith had played a key role in her healing. What a morale booster! In a few moments, he had not only healed her body but her heart as well, affirming that her trust in him was well placed.

Reading about the Mark 5 woman helped us remember that God cared for us just as he cared for her. He knew that we were suffering. We were not alone. And as with her, he would see us through an unknown future and provide the help we needed as we looked to him.

One provision readily apparent to us was that he had allowed us to experience this condition together. Through all of the turmoil, we had each other for support. Thoracic surgery was not easy to endure by any means, but going through the experience together was such a blessing to us. We wondered how we would have managed had there been just one of us. We couldn’t imagine how hard it would have been to cope with such a struggle alone. The uncertainty, the fear, and the pain were all easier to bear because of our shared experience. Our gratefulness led us to think about all of the other women with CPT who *did* have to walk this road alone. We asked ourselves, what about the women who didn’t have the support of someone who understood what they were feeling? How did they manage to be their own health care advocates, especially when information about CPT was so hard to find, and most doctors had never even heard of the condition? We had helped each other, but what about the women who had no one to help them?

During those long months of trying to understand catamenial pneumothorax, we poured over journal articles and internet sites together.

We discussed all the reported treatment options and the advantages and disadvantages of each. The information we learned had played a key role in both our treatment plans, especially when it differed with what some of our doctors had in mind.

At the very least, other ladies needed the benefit of our research. We wanted to turn our period of suffering into a lifeline of hope for women with CPT. We formulated a plan to develop a web site which would provide pertinent information that patients could use. Initially the web site was about six pages, consisting of treatment option descriptions, our story, a collection of journal article citations, pictures from our video-assisted thoracic surgeries, a page about endometriosis and anemia, and a contact page.

A few months later, we thought to add an emotional support page so we could provide encouragement to women who might be dealing with issues of fear, hopelessness, and depression. Both of us had struggled with those same emotions, and sometimes those emotions had overwhelmed us. We wanted to offer ladies the comfort of our shared experience, not only medically, but emotionally as well. We also wanted to share how our faith in Christ had helped us through some of the darkest days of CPT. We turned again to our new-found friend, the Mark 5 woman, and began the page with her story. Revisiting her gave us a new sense of purpose in our CPT adventure. Her story had helped us and now we were hoping that our story would help others.

Surprisingly, we encountered the Mark 5 woman again, when Max Lucado included the passage about her in his book *He Still Moves Stones*. He described the woman's station in life and her obligations under Levitical law.<sup>19</sup> The illustration gave us a new perspective on her story. We realized the extreme risk she had taken to touch the garment of Jesus.

The Levitical law was a set of rules given to the people by God during the time of Moses. The rules were put into place to govern the people and to keep them safe. With respect to the Mark 5 woman, there were certain laws concerning a woman's menstrual flow.

When a woman has her regular flow of blood, the impurity of her monthly period will last seven days, and anyone who touches her will be unclean till evening (Lev. 15:19).

When a woman has a discharge of blood for many days at a time other than her monthly period or has a discharge that continues beyond her period, she will be unclean as long as she has the discharge, just as in the days of her period (Lev. 15:25).

Under the law, her prolonged bleeding caused her to be labeled *unclean*. While this might sound harsh or even severe to us today, the people in her time did not have the benefit of our understanding of blood-borne pathogens. There were no antibiotics or antiseptic soap. God provided laws about hygiene to protect the people from disease.

Because of her status, she was forbidden to mingle with people. She was to keep herself set apart from the population, for anyone who did touch her would also be considered *unclean*.

To approach Jesus, she had to become part of the crowd surrounding him. This caused other people around her to inadvertently touch her. And then she herself reached out to touch Jesus, knowing that in doing so, she was breaking the law. She had to choose between her own desperation and following the law. It was a big risk. Following the law would mean bypassing the opportunity to be healed and a life of continued suffering. Breaking the law could bring healing or it could bring punishment and further separation from her community if she were discovered.

It is important to note here that although he could have, Jesus did not chastise her for breaking the law. To the contrary, he praised her for her faith. As a Jew, Jesus was very familiar with the law. He could have publically berated her, but instead he chose to extend grace to her. And in doing so, he showed that her salvation did not depend upon her ability to keep to a set of rules. Christ required nothing more from her than her humble heart.

Many days over the course of our own adventure we felt just like the Mark 5 woman. Although we have strong faith in the goodness of God, some days were just downright hard! We spent many hours praying, crying, despairing, and fearing what the future would bring. At each juncture, God would extend grace, gently reminding us of his love. When we needed encouragement, he provided it, and when we needed hope, we found it in him. He brought provision in the form of information we could use. He arranged to have us see doctors we could trust and gave us courage to face the surgeries we needed. When we were afraid, he calmed our fears. His Word was a source of strength and encouragement.

But the eyes of the LORD are on those who fear him, on those whose hope is in his unfailing love . . . . (Ps. 33:18).

For I am the LORD, your God, who takes hold of your right hand and says to you, Do not fear; I will help you (Isa. 41:13).

Our hope in Christ would be our mainstay, as we tried to help other ladies find their way through the maze of catamenial pneumothorax.

## I've Been Where You Are and I Know How You Feel

The initial goal of the web site was to provide a repository of information to help patients better understand their condition. But after a few months of the site being posted, we began to get e-mails from ladies--ladies who had questions, sometimes lots of questions. We never really contemplated this when we began the web site. We never considered that women might actually write to us.

When they wrote, we provided examples from our own story that might relate to them, suggested articles or went over treatment options they could discuss with their doctors. Some comments lead to additional web pages. When ladies told us they were printing all the web pages to take to their doctors, we prepared a document for them to download instead.

Over time, the literature reference page was expanded as more and more doctors diagnosed CPT and published their cases in scientific journals.

Providing information that the ladies would find useful was very important for us. With each new e-mail, we began to see trends in treatments and how doctors in general were addressing (or not addressing) CPT symptoms. Later, the site would host an on-line survey so that we could compile and post statistical data on which treatments were successful and which were less effective.

The letters continued to arrive, and we continued to correspond. At first it was fairly straightforward, but as the number of contacts increased, it became apparent that some ladies were asking for more than facts they could easily find on our web pages. Some of them were clearly not just desperate for information; they were desperate for hope.

Since we always had each other, we couldn't know the level of hopelessness some of these ladies were experiencing. In many cases, they were completely alone. Even if their families tried to be supportive, family members did not understand the fear these ladies faced daily, wondering if the next menstrual cycle would bring another chest tube. Many women told us about doctors who had never heard of catamenial pneumothorax before and were, therefore, unwilling to consider CPT as a diagnosis. Some ladies just needed another person to talk to who could relate to what they were feeling.

“I have been so depressed. I am crying all the time and I feel hopeless.”

“The doctors really don't know what to do with me. I don't think I can take another surgery.”

“It scares me to death thinking that this might happen again.”

“The doctors all say that this is so rare and really don't have a treatment plan. I feel like I am a guinea pig.”

“I’m really depressed about all of this and find myself crying constantly. My future just seems so bleak right now and I wish that I could just wake up from this nightmare. I can’t reach out to friends because they don’t really understand my situation. My family is supportive, but it’s taking its toll on all of us.”

These ladies needed something to hold on to. Reading their letters brought tears of our own, as we agonized over their pain. The feelings of fear and desperation were still fresh in our own lives, and each letter took us back to that time when we were there. At times, it was difficult for us to check the mail for just that reason. We wanted all of them to be well, and at times the burden of their pain was difficult to carry, especially when they asked questions for which we had no answers.

Lynn was reminded of a comment she heard at a leadership conference. “Never take on a burden unless you have somewhere to place it.” The instructor continued by explaining that Christ is our ultimate burden bearer, because, as the Bible says, “we are to cast all our cares on him because he cares for us.”<sup>20</sup>

This was an important reminder for us. God intended that we *care* for the CPT ladies, not *carry* them. He did not intend for us to try to do what only he could do. It was his job to carry. Our job was to come alongside in support, and we had to rely upon the Lord daily to help us accomplish that task. By allowing us to minister to ladies in this way, Christ was giving us the opportunity to demonstrate obedience. He admonishes all believers to comfort others with the comfort that he has provided to us.

Praise be to the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves have received from God (2 Cor. 1:3-4).

God doesn’t provide us comfort to make us comfortable. He provides it so that we may extend that comfort to others who are hurting.

He uses our greatest losses to teach us truths about himself and to give us perspective, enabling us to come alongside someone else who is going through the same situation.

In his book, *When God is Silent*, Pastor Chuck Swindoll describes how our suffering need not be in vain.

As a result of enduring pain, we change from being mere sufferers to wise counselors and valuable comforters.

The most valuable counsel I have received in my life has never come from a novice. It's come from those who bore the scars of the crucible.<sup>21</sup>

Because of the shared experience we can truly mean *I know how you feel* when we say it. Additionally, we can encourage them with our knowledge that God is involved in their situation. From his record of faithfulness in our own experience, we can assure them, *God has not forgotten you.*

Not all of the letters were hopeless. In fact, some were amazing examples of how God was using us to provide hope for these ladies.

“Yesterday, I could have cried when I found your site.”

“I feel like you have provided a beacon of light through this dark time.”

“What caught my attention was the friendly non-technical testimonials about your experience.”

“I just found your web site and must say it has been a Godsend. I have felt so alone in this condition.”

“I have followed your web site over the years and have found it reassuring, insightful and informative.”



“You don’t know what it means to me to have found your web site.”

“I’m crying now because I just read your story about Jesus and the woman who was so sick for so many years. I can relate to her so strongly.”

Over time we were able to see the ministry of our web site as God’s adventure for us. He walked with us through our suffering so that we could walk with others through theirs. And while God can and still does perform supernatural miracles, he often uses *people* to minister to other people. Although he doesn’t need us to help him, he often chooses to allow us the privilege to be his hands and his heart.

## CHAPTER FOUR

### *The Whirlpool of Fear*

Lynn had returned home from a week long business trip and was retrieving her dog from the kennel. As she reached out to take the dog's leash, a sharp pain cut across her back and immediately she knew she had suffered another collapse. It had been six months since our thoracic surgeries and recovery had been tenuous. Our stamina was still low, and we continued to have some chest pain with each period. We were hoping that the diaphragm repair would be our last treatment, but we didn't know if the scar tissue which had formed would keep our lungs from collapsing. If the scar tissue didn't hold, we had few options left for additional treatment. Each month of continuing pain raised doubts that the thoracic surgery alone would provide a long-term solution. We were petrified of more collapses, knowing they would mean more hospital stays, and more chest tubes. We tried to maintain a hopeful outlook, but that underlying uncertainty continued to surface. Now, six months out from surgery, our worst fears had been realized. Lynn describes her experience:

An X-ray confirmed a 15% pneumothorax, and the thoracic surgeon decided to take a wait-and-see approach. After two weeks, the

collapse had doubled in size and the surgeon was unwilling to let it go any longer. He insisted that I be readmitted to the hospital. It was my third hospitalization in six months. I remember feeling numb and completely despondent. I begged God to intervene.

“Lord, is this ever going to end? There has to be a medical answer for this. There has to be a solution. Lord, I can’t live like this.”

My surgeon wanted to try chemical pleurodesis to see if additional scar tissue would help the lung remain adhered to the chest wall. I was desperate for a solution, even though I knew the procedure could be painful. Reluctantly I acquiesced. Painful was an understatement. Chemical pleurodesis was like being set on fire from the inside out. It was excruciating.

During the procedure a chemical slurry is poured into the pleural space through the chest tube, and the patient is repositioned multiple times, allowing the sclerosing agent to burn the tissue around the lung. After a time, the slurry is drained back out through the chest tube and suction is re-applied pulling the air out of the pleural space and re-expanding the lung.<sup>1</sup>

They gave me a sedative for the procedure, but could not give me anything strong enough to induce unconsciousness. However, due to the amnesic effect of the sedative I was given, I only remember portions of the lengthy treatment. I do remember crying a lot, begging the nurses to call the doctor back to give me more pain medication, and begging God to make the pain stop. Some of the nurses whom I had come to know from my previous hospitalization were caring for me a second time. Their presence during this procedure was much appreciated, and they did their best to comfort me despite all of my screaming. Once the procedure was over, I was hopeful that the new scar tissue would hold, but also concerned that the holes in the diaphragm would continue to be a problem.

The ramifications of this new collapse didn’t just affect me, but were indicative of Lori’s prospects as well. It was beginning to look like diaphragm repair was not completely effective, and not what we had hoped that it would be. Was my gynecologist right? Did I need to have a hysterectomy?

Just when we thought the situation couldn't get any worse, it did, and Lori suffered another collapse as well. Gratefully her collapse was small, and her surgeon wanted to allow it to resolve on its own without treatment. Even so, we were beginning to be very distracted by our uncertain futures.

Hopelessness set in. What should we do? Is there a solution to this problem? Will the collapses continue and, if so, for how long? How will we live like this? What does this mean for the ladies to whom we write? How can we help them have hope, when ours is fading?

Fear and anxiety became a real problem. It was constantly present and often prevented me from sleeping. I was so afraid of hearing the crackling noise that I kept the television on at night, so I wouldn't be able to hear myself breathe. I spent a lot of time crying. My mind was spinning out of control in the whirlpool of fear, and, like Job, I gave in to despair.

“My days have passed, my plans are shattered, and so are the desires of my heart” (Job 17:11).

Despair is a traveling companion of fear. It can overtake our emotions and threaten to swallow us. Fear places us in the whirlpool, and despair allows us to drown. If we lose the hope of deliverance, we cannot battle the fear. We need to be able to trust that help is on the way in order to maintain hope over fear.

Women of Faith speaker Patsy Clairmont is no stranger to fear. An agoraphobic, she struggled with her emotions, housebound by her fear of open spaces. Patsy knows first-hand how the feelings of anxiety and fear can cause us to lose hope. Over time, she realized that God offered her liberty from her self-imposed prison, but that freedom would come only by placing her trust in him.

In her book and DVD, *I Second That Emotion: Untangling our Zany Feelings*, Patsy shares a conversation she had with God about this exchange.

I used to say to God, “Make me feel safe and then I'll trust you.”  
And he said, “Trust me and find out that you *are* safe.”<sup>2</sup>

We are understandably afraid of the unknown, but our future is only unknown to *us*. It is not unknown to God. What frightens us does not frighten him because he has complete control over our situation.

. . . Do not be afraid. Stand firm and you will see the deliverance the LORD will bring you today. . . . (Ex. 14:13a).

I lift up my eyes to the hills – where does my help come from? My help comes from the LORD, the Maker of heaven and earth (Ps. 121:1-2).

Have I not commanded you? Be strong and courageous. Do not be terrified; do not be discouraged, for the LORD your God will be with you wherever you go (Josh. 1:9).

Have you ever noticed how many verses in the Bible encourage us not to be afraid? There are a lot of them. In the midst of my struggle with CPT, I have to admit that I was afraid most of the time. The thought of having another collapse, knowing it would send me back to the hospital for another chest tube or another round of pleurodesis was debilitating for me. I can't tell you how many times I argued with God over all those verses.

“Lord, you tell me not to be afraid, but I am.”

Since I couldn't just tell myself to stop being afraid, I knew that I had to ask for his help. I could continue to wallow in fear, allowing it to immobilize me, or I could choose to give it to God and exchange it for his strength. I received peace and comfort when I turned my focus away from my own fear and turned it toward him instead. This was a task I had to do daily. When I did, he met me in my need and I was able to rest in him.

I sought the LORD, and he answered me; he delivered me from all my fears (Ps. 34:4).

## Struggle to Maintain Hope

Even though we had learned a great deal about CPT treatment, our circumstances had left us still floundering for answers and direction. Despite our hopes, VATS had made little difference in our conditions as we continued to suffer lung collapses. Furthermore, we felt it necessary to maintain an optimistic front for the ladies who wrote to us, who were looking for support and answers. If we could not even help ourselves, what kind of advice could we provide for others? In trying to be a “beacon of hope” for other CPT women, we had inadvertently placed a large burden upon ourselves to keep up appearances that we were getting better.

It was during this time of feeling overwhelmed that we came across a column by Women of Faith speaker Marilyn Meberg. The column focused on her background as a psychologist offering advice to ladies’ written questions. Feeling particularly overwhelmed, we wrote to Marilyn’s column. We detailed our medical condition and explained how the web site was created after our thoracic surgeries. We expressed disappointment that our treatments had not produced the results we were hoping for.

*“Since then, we have walked through every door that God has led us to with regard to our condition and treatment. In spite of that, this week we have both suffered another collapse... We know that the Lord has a plan, and we do trust in him, but this last year has been really hard, and we have at times been angry that we haven’t gotten any better. The devotionals have been helpful, but sometimes we have felt really depressed and hopeless. We want to be that beacon of hope for others suffering from this, but sometimes find it hard to maintain hope ourselves. How do we keep the faith that this trial will eventually end, and we will have some sort of a “normal life” once again?”*

Marilyn’s response was supportive and insightful. She reminded us that God uses both our strengths and our weaknesses for his own sake and for the sake of others. Despite how we feel about our usefulness, he can still use us. She pointed out that God may be asking us to receive encouragement from others, and allow someone else to be our “beacon of

hope” for a time. This would be a blessing for both them and us. Lastly she joined in prayer for our physical restoration and healing reminding us that God is sovereign and knows our every need.

We were encouraged by Marilyn’s response and realized that we had placed an unreasonable burden upon ourselves. We needed to pass the beacon-torch to someone else for a time and let others minister to us instead. We had never considered that other people might be blessed by helping us with our struggles. Her letter also refocused our hope, ensuring that it remained on Christ and not on our circumstances.

No matter what we face, our hope in the Lord is secure and stands firm, even when we feel we cannot go on another day. It is in our misery that we find the Savior’s arms open wide to embrace us. He is our rest.

“Come to me, all you who are weary and burdened, and I will give you rest” (Matt. 11:28).

## Comfort Found in Unlikely Places

Efforts to keep a hopeful attitude were often derailed by continuing pain. Over the next six months, Lori had several small collapses, and then Lynn suffered a fourth large collapse which required another chest tube and a fourth hospitalization in twelve months. The scar tissue formed during pleurodesis was not preventing collapses because the diaphragm was still compromised with endometrial tissue. We realized that as long as we continued to menstruate, the implants in the diaphragm would continue to bleed and we would continue to have collapses. An oophorectomy, or removal of the ovaries during a hysterectomy, was the last option available. Lynn saw the same gynecologist who one year earlier had discussed the possibility of a hysterectomy. This time she was more than persuaded and asked to have it done immediately, preferably within the next week since she was already in the hospital with a chest tube. The thoracic surgeon and gynecologist consulted with one another, and the surgeon agreed to authorize the hysterectomy with the chest tube in place. Lynn describes her final hospitalization:

Since I had spent so many days in the hospital already, there were times when my family just couldn't be present. Lori and my parents could not take any more time off from work, so I was on my own for this surgery.

I was nervous but pragmatic. The sooner this could be done, the better I thought I would feel. I was becoming very adept at being a patient and knew the routine. I had tremendous confidence in the staff, finding the doctors to be professional and competent. The nursing staff had been exemplary and took very good care of me.

One of the nurses I had regular contact with during my several hospitalizations was the Cardiac Care Nurse. Her job was to act as a liaison between the thoracic surgeon and his patients. Cathy Yee had coordinated my thoracic surgery and had been present during my very painful chemical pleurodesis procedure. Over the last year, she had met my family and learned that my twin had also been treated for CPT. She also knew that I was alone the day of my scheduled hysterectomy, so when I asked if she would just accompany me to the surgical suite, she said, "Absolutely!" I was very grateful, knowing that she was leaving her cardiac duties to help me, and that this was not part of her job. She gowned up, and we met my gynecologist in the surgical suite.

For my previous surgery, I had been sedated in the corridor outside the operating room, so I was surprised to be wheeled straight into the operating room this time while still fully conscious. Since I was wide awake, I couldn't help but see the tray of shiny surgical instruments which would soon be used to cut me open. It was like watching a train wreck. I didn't want to look at them, but I couldn't keep myself from glancing in that direction. Seeing the instruments made me nervous. I kept telling myself, "It's okay; it will be fine." But as they moved me onto the skinny little operating table, my heart started to pound. My anxiety level rose. The anesthesiologist was apprehensive about my chest tube. He didn't want to put me under general anesthesia, so he and my doctor discussed the possibility of giving me an epidural instead. By the time they finished their conversation, I was bordering on panic. While my mind was telling me that this was all very normal and I should just relax, my emotions were



screaming at me, “Run, run!” Unfortunately fear won the battle over reason, and I began to shake. I started to cry, embarrassed that I didn’t have more control over myself. I apologized to the staff. I wanted to be brave and sensible, but my body refused to cooperate. Cathy and my surgeon were completely calm as they came along either side of me to hold me in position for the epidural. It was like receiving a group hug. The whole time each spoke to me with the assurance of a parent picking up a skinned-kneed child. “You’re fine, you’re doing good.” In that whirlpool of fear, I had found a life preserver. Two people, who were there to do their jobs, became family in my moment of fear. I have no doubt that without their calm reassurance, I would have lost it. God promises to supply all of our needs, and when those needs include emotional support, he often puts others in our path to give us encouragement just when we need it the most.

Lori describes a similar hospital encounter during her last collapse when her husband took her to the emergency room:

The doctor asked how long I had been having symptoms and chided me for not coming in earlier.

“I hear no breath sounds from your right lung.”

I knew that meant a large collapse, and a large collapse would mean another chest tube. Fear and panic returned as the staff wheeled my gurney to the x-ray department for a chest film. After the films were taken, Victor and I waited in the hallway for the results. I sat in silence, my thoughts consuming me.

I must have looked fearful, as another patient sitting nearby with her husband, engaged me in conversation.

“What are you here for?”

“I may have a collapsed lung, from endometriosis of the diaphragm.” The kind woman expressed her concern, and I continued with a reciprocal question.

“I have stage-four breast cancer. I have been undergoing treatment here, and we are seeing if more can be done.”

I didn’t know how to respond. As painful as it might be to have a chest tube placed, I was not fighting for my life as this woman obviously

was. What she said next surprised me even more. The woman asked if she and her husband could pray for me.

So in the hallway of the hospital, the four of us joined hands and sought the grace and guidance of the only one who could intervene at such a time. The couple asked God to comfort and heal me, and I felt humbled by the experience. Their confidence in God's sovereignty in the midst of cancer gave me the peace to remember that God was still in control over my situation. The prayer was finished with some tears and we parted ways. Victor and I were convinced that God had allowed us to cross paths with this couple in the x-ray department to help encourage us. The staff told us that my x-rays were ready, and we met once again with the doctor.

"Well, you have a small pneumothorax, but it's less than 5%, so it doesn't need any treatment."

I was astonished.

"It should resolve on its own."

There seemed to be no logical reason that a miniscule 5% collapse would give no breath sounds. Did God orchestrate a quick healing? We don't know.

We also don't know what became of the woman with stage-four breast cancer. But we do know that one day we will see her again, and when we do, she will no longer have cancer, and I will no longer suffer from endometriosis.

## Finding Irrepressible Hope

Within weeks following Lynn's surgery, Lori also had a hysterectomy. We recovered some stamina and experienced no additional collapses. Each day brought more confidence that we were on our road to recovery. In this mindset we attended the next Women of Faith conference, *Irrepressible Hope*. The poignant messages focused on the lessons we learn from God as we place our hope in him.

Sheila Walsh spoke about how broken people are looking for help in their lives now; they want to know that God will help them here on this planet, not just provide relief when we get to heaven. In Psalm 147 Jesus

promises to heal the brokenhearted and bind up their wounds. Other verses clearly indicate that some of God's promises apply to us now, in this lifetime.

I am still confident of this: I will see the goodness of the LORD in the land of the living. Wait for the LORD; be strong and take heart and wait for the LORD (Ps. 27:13-14).

God can bring beauty from ashes. He can bring good out of bad. When we can't see the whole picture, we can rely on his promises and have confidence that God is working in ways that will ultimately bring about good in our lives. There is hope for this life.

Patsy Clairmont reiterated that we are not alone in our struggles and that the Bible describes many people who faced the same types of circumstances that we do today. Her message focused on the story of Elijah. He had witnessed many miracles and experienced God's power first-hand. But, despite that, he was filled with fear when Queen Jezebel threatened to kill him. He ran for his life into the desert and fell exhausted under a tree.

"I have had enough, LORD," he said. . . Then he lay down under the tree and fell asleep. . . All at once an angel touched him and said, "Get up and eat." He looked around and there by his head was a cake of bread baked over hot coals, and a jar of water. He ate and drank and then lay down again. . . The angel of the LORD came back a second time and touched him and said, "Get up and eat, for the journey is too much for you." So he got up and ate and drank. Strengthened by that food, he traveled forty days and forty nights until he reached Horeb, the mountain of God (I Kings 19:4b-8).

God knows that we are weak people, and unable to endure all that life throws at us. Sometimes the journey is just too great for us, but the

journey is never too great for God. He supplies all of our needs so we can complete the tasks he sets out before us.

When our world is unstable, our hope must be placed in the one who can replace our fear with confidence. We can find courage as we see God meeting our needs day after day just as he promised he would.

We found an interesting analogy in a story our brother Danny shared with us during a recent trip to Disneyland. Like the two of us, Danny loves coffee, and like our Dad, Danny prides himself on his frugality. While we prefer the more expensive lattes from the bakery on Main Street, Danny very much enjoys the less expensive regular roast which is served in the mercantile store across the street. Imagine his surprise and joy to learn of the free refills which accompany a single coffee purchase! After buying one cup, he left the store, already savoring the free coffee he planned on enjoying later in the day. During the next few hours of rides and walking and shopping, he diligently protected the now empty cup. He carefully placed it into his baggy pants pocket to keep it clean. He made every attempt to avoid bumping the pocket to ensure that the cup would not be damaged. When it did suffer some slight crushing, he carefully pressed it back into shape.

Despite his best efforts, the cup did not maintain its pristine condition. It became crushed and dirty. It dripped coffee inside his pocket and down his pant leg. Undaunted, he continued to protect the cup from all harm. Resolute and determined, Danny finally returned to the store for his free refill, and presented the battle-worn cup to the attendant. Suppressing her amusement, she clarified the program details.

“Honey, I don’t need your *cup*, I just need your *receipt*.”

Being typical sisters, we laughed heartily at Danny’s retelling of the story and took every opportunity that day to tease him about his misunderstanding! The story did however remind us of a truth about human nature and how we sometimes view God’s provision.

Danny’s assumption that he needed to keep his cup to get more coffee reminded us that we often treat God’s provisions in that way. We hoard what he provides, like it is the only provision he plans on giving us.

His Word clearly tells us that he knows our every need and will provide for each need on a *daily basis*. God gives us a “new cup” every morning.

“Look at the birds of the air; they do not sow or reap or store away in barns, and yet your heavenly Father feeds them. Are you not much more valuable than they?” (Matt. 6:26).

Notice that he doesn’t give the birds a whole lifetime of seed all at once. Likewise, he doesn’t provide a one-time gift of everything we will ever need and then expect us to carry his provisions into next week, next month, or next year. Imagine that God knew we liked coffee, so he had an angel drive a tanker truck full of coffee onto our front lawn. It would make the morning routine a bit cumbersome if all we would ever need was sitting out in the yard.

He doles out what we need when we need it, and because of his history of faithfulness, we can depend upon him to supply our needs every day. We don’t have to be afraid that he won’t show up or worried that he will withhold what we require to get through each day. He knows what we need and is generous with his gifts.

Because of the LORD’s great love we are not consumed, for his compassions never fail. They are new every morning; great is your faithfulness (Lam. 3:22-23).

When we feel uncertain, he provides confidence. When we feel lonely, he provides friendship. When we feel afraid, he provides courage. And when we feel despair, he provides hope . . . one cup at a time.

## CHAPTER FIVE

### *The Maze of Medical Misdirection*

After our hysterectomy surgeries, Lynn's health continued to improve. Lori, however, did not find resolution to all of her problems, even though she was no longer having collapses. During her struggle with CPT, Lori also began having symptoms of significant dizziness, heart pounding, palpitations, nausea, muscle weakness, adrenaline-like surges, and fatigue. Since Lynn did not share those symptoms, we attributed them to the progestins Lori had taken for endometriosis. Her blood pressure had been elevated for several years after the use of birth control pills, but now it began to spike periodically. At times it would be within normal range and then suddenly rise to a systolic reading of 180+ for no apparent reason. As her symptoms worsened, the dizziness increased, and she constantly felt like she was on a boat or an elevator. Frequently she was so weak she could not stand for more than a few minutes at a time. Sometimes she was so fatigued it affected her ability to care for her family or to complete her duties as a dental hygienist. She had to severely limit her driving to local city streets and then for only necessary travel. Her primary care physician

remained unconvinced that anything was wrong with her and continued to prescribe blood pressure medication.

Thus began the quest to find the cause of Lori's symptoms. We searched the internet to educate ourselves about the possible causes of dizziness and high blood pressure spiking. This entailed hours of reading and trying to sort through information to distinguish which articles were legitimate science and which ones were quackery. Lori changed to a new primary care physician, hoping that a different doctor might have a more open mind and be a bit more objective. Lori continues with her story:

Many women who have had hysterectomies are also diagnosed with subclinical hypothyroidism.<sup>1</sup> Since my blood test results showed my thyroid level to be on the low end of normal, I wanted to address this issue with my doctor. After many unreturned phone calls, I chose to go out of my insurance network to see a hormone specialist. He looked at my thinning eyebrows and cracked heels and diagnosed me with subclinical hypothyroidism. I began taking thyroid hormone. Shortly thereafter, my primary doctor finally called and warned me of the dangers of taking thyroid hormone if I didn't really need it. Now I was really confused. I discontinued the medication and completed a holistic consultation on the advice of my doctor. After assessing my health from a questionnaire, the doctor made a diagnosis of adrenal fatigue and recommended that I purchase about a hundred dollars worth of supplements.

Over the next several months, I also had a bone density test and endured acupuncture treatments. An MRI of the brain showed a pituitary microadenoma, and I was referred to an endocrinologist. That doctor determined the adenoma to be too small to be the cause of my symptoms, but she ordered a 24-hour urine test to measure byproducts of the adrenal glands, which, she postulated, could be causing the heart pounding and adrenaline-like surges. All tests came back within normal limits, and she told me that sometimes doctors can't always find the cause of the patient's symptoms. This was not something we wanted to hear.

Later, I was referred to a cardiologist for the palpitation symptoms. He ordered a 24-hour Holter monitor and an echocardiogram. Again, all the results came back within normal limits.

Many of my symptoms were similar to those indicating a parathyroid problem. The parathyroid is a gland which regulates calcium in the body.<sup>2</sup> Again, I went out of network and consulted with a specialist at a local university hospital. He listened to a description of my symptoms, stuck a small camera down my throat (not a pleasant experience), and promptly diagnosed me with acid reflux disease. After completing an esophagram the following week, this diagnosis was proven false, and we were back to square one.

It was very discouraging to go from doctor to doctor and still have no answers. We always assumed that doctors generally know what is wrong with a patient or are at least concerned about finding out what is wrong. As a result of so many disappointments, we began each encounter with a new doctor with a measure of both hope and skepticism. We hoped that every doctor would be the last and would tell us, “Yes, I know what your problem is!” At the same time, we prepared ourselves emotionally for another blank stare and another shrug of the shoulders. While some of them did give me a “diagnosis,” it was more often an obvious method of writing me a prescription I didn’t need and ending my appointment as quickly as possible. We began to think that many were just guessing and that none had the clinical skills or the time necessary to reason out all the possibilities.

This constant effort in futility began to take a large toll on my emotional well-being. Anyone who has battled an uncertain illness understands how desperate one becomes waiting for someone, anyone, to give them a bit of hope to hang onto. While we did go through some of that with CPT, during most of that struggle, we knew the identity of the condition we were facing. Now I felt like I was chasing the wind. I would talk with Lynn several times a week and just cry. We knew that God was still with us, but his silence while we waited for an answer was difficult to endure. I kept a journal during this time and my entries reveal the depth of my pain while I suffered and looked for God’s direction:



*September 15, 2004 -*

*Psalm 130:1,2,5: Out of the depths I cry to you, O LORD. Oh, LORD bear my voice. Let your ears be attentive to my cry for mercy. I wait for the LORD, my soul waits, and in his word I put my hope.*

*I am having a difficult time today. I have read all about other people's anemia on-line, which makes me think I'm on the right path; however it brings me little comfort. I still wonder, what if it is something else? Am I doing the right thing? I'm so tired of being sick even though I know there is a purpose in all of this - a plan for my life. I want to feel you close, Lord. I am afraid, Lord. My blood pressure is high again. My chest hurts. Today I am so tired - probably from our busy weekend, but I was already dizzy before we left. I feel as though I will never be well again. Lynn doesn't feel this way. Even her low hormone symptoms are not as bad as mine. I'm tired. It is enough.*

*And in his word, I do hope. Hope - I need to rest in him - lean on him. How do I let go of the worry Lord?*

*September 16, 2004 -*

*I had a hard day today—not feeling that great and discouraged. I'm wondering if I'm going in the right direction. I thank God for my sister. She always helps to put things into perspective. She redirects my thinking and reminds me of the truth. I'm going to make an appointment with the hematologist to confirm that what I'm feeling is still the effects of the anemia. Everyone keeps saying, "It takes time." God is still in control of my life. I'm not on my own as the enemy keeps telling me. How could I survive without you Lord?*

*December 4, 2004 -*

*I feel so bad. I'm crying even as I write this. I'm so tired and weary. I should be much better by now, but I'm not. Everyone said I would feel so much better. But I am miserable. I can hardly take care of my family and go to work, let alone be the great mom that I would like to be to Katie. How long can I continue like this? I hurt. I'm depressed. My body feels like it wants to die. I*

*long for a place where I can just sit with God and rest without feeling this constant pounding of my heart.*

*December 6, 2004 -*

*I am feeling better today. I have a little more energy. God has again given me strength to get through a rough day. This body betrays me, but one day I will be whole again.*

*Let us hold unswervingly to the hope we profess, for he who promised is faithful.  
Hebrews 10:23*

## Needing Extraordinary Faith

We attended the Women of Faith conference, *Extraordinary Faith*, despite Lori's ill health. She found it difficult to negotiate the stairs at the arena due to extreme fatigue, so we tried to let her sit as often as possible and limit how far she had to walk. Despite adrenaline surges and a pounding heart, Lori tried to enjoy the conference and hear what the Lord would say to her.

Patsy Clairmont's message about God's deliverance was timely and encouraging. She shared the story of David's encounter with Goliath.

David said to Saul, "Let no one lose heart on account of this Philistine; your servant will go and fight him." . . . "The LORD who delivered me from the paw of the lion and the paw of the bear will deliver me from the hand of this Philistine."

Saul said to David, "Go, and the LORD be with you" (1 Sam. 17:32, 37).

David was just a young man at the time of this story, more accustomed to the sheep pasture than to the battle field. He was not trained for war, yet he was taking on a seasoned warrior. Understandably, Goliath found this turn of events rather insulting.

He looked David over and saw that he was only a boy, ruddy and handsome, and he despised him. He said to David, “Am I a dog, that you come at me with sticks?” (1 Sam. 17:42-43a)

Goliath told David that his death was at hand. David replied that Goliath’s perception of the situation was not accurate.

David said to the Philistine, “You come against me with sword and spear and javelin, but I come against you in the name of the LORD Almighty, the God of the armies of Israel, whom you have defied.”

“All those gathered here will know that it is not by sword or spear that the LORD saves; for the battle is the LORD’s, and he will give all of you into our hands” (1 Sam. 17:45, 47).

David was confident that God would deliver him in his current situation, because he remembered God’s faithfulness in past situations. As a result, David runs into the battle field, meeting the challenge head on. He was not timid, but trusted God to do the impossible. His assurance was based not upon his own strength but on the strength of the Lord.

Sheila Walsh’s message had a similar theme of relying on God’s strength. Having faith in God doesn’t mean that we have all the answers. To the contrary, it means that we trust God because we don’t have all the answers. God is with us despite what our circumstances look like. The enemy would have us believe that God abandons us in our time of need, and that we are all alone in our struggle. Sheila described the lie we often hear.

The Enemy says, “God doesn’t see you.” That’s a lie. The Father sees you and delights over you with singing, and you are never alone for a moment.<sup>3</sup>

God is not only with us, but he gives us the strength to endure whatever comes our way. We don't have to rely on whether we have "big enough" faith.

When reflecting on some of the Old Testament believers, we doubt that any of them would have considered themselves "big faith" people. We wonder what it was really like for Noah to build a huge boat in the middle of a land-locked area where it never rained. How did Sarah hold onto the promise of a child when she was past child-bearing years? Certainly, Joseph needed "big faith" when his brothers sold him into slavery. Were they all "big faith" people, or were they most likely just like us, taking one step at a time? Our job is not to bring about the deliverance that we pray for. That is God's job. What he expects from us is to trust him and walk through the doors he opens. Our job is to be obedient. We don't need to have "big faith" because we have a big God!

Marilyn Meberg's message focused on evaluating our perceptions about God.

Do not conform any longer to the pattern of this world, but be transformed by the renewing of your mind (Rom. 12:2a).

The way we think affects how we interpret events--how we feel about God, and how we think he feels about us. If we have a faulty or inaccurate view of God, it causes us to think that he doesn't see us or care about us. God wants to transform us by changing the way we think about him.

Marilyn shared a common "faulty thought"; "I don't have enough faith." A big problem with this premise is that when situations go sideways, we can blame ourselves for not having enough faith to bring about a favorable conclusion. The enemy is very fond of this tactic because it works so well to defeat and discourage us. God never intended for us to carry the burden of directing the outcome of a bad situation by measuring our faith or how hard we pray. The outcome is not our responsibility but God's, and his alone.

To get a better understanding of what our faith means, we must first look to where our faith originates. For a believer, the Bible says that it is Jesus who gives us our faith.

Let us fix our eyes on Jesus, the author and perfecter of our faith. . . (Heb. 12:2a).

So if Jesus authors our faith, how does it grow?

. . . being confident of this, that he who began a good work in you will carry it on to completion until the day of Christ Jesus (Phil. 1:6).

Our faith is a work in progress, and Jesus expands our faith through the circumstances of our lives. He brings our faith “to completion” by walking with us during trials, crying with us when we’re broken, and carrying us when we feel crushed. As we turn to him during times of suffering, he expands our capacity to trust in him.

In the Gospels, Jesus said that if our faith was as small as a mustard seed, he would still use it. That statement would seem to throw the whole “not enough faith” argument right out the window! He wants our humble hearts and willingness to trust him. We have enough faith to endure any circumstance. The God of the universe has authored that faith, so if we have only the strength to whisper the name of Jesus, it is enough.

Nicole Johnson continued this theme, presenting a dramatic sketch about the woman with the issue of blood--our friend, the Mark 5 woman.<sup>4</sup> Nicole focused on the aspect of the woman’s inability to bear children. Considering the importance of a fertile woman in her society, she must have been ostracized and considered cursed by God. Her days must have been filled with sadness, emptiness, and a continual longing to be normal. Nicole spoke of how that woman is representative of all of us who have our own “issues of blood.” Some of us may feel used, abused, and abandoned. Some may regret decisions they have made or loathe

relationships they are in. Some may suffer with guilt, fear, or hopelessness. Some may feel unloved, unwelcome, and unwanted.

What changed for this woman was a kernel of hope as she reached out to touch Jesus. Nicole described additional details about the woman's story as told in the Gospel of Luke.

She came up behind him and touched the edge of his cloak, and immediately her bleeding stopped (Luke 8:44).

In the original Greek, the word for edge is actually translated "tassel" or "fringe."<sup>5</sup> The Israelites were commanded to put tassels on their garments to remind them to obey the commandments of the Lord.

The LORD said to Moses, "Speak to the Israelites and say to them: 'Throughout the generations to come you are to make tassels on the corners of your garments, with a blue cord on each tassel. You will have these tassels to look at and so you will remember all the commands of the LORD, that you may obey them'". . . . (Num. 15:37-39a)

As the woman approached Jesus, it would have been just such a tassel that she would have had her eye on.

In faith and desperation, she reaches out. In an instant, the bleeding stops and Jesus stops. He asks her to step out of the crowd, not to embarrass or condemn her, but to acknowledge and commend her.

Hers was an example of faith against all odds. In a mustard seed moment, she lived her faith, and, in return, she received healing.

God valued her, and he values us just as much. The enemy tells us that our issues affect the value God places on us, so we offer every excuse why God shouldn't touch us, while desperately hoping that he will. When we come to him and confess our story, the bleeding stops and we are healed. Sometimes our situations may make us feel as though we are not worthy of God's attention, but he doesn't see us that way at all.

I have chosen you, and have not rejected you (Isa. 41:9b).

Although this woman was ostracized by her society, God did not reject her. He healed her and then he addressed her in a way that would have likely stunned the crowd around them.

Then he said to her, “Daughter, your faith has healed you. Go in peace” (Luke 8:48).

He called her “daughter.” What is remarkable about this term of endearment is that the Bible does not record Jesus addressing any other woman in this way. She was the only one. Society had rejected this woman, but Jesus found her worthy of his attention. Society had abandoned her, but Jesus addressed her as *family*.

With the end of another conference, we left encouraged that the Lord would provide answers to Lori’s health issues in his own time. We had hope that before too long, she too would feel that tassel in her hand.

## Finding Provision off the Beaten Path

Lynn searched the internet and found information about symptoms associated with a condition called atlas subluxation. The cervical vertebra in the neck can become misaligned and disrupt the delicate communication pathways of the nerves which connect the brain with the rest of the body.<sup>6</sup>

Although it sounded logical, Lori thought it was pretty far-fetched to think that a problem with her neck could be causing all of these symptoms. However, at this stage we were becoming very disillusioned with medical specialists and were willing to consider anything. Lori’s head had been tilted to one side for several years, most likely due to her job as a dental hygienist. While we didn’t think much of her head tilt, we did think perhaps the cervical chiropractor could shed some light on Lori’s symptoms. We made an appointment, cautiously optimistic as we made the hour-long drive to his office.

The doctor had a pleasant manner and was determined to help if he could. He was honest enough to say that he didn’t know if her neck was

causing all of her problems, but would treat her if he found subluxation that warranted treatment. He explained how the cervical spine affects the way the rest of the body carries itself. The body will always try to keep the head level in an effort to maintain balance. If the cervical spine holding the head is misaligned, the rest of the spine will compensate. This compensation will cause one shoulder and hip to appear higher than the other side and one leg to be shorter than the other. It is the same principle as when someone is walking sideways on a hill. One leg is bent, while the other leg is extended to keep the body level while walking side-ways on an incline.

After examination, Lori's right leg was indeed shorter than the other, so x-rays were taken to determine any cervical misalignment. From the x-rays, the doctor could measure the degree of subluxation. While back in the waiting room, we could hear him conversing with one of his colleagues about Lori's films as he exclaimed, "Wow!"

He called us back into the office and shared the results. Lori's C2 and C3 vertebra were out of alignment by nine degrees! The doctor speculated that this was probably due to more than just her job, and confirmed that further damage may have occurred from a minor traffic accident several years prior. While we still didn't know if this was causing any of her symptoms, the misalignment clearly needed to be addressed and additional appointments were made for treatment. We felt that we were one step closer to health for Lori.

The cervical treatment did help relieve some of Lori's symptoms, but not all of them, so we continued to search for more answers.

As Lori's primary care physician was unable to order the battery of diagnostic tests needed due to insurance constraints, we sought to have testing done out of network, with Lori often paying for the tests herself. Through God's provision, we discovered that Lynn's county benefits included a full body CT scan at a discounted rate--both for her and for immediate family members. We had already tried to chase down every possible lead and consider every body system malfunction that could cause Lori's symptoms. We thought maybe the scan could reveal something that we hadn't considered. We scheduled the appointment and were again



hopeful that the CT scan would give us a clue as to the problem that still plagued Lori. The results showed scar tissue from her thoracic surgery, as expected. However, it also showed something totally unexpected.

## He Will See You on Tuesday

The CT scan revealed an atrophied right kidney. After considering and researching so many different causes for Lori's symptoms, this find was completely unexpected. Was this the cause of Lori's problems? Researching the causes of kidney atrophy in conjunction with high blood pressure, Lori found a condition called renal artery stenosis.

A blockage or blood clot can occur in the artery that supplies blood to the kidney. When the kidney doesn't receive enough blood, the brain sends a signal to the kidney to produce and release more of a chemical called renin. Renin increases the blood pressure so more blood will flow to the kidney. As the artery becomes more blocked, the blood supply continues to decrease, the renin continues to increase, and the blood pressure becomes more and more difficult to manage.<sup>7</sup>

This condition would certainly explain the erratic spikes in blood pressure that Lori was experiencing. Treatment options for renal artery stenosis included angioplasty of the artery, which would remove the blockage and restore kidney function. Hopeful, she discussed this option with her doctor.

Unfortunately, Lori's insurance provider did not share her enthusiasm about the need for angioplasty. The local nephrologist recommended immediate removal of the kidney without any testing for viability of the artery. Lori requested a consultation with the vascular surgeon. The insurance provider refused to authorize it. The nephrologist deemed that the kidney was not worth saving; therefore, any artery repair was out of the question.

This extreme "throw-the-baby-out-with-the-bath-water" mentality of her insurance provider led us into a six-month battle Lori aptly named her 'Save the Kidney!' campaign. She didn't have a problem losing the kidney--as long as it was necessary, but to refuse to even evaluate the

possibility of repair, we thought, was short-sighted. It was *her* kidney the nephrologist wanted to throw away, not his, and she needed reassurance that this was the only option. Before she would consent to the removal of her kidney, she wanted a second opinion from a vascular surgeon.

Once again the Lord opened a door for us, and we ran through it! After much arguing with the insurance representative, a nephrology consultation at an esteemed local university medical center was finally authorized. Lori's hopes were raised. Surely a nephrologist from such a prestigious university would have a more open mind about repairing the artery. Our goal was to meet with him and secure a referral to a vascular surgeon.

The day of her appointment arrived, and we snaked our way through the heavy traffic of Los Angeles. Finally we made it to his office, albeit fifteen minutes late.

"I am sorry, but the doctor cannot see you."

"What do you mean, he can't see me?"

"You were late for your appointment. The doctor has a very full schedule and his policy is to reschedule late patients."

"But it's an hour-long consultation and there are still forty-five minutes left of my appointment. Can't I at least use the remaining minutes of my time to talk with him?"

We waited anxiously as the receptionist disappeared. A few minutes later she returned.

"No, he will not see you. You will have to reschedule."

We were disheartened by the lack of flexibility and the absurdity of not allowing Lori to use the remaining time of her own appointment! This was time already allotted to her and would have had no effect on any other patients. It took Lori months to secure this appointment and took us nearly three hours to make the drive from her house across the Los Angeles basin in rush-hour traffic. We were frustrated with the doctor's harsh response. For a few minutes we just stood there in the lobby, trying to regroup.

"Okay, what are our options?"

“Well, we could make another appointment and try to see him again.”

“That will take months.” Lori was beside herself, “I can’t believe this. All I needed was the referral.”

The Lord had clearly closed this door, at least for now. Would the nephrologist have provided Lori with the referral she was seeking had we been able to see him? We didn’t know. Why would the Lord bring us all the way out here, just to have this doctor’s door slammed shut so abruptly?

In retrospect, this was one of those moments that would have made us laugh had we seen it from God’s perspective. When God opens a door, sometimes he doesn’t want us to just walk through the door. Sometimes he wants us to walk through, turn right, and then go down the hallway.

In her research, Lori had compiled a list of vascular surgeons who specialized in renal artery stenosis. One of those surgeons was a doctor from this university. We looked at the directory. As it turned out, the surgeon’s office just happened to be about 100 feet down the corridor in which we stood. Hmmmm.... We decided to take matters into our own hands. Knowing that Lori would most likely pay the entire bill for going out of network anyway, we walked down the hallway and talked with the staff.

“I was wondering if the doctor might have any cancellations in his schedule today that would allow him to see a new patient.” We were prepared to wait all day if necessary in order to see the vascular surgeon.

“The doctor is out of town at a conference this week, but I may be able to schedule you to see one of his colleagues.”

Lori weighed her options. She could take her chances with another doctor who was immediately available, or she could wait a few weeks more to see the doctor in question. A second receptionist threw in her two cents about the surgeon on Lori’s list of specialists.

“He is my dad’s doctor, and he’s the best there is. He saved my father’s life!”

That was all the encouragement Lori needed. With renewed hope, she made the appointment, confident that this vascular surgeon would give her an honest opinion about the viability of her renal artery.

A few weeks later we were back, and the consultation was very productive. The surgeon listened attentively as Lori described her concerns, and he even discussed CPT with us. Some people are just meant to be doctors, and he was one of them. He took the time to address each issue and answer each question. His attitude said, “*We’ll do our best to help,*” and that went a long way.

He agreed with Lori that her symptoms and CT results were consistent with renal artery stenosis and also validated her blood pressure concerns.

“Yes, the blood pressure is a problem; you could have a stroke!” He took charge of the situation and aggressively developed a plan of action.

Unsatisfied with the poor quality CT scans from Lori’s health plan, the doctor ordered additional scans to be taken at the university so he could better evaluate the artery. After reviewing those scans, he broke the bad news.

“Unfortunately, the artery is too small to try angioplasty. If it were just a little bit bigger or if the kidney had a bit more function, I’d say, ‘Let’s go for it!’ But even if I reroute a new artery to the kidney, you still won’t get much use out of it.” He instructed Lori to remain on blood pressure medication until the kidney could be removed. The only good news was that the doctor was nearly certain that removal of the kidney would solve the blood pressure issue. Although he couldn’t make any guarantees, he was confident that a nephrectomy would help her. He also suggested that a urologist would be more experienced in kidney removal than a general surgeon. Sadly, our only alternative was to go back to the nephrologist from Lori’s health plan. She mentioned that she had not seen eye-to-eye with the nephrologist and asked if the surgeon could recommend a urologist that he trusted.

After a moment, he jumped up saying, “Wait here just a minute,” and left the room. What happened next was extraordinary and could only

be seen as the hand of God. He returned and explained details of a phone call he had just made to another surgeon.

“I called the urologist who performs the live donor kidney harvesting for transplants here at the university, and he is the best! I told him about your concerns and he said he’ll see you on Tuesday. He’s still in surgery, so wait a few hours until he can tell his nurse that you will be calling.”

We were left speechless. It would have taken us months to do what this doctor accomplished in just a couple of minutes! Anxiously, we waited the few hours as instructed and then called the urologist’s office. Lori explained the conversation she had with the vascular surgeon. The nurse was not convinced that the urologist could have promised a Tuesday appointment.

“The doctor does not see patients on Tuesdays. It is a surgery day.”

Her response was disconcerting, but she assured us that she would talk with the doctor. A few hours later she did call us back.

“I have spoken to the doctor, and he will see you on Tuesday between surgeries.”

A few days later, we met with the urologist. He requested a new MRI to be sure that the left kidney was functioning properly, before removing the right one. The MRI revealed very good news. The left kidney had not only enlarged but had grown an extension artery which allowed it to compensate for the deficient functioning of the right kidney. The urologist was confident that the left kidney and artery were in very good condition and would function adequately. Lori would do just fine with a single kidney, and the removal of the right one could only help her.

After being tossed upon the sea of uncertainty, finally the shore was within sight. Lori was on her way to recovery. With her surgery date scheduled, we anticipated the next Women of Faith conference with happy hearts and answered prayers!

## Celebrating Contagious Joy

In the midst of pre-operative appointments necessary for Lori's surgery, another Women of Faith conference was upon us, and we reveled in the meaning of this year's title, *Contagious Joy*. If ever there was a time when we were ready to embrace joy, this was the time! The answers that were once so elusive seemed as though they were now finally within our grasp. New strength and optimism were found in knowing that Lori's surgery was but weeks away.

The conference messages focused on finding joy in not-so-joyful circumstances. Sheila Walsh talked about the way society dictates who matters and who doesn't matter. From childhood, our culture tells us who are the "Somebodies" and who are the "Nobodys." This in turn influences how we feel about ourselves. Even if the messages we receive as children are not meant to forever label us, they often do. Sheila described parts of her own childhood which left indelible negative messages on her heart. Although she gave her life to Christ when she was a child, it took her years to understand that what she believed about herself was not the way God thought of her at all.

Children are amazing recorders of information; they miss nothing; but very poor interpreters of information.<sup>8</sup>

Hurtful words and attitudes can carry long and far into adulthood, and we perceive our value to be whatever society tells us we're worth. And so we question if we are worthy to be loved by God, if we are worthy to be used by God, and if our life matters at all. If others don't value us, how could God value us?

God's Word says that he cares about those whom society would consider the "Nobodys," the "Throwaways," and the "Outcasts."

He upholds the cause of the oppressed and gives food to the hungry. The LORD sets prisoners free, the LORD gives sight to the blind, the LORD lifts up those who are bowed down, the

LORD loves the righteous. The LORD watches over the alien and sustains the fatherless and the widow, but he frustrates the ways of the wicked (Ps. 146:7-9).

The LORD does not look at the things man looks at. Man looks at the outward appearance, but the LORD looks at the heart (1 Sam. 16:7b).

For all of us who have ever heard the accusation, “You don’t matter!” we can be encouraged that God doesn’t agree with that sentiment, and that we will never be a “Nobody” to him.

Not only does he take notice of us, but he chooses to use those of us whom society has deemed unqualified, broken, or useless.

Brothers, think of what you were when you were called. Not many of you were wise by human standards; not many were influential; not many were of noble birth. But God chose the foolish things of the world to shame the wise; God chose the weak things of the world to shame the strong. He chose the lowly things of this world and the despised things - and the things that are not - to nullify the things that are, so that no one may boast before him (1 Cor. 1:26-29).

Knowing that the God of the universe chooses us because he loves us brings us a joy that society cannot provide.

Patsy Clairmont’s message focused on the story of Gideon. In the book of Judges, God finds Gideon threshing wheat in a wine press in order to hide the wheat from Israel’s oppressive enemies. God approaches Gideon and makes a declaration, to which Gideon expresses skepticism.

. . . “The LORD is with you mighty warrior.”

. . . “Go in the strength you have and save Israel out of Midian’s hand. Am I not sending you?”

“But Lord,” Gideon asked, “how can I save Israel? My clan is the weakest in Manasseh, and I am the least in my family.” The LORD answered, “I will be with you, and you will strike down all the Midianites together” (Judg. 6:12b, 14-16).

God assured Gideon that neither his weakness nor his lowly station, were of any consequence. Even Gideon’s doubt about God’s choice to use him for such a task did not deter God from using Gideon to save Israel.

This story reminded us that our own struggles with our health issues could be used by God for a greater good. During the conference Sheila Walsh gave voice to this sentiment.

There is a purpose to all your pain. Not one single tear is wasted in the economy of heaven.<sup>9</sup>

We left the *Contagious Joy* conference optimistic about the future. Our recovery from CPT was more evident each day, and Lori’s recovery from renal artery stenosis was just on the horizon. Our family was eager to move forward, joyful about the progress that had been made, and hopeful that very soon we would all be well.

## The Shore Within Sight

After living with debilitating symptoms for nearly four years, Lori’s surgery date had finally arrived. A laparoscopic nephrectomy involves removal of the kidney through a small incision in the abdomen. Additional incisions allow insertion of a small camera and the instruments needed to detach the kidney. A gas like carbon dioxide is used to inflate the abdominal area so the surgeon can view the procedure more easily and operate the instruments more effectively.<sup>10</sup>

Due to Lori’s previous history of CPT, the surgeon was aware that the gas could seep through the weak areas of her diaphragm and possibly cause another collapse. Although the diaphragm had been repaired, the



pressure of the gas pushing it outward could stretch the areas of repair, much like the design on a balloon thins out as the balloon is inflated. Considering the possibility of a collapse, the doctor made plans to deal with the event, should it occur.

“Worst case scenario, you’ll wake up with a chest tube.”

For the most part, the surgery proceeded as planned. They monitored Lori’s right lung as they filled her abdominal cavity with carbon dioxide gas. Toward the end of the procedure, they took a chest x-ray and found that she did have a small collapse of the right lung. A small Heimlich valve chest tube was inserted allowing the gas to evacuate by the following day. After a few days of recovery, the chest tube was removed and Lori was sent home.

Once again, Mom came to the rescue, staying with Lori while she recovered. For several days Mom cleaned the house and shopped for groceries, vacuumed the carpets and took Katie to school. She rarely sat down until it was bedtime. That was Mom--always ready to help her kids. She never became weary of helping us after our surgeries and often commented, “I wish I could do more for you.” She was such a source of strength for us when we were unwell.

We were all hopeful that the nephrectomy would be the answer for which we had been searching. After a few weeks, Lori’s health began to improve. Her blood pressure stabilized, and she was able to discontinue blood pressure medication. The heart pounding and palpitation symptoms also began to diminish. Although the dizziness and nausea remained, we were encouraged by the progress she had made.

The kidney journey was long and bumpy, but we believed God had a purpose in it. We were learning how to rely on him more and on ourselves less. We were grateful for the answers which resolved Lori’s hypertension issue and trusted that he would, in his own time, provide the answers for her continued dizziness.

Sometimes answers to our questions can arrive in the most peculiar ways. Lori was watching an old re-run of *I Love Lucy*. It was the episode where Lucy was supposed to meet everyone at the passport office to apply for their passports for an ocean voyage to Europe. But Fred revealed that

he got seasick on boats. So Lucy convinced him to ride with her on the Staten Island Ferry to show him how effective the new seasickness pills were in preventing the dizzy, queasy feeling. After a short time, Lucy found herself succumbing to the motion of the boat and became seasick herself. She was dizzy, weak-kneed, and nauseous.<sup>11</sup>

All of a sudden it occurred to Lori, “that’s exactly how I feel!” She wondered if an inner ear problem was causing her to experience motion sickness. (Incidentally, Lucy did arrive at the passport office, just in time to get her passport!) Lori’s doctor agreed to authorize a CT scan of the sinus and referred her to a local ENT for evaluation. He tested her hearing and declared that she had no inner ear issues because she had no hearing loss. We tried another ENT and then another. The third was a specialist of the inner ear. After just looking into her ears, he startled us with his statement.

“I know what is wrong with you.”

“Great,” we thought, “finally someone who has an answer.” Our joy was short-lived, however.

“You have migraines which are causing your dizziness.”

“What? But I’m not having headaches, just dizziness.” We left the office discouraged and at another dead end. Lori was still unable to drive very far and continued to limit her driving to local surface streets only. The freeway set her head spinning so she avoided it.

On a chance encounter with a longtime family friend, we were discussing Lori’s condition, and the friend recommended a respected medical facility that her brother had visited. The center had a long history in Los Angeles and a reputation for innovative research into conditions which affect the ear. Some of their patients have even included actors and politicians. In a nut shell, they knew ears! We thought that if Lori’s problem was an inner ear issue, they might be able to discover it. On our first visit with the doctor, we were encouraged by his obvious passion for his specialty and the honesty by which he communicated to his patients.

“I don’t know exactly what is wrong with you, but I will do everything in my power to find out.”

He gave us real hope that he would try to find the cause of Lori’s problems. With a little riddle about two 400-pound canaries, he pointed

out that symptoms can often be caused by more than just one problem. He wanted to start with some balance testing and some allergy testing, as inflammation caused by allergens can affect the delicate balance of the inner ear canals. Lori was a bit skeptical about allergies being a substantial issue, but she trusted the doctor's opinion and consented to the testing.

The balance tests revealed a small inner ear imbalance, which the doctor didn't feel was significant enough to be the sole cause. Next came allergy testing as she sat through two days of needle sticks. To our surprise she was allergic to nearly everything that grew! Grasses, weeds, pollen and trees were causing a histamine response which most likely contributed to her dizziness, so she began a series of allergy shots. Later, as Lori continued to research symptoms of hypothyroidism, we were brought full circle and she returned to the thyroid specialist she had seen years earlier. He reconfirmed hypothyroidism, and she was prescribed natural desiccated thyroid. As the weeks turned into months, she gained stamina and strength and started to feel more like herself.

Navigating the maze toward health was long and arduous at times. We often asked God why he couldn't just show us the way out. Why did he make us walk through the maze, sometimes meeting with dead ends and back tracks, before giving us the clues which led us out? On this journey of life, there are lessons to be learned in the valley of adversity. God provides needs day by day, not all at once. When we depend on him to meet our needs daily, we learn about his character, his faithfulness, and his love for us.

Author Sheila Walsh shares a similar perspective in her book, *Life is Tough but God is Faithful*:

I would never choose Job's life, and yet there is something about pain that repaints the picture of life. Of who we are, of who God is. I've said it myself. I look at my life. I think of the death of my father. I think of my struggle with clinical depression and that bleak winter of my soul, but even though I would not have chosen this path, I would not change a single day, a single step.

Why? Because I am a different woman. It's one thing to say that the Lord is my shepherd; it's quite something else to be unable to walk one more step by yourself, to lean on that staff, and to be held up.<sup>12</sup>

Working through a difficult situation teaches us more than if we are just given the answers immediately. Just as struggling through a math problem gives us the skills to understand more complex problems, the Lord wants to guide us through life's complications to make us stronger people.

God was teaching us throughout these trials. When the way became dark and the path uncertain, we were to hold tight to his hand and listen to his voice. What we learned in the valley would prove necessary for what was to come. It would be our hardest journey yet.



## CHAPTER SIX

### *Joining the Club No One Wants to Join*

Our medical issues mostly behind us, life was finally starting to get back to normal. Mom and Dad had taken a cruise with our brother Danny and his family. Both our parents had recently retired, and they looked forward to devoting more time to hobbies and traveling.

Just as optimism grew, Mom began to experience symptoms of an intestinal disorder. She discussed her concerns with her doctor. A few months earlier Mom had undergone a routine colonoscopy and was given a clean bill of health. The doctor assumed that Mom suffered from irritable bowel syndrome and constipation and prescribed more fiber. Mom dutifully increased her fiber intake. As the discomfort continued to increase, she spent more time at home. Mom was not one to complain about her own needs, so she was not as vocal about her pain as she could have been. Finally the pain became so intense that Dad insisted on taking her to the emergency room.

Dad called that evening, telling us that Mom was in the hospital. We were worried that she could be so constipated that a doctor's intervention was necessary, but we were also confident that they would

alleviate her pain and clear her bowels. Dad said an x-ray showed that her bowel was indeed full, but that they wanted to run more tests.

Next came an ultrasound and, after that, a CT scan. We could not understand why they were using every available imaging technique to view a blocked bowel that could clearly be seen on an x-ray. It never dawned on us that they would be looking for something else.

We slept off and on in between Dad's updates, receiving the last one early the next morning, as he awkwardly blurted out, "They think it's cancer."

We were speechless and felt sick.

"No, she's just constipated. This can't be happening." With stomachs turning and hearts racing, panic set in. "Lord, no, please, no!"

Mom was rarely even sick. How could she have cancer?

The next few hours were a blur as we tried to focus on the task at hand and not rush to conclusions based on very little information. The first order of business was to travel to San Diego as quickly as possible. Suitcases were hastily packed with no thought as to what was being put into them; neighbors were notified to arrange for pet care; employers were called, and family emergency time off was requested.

Fear was our constant companion on the drive to San Diego. It competed with rational thought until our minds were exhausted from the struggle. Reason assured us that many people get cancer, receive treatment, and live for many more years. In between these lucid thoughts however, panic would not be silenced as the fear set in that we could lose our mom. Such a scenario was unimaginable. Mom was the rock of the family. Everyone depended upon her to always be there and know everything about everything. A life without Mom was inconceivable. This schizophrenic mindset was punctuated with emotional outbursts of prayer and the hope that this was just a huge misunderstanding. We didn't want to believe that God would let this happen to her.

Mom was in fairly good spirits when we arrived at the hospital. They had removed the contents of her bowel, so she did feel a bit better, but the doctors didn't really tell us much past, "We're running more tests." They collected blood and completed scans. A blood test revealed elevated

levels of liver enzymes. An ultrasound showed an enlarged uterus pressing on the left ureter, making it difficult for the kidney to drain into the bladder. A stent was inserted into the ureter, and a uterine biopsy showed no cancer in the uterus.

We were still partially in denial.

“Maybe she doesn’t have cancer at all,” we tried to reason. “Maybe there are other causes for elevated levels of liver enzymes.”

We knew she had been trying to lose weight, and we reasoned that the uterus was probably enlarged due to fibroids. We tried to piece together when her weight loss began and when her symptoms had started. We searched the internet and found that gallstones could cause elevated liver enzymes.<sup>1</sup> While obviously naive on our part, we held onto the hope that the situation was not what it seemed to be. It was still too horrible and unbelievable to be true. The cause of her condition had to be some sort of other logical reason besides cancer.

A CT scan showed spots on the liver and lung. Again, denial got the best of us.

“Is it possible that the spots could be non-cancerous growths or cysts?”

After that, the doctors did find the source of the blockage, which was an intramuscular rectal tumor. After obtaining a biopsy, the doctors waited several days before giving us a more definitive diagnosis.

We were now to the point of accepting she might have cancer, but we were still in denial as to the severity.

“Maybe they can remove the tumor surgically, and use chemotherapy to kill off the rest.” We held onto the hope of a remission. With every bit of news that trickled in, we greeted it with a positive “maybe-it’s-not-that-bad” spin.

The waiting was difficult. We did not understand why testing was taking so long and why biopsy results did not come back right away.

“What are they waiting for? If she has a rectal tumor, she must have colorectal cancer. Can’t they just tell us that so she can get started with treatment?”



After enduring our own medical battles, we were determined to “fight against the establishment,” on behalf of our mom. We vowed that we would hold the doctors accountable, insisting that they explain in detail her condition and their plan for her treatment. We assured Mom that we would be her advocates and even joked with her about her doctor.

“Okay, when he comes in, Lori will hold him down and Lynn will pepper him with questions!” Our antics made her laugh. She still had a sense of humor and that was comforting. We all needed those brief moments of levity.

After the first few days, we were all fairly stir-crazy, both anxious and fearful of the news we were to receive. Danny’s family had arrived from Sacramento, and we briefed them with the little information we had. Danny’s wife, Nancy, took the kids to the cafeteria, leaving our immediate family alone in Mom’s room. Just as we were left alone, one of the general floor doctors came in to check on Mom. After asking the usual, “so-how-are-you-feeling-today” questions, Dad asked if she knew anything about Mom’s condition. Apparently, she had been briefed more than we had.

“Well, she has the rectal tumor as you know, and the cancer has already spread to her liver. The oncologist can give you more information, but I understand that the cancer she has is very hard to treat.”

Then she rattled off some apology and left to continue her rounds. Nobody spoke, but we were all thinking the same thing: *She just said that Mom is going to die.* What was the point of treatment, if they had already given up on her? It was a somber and quiet moment. Lori shut the door and we joined hands as our family sought the one who ultimately held her fate. Dad expressed the sentiments of all our hearts with his prayer.

*“Lord, we don’t know why this is happening, but we know that you are sovereign and in control of all of it. We pray that you will provide Mom with comfort and heal her of this affliction. We know that you are able and that you love her even more than we do. We ask that you give her strength to endure the treatment, and that in all of this your name will be glorified. Lord, help us put our trust in you. In Jesus’ name, Amen”*

We would put our hope in God, and leave it in his hands.

## How Will We Pay for This?

In the course of the first weekend, while we waited for a diagnosis, Dad was worried about more than just Mom's condition. Understandably, he was concerned about money. Perhaps men are a bit more pragmatic about it, but it was a legitimate concern. Both Mom and Dad had just retired the previous spring, and they were still adjusting financially.

As the weekend progressed, and it became clear that expenses were accumulating rapidly, Dad was anxious to determine exactly what would be covered by insurance and how much would need to come out of their savings. He could easily envision the next few months' expenses completely wiping out all of the money he had worked so hard to save for their retirement. It was in the midst of this anxiety about money and resources, that God revealed several provisions he had set into place regarding Mom's previous employment, Dad's retirement, and the timing of both.

On Monday morning, Dad and Lynn arrived at the hospital's financial office as soon as it opened. Wanting to know, but dreading an answer that might be devastating to hear, Dad approached the counter.

"My wife is here in the hospital, and they think she has cancer. We need to know what her insurance will cover." He handed the employee Mom's insurance card and continued. "They're doing a lot of tests and stuff, and I'm afraid this might wipe us out." He silently waited while the attendant reviewed Mom's policy details.

"Oh, this is one of the best plans her insurance provider offers."

Dad learned that nearly 100 percent of Mom's expenses would be covered by her insurance.

"Wow, are you serious? Man, I can't believe it. I have been so worried about this. This takes a big load off my mind."

Dad thanked the woman profusely and rushed back upstairs to tell Mom.

“Sue, you’ll never believe it. Insurance is going to cover almost all of it!” Although Mom had not been as vocal about her own anxiety earlier, she was also clearly relieved to hear the good news.

“You know, if I hadn’t worked at the nursing home when I did, I wouldn’t have this insurance.”

“That’s right. It was a good thing that you went back to work when you did.”

Later, Dad explained to us why Mom went back to work in the first place. He had been self-employed nearly all our lives, owning a milk route when we were kids, and a bottled water route when we reached high school. Because Dad owned the routes, he had no medical coverage from the parent companies, and had to secure private health insurance for himself and Mom. About five years prior, the premiums began to rise dramatically, and Dad found their income less and less able to afford the increasing premiums. They both agreed that Mom should return to the work force solely for the medical insurance coverage, even if it was for a low paying job.

When we were in grade school, she worked for many years as an activity director at a convalescent facility. She enjoyed the work and her interaction with the patients, so when she went back to work, she obtained a similar job at a nursing home. The administration at the facility chose the plan for their employees, but since Mom and Dad’s focus was on reducing their monthly premiums, they didn’t really know what the plan covered until Mom was admitted. Again, God was faithful to our family by providing the financial resources necessary *five years* before they would be needed.

An additional provision was recognized in Dad’s availability to care for Mom around the clock. If Dad had not recently retired, they would have had to hire a care giver, placing another financial and emotional burden on them. His retirement had depended upon the sale of the water route at its full market value. Optimally, they had been looking for a cash buyer who also met with the approval of the parent company as stipulated in Dad’s contract. Although Dad had attempted to retire a few years earlier,

the route did not sell. At that time, some buyers wanted Dad to carry credit while others were interested in purchasing only a portion of the route.

The previous fall, a cash buyer willing to purchase the entire route at the price Dad was asking, made him an offer. Simultaneously Danny had approached Mom and Dad with an invitation to accompany his family on an Alaskan cruise. Danny's plan began a cascade of events. Dad decided to accept the route offer allowing him to officially retire just before they were scheduled to set sail. This also prompted Mom to schedule her own retirement for the same time-frame, after concluding that essentially her insurance plan would continue under Cobra and CAL Cobra until she reached the age for Medicare. They would have to start paying premiums again, but since Dad was now covered under Medicare himself, the monthly payment to continue Mom's coverage would not be as much of a financial burden as it had been years earlier.

The timing of both Mom and Dad's retirements were prompted by Danny's insistence that the cruise be scheduled for the spring of 2006. Later, Danny told us why he was so insistent.

Some of his colleagues had recently lost a parent, causing Danny to think about his own. He and Nancy enjoyed taking cruises and for many years they had wanted to take Mom and Dad with them. He further confided in us that he felt an increased sense of urgency to make the plan a reality.

"I know that if I put it off and something happens to one of them, I will forever regret that I didn't take the opportunity to do it when I could." He became increasingly persistent in persuading Mom and Dad to go with them. He purposely chose a destination that would appeal to them and then assured them that the cruise was a gift. Danny even told us that Alaska would not have been his family's first choice, but he knew that Mom and Dad would prefer to go there more than anywhere else. He was determined to remove every obstacle that might prevent them from declining the invitation. In May, they did go on the cruise to Alaska and had the trip of a lifetime. Danny said that he had never seen Mom and Dad so relaxed.

Clearly God knew where our family would be just a few months later. If Mom had not secured the *job* she did, if her employer had not chosen the *plan* he did, if the route had not *sold* when it did, and if Danny had not insisted they take the cruise *when* they did, our current circumstances would be much different. The timing of events was a powerful reminder of God's continual intervention and provision in the lives of our family.

## “I Believe in Miracles!”

It had been a long five days, and we were still waiting to hear something definitive about Mom's diagnosis. We were anxious about the kind of treatment she would have to endure. We had been spending much of each day with Mom at the hospital, and going to our parents' house each evening to spend the night. One late afternoon, heading for home, we walked toward the elevator with Dad. We were tired, mentally and physically, and wished that all of this was just a bad dream. While trying to be hopeful about the road Mom was set to travel, we had to confess that we were all a bit discouraged.

We waited before a bank of three elevators, each of us lost in our own thoughts. The right elevator doors opened, and we stepped forward. Immediately the doors closed again, before we could get on. “*Hmm, must be a temperamental elevator.*” The left elevator doors opened, and we moved forward to board. Again, the doors immediately closed before we could get on. “*Okay, now this is getting weird.*” We were bound and determined to rush the doors when the middle elevator arrived. It did, and we got on. Being motivated to move quickly, we had not noticed the other passengers already on board.

“Ken!”

Dad turned around. Standing before us were two of Dad's former bottled water customers. The friendly elderly couple enthusiastically embraced Dad in the elevator.

“It's so good to see you. It's been a long time.”

Dad introduced us. Although we had never met them, they had known Danny since he was a teenager. During summer vacation, Danny would help Dad on his route. The couple raved all about Danny and what a wonderful young man they remembered him to be. They had taken a particular liking to him over those summers and had consistently held him up in prayer over the years.

They mentioned that they were visiting a friend at the hospital, and asked who we were visiting.

“My wife is here. She has cancer. We’re waiting to find out what they are going to do.”

Their faces showed empathy and concern. We all exited the elevator and lingered in the lobby.

“We will certainly keep her in our prayers. I believe in miracles!”

The woman continued to encourage us with examples of other people they knew who had been healed. As we parted ways in the lobby, she reiterated, “I believe in miracles!”

The three of us discussed the uncanny timing of missing the first two elevators in an odd way, which ensured that we would take the third. It was also extremely coincidental that the same elevator just happened to carry a strong prayerful couple from Dad’s past, whom he hadn’t seen in years, who happened to be in the hospital visiting someone while we were there and then just happened to get on the same elevator we did. There is a saying that “there are no coincidences in God’s kingdom.”

This encounter was clearly a provision to give us hope at just the time when we needed the encouragement. It was such a blessing that the Lord would recognize our pain, grief, and feelings of uncertainty and then to remind us through Dad’s customers that he is sovereign and could still heal Mom if he chose to. We believe he orchestrated the message to tell us that he was traveling this road with us and that we were not alone.

Behind the scenes, much was happening. The Lord blessed Mom with a wonderfully calm and caring oncologist, and after the encounter with the rounds doctor, we needed a bit of good news. The oncologist

came into Mom's room, and after ensuring that we all had chairs, he closed the door indicating that he intended to remain with us for a while.

He carefully explained that Mom had a rare form of anal cancer known as cloacogenic carcinoma. This cancer generally manifests itself as an anal tumor, but it could cause rectal tumors as well. It was a fast growing cancer of embryonic-type tissue, originating from a remnant of the cloacal membrane in the embryo.<sup>2</sup> The cells were not the same type as those indicating rectal cancer, or cell types which could arise from the uterus or ovaries. Even though the main tumor was rectal, this was not colorectal cancer which is why it took longer for pathology to identify it. The biopsies showed carcinoma with metastases to the liver and the lung. The spread into the liver was described as diffuse and peppered. Another measure of the cancer's growth was the carcinoembryonic antigen (CEA).<sup>3</sup> Normally this number is less than 5. Mom's CEA was currently at 72.

The doctor explained how the oncology doctors collaborated on patients' cases, and that he would be discussing Mom's case with them that afternoon. While it seemed to us that they had taken a long time to reach this point, we realized they had already systematically and methodically consulted with one another to make the proper diagnosis.

Mom's doctor suggested a plan for chemotherapy, explaining that the tumor was situated within the rectal wall so that removing it surgically was not the best option. The goal was to use chemotherapy to shrink the tumor and improve Mom's quality of life.

"We won't be able to cure it, but can we try to manage it."

They would start her on a "cocktail" of two chemotherapy drugs: 5-Fluorouracil and Cisplatin.<sup>4</sup> The oncologist briefed us on the typical side effects that Mom might experience. She was not expected to lose much hair, but she would feel fatigued from the loss of blood cells. Vicodin could be used for the rectal pain while she was on chemo. Anti-nausea treatment would be given prior to chemo sessions, and they would give her a prescription to take home. The Cisplatin might also cause numbness in her fingertips. He told us the projected effectiveness of these drugs on the tumor was about 50-90%.

We asked about experimental drugs, and the doctor did not know of any for this type of cancer. We also asked if the cancer was genetic in origin.

“Cloacogenic carcinoma doesn’t appear to be a cancer with hereditary involvement. We don’t know why it occurs.”

As we fired question after question at him, he respectfully answered each one, patiently explaining the science until we were all questioned out. It seemed as though he was genuinely concerned about our fragile emotions, and we were grateful for his time and attention. Mom found his demeanor very sincere and comforting. While he was honest about the seriousness of her condition, he did promise to do as much as he was able. Throughout treatment they would monitor her CEA and liver enzymes to determine how effectively the two drugs were working.

“If they don’t help, we will change course and try another cocktail.”

Finally, in the midst of fear and uncertainty, we had a plan. And it was a plan that included the hope of managing the cancer. We would move forward as a family with Mom’s treatment. She would start chemotherapy on November 13<sup>th</sup>, her 62<sup>nd</sup> birthday.

## Chemo for My Birthday

Mom’s birthday morning began very early. We had celebrated the occasion in the hospital a few days prior, so that Danny’s family could be present. But today was all business. No cake, no gifts, no balloons, and no fun were on the schedule, only chemo. We made the twenty-minute drive back to the hospital, anxious to get started but nervous for Mom. This was new territory for our family. We knew of other people with cancer, but we had never been involved in any of the details of treatment until now. We really did not know what to expect and had no idea what Mom would have to endure.

We arrived at the Outpatient Treatment Center (OTC), just as they were opening for the day. One side of the room was filled with large reclining chairs, separated by curtains. Each area had a small ceiling-mounted television on an adjustable arm. The other side of the room had



beds, similar to an emergency room set up. A small reception desk was manned by a woman who asked if she could help us.

“I am starting chemotherapy today,” Mom offered. The woman took her medical card and ushered Mom to a bed.

“I understand we will be placing a PICC line this morning. After that is done, I will take you over to the Chemotherapy Suite.”

“Oh, this isn’t it?”

“No, this is the OTC, where you will do all of your blood draws and dressing changes. The treatment will take place in the Oncology Department.” Mom was settled into a bed, and we were told that the PICC nurse was on her way.

The staff was friendly and supportive, understanding that it was Mom’s first day, and we were all a bit unsure of what to do. A few of the nurses asked if we had taken the “Chemo class.” We explained that Mom was just scheduled for treatment and released from the hospital two days ago. There had not been any time to attend a Chemo class, so we really had not received much in the way of instruction on the whole process. The PICC nurse arrived and explained the procedure.

“PICC stands for Peripherally Inserted Central Catheter. A long tube will be inserted into a vein in your upper arm, and threaded up through the vein until the catheter reaches a larger vein in your chest.” She described how fluoroscopy technology would be used to place the catheter into a deep large vein in the upper arm. A chest x-ray would confirm that the line was in the right place. The PICC line would provide long-term intravenous access and could remain in place for several months while chemotherapy was being administered.<sup>5</sup>

Mom asked her, “Will it hurt?” The nurse explained two methods for placement.

“I can give you a local anesthetic. However, this will constrict the blood vessels making it more difficult to find the large deep vein that I need. Without the anesthetic, I can visualize the target vein more easily and insert the catheter on the first try. Once the catheter is in, I will administer the anesthetic directly into the vein for the remainder of the catheter threading into the chest. It will hurt for the first ten seconds or so, and

then you won't feel anything." Mom reluctantly agreed, choosing to forego the local anesthetic.

We had a difficult time watching. As the nurse set up her sterile tray of equipment, Lynn had to look away during the initial puncture, so she wouldn't see Mom's face during the procedure. Mom had already endured so many other punctures and pokes, it was getting to be routine, but it never got any easier to watch her go through it. After the procedure ended, the nurse gave Mom instructions on how to maintain her PICC line at home by flushing the line daily with heparin to prevent blood clots from forming within the line. She also discussed returning to the OTC for weekly PICC line dressing changes.

The PICC line in, we and Mom were taken to the Chemo Suite. The suite was part of the Oncology Department and adjoined the oncologists' offices, so Mom was able to see where she would come back for her doctor's appointments. The building was connected to the hospital by a corridor on each floor, so everything was conveniently located.

In the Chemo Suite we learned that the chemotherapy drugs were prepared by the pharmacy after the patient checked in, due to the high cost of the drugs. Our patient information guide indicated that it was like going to a restaurant, where your order is taken after you arrive. Since each IV bag was individually formulated for each patient, any such preparation which could not be administered would have to be discarded. We learned that the drugs were several thousand dollars per treatment, and were again reminded of the blessing the Lord had provided with regard to Mom's insurance coverage.

We were ushered into the Chemo Suite, and Mom was assigned to a chair. Like the previous room, it contained mostly recliners and a few beds separated by privacy drapes. Each area had a television with a DVD player, and one or two chairs for family and friends. Scattered throughout the room, other patients were receiving intravenous treatments. Some passed the time by reading or knitting, while others watched television or slept. Some had visitors to chat with and others were alone. Nurses attended to the patients and responded to the constant IV pump alarms when contents of IV bags were empty. Patients periodically left their

recliners, rolling their IV stands down the center corridor to one of the restrooms on either end of the long room.

Our chemo nurse brought Mom a blanket and explained how the treatment would proceed. Mom was to be given two drugs that day. Cisplatin would be administered through an IV infusion over the next five hours. 5-Fluorouracil would be administered over the following week with a pump device that Mom would take home with her. Before the infusion she would be given an anti-nausea drug to keep her from vomiting and a Benadryl to help prevent an allergic reaction to the chemotherapy.

With the anti-reaction drugs given and the infusion started, the nurse continued with instructions.

“The Cisplatin is an irritant and the patient must be very hydrated to protect kidney function.”<sup>6</sup> Mom would receive 3000 milliliters (3 bags) of saline throughout the infusion. Before she could go home, she needed to excrete at least 2500 milliliters of that fluid. The nurse brought us a plastic measuring container, and we started to record the volume of bladder void. While seeming to be a simple task assignment, it proved to be more difficult than we had expected. To complicate issues, several patients were similarly assigned to monitor their output. With only two bathrooms, and the kidneys working overtime to remove all of that saline, timing became everything.

For the first hour or so, Mom was a trooper and got herself in and out of the reclining chair. Sitting in it had not been comfortable because of the tumor, but she did her best to orient herself so that she could sit that long. After two hours of restroom trips and monitoring output, it became obvious that there was a problem. Although she felt the urge to void, her output was decreasing. Mom was becoming very uncomfortable, and we consulted the nurse. She read our output log and agreed that we had a problem. She speculated that the tumor could be pressing on the urethra, preventing the bladder from emptying. The nurse moved Mom to a bed and inserted a catheter. Her theory was correct. The catheter allowed for the evacuation of the bladder, and we continued recording our measurements by monitoring the contents of the bed pan. This turn of

events improved the situation. Mom was more comfortable lying down and less stressed not having to go back and forth to the bathroom.

The infusion ended and the nurse explained the next part of the process. 5-Fluorouracil would be administered around the clock via a mechanical pump. The pump was a rectangular plastic box that attached to the port of the PICC line. A small IV bag containing the drug was placed into the interior. Once the pump was attached and turned on, it would continue to administer the drug continuously on a timed schedule. Mom was to wear this mechanical device until she returned to the OTC on Friday (five days later), where they would turn it off and disconnect it. The nurse instructed Mom on how to change the battery if the alarm sounded, and how to deal with emergency procedures should the pump leak. Since the drug was so toxic, any leakage could not be touched. Lastly, she gave Mom an overview of some of the side effects that she might experience and warned her to stay out of the sun.<sup>7</sup>

Because of the strict number of hours in which the pump had to provide treatment, the timing of the activation on Monday coincided precisely with the timing of the deactivation on Friday. Due to the bladder void problems during the infusion, we were behind schedule. As a result, the staff was rapidly working to attach and activate the pump so that the Friday deactivation time would occur before the OTC closed on Friday. They got it done just under the wire, and we left for home. Mom was exhausted from her first day of chemotherapy. It had been a really long day, and we all hoped that once we learned the routine, the other treatment days would be easier.

## Emotions Run High

Virtually overnight our family was plunged into a new life, where “normal” was a bittersweet memory from the past. The “new normal” was a whirlwind schedule punctuated by chemotherapy infusions, blood draws, pump connects and disconnects, doctor office visits, CT scans, PICC line dressing changes, and prescriptions to be refilled and picked up. We tracked blood test results online, monitoring Mom’s liver enzymes and

CEA numbers. We all had calendar copies of Mom's schedule, and each activity was assigned to one or more family members, so that everyone knew what Mom was doing on any given day, and who was to get her where she needed to be.

Our work schedules were adjusted as much as we could arrange. Regular days off were moved, and vacation time was used when necessary. Childcare issues were worked through, and other family members or friends were depended upon to look after things at our own homes during those San Diego weekends. Lori traveled by train on those weekends that Lynn was on-call for her work, as Lori was still recovering from her nephrectomy and was not well enough to drive the long distance. In those first months, our family mind set was, "We will do whatever needs to be done to get Mom through this." There was no question of sacrifice. The whole family needed to step up to the plate. Since we had limited time in San Diego, we made lists of things we needed to get done while we were there. During our weekends, we completed as many tasks as possible, making lists of additional phone calls or activities to be coordinated long distance during our work weeks.

Despite our resolve to "get in there and get it done," all of us were dealing with strong emotions. At times, these spilled out toward one another, sometimes erupting into harsh words and hurt feelings. When we were around Mom, the family really tried to put on a happy face and be positive for her sake, and for the most part we were. But as the first few weeks turned into months, the stress of the situation became overwhelming at times, and we just flat out got on each other's nerves!

Understandably, each of us was going through some stages of loss. We had lost our norm. Mom had cancer, and we didn't know if she would live. Our world was upside down. We were uncertain about the future, and we were afraid. And more than that, we were angry. We were mad that this disease had afflicted Mom. We were mad that she was suffering. We were mad that we might lose her. It was very frustrating to be so angry and have no one to yell at. We wanted to strike back, but there was no way for us to take our aggressions out on the cancer. We were also tired. The constant activities and stress of the situation left us little "down time," and we were

all exhausted. This bottled-up frustration began to take its toll, and we grew impatient with one another. We began to snap at each other, finding fault with the smallest of infractions. This added annoyance with one another led to more snapping on the part of some, while others became more withdrawn or excused themselves more frequently, to go cry in private.

This disparity of emotional reactions reminded us of a presentation by Women of Faith speaker Jan Silvius, who described how people react to stressful situations in different ways. She relayed a story about preparing for an outing with her daughter, daughter-in-law, and several grandchildren. In the frenzy that generally ensues when children are loaded into a vehicle, the three adults were busy with children fighting over seats and with one another. In the chaos, one of the children fell out of the open door of the van and onto the driveway. The fall was not severe and the child was not injured, but as the crying began, each of the three adults responded to the stress in very different ways. One became upset, one began to cry, and one made a new rule.

Two of them responded to the stress emotionally. One became annoyed at the situation while the other dissolved into a bucket of tears. Pragmatic and organized, the third responded by trying to control the situation, and issued a new rule. She mandated that from now on, the van would not move until all occupants had their seatbelts fastened. What made this response over-reactive was that the van had not been moving, the kids were in the process of buckling their seatbelts, and the keys were not even in the ignition.<sup>8</sup>

All three women experienced the same situation, but their default reactions were very different. Likewise, each of us was coping with fear as best we could. Eventually we did learn to be a bit more patient and forgiving of one another and really tried to remember that we needed to rely on one another if we were to help Mom. God gave each of us a measure of tolerance and a new perspective to understand how we were all reacting out of our own fears and that we needed to cut each other some slack.

## Settling into the Cancer Norm

Most chemo days began fairly early and lasted into the late afternoon. To pass the time, Lynn brought old movies on DVD. We watched Bob Hope and Bing Crosby traverse the roads to Rio, Bali, and Morocco, while Doris Day and Rock Hudson navigated through comical misunderstandings.

Part of our chemo routine was a lunch run to the hospital cafeteria. After her infusion was started and she was settled, Mom would place her order, and we would leave for a little while to go get lunch. Mom liked the frozen yogurt as it made the inside of her mouth feel better. Comfort food was a favorite for the two of us as well. That poor cook in the cafeteria probably never made so many grilled cheese sandwiches in his life, than he did during those months!

As cell phone use was not allowed within the hospital, we would make our phone calls during the food run, outside by the latte cart, which was a popular destination for staff and visitors alike. It adjoined a very pleasant garden area surrounded by impatiens, ferns, and large shade trees. Several benches provided quiet solitudes away from the latte cart and a surprisingly novel and carefully fenced “poison plant garden.” It was funny but also very informative to see this collection of plants, especially since there were several that we didn’t know were poisonous. You never know where you will pick up new fun facts! Needing a momentary escape from stress, the latte cart and the garden gave us a few minutes of happy distraction.

After a few weeks, we began to recognize some of the other patients who were on similar treatment schedules. Many would say hello before settling into their own routines. Some patients watched television while others read books, listened to music, slept, or ate lunch. The scene had a sense of the surreal. On the surface, the patients were like any other group of people waiting; like those who might be waiting at the car wash, at the hair dresser, or at the airport. But unlike those types of waiters, this

group was passing the time receiving a toxic mix of chemicals that would likely make them feel worse than they did before they started their treatment. And their wait time was a bit more complicated, being punctuated by frequent trips to the bathroom or bouts of vomiting. Such close proximity to other patients was sometimes disconcerting, as there was no way not to see or hear events that you'd rather not see or hear.

During one chemo session, Mom fell asleep while we watched a movie. Suddenly a commotion occurred in the suite, as the nurses rushed through the room to assist another patient. While we were not close enough to see him, the nurses communicated to one another that he was having an allergic reaction.

“Go get his doctor!” one nurse directed, as they quickly disconnected the chemo drugs and administered intravenous Benadryl. His doctor came in to evaluate his condition and to determine if they needed to call for a transport to the emergency room. We watched in horror and dismay at the unfolding emergency and looked to see if Mom was aware of the commotion. To our relief, she was still asleep. Once the situation had calmed down, we agreed that there was no good reason to tell her what had happened. We were just grateful that Mom had not had any reaction to her chemotherapy. However the incident left us a bit rattled and we wondered if she might suffer a similar reaction one day. Just as we had settled into a comfortable routine, we were reminded of the toxicity of her treatment and the unpredictability of her situation.

For another session, Lynn had accompanied Mom to her chemo appointment. Mom's treatment was underway, and they were watching television. A nurse came by and drew the privacy drape, as another patient was put into the bed next to Mom. While Lynn was not trying to eavesdrop, they were only separated by a curtain, so it was hard not to hear the conversations taking place between the patient and the nurse, and then between the patient and someone she called on her cell phone. She had just come from a doctor's appointment in the adjoining offices and was in the suite to complete an unscheduled chemotherapy session. As soon as the nurse left to order her drug preparation, the patient made a cell phone call. Apparently her blood test results were not encouraging. She was crying as



she explained that the doctor had given her about two to three weeks left to live, and that they were making one last attempt at chemotherapy to see if it would give her a little more time.

We were trying to be positive about Mom's outcome, so it was depressing to hear that someone else's battle was nearly over, and that they were going to lose it. Lynn's main concern was making sure that Mom could not hear the conversation taking place behind the curtain. As they watched television, Lynn made more comments, asked more questions, and actively worked to engage Mom in as much verbal interaction as possible. As long as one of them was talking, Mom was distracted from listening to her neighbor.

Not all encounters with other patients were bad ones. While in the waiting room before chemo one day, Mom chatted with another woman. She and Mom traded cancer stories and talked about their families. We learned that the woman was being treated for breast cancer and that she lived by herself. Knowing how ill Mom became after her chemo treatment, we wondered how the woman could manage it alone. She didn't have a car and relied upon her neighbor to drive her to appointments. When the neighbor was not available, she sometimes took a taxi.

"God is so good," she said. "He always provides a way for me to get to my appointments." She continued by expressing her gratefulness for God's many blessings despite her illness.

Further conversation with her revealed that she didn't see her own children very often, and it brought her joy to see that we accompanied Mom to the chemo sessions.

"You are so blessed to have your daughters here with you." Mom began to tear up, and the woman reached out and put her hand on Mom's arm. "God is with you. He's not going to leave you."

"I know," Mom nodded as she began to cry. The conversation was emotional, but very encouraging as God reminded us once again that he was still walking with us. We were touched by the woman's strong faith and commitment to the Lord. She was so thankful for even the smallest of provisions, which, considering her condition might seem incongruous.

Instead of focusing on her cancer, she chose to see the goodness of God around her and encouraged others to do the same.

Another silver lining in the dark cloud of cancer was that the infusion time gave us the opportunity to just spend time with Mom talking and thinking about something else other than cancer. Since these moments were few, we tried to savor them as long as possible. We would talk about the grandkids, world events, politics, and the latest activities of family and friends. Before we knew it, these few minutes of down time would be over, and we would be obligated to get back into the trenches. With the infusion over, the take-home pump would be attached and we would head for home.

The chemo pump seemed to be particularly bothersome for Mom, and many times she told us how much she hated it. The electronic motor would make a noise as the drug was dispensed, and sometimes the alarm would sound in the middle of the night, when the batteries needed changing. She had to put the pump on the bed next to her, and then had to move it if she wanted to turn over. During the pump weeks, it was more difficult for her to sleep, and she always looked forward to the Friday when it would be disconnected.

After a few months of chemotherapy, the side effects of the drugs were intensifying and really starting to bother her. She did have some nausea and sometimes also had no appetite.

Neuropathy, which the doctor mentioned she might experience, was an unpleasant side effect that started mildly in her fingertips and progressively got worse. A constant tingling sensation in her hands and feet made even the simple tasks of feeding herself or walking more difficult. Everything she touched felt prickly to her. Later all of her skin became hypersensitive, so that even the bedding was uncomfortable. Sheets and towels felt rough against her skin. She became sensitive to light and noise as well. Due to her increased sensitivity, Dad began to sleep in the guest bedroom, as just his movement in the bed would awaken her and make her edgy. She needed her surroundings to be cool, soft, and quiet.

The chemotherapy had an obvious effect on her appetite, and we tried to bring her whatever she could tolerate. Mouth sores, another side

effect of the chemo, also affected what she wanted to eat. Often her choices included soft cold foods like yogurt, fruit cups, Ensure shakes, and Starbucks orange cream frappuccinos!

During our own experience with CPT, we had researched our condition so we could understand our situation and take an active role in determining the best course of action for our treatments. When Mom was diagnosed, we found that our previous method of combating disease didn't work so well in her situation. We were in way over our heads. We tried to understand the science behind the disease, reviewed chemotherapy drug side effects, and poured over cancer web sites to get a better handle on how we could help Mom. Our goal was to get her through chemotherapy treatment with as little discomfort as possible. Between the effects the cancer was having on her body and the side effects from the chemo drugs, we were severely outmatched. She also had significant bowel issues, needing both anti-diarrheal medication and stool softeners.

We were in a constant state of second guessing ourselves in an effort to reduce Mom's suffering. She was taking Vicodin for the rectal pain which caused constipation, so we alternated with Tylenol instead. Since the tumor continued to partially block the bowel, abdominal cramping, gas, and bloating were a problem, for which we gave her simethicone. The chemo caused loose stools, so we gave her Immodium and followed the BRAT diet. We alternated over-the-counter medications to help her cope with the symptoms. There was no way to know which of her bowel issues were due to diet, which were due to the chemo and medication, and which were due to the tumor. Communication with the doctor helped guide us a bit, but mostly we were left on our own to make our best guesses. We tried to anticipate the symptoms and keep ahead of them with the appropriate medications, and Mom generally agreed with our logic. Just when we started to make some progress, her bowels would go too far in the other direction, requiring us to change medications again to bring her back to some sort of middle ground. As much as we tried to help, on some days she was clearly uncomfortable, and we were discouraged that we couldn't do more to help her.

Another side effect of the tumor was some loss of bladder control. Often the urge to urinate was sudden, and she had not the strength to get to the bathroom in time. To her disappointment, she had to start using adult diapers. While they worked for the most part, they leaked fairly often during the night, which prompted the need for bed pads. Once or twice a night, she would call, and we would need to change her, sometimes requiring a change of bedding and pajamas as well. This became a big deal, because the wet condition woke her up in the middle of the night, making it even more difficult for her to sleep for more than a few hours at a time. In addition, the constant wetness increased the likelihood of urinary tract infections. After doing some research online, we found a brand of adult diapers with a very good track record of both preventing leaks and keeping the patient dry throughout the night. She was finally able to sleep without the wetness waking her up. They were more expensive than the store-bought brands, but they made all the difference in the world! One wouldn't think that a package of diapers would be all that important, but, in our case, it was such a tremendous blessing. We had really needed to get the problem solved, so that Mom could get the sleep she needed, and, with this brand, she was finally able to sleep.

Upon starting chemotherapy, Mom initially understood that her hair loss might be minimal, but after a few months she did begin to notice it accumulate on her pillow.

“Look at that, I'm losing my hair. Oh, it's just coming out in clumps.”

With all of the physical side effects that caused her pain, this side effect which didn't cause any pain, seemed to damper her spirit more than the rest. Generally, Mom was very practical, but her disappointment over losing her hair was something she could not hide. Dad tried to reassure her.

“It doesn't matter, it will grow back.”

From a woman's perspective though, her hair is a symbol of her femininity. In society, ladies are expected to have hair. The hair loss also made her cancer real in a very visible way. Until this time, she could keep her condition private. Now when she went out into public, her lack of hair

was like a big sign around her neck saying, “I HAVE CANCER.” Mom also expressed her concern that her grandchildren might be afraid of her looking so different. This turn of events was very difficult for her, and she expressed a desire to wear a pink wool cap whenever she saw the grandchildren or ventured out into public.

Throughout those tumultuous months, we were given the opportunity to serve Mom for a change, showing her how much we loved her. Often she would thank us for the care and then apologize for being such a burden.

“Mom, you don’t have to thank us. You’re the only mom we have, and we love you!” She was there for us our whole lives. During our struggles with CPT, Mom’s help was invaluable. We couldn’t have endured it without her. She had taken time off work and had cared for both of us after our surgeries. She worked tirelessly to do for us what we couldn’t do for ourselves. How could we do anything less for her now?

During those times, we learned a lot about sacrificial giving. Caring for someone with an illness can be overwhelmingly difficult at times. Caring for someone with cancer is hard. It is messy, and it is heart wrenching. However, it gives us the opportunity to be like Christ and really show those we are caring for, how much we love them. Sacrificial love is when we place ourselves in situations that take us way out of our comfort zones. During those months with Mom, we realized a truth. We don’t show our love for someone by doing something that is easy for us to do or that doesn’t take much effort on our part. We show our love for them by doing things that are difficult or hard for us to do. That is when we are most like Christ.

Since trying to be more like Christ is not easy, we needed to continually turn to him to help us. During chemo treatment weekends, Lynn slept in her old room, which is the bedroom closest to Mom and Dad’s room. Both doors would be open so Mom could call her. We all learned to sleep lightly during those months. Mom would sigh as she tried to find sleep and sometimes moan softly in response to the aches, pains, and general discomfort in her body. In listening to her, Lynn was grateful when she finally heard Mom snoring. We were constantly aware that Mom

was in pain, uncomfortable, and sometimes nauseous, and that we were unable to do much to relieve her suffering. During most of those nights, listening for when she finally slept, Lynn prayed that God would diminish her suffering. “*Lord, please decrease her pain tonight. Please allow her to sleep.*” The helplessness one feels as a caregiver is sometimes overwhelming.

Some people think they are not up to the task of being a caregiver, so they avoid the sick at all costs. Lynn once talked with a fellow airline passenger who mentioned that his father had just had a stroke the day before and was in the hospital, possibly close to death. When Lynn asked if he was traveling to see his father, he replied, “No, my sisters are there, and you know there’s really nothing I can do.”

Lynn felt sorry for the father whose son couldn’t put his own discomfort aside in order to spend time with his dad, possibly for the last time. Lynn guessed that the son found the illness of his father just too difficult to face.

So, when we do feel overwhelmed by the illness of a loved one, and we can’t stop their suffering, how do we help them? What if we don’t know what to say? What if we don’t know what to do?

First, we can start by just being there. Most people who are ill do not want to be alone, especially if they are hurting or afraid. Our presence can make a huge difference.

Second, we can start with the basics and inquire with specificity. We can ask them “what do you need?” Many people become overwhelmed with the suffering of others because they feel that any small amount of comfort they might offer won’t go very far. To the person in need, however, all the little things add up. The neuropathy, which caused Mom’s hands and feet to tingle, became very annoying to her. Because of that, she valued the times when we could help her to just stand in the shower under the warm water. Other times, she enjoyed laying on the chaise lounge on the patio, listening to the birds. In the hospital, she was grateful for more ice water, our DVDs from home, or cards from friends and family. If we are asked for something we can do, we should do it, and, even more important, when we offer to help, we should mean it.

Afflicted people often hear, “if there’s anything you need, just call me.” As recipients of that common phrase, we found that when we asked some people for help, we learned that a few of those offers were not genuine. However, in realizing this disappointment, we received a tremendous blessing from those who did step up to the plate. It was during these times we discovered just who our real friends were and how passionately they cared for us. If you are a friend or family member, be one of those people for your loved one. Be their advocate and their rescuer. Ask them, “What do you need?” and do your best to get it for them.

Third, we can pray. Ultimately, God is in control of the situation. He has not forgotten our loved ones and is allowing them to go through this valley for purposes of his own. The Bible says that his ways are higher than our ways, and his thoughts are higher than our thoughts. His plan is to redeem all people back to himself, and because of that plan, he allows situations to occur that will help accomplish that goal. In praying, we can ask him to provide comfort for our loved one and to make himself very real to them, so they know that he has not forgotten them. When we don’t know what to do, we do what we can, and we leave the rest up to God.

## CHAPTER SEVEN

### *Silver Linings in a Dark Cloud*

As we settled into the cancer norm, our family made an effort to look for the good despite our painful circumstances. When we looked, unexpected blessings were seen. Suffering had clarified what was important in life and what was not. We spent more time concentrating on our relationships with each other. Caring for Mom had brought our family closer in a way we weren't expecting. Instead of allowing the cancer to conquer and divide us, we chose to come together; in doing so, we were rewarded with opportunities to value and cherish one another.

### Dad Learns How to be Mom

Since we only traveled to San Diego about every other weekend, Dad quickly became Mom's primary care giver. We spoke to Mom by phone every evening and after she was in bed, Dad would talk to us candidly about her care. He would voice his concerns about her physical condition, and we would try to address those issues when we made our



next trip. Other than our long distance advice, Dad had to make daily decisions unassisted.

One of Dad's new tasks was something that he was initially very reluctant to do. Mom's PICC line required a daily heparin flush, using aseptic techniques. Dad was very uneasy just being in a hospital and certainly didn't feel capable of participating in an activity he had watched the nurses perform. With the help of a nurse from their church, Dad learned the technique. She patiently taught him how to swab the injection port with an alcohol wipe, open the sterile blunt tip, attach it to the syringe, expel air from the syringe and inject the heparin straight into the port. After a few weeks, it became just as routine as bringing Mom her tea.

Communicating all the changing details to one another became somewhat burdensome, so we started to write everything down. During our trips home we would compose a list of questions for Dad and Mom to address with the doctor at her next appointment. Dad would write down the answers, sometimes asking the doctor to write them instead. He would even call us on his cell phone while in the doctor's office so we could communicate directly with the doctor. It was a very good method to make sure everyone was on the same page, and it took the burden off Dad of remembering everything that was said. Mom's oncologist was very understanding, patient and accommodating, making every effort to communicate clearly with the family.

We left Dad our own notes in bullet format, so they were easy to see and follow. We drew a clock with color-coded hours circled on it and prepared *Dixie* cups of "Breakfast pills" and "Dinner pills," to make it easier for him to administer Mom's medications on a schedule. After our brief weekends, Dad was left to be responsible for everything until we could return to help him.

Mom showed him how to pay the bills, how to turn on the dishwasher, and reminded him not to put metal in the microwave. After that, he was mostly on his own. He learned how to shop for groceries and how to do the laundry. He vacuumed and dusted, prepared meals and washed dishes. When faced with a new challenge, he did his best to figure it out for himself or make the best guess that he could. This sometimes

resulted in us having to figure out where things were, using “Dad logic.” *If I was toilet paper, where would I be? In the bathroom? No--in the hall closet, next to the books!*

Understanding that men don't use the same thought process as women, we were amused when liquid dishwasher detergent was put in the kitchen sink scrub sponge, requiring a lot more water to properly rinse it from the dishes! *Poor Dad! All those soaps, which one to choose?* Dad was thrown into the unknown and had to either sink or swim. To his credit, his early dog paddling gave way to a confident breast stroke over time.

As the weeks went by, he found that he was quite capable, sometimes even surprising himself. He and Mom settled into a new routine of reversed roles. He got her breakfast in the morning, saw to her personal hygiene, and ensured that her medications were administered on time. He would settle her onto the sofa in the family room or out onto the patio chaise lounge for some fresh air, while he went to the store for supplies or groceries. In the afternoon, he took her to the park by the bay to change her scenery. In the evenings after dinner, he would help her with pajamas and bring her a cup of tea. He prayed with Mom before she went to sleep, later falling into bed himself, exhausted. Despite the hard work, finding a routine helped both of them. When we arrived every other weekend, we would pick up where Dad left off, allowing him some “down time.” Over all, we had found our footing. We had a schedule and a routine, and we all worked to get through one day at a time.

## The Retro Christmas tree - Restoring Some Normal

On some of the weekends we were in San Diego, Dad would travel to Lori's house for a few days' break. Lori's husband, Victor, rebuilds classic cars, and having restored a 1957 Chevy Bel Air for Dad, they had a lot in common. On one such weekend in December, we visited with Mom for a little while and then allowed her to rest while we went out to run some errands. We listened to Christmas music in the car as we headed off to Walmart.

The year earlier, Lori had compiled two compact discs full of Christmas music from our childhood. Our old LP recordings had been converted to electronic format, so we could listen to the records we loved as children. When we were kids, we would lay under the Christmas tree looking up at the lights while listening to Bing Crosby, Doris Day and Johnny Mathis sing the classics. (Lori's daughter does the same thing now, so it must be a kid thing!)

As we listened to the Christmas CDs that day, we reminisced about how life used to be. We desperately missed the "normal" that so many of us take for granted until it's gone. Festive Christmas decorations were everywhere. Colorful garlands were draped across streets. Outdoor trees were covered with lights and larger-than-life ornaments hung on every fixture that would support them. People bustled in and out of stores, while others relaxed around the outdoor fireplace with their favorite coffee drink. Normally we would have had our spirits lifted by such displays, but the uncertainty of our situation left the family focusing on Mom's cancer, and nothing else. We had barely shared turkey on Thanksgiving Day, which had not been an easy task for Mom since she was frequently nauseous. The family's schedule was now planned around the chemo schedule and so far, Christmas wasn't on the schedule.

At Walmart, we walked up and down the aisles gathering Ensure shakes, Diaper Genie refills, straws, yogurt and fruit cups--all the things Mom now needed for her new life with cancer. As we turned into a new aisle, we spotted all of the beautiful Christmas decorations. Needing a bit of normal ourselves, we strolled by to look at them. Over the last several years we had spent most family holidays at Lori and Victor's house, since they were more centrally located. As a result of their frequent travels away from home at Christmas time, Mom and Dad had not put up a tree in years. All the decorations had been safely packed away in the garage rafters where now, more than ever, they seemed destined to remain.

Just then we saw it: a beautiful white pre-lit tree, adorned with shiny ornaments of magenta, teal and lime green. It looked just like a retro-tree from the sixties and reminded us of our childhood when Dad was a display manager for Sears and then for JC Penney. Both stores were part of

an outdoor shopping mall, and had large display windows where Dad would dress the mannequins in the latest fashions. Part of his job was also creating appropriate backdrops or scenes to accommodate the seasons. One year Dad took photos of us kids at Sears, using the Christmas window decorations. We sat in a red painted sleigh, surrounded by white Christmas trees, glittering ornaments and plastic snow flurries. It was quite a treat, since our parents could not afford to have pictures taken at a photography studio.

At night, Mom and Dad would take us to the outdoor mall for Christmas shopping. We would save our allowance to shop for Grandma Catherine and our great-uncle Henry at the five-and-dime store, buying the same smelly aftershave lotion for poor Uncle Henry, year after year. He was always grateful though, like it was the first bottle he had ever received!

In the center of the mall, glass-enclosed pavilions were set up each year. Inside, enchanted winter wonderlands unfolded, where penguins ice-skated in circles, seals sled down icy hills and a polar bear tried his hand at ice fishing. We would stand in awe and wonder, trying to see each detail and catch a glimpse of every moving part. At one end of the mall, the smell of perfume wafted out the doors of the Broadway store, mixing with the cold night air. Hearing Bing Crosby sing of a white Christmas, we would snuggle in our coats and relish in the sights and sounds of the season.

A few moments of nostalgia inspired us to recognize that Mom needed more than just fruit cups and vitamin shakes. What she really needed was some normal and we were going to surprise her with it! Although inexpensive and artificial, the Walmart tree was just like the retro decorations we remembered from our childhood.

We bought the tree and the ornaments, leaving them safely hidden in the trunk of the car until Mom was tucked away in bed that night. Quietly, we assembled the tree in the living room. We forgot to buy ornament hangers (who doesn't?) so we rifled through Mom's desk, looking for paperclips! It was difficult to keep from giggling that night, but we were on a mission, happy to be doing something that would bring her some joy. The tree sparkled, adding both Christmas and nostalgia to the room. A silver rhinestone star topped the tree, while a silver embroidered

skirt anchored the bottom. It was perfect, and we knew that Mom would love it.

The next morning we tended to her needs, carefully hiding our excitement about her waiting surprise. We asked her what she wanted for breakfast and told her that it would be waiting for her when she was ready. We lit the tree, loaded a Christmas CD onto the stereo and watched for Mom to make her slow progression down the hallway.

She came around the corner and then she stopped. Wonder and surprise crossed her face as she took in a breath.

“Oh. . . you got a tree!” she said as her voice wavered and she began to cry. With tears of gratitude, she stepped closer to the tree.

“We haven’t had a tree in such a long time. Thank you girls; it’s so beautiful.”

It touched her heart that we had thought of her emotional needs as well as her physical needs, and tried to give her some normal in a cancer world. It was also a big boost for our own emotional well being. We were happy to see her enjoy a moment in life instead of trudging through another day with cancer.

From our experience with Mom and our own struggles with CPT, we know what it means to lose that day to day “normal.” While everyone has ups and downs in life, having a prolonged illness somehow changes life in a way where it never quite returns to “normal” again. Even when treatment occurs and health follows, there can be a lingering fear that the condition may return. During our journey, it became evident that time, energy and resources were in limited supply. It was very important to distinguish those things which were worthy of our resources and those things which were a waste of time. When people are obligated to re-prioritize the components of their lives, they realize how much time and emotional energy are spent on things which are utterly worthless. After a while, things like making sure your favorite show is recorded or planning what to do this weekend pales in comparison when placed next to a few hours of normal for someone with cancer.

We spent time that weekend talking with Mom about our family Christmases, and during those conversations our thoughts were diverted to

happier times. We believe that God gives us those precious memories to comfort us when life becomes uncomfortable. Perhaps he also wants to remind us how life was supposed to be and how it will be again for those who are his.

## In Spite of Cancer, Life Goes On

By January, some progress had been made. Mom's liver enzymes were within normal limits and the CEA had decreased from 72 to 19. A CT scan revealed that lesions in the liver had decreased significantly in size, which indicated that the chemo was being effective. We were encouraged by these positive signs as well as Mom's stubbornness to do as much as she could for herself. She would often get out of bed and make herself something to eat, reclaiming back a bit of her independence. Despite her progress however, she continued to be burdened by neuropathy. Her hands and feet constantly tingled as though they were asleep, which made walking and doing even simple tasks, more difficult. Being dependent on others was a change she reluctantly succumbed to. Before cancer, Mom was used to taking care of herself and everyone else. At an early age, her father passed away suddenly, requiring her mother to enter the workforce to support the two of them. At just thirteen, Mom took over many of the household responsibilities in addition to her school work. These significant changes to her life taught her to rely on the Lord when times were difficult. These early life lessons instilled in her the gift of empathy which blossomed into compassion for others.

Working with geriatric patients in the nursing home allowed Mom to put her faith into practice. She had a true concern for the elderly and was gifted in a way that allowed her to foster genuine friendships with the patients she worked with. She enjoyed spending time with the patients, but the extensive record keeping mandated by law consumed a great deal of her work day. She found this to be very frustrating and she made it her goal to retire and return as a volunteer. She had amassed a collection of historic literature, vintage magazines, old music recordings, and antique objects. Mom understood that while their bodies didn't work as well as

they used to, many of the patients still had sharp minds. She used these tools to encourage them to remember, thereby increasing their cognitive functioning. She also understood their need just to have visitors to talk to and to listen to them talk about themselves. Mom was a wonderful listener. She discovered that really listening to what someone had to say was a very practical way to show them God's love. She tried to treat them as Christ would treat them and show them that they were still valuable members of society.

Through her work at the convalescent facility Mom met Chaplain Paul. He was part of the Chaplin Program for nursing homes, and he and Mom enjoyed discussions about faith and about the Bible. After Mom had been admitted to the hospital, we discovered that Chaplain Paul was on staff there as well. She found great comfort in his visits with her.

Despite Mom's strong faith, she found life with cancer very difficult and would often sigh, "Dear Lord." She had to rely on God's strength daily, and at times hour by hour, or minute by minute. We know from Scripture that he was indeed by her side, encouraging her and giving her strength when she didn't have any of her own. The Bible reminds us that Jesus was himself acquainted with suffering, and therefore understands our pain and our weakness.

He was despised and rejected by men, a man of sorrows, and familiar with suffering (Isa. 53:3a).

Sometimes we may feel that God is too big up there to care about our small needs down here--needs like getting a good night's sleep, getting to a doctor's appointment, getting a cap off a bottle with tingling hands, or just getting some food to stay down. These were Mom's daily struggles and she called on the Lord to help her with each one of them.

At the beginning of the cancer battle, she placed her small white leather-bound Bible on her night stand. Mom had many Bibles for studying but this one held special significance. It was the Bible that her mother had presented to her on her wedding day. Being confined to her bed so much,

she read passages from this Bible frequently. Early in her struggle, she told us that she had claimed a verse for herself which underscored her hope.

God is our refuge and strength, an ever-present help in trouble (Ps. 46:1).

Mom recognized that God was the source of strength from which she could draw. He wasn't a God just sitting on some lofty throne, unaware of her struggle, but a Lord of compassion and help. His intervention was tangible as we saw provision after provision being made for her, and for us as a family.

It was Mom's relationship with her Lord that enabled her to face the valley of the shadow of death without fear. Later, Dad told us of a conversation he had with Mom during the midst of her chemo treatments. They were talking candidly about the "what ifs" and Dad asked her if she was afraid to die. She thought for a moment and replied calmly.

"No. I don't want to die, but I'm not afraid." The assurance of God's presence gave her peace in the midst of an uncertain future.

You will keep in perfect peace him whose mind is steadfast, because he trusts in you (Isa. 26:3).

Facing death is the greatest challenge we will ever face as humans. There is no going around it or avoiding it. We can try to push it off for a while with healthy living or medical treatment, but eventually it catches up with all of us and there is nothing we can do to stop it. However, how we face death is a choice we *can* make. We can choose to walk that road alone or we can choose to walk it with God.

## Mom to the Rescue

Over the years we found that some aspects of our relationship with our parents remained the same no matter how old we got. Despite our age, our mom has always been our mom, and even as adults we found comfort



and security in that relationship. Being separated by only eighteen years, we've always had a close relationship with her. After moving away and establishing our own families and households, we still relied on Mom's opinion and her wisdom. She was always there to listen and provide "Mom advice." Whether it was child rearing techniques, where to find something that was lost, or how to cook a turkey, we sought her opinion.

Part of the emotional struggle we faced when Mom got cancer was the reversal of our roles. Instead of her being the caregiver, we were now caring for her. We gave her our advice and direction, and she dutifully followed. She trusted us to care for her, just as we had always trusted her to care for us. Although we were glad to do this for her, that role reversal brought with it some sadness as well as a loss of security. We felt as though we had lost the mom we remembered from our childhood.

Lynn said that she had always enjoyed going home because she got to "be the kid again." She would sleep in her old room, and in twilight sleep would hear the sounds of home. The television would be on, and Mom and Dad would be talking in the other room. In those moments she was a child again, without the responsibility of a job and a mortgage. The burden of adulthood was stripped away and she was safe in the protection of her parents. Someone else was in charge and she could sleep peacefully.

When Mom got cancer, all of that changed. That sense of "going home again" was no more. When we went home now, we were in charge and responsible. There was no peaceful sleep. There was no sense of security. Home was no longer a place of comfort. Mom's appearance and demeanor had changed, and at times it was difficult to remember her the way she used to be. The loss of that childhood relationship with her was very painful and just another reminder of what cancer had done to our family. We knew that we couldn't change the circumstances and gain back that childhood relationship, but in God's provision, he allowed Lori to get a glimpse of the mom we remembered.

The days of chemotherapy were very trying. We were all worn out, physically and emotionally. Lori was there for the weekend without Lynn, staying in the bedroom closest to Mom's room in case Mom should call for her during the night. Exhausted one evening, Lori dropped into bed. She

wasn't asleep very long before she had an awful nightmare. While still asleep, she could hear Mom calling to her in her dream.

“Lori, Lori, you're having a dream, wake up.”

She finally woke to find Mom coming through the doorway. Although weak and mostly confined to her bed, Mom somehow found the strength to get out of bed unassisted and make her way down the hallway toward the sound of Lori's cry.

For one brief moment, it was as though nothing in our lives had changed. There was no thought of cancer. There was only Mom bringing comfort to one of her kids. Mom was Mom again. She was needed, so she put her own weakness aside and came to help. Lori was reminded that Mom was still Mom on the inside regardless of how much the cancer had ravaged her body on the outside. It had taken so much from her, but it could not take away who she was. She was still our mom and always would be. For a short while, Mom was given the strength necessary to come to the aid of one of her children, and Lori experienced a momentary relief from the burden of being in charge. God knew that an exhausted child needed her mother's reassurance and perhaps the mother also needed the opportunity to be the caregiver once again. Through the provision of one nightmare, he provided for both.

## A Bittersweet Celebration

It was a few weeks before Mom and Dad's forty-fifth wedding anniversary, and we talked about how we would celebrate it. In the midst of everything that made life abnormal, we wanted to give both our parents a few hours of normal. Our goal was to distract them with memories of happier times when life was more enjoyable. Dear friends of theirs from Minnesota were already scheduled to stop by for dinner on the weekend of their anniversary, so we started with that and expanded it into a small celebration. Knowing that Mom frequently felt unwell, we didn't want to overwhelm her with too many people or too many activities. As a surprise for Mom and with Dad's help, we invited three other couples who were close to them to stop by for dessert. We ordered a cake which featured

their wedding picture, decorated in pinks and greens with fresh flowers adorning the edges. Lori arranged additional flowers in a vase and used a few roses to make a lovely corsage for Mom. Floral plates and napkins depicting the vibrant colors of spring and plastic champagne glasses completed the festive decor. It was not the most glamorous party we had ever thrown, but after several months of fighting cancer, we all needed a little bit of beauty. Those paper napkins and plastic champagne glasses were more beautiful and more appreciated during this time than a lavish banquet at any other time.

For their gift we chose to produce a family photo DVD slide show. We wanted to celebrate their anniversary in a nostalgic way without dwelling on the fact that life used to be better than it was now, or alluding to the fact that this might be their last anniversary together. We knew there would be a fine line between remembering the past with joy and somehow insinuating that the show was Mom's life in review because we expected her to die.

Because the DVD was a surprise for both Mom and Dad, we had to secretly pull old pictures from the family albums late at night over a few weekends in San Diego. We smuggled the pictures out in our suitcases and scanned them into electronic format. Although we selected some pictures of Mom and Dad as children, most of the pictures were fun and lighthearted. We purposely chose photos that were funny and even used captions with some of the pictures to remind Mom and Dad about humorous inside jokes we shared as a family.

In looking for slide show backgrounds, we found a nostalgic red velvet theater curtain, reminding us of *The Carol Burnett Show*. It had been a favorite program during our childhood and Mom still enjoyed the show on video cassettes. We would start our production with the red curtain and a small cartoon of Carol Burnett as the cleaning woman, opening our family satire "A Bucket Full of Memories." Each family member was introduced through an open doorway, just as the guests appeared on the show. Lynn found cartoon bodies for our faces and Lori searched for the theme music. She found a web site featuring a whole collection of television show music and our Retro-Television Sitcom theme was born. It was a perfect way to

present the nostalgia of our past in a funny and lighthearted way. We used music from several shows we enjoyed as a family like *The Flying Nun*, *The Dick Van Dyke Show*, *Big Valley*, *My Three Sons* and *The Andy Griffith Show*. Each song accompanied pictures with a similar theme. We panned for gold and explored ghost towns to *The Wild Wild West*. We walked along the beaches of Waikiki to *Hawaii 5-0* and *Magnum PI*, and Mom and Dad cruised the Alaska inner passage to *The Love Boat*.

On the afternoon of the celebration we hoped that Mom would feel well enough to want to join us for dinner. She knew that their Minnesota friends would be there, but there was still the possibility that she would stay in her room if she didn't feel up to joining us. Since we had a nice evening planned for her and Dad, we prayed that the Lord would give her the strength to be able to enjoy herself.

Lynn helped her dress and even apply a bit of lipstick. To our delight she felt fairly well and even looked forward to the visit with their friends. Dinner went well and Mom settled onto the sofa. After dinner, the doorbell rang again. To her surprise, more friends arrived with flowers and gifts. As she received her new visitors, we set up the cake and poured the champagne for an anniversary toast. Mom clearly enjoyed herself in a way that she hadn't for a long time. She talked and laughed with her friends just as she had before the cancer.

As we gave Mom and Dad their gift, they both put on their glasses so they could see it, and simultaneously asked, "What is it?" The room got quiet as we explained that we had created a DVD slide show incorporating family photos. Knowing that Mom and Dad might be apprehensive about viewing a show that could elicit some strong emotions, we assured them that the show would be entertaining.

Everyone thought the *Carol Burnett Show* opening was clever and funny. Mom did become a bit emotional during her and Dad's childhood photos, but soon the campy music from the sitcoms had Mom and everyone else laughing. It then became a game to see who could guess the name of the sitcom first. Before the *Carol Burnett* theme music began again to close the show, we showed pictures of just Mom and Dad as a couple from their wedding day to the last picture of them together on their Alaska

cruise. This part of the video quieted the laughter as we reviewed their forty-five years together. Since we didn't want the video to end on a tearful note, we placed a little lighthearted surprise at the end.

Following the credits, the red curtain returned with the words "The End," as silent screen era music started to play. A picture of Carol Burnett reappeared, this time as the silent screen star Nora Desmond. She asks her faithful servant Max, "Max, is the movie over? Did they love me Max?" To which he replies, "I am sorry Madam, but you were not in this picture." The last photo showed a shocked and appalled Nora Desmond as the music ends and the screen fades to black. It was an upbeat ending that brought back the laughter.

After all the guests had left, Mom expressed her gratitude and appreciation for the bit of normal. She enjoyed the interaction with company and the breakup of her routine. Mom went to bed that night, happy and with uplifted spirits. For one evening she wasn't a cancer patient. She was a wife and a mom and a friend.

## CHAPTER EIGHT

### *Overrun by the Enemy*

Mom's independence didn't last very long. Once again she became very weak and had to be admitted to the hospital where it was determined that she was anemic, dehydrated, and suffering from a urinary tract infection. The chemotherapy was affecting the cancer but it was also decreasing her immunity to infection.

Additionally, her liver enzymes were steadily increasing, indicating that the chemo drugs Cisplatin and 5-Fluorouracil were losing their effectiveness. Due to this and her increasing inability to tolerate the side effects, her doctor decided to change her chemotherapy drugs to Taxol and Carboplatin.<sup>1</sup> The new drugs would bring some positive changes to her routine. Nausea was not expected to be as bad and overall the drugs would be better tolerated. The number of infusion days would increase from one to three per month but the time needed for each infusion would decrease from six hours to two. Additionally the pump would no longer be necessary. Mom looked forward to the changes, hoping she would be better able to tolerate the new drugs.

During Mom's hospitalization, a minister from our childhood, Pastor Vanderpool and his wife came by to visit with Mom and to pray with us. Danny and his son, Austin had returned from their home in Northern California, which also brought Mom a great deal of comfort. The provision of family and friends to visit and encourage her during this time of setback was a wonderful blessing for Mom. God sent so many friends during the cancer journey, some of whom we had not seen in years. People just came out of the woodwork to help, support, encourage, or just sit with Mom, and we felt the effect of all the prayers raised to heaven on our behalf.

As a result of the hospital stay, Mom received fluids, antibiotics, and a blood transfusion. We didn't know until the following week just how important and necessary these provisions would prove to be.

## Emergency Surgery and New Challenges

Mom was released from the hospital feeling a little bit better. She was better hydrated, and the antibiotics were fighting the urinary tract infection. The blood transfusion had given her more energy as the additional red blood cells provided more oxygen to her tissues. A few weeks off the chemotherapy drugs made her feel better but apparently gave the cancer the freedom to proliferate with little resistance.

The tumor increased in size causing more bowel blockage and more pain. Within a week she was back in the emergency room.

The doctor explained to her and Dad, that even though the previous blockage had been significant, the tumor was now very close to causing a complete bowel obstruction. The situation had to be addressed surgically and it had to be done immediately.

"Since we cannot remove the tumor, the bowel needs to be rerouted. You need to have a colostomy."

After working for so many years in a nursing home, Mom was well aware of what a colostomy would mean for her future. Her response to the doctor revealed this contemplation.

“I think I would rather die than to live with that.” She asked if there was any other way and then ventured, “What if I don’t have the surgery?”

“Well, we can send you home with pain medication, and you’ll be dead within a week.”

At this crossroad, she and Dad had a serious and emotional discussion. If Mom had the surgery, she might live for several more months or even years, but if she didn’t, her imminent death was assured. From Dad’s perspective he wanted her to agree to whatever it took to preserve her life, both for him and for her children. To this end, he continued.

“If you don’t have this done, your kids will never forgive you.”

Perhaps she wanted to let go at that point, but realized the family was not yet willing to let her go. Again, Mom acquiesced to her apparent lack of choices and consented to the procedure.

As Mom went into surgery, we headed back to San Diego. The doctor was unsure if she would even survive the surgery given her compromised immune system. However, the previous week’s hospitalization provided the fluids, blood, and antibiotics her body needed, making her strong enough to endure the operation.

After the surgery, we met with the doctor and he explained how the tumor was situated, why the colostomy was needed and how he had rerouted the bowel. A colostomy is an opening in the abdominal wall, where a portion of the colon is rerouted to protrude through the opening. Disposable pouches attached to the abdomen are used to collect the waste.<sup>2</sup>

The surgeon was a very humble man, and spent a significant amount of time with us, even drawing diagrams to explain the procedure. The colostomy had saved her life. We were still hopeful that her cancer treatment would be successful in time and that Mom would return to some sort of relatively normal health. And so we asked about the possibility of colostomy reversal procedure. The surgeon was honest about his doubts for the necessity of such a procedure considering the cancer, but was quite



respectful with our questions, knowing that we needed to maintain hope that Mom would eventually be well.

The colostomy brought new challenges, but also provided a great deal of relief for Mom. She no longer had a painful blocked bowel or loose bowel symptoms. Her diet improved and she was free to eat whatever she liked without worrying about how it would affect her bowels. Emptying and changing the colostomy bag was necessary and a bit like changing a baby's diaper, but the reduction in her overall pain was well worth the unpleasantness. Again, Dad stepped up to the plate, learning how to empty and change the bag. When Mom felt strong enough, she began to empty the bags unassisted, giving her back a bit of independence. Overall, the procedure did provide a great deal of comfort for her and she began to feel a bit better. A few weeks later she resumed her chemotherapy treatments.

Prior to one of Mom's chemo weeks, Lynn traveled to San Diego alone, to take Mom to her appointment. The ritual blood draw had been completed the day before, so early on Monday morning she and Mom set off for the hospital. It was a chemo appointment like any other. Mom was set up in a bed, and the prerequisite Benadryl was administered. The first infusion began without incident, and Lynn asked for Mom's lunch selection. Lynn left for the cafeteria while Mom watched television. After lunch, Mom rested a bit before the second infusion was started. Lynn worked on a sewing project, looking up periodically to check on Mom.

About five minutes into the second infusion, Lynn noticed Mom in her peripheral vision, lifting her hand to her face. Lynn looked up to see that Mom's face was bright red like she had sunburn. Lynn jumped up and ran to the nurse's station a few feet away.

"She's red, she's red!"

Immediately an army of nurses surrounded Mom, disconnecting her from the intravenous line, and injecting her with additional medications. Her oncologist was immediately summoned and her treatment ended for the day. Since she had suffered an allergic reaction, the drug would have to be eliminated from all future treatments.

Mom was stabilized and Lynn was allowed to take her home. After getting Mom settled, Lynn drove the three hours back to Los Angeles

stopping by Lori's house on the way home. As soon as she saw Lori, she burst into tears.

“Mom had an allergic reaction, and she turned all red. They had to stop her treatment. She's all right, but the doctor said that she can't have that drug anymore.” Such a reaction had been a lingering fear, since seeing the other man in the Chemo Suite suffer a similar fate. With each setback, we lost a little more hope.

## Mom Suffers a Fall

Mom continued the next two treatments without any problems and after the third week actually began to feel better than she had in a long while. There was an increase in her energy level, so much so that she and Lynn attended a late afternoon local car show with Dad the afternoon of her third infusion. Lynn pushed Mom around in the wheelchair and Mom was happy to be out. She sat content, enjoying the people and the late afternoon sun on her face. Friends came by to say hello as Dad talked with visitors about his car. Dad won a raffle and Mom was in good spirits. She felt more like herself and we were hopeful that such progress might continue.

The following day, she and Dad traveled two hours to Lori's house. When they arrived, Lori heard Dad come in from the garage. She met him in the hallway carrying the soft bedding Mom needed.

“Here, can you take this and set up your Mom's bed so I can bring her in from the car?”

Just as Lori accepted the bedding they heard a bang and then heard Mom yell, “I fell!”

They rushed to the open doorway and found Mom on the floor. Having more confidence in her capabilities than her body would allow, she attempted to manage the step up into the house without assistance. In her weakened state, her legs did not have the strength to manage the step and she collapsed. Dad and Victor quickly helped her up and into the guest bedroom. Her ankle immediately began to turn purple and Lori applied ice to ward off the swelling.

Mom apologized, and it seemed certain that she perceived herself as a burden.

“I should have waited. I’m sorry.”

She was growing weary of having to rely on others to help her and wanted to regain some of the independence that she used to have. She then berated herself for trying to negotiate the step without assistance and apologized again and again for becoming a bigger burden in her attempt to be less of one. This broke our hearts.

“Mom, you are not a burden.”

We knew she was struggling with the loss of her independence and trying to do as much as she could for herself, while each day brought more reliance upon others. Now with her fall, she was completely confined to her bed.

After the fall, Mom’s health declined dramatically. When we returned to San Diego the following weekend, she was so weak she could not even hold up her head. Dad had propped up pillows behind her back to support her head in the wheelchair. We had driven down for the day to meet them for her appointment with the oncologist.

Noting her obvious weakness, the doctor was concerned that Mom was not strong enough to endure another month of chemotherapy and her next three appointments were canceled. He suggested that local radiation might be a better option until she regained some strength. He also looked at her still swollen ankle. An x-ray determined that it was fractured, so she was fitted with a boot to keep it from twisting while it healed.

Outside the exam room we asked to speak with him privately. Up to this point, no one in our family had asked the “how long” question, and her oncologist had been very careful to give us only the information that we were willing to hear. Considering Mom’s declining state, and knowing that treatments were becoming limited, we succumbed to the task of approaching her doctor with the one question that no one really wanted the answer to. With honesty and compassion he estimated, “a couple of weeks to a couple of months.” While still praying for a miracle, we drove back home that night, uncertain how we should arrange our work schedules should God choose not to heal her and take her home instead.

The following day Dad called Lori, frantic that Mom was becoming unresponsive. He was having difficulty caring for her.

“Lori, she’s acts like she’s drunk.”

We were concerned that Mom might have hit her head during the fall and had a concussion or some sort of brain injury that needed attention. Lori phoned the on-call nurse and the nurse suggested that Mom should return to the hospital. Mom was resistant to that plan, and Dad was unsure whether he should make her go if she didn’t want to. Lori called Danny and Danny called Dad.

“You need to call 911.”

Another ambulance was called and Mom went back to the hospital. Over the phone, we told Dad to make sure he asked the doctors in the emergency room about the possibility of Mom sustaining a head injury, and to request a CT scan. Although Dad did ask the doctors about that possibility, they didn’t appear to be concerned about that, and a CT scan was not authorized. They were, however, greatly concerned about physical therapy for her ankle, so after a few days she was moved to a nursing home where she could receive physical therapy for rehabilitation of her ankle.

A radiation appointment was also scheduled, with assurances that a transport would pick her up at the nursing home and bring her back to the hospital for her treatment. This all occurred during a week when we were not in San Diego. The arrangements were made by a hospital coordinator, and Dad was left to navigate the changes alone.

The following day a transport arrived at the nursing home, but refused to take Mom because she could not sit up in a wheelchair. They also told Dad that he was responsible for paying for the expensive transport even though they didn’t take her anywhere. Frustration set in, and Dad became overwhelmed. By the time we arrived at the nursing home a few days later, Dad was at his wit’s end and Mom’s condition was much worse.

We were stunned at her unresponsiveness. The doctor in charge of her care at the nursing home put her on continuous morphine and although the physical therapist visited her daily, she was in no condition to

participate in physical therapy. Convinced that she was over-medicated, we decided to bring her home and arranged for private ambulatory transport.

Mom was coherent enough to know that she was home and seemed content to be so. She slept for several hours, and we checked on her periodically to see when she was ready to eat. Later that evening, Lynn went in to check on her while she slept and heard a familiar sound. When she inhaled, Mom made the same crackling sound that we had made when our lungs were collapsed. Lynn woke Dad and Lori and we discussed what we should do. We wondered if her fall had also cracked a rib and partially collapsed a lung.

We then woke Mom to tell her of our concerns. She clearly did not want to go back to the hospital. She sighed several times before finally consenting to allow us to call for an ambulance. Lynn and Dad accompanied Mom to the hospital. Since it was the middle of the night, Lori remained at the house with her daughter Katie.

The emergency room doctor was very caring and respectful. She listened to Lynn explain the family's concerns and gently evaluated Mom's neurological responses. Gratefully, a lung collapse was ruled out with a chest x-ray. However, her white cell count was very high, and it was determined that she had a bladder infection. She needed to be put back on antibiotics. The doctor also ordered a CT scan of her head.

Lynn accompanied Mom to the Radiation Department, and waited outside for the scan to be completed. The hour was late, and she was tired. The Department was empty except for the technician who wheeled Mom into the scan room. Lynn remembers sitting and thinking how familiar all this hospital waiting time had become in the last few years: waiting for an X-ray to see if her lung had collapsed again; waiting for the doctor to evaluate the chest tube drain; waiting for Lori to be evaluated by yet another specialist; waiting for the surgery to end where Lori would lose a kidney; waiting for another blood draw to check Mom's liver enzymes; waiting to discover if Mom had a brain injury. She was growing tired of all of this and could hardly remember a time when life did not include waiting in the hospital for something.

With the CT scan completed, the doctor explained why Mom had been acting the way she had. She did not have a head injury but the cancer had spread.

## Cancer Moves to Her Brain

The previous evening, Lori called Danny, explaining that Mom had gone back to the hospital. Since this was uncharted territory for our family, Lori didn't know if she should tell Danny that he needed to come home. The following morning she called Danny's cell phone to update him with the grim news. Danny was already one step ahead of us.

"We are already in the car, and on our way."

Danny and Austin arrived a few hours later, and we talked about the next plan of action.

The doctors suggested that radiation treatments on her brain might improve her cognitive function. While this would not destroy the cancer lesions, it might make communication easier for her. Earlier that day, she had complained that she was having difficulty articulating what it was she wanted to say. She was becoming frustrated because her words were coming too slowly to express her needs to the staff. Because of this, both she and we agreed to proceed with the radiation, and Mom was scheduled for several treatments.

On the first day, the two of us and Mom had a consultation with the doctor of radiology. He was a very kind man, and asked Mom a variety of questions to test her cognitive ability. Although a bit unclear about the date, she knew who the President was, and even had some playful bantering with the doctor about his questions. The following day, she was not as energetic and began having sporadic moments of unconsciousness. The radiation appointment was difficult for her. Moving her from the bed to the gurney to the treatment table and back again proved to be very painful for her.

After getting her back into her hospital bed, we left her room to get some dinner, discussing the radiation treatment plan and whether the benefit of her being able to speak with us was worth all the pain of moving

her. We decided that it was not. In the midst of this conversation, we ran into Chaplain Paul in the hallway.

## Finding Peace in the Circumstance

Chaplain Paul recognized us and stopped to ask about Mom.

“How is your mom doing?”

“She’s not doing very well. The cancer has spread to her brain.

They have started radiation, but she went today and it was very painful for her.”

We mentioned that Mom had been a real trooper, enduring every medical treatment possible. But despite that, we were facing the very real possibility that she might not be with us for very much longer. While we knew her final destination, she had not openly discussed the possibility of her death with her kids. And because we had also avoided the subject, it left us uncertain about her feelings. Chaplain Paul’s response was enlightening and timely. From his perspective as a hospital chaplain and dealing with families in situations like ours, he had a real understanding of the emotions that accompany this journey. We were so close to the pain that we could not see, or chose not to see, what was obvious to him.

He encouraged us to see the situation from Mom’s perspective. Her family is so afraid of losing her, that they refuse to talk about the possibility that she might die.

“She may have avoided that type of conversation, because she’s afraid that it may hurt all of you. And she may be hanging on because she thinks that’s what you expect from her.”

He continued with a very sobering statement.

“You place a terrible burden upon her by allowing her to think that she needs to live up to your expectations; that she needs to keep fighting the cancer at all costs. You need to release her from that burden and tell her that it is okay for her to let go.”

We then realized that we had been unwilling to give up and unwilling to tell her we had given up, and in the process had created the situation where she could not give up either. He said that our hope for

healing needed to be tempered with the acceptance that the Lord might choose to take her home instead.

Chaplain Paul was right. We needed to relieve any burden we had inadvertently placed on Mom. We called Dad and Danny to meet us back at the hospital for a family meeting. Within the hour, we gathered in a small waiting area down the hall from Mom's room. We shut the door and had a serious and sober discussion about Mom's impending death. We decided as a family to discontinue all further treatments and tell her that it was okay for her to leave us when the time came. We contacted Chaplain Paul to meet us in Mom's room, asking him to pray with us before Danny was scheduled to return home.

Danny went back to Mom's room alone to say his final goodbyes. With a shaking voice, he told her that he loved her.

“Mom, it's okay if you . . .”

His tears prevented him from saying any more.

As Moms frequently know their children's hearts well, she understood what Danny needed to communicate, and quietly whispered “Thank you.”

She had been waiting for our acknowledgment that she was dying, and was now able to let go without having to protect our emotions.

Chaplain Paul joined us in Mom's room and we shut the door. He led us in prayer, focusing on the hope of heaven promised to her by Jesus. He then said his goodbyes to her, and left the room to give us some privacy. Just seven months earlier, we had gathered around Mom's bed in another room like this one, just down the hall from where we stood now. At that time, we were fearful of the future but hopeful that the Lord would heal Mom. Now gathered around her once again, we accepted the inevitable and made the most painful statements of our lives.

“Mom, we're all here. We need to tell you that if you want to let go, that it's okay. We don't want to lose you, but we don't want you to stay here just for us. We love you Mom, and we know you'll be safe with Jesus.”

In looking back we wondered why we continued to push on with treatments when it should have been obvious that she was dying. Perhaps



we didn't want to accept the fact that she might die, and so we held onto the hope that God would still heal her. We had not recognized how close to death she actually was, and had not wanted to consider that God might have other plans. We saw certain events as indications that he might heal her, and so we clung to that possibility like a dog with a bone.

In retrospect, we realized that our expectation of her healing was limited compared to what God had planned for her. His design did, in fact, include her complete healing, but not in the way we had asked for.

Mom understood that she would be leaving us soon and indicated her preference to be taken home. She knew that she was dying and did not want to die at the hospital.

Although the staff had suggested and encouraged us to leave her where she was, we knew that she wanted to come home. After our encounter with Chaplain Paul, our mind set changed from one of trying to beat the cancer and save her life to one of accepting that she would die. Our new mission was to honor her wishes and bring her home. This included getting hospice involved, and we met with the hospital coordinator to set that in motion. They began her discharge paperwork with assurances that we could bring her home the following day.

## Lori Has a Dream

Knowing Mom wanted to go home, we worked with hospice to accomplish Mom's transport as quickly as possible. Her doctor had said only two days earlier that Mom's death was not imminent, but since we had never been down this road before, we were unsure about how much time we truly had left with her. We met again with the hospice coordinator and a decision was made apply a fentanyl patch for pain control. Because the staff wanted to evaluate its effectiveness, they decided to keep Mom another twenty-four hours. We became greatly distressed because we were trying to get her home as quickly as possible, and this would delay us one more day. We returned home from the hospital that night anxious and discouraged. While understanding their reasons for keeping her, our greatest fear was that Mom might die alone at the hospital before we could

get her home. We dropped into bed late that night, not knowing what tomorrow would bring. That night, Lori had a dream.

In her dream, Lori was at our parent's house and Mom was still at the hospital. Suddenly, there was an insistent knocking at the front door. Thinking it might be hospice, Dad said, "It's probably hospice delivering a blanket. They can just leave it on the porch."

Lori replied, "But we have to open the door." When she answered the front door, she was astonished to find Mom standing there. Mom was weak, but walking on her own. Lori quickly helped her into the house and down the hallway to her bed, asking her, "How did you get here?" Before Mom could answer, Lori woke up.

The dream impressed upon Lori, two points: Mom showed up *unexpectedly* and she did so *without our assistance*. We had been doing everything in our power to bring Mom home and were afraid that we would be unable to accomplish that before she died. We felt that through the dream, God was telling us, "She *will* come home, and *I* will bring her." Once again, he reminded us that he was still in control of the situation. Events were proceeding according to his timetable and he did not want us to be fearful.



## CHAPTER NINE

### *The Golden Chair Vigil*

The following morning the hospital was ready to release Mom. Her discharge papers in order, we said our final thank-you to the hospital staff while the nurses prepared Mom for transport. Through the many months of care, the staff had been warm, but professional. Understandably, this is a necessary defense mechanism when dealing with people's pain on a daily basis. As we hugged them goodbye for the last time, some of the nurses we had come to know struggled with their emotions. We can only imagine how difficult it must be for these people to care for patients and their families only to see the cancer win out in the end. They were genuinely sad for us, and our hugs brought on heartfelt tears.

The transport arrived, and three young men moved Mom to a gurney and then to a waiting ambulance. Lori rode in the back of the ambulance with Mom, and Lynn followed behind in her car. During the journey, Lori continued to talk to Mom assuring her that she was going home. Lori provided her a landmark-by-landmark update so she could picture in her mind's eye exactly where they were. Lori wondered what the attendant must have thought as she continued to converse with her

comatose mother. Generally, they were accustomed to taking people to the hospital to get better, but we were in fact, taking Mom home to die.

Lynn's journey brought similar emotions as she listened to a popular song quoting words from Isaiah 6:3 and Revelation 4:8. During a long chorus of "*holy, holy, holy, is the Lord God Almighty,*" Lynn recounts her thoughts as the song played:

I followed behind the ambulance in my car, listening to the words of that chorus over and over again. I felt defeated and numb as I considered the people in passing cars going about their daily business, unaware that my mom was being taken back home where she would die. I asked God to help me see this event from his perspective.

*In my mind's eye, I envisioned our ambulance and car caravan not as a funeral dirge, but as a noble procession. It was like the presentation of a royal daughter to the King with angels lining the way from the hospital to our home. It was as though a great multitude was witnessing her final earthly journey to the portal through which she would soon pass. They were praising God, anticipating her arrival where Jesus would welcome her home. In those moments of hearing holy, holy, holy is the Lord God Almighty, I felt as though we were releasing our grasp on her and accepting the fact that the Lord already had her in his.*

Arriving at home, the attendants moved Mom to a hospital bed which had been provided by hospice that morning and installed in the living room. We chose to utilize the living room because it allowed us to move the furniture and easily access both sides of her bed. An oxygen system was set up, and all of the supplies needed for her care had been moved to the room the night before. While we had turned the living room into a hospital room, it was still home and we worked to bring the familiar sounds and smells into the room to make Mom as comfortable as possible. The front windows were opened, allowing the San Diego afternoon breeze to freshen the room. Lori described Mom's surroundings to her.

"Mom, you're home now. You are in the living room and we have the windows open. There is a cool breeze coming in. Dad brought some roses in for you. One is yellow and two are dark orange and he put them in

your blue vase here next to your bed. He also brought out all of your favorite music CDs, so we can play them for you.”

Hospice had supplied pain medication for us to administer to Mom. A fentanyl patch had been placed at the hospital, and we were to give her sublingual morphine every four hours. At this point, Mom was mostly unresponsive. She was unable to move her limbs, speak, or even open her eyes. The only time she responded was when Dad told her that he loved her. To this, she made a vocal sound, as if she were trying to tell him that she could hear him and that she loved him too. This was the only communication she was capable of.

Although the sofa was nearby, we wanted to be near enough to talk to her, preferring to sit on either side of the bed. There are two gold colored velour chairs which have been in the living room ever since we were little. They are big, high backed, soft chairs where you can curl up and sit with your feet tucked under you. When we were small, we would snuggle up in those chairs while listening to Christmas music. We remember Grandma Catherine and Great-Uncle Henry sitting in those chairs while we kids ripped open our Christmas presents. We marked momentous occasions with pictures taken in those chairs: when Lori received her first box of long-stemmed red roses from a high school admirer, or when we sat the drill team mascot doll with her arm around the family dog, Honey. As life happened, those chairs marked its time. They were the only part of the living room which had not been redecorated since our childhood. We found comfort in those chairs and pulled them up alongside Mom’s bed as we began our final vigil.

Knowing she could hear us, we continued to talk to her and play her favorite music. Even though it was June, we played Christmas music from our childhood. We talked about family vacations, and funny things that happened over the years. Conversation lulled at times until reminiscing would bring more things to say. Other times we had no words and sat alone in our thoughts. Familiar music continued to play, bringing comfort in the silence. Christian hymns were some of Mom’s favorite melodies and we had often heard her play them on the family piano. Not only did she know the music but she knew the words as well. The lyrics of the old

hymns gave her confidence in God's promises. These same lyrics continued to give us comfort now. It was during Sandi Patty's rendition of "Softly and Tenderly" that we noticed a small response from Mom.

Softly and tenderly Jesus is calling,  
Calling for you and for me;  
See, on the portals He's waiting and watching,  
Watching for you and for me.  
Come home, come home, Ye who are weary, come home;  
Earnestly, tenderly, Jesus is calling,  
Calling, O sinner, come home!<sup>1</sup>

Even in her comatose and dehydrated state, Mom's emotions elicited a tear at the corner of her eye during this song.

"Mom, we can see the tear. We know you can hear the music and that you can hear us." It comforted us to know that we could still communicate in this small way.

During this vigil, our feelings were in conflict. We were extremely sad to know that her time with us was very short, and we wanted desperately to keep her with us. But at the same time, we were also at peace with the knowledge that she would soon be going home and looked forward to the end of her suffering. It was a bittersweet wait. As believers, we recognized that death was not all sad and tragic. It was still very painful, but the pain was buffered and softened by the comfort that we would see her again. Armed with the knowledge that the Lord had her in his care, we could let go of her with confidence. We had no feeling of hopelessness that she would soon become "non-existent" or that her life had just come to this and that this was all she would ever be. On the contrary, we knew that her life here was just a prelude to the "real life" that she would soon enter into. Our experience was just as Paul had described to the people of Thessalonica.

Brothers, we do not want you to be ignorant about those who fall asleep, or grieve like the rest of men, who have no hope (1 Thess. 4:13).

Later that evening, although we didn't want to leave her side, we finally had to get some rest. We slept off and on, maintaining the pain medication schedule. Early the next day, we resumed our vigil on either side of her bed.

During the morning, the hospice nurse arrived to conduct her evaluation. She examined Mom gently with dignity and care, offering us support and compassion. She explained the dying process and described the physical characteristics that we could expect to see as Mom's body shut down.

The body would go into a state of dehydration, pulling water away from the extremities and the skin would become somewhat waxy. The blood pressure would decrease dramatically and the body temperature would rise. During the last hours, the kidneys would stop functioning and her breathing would become much more labored. Although we prepared ourselves to witness these further transformations in her body, it was difficult to see her body continue to deteriorate.

We learned that our hospice nurse was a Christian herself, so this visit with her was another provision from God. Despite our faith, we still had human fears about the death process. We were not afraid of Mom's final destination, but were unfamiliar with the transition of death. As the nurse had experienced many situations like ours, her reassurance was invaluable. She told us that Mom was making a peaceful transition and that she was not in pain. She also reminded us that God was in control, and he was with Mom at every moment. Lastly, she commended our efforts to comfort Mom and communicate with her.

“What you are doing is exactly what she needs. You are continuing to talk to her. A lot of people don't realize that their loved ones can often still hear *everything* said in their presence even if they are unconscious and unresponsive.”



The nurse told us that hearing is the last sense to be lost during this process. This fact struck us profoundly. We wondered how many dying people listen to their loved ones squabble over money or property they are to inherit, or voice their true feelings about the soon-to-be-deceased, because they assume that the comatose relative cannot hear them. We thought about the many people who might have spent their last moments on earth disappointed and saddened by the words of their family and friends.

We continued our vigil into Friday evening, praying that the Lord would minister to Mom in ways that we could not. We felt inadequate that we could only give her pain medication and attempt to relieve the dehydration with a moist sponge on her lips. There was nothing more we could do for her than to sit with her and wait.

## The Name of Jesus

During the last few days when it became obvious that she was dying, we prayed that God would allow us the privilege of witnessing her step into eternity. She could have easily slipped away quietly, with her eyes closed and in a coma, but we wanted to see something of God's presence at the moment she stepped across that threshold. We maintained our vigilance, looking for such an indication. Mom's favorite Christian music continued to play and we continued to wait.

Late in the evening, we put in a compact disc by Marty Goetz. His unique blend of Jewish heritage and his love for the words of Scripture make his music reminiscent of the Psalmist David. As we listened, a song entitled "He Who Trusts" began to play. It is a song which describes the promises of God for the believer.

These are periled times we live in, trouble everywhere  
Weary hearts will often give in to this world's despair  
But high and over all, our Father knows our every care  
And in His book, if you will look you'll find His promise there

He who trusts in the Lord  
Mercy shall surround him  
Be glad in the Lord and rejoice  
You upright in heart, lift up your voice  
For great is His mercy toward  
All who trust in the Lord . . .

We found comfort in these lyrics. We knew that the promises of God for Mom were fulfilled in her lifetime, and that his final promise to take her home would soon be fulfilled in her death. Seeing Jesus face to face is the aspiration of every believer. The lyrics also reminded us that Mom was not making this transition alone, and that God was with her every step of the way. Just as our great-grandmother could see lights and flowers before her death, we wondered what Mom could see. Although not visible to us, we knew it was quite possible that the spiritual portal was already open and that Mom was looking into it.

It was during these thoughts that Lynn was reminded of a story about a father confronted with the death of his daughter. He could find no words to form a prayer and his heart was so heavy that he could only utter the name of Jesus. The Bible tells us that there is power in his name, and that the Holy Spirit can pray for us when we don't know what to say. While listening to the words of "He Who Trusts" and being overcome with emotion herself, Lynn felt compelled to quietly speak the name of Jesus. At about the fourth mention of his name, Mom opened her eyes.

Lynn quickly stood up, "Her eyes are open!"

We both leaned in toward her. She didn't look at either of us, but kept her eyes focused upward, as if gazing at something we could not see. It was as if Jesus had told her, "Open your eyes, Susie, it's time to come home."

The next few moments occurred as if in slow motion, full of conflicting feelings.

We felt excitement.

*“She’s going home! She’ll see her mom and dad again! There will be no more pain and she will be free from the cancer.”*

We felt loss.

*“Mom, don’t leave us!”*

The physical, maternal bond was being broken as she slipped away, causing a panic akin to abandonment. Although knowing her destination was paradise, we felt a profound pain in the separation.

As we prayed out loud, we knew these would be our last words to Mom, before we would see her again in heaven. Words tumbled out quickly as we both talked at once.

“Mom, we know that you can see Jesus. Go to him. We love you Mom, and we’ll see you soon!”

Dad tearfully expressed his love to her and after a few moments, her eyes began to close as if she were falling asleep. With her eyes closed once again, she took two short breaths and was gone.

The event was surreal. We had never watched anyone die before, especially someone so close whom we loved so dearly. In watching her make that transition, it was as though God had reached down, gently taken her by the hand and led her into his presence. We felt a sense of his *gathering her to himself*, although the feeling was difficult to describe. As written in the book of Genesis, God created man by breathing life into him. At the moment of Mom’s passing, it seemed as though God had withdrawn her breath and her life back to himself.

God had answered our prayer in allowing us to witness the fulfillment of his final promise to Mom. The Lord did not have to open her eyes to take her home. We believe that he told her to open her eyes for our benefit, so we could say our last goodbyes and witness his presence at the moment of her death.

As she was called home, Marty Goetz was still singing.

. . . Soon will be the time when we will see the Holy One

Oh how sweet to know that He'll complete what He's begun  
And blessed is the man who stands forgiven in God's Son  
And blessed are they who in that day  
will hear Him say "Well done!"  
For great is His mercy toward all who trust in the Lord

© Marty Goetz/Wendell Burton, 1994, Singin' in the Reign  
Music/Cross Purpose Music<sup>2</sup>

We were reminded that Jesus promises to walk with us in life until our final breath. We believe that in that final breath, he himself leads us home.

## Where Joy and Sorrow Meet

Mom's service would be her final chapter; the last impression her life would make on those who knew her. Throughout her life the Lord had sustained her and we knew that she would want her service to reflect that. We wanted to avoid a somber resume-driven ritual listing her accomplishments and a focus on her life cut short. We did not want to dwell on the sadness of us missing her, but rather speak to our hope of seeing her again by emphasizing the foundation her life was built upon. As such we set out to focus on her life of faith, the hope that sustained her through illness and the Gospel message that proclaimed that hope. As many funerals focus on the life that has just ended, we wanted to focus on her life that had just begun. For the believer, death is but the open door to heaven. The transition she had made was sad for us, but glorious for her.

She would have wanted us to use the opportunity to present the Gospel message to those whose hearts were broken and open. Additionally we wanted to show those who didn't know Christ, the reason for our celebration. Even in these circumstances, believers can have joy in the midst of sadness. The death of the believer truly is where joy and sorrow meet. But for those who are without the hope of heaven, there is just sorrow. With these goals in mind, we set about planning Mom's service.

On Saturday morning we made an appointment with the memorial park to make final arrangements. Gratefully, Dad had already secured plots for both of them. A few months earlier, Lynn had been present when Mom broached this subject with Dad.

“Have you looked into making any arrangements?” Dad clearly held back tears as he struggled to find words to respond to her question. Mom continued, “I need to know that it has been taken care of.”

With much emotion Dad finally found his voice, “I have looked into it, but I didn’t want you to think... I didn’t know how to tell you.” He tearfully continued, “I didn’t want you to think I was giving up.”

Lynn didn’t contribute to the conversation, but the witnessing of it was heart-wrenching. Mom had not discussed the possibility of her death with us kids, but she had clearly been thinking about it. In retrospect, we wondered if Mom knew she was going to die but being our Mom, wanted to protect us as long as possible. For us, that prospect was difficult to face and the subject too painful to talk about. At that point we were still in the middle of the battle and no one wanted to consider the possibility of retreat.

Mom continued her inquiry. “I know [you’re not giving up], but I need to know that I have a place. I would feel better knowing that it has been taken care of.”

Dad asked if she wanted to be buried near other family members in Orange County. “Do you want plots at Fairhaven?”

“No, this is home.”

Dad reassured her, “I will do it today.”

Mom expressed her wishes from the locations available, and Dad selected the space at the memorial park she had chosen. In the following weeks, she expressed a desire to see the general location, and they drove by to see it. Dad wanted to make sure that Mom knew he had purchased a double plot for the both of them, and they both seemed relieved to know that the matter had been settled.

With plots already purchased we concentrated on the remaining details. Dad asked us to make those decisions without him, so we made choices with Mom in mind.

One of the first things we had to decide is what Mom would be buried in. The service planner had asked us to bring her clothes to the appointment. The task of choosing Mom's final attire was uncomfortable and funny, as incompatible as those things are. The two of us began looking through her closet.

"How do we decide what she should wear? Do we dress her like she's going out for dinner? Should she look like she's going to church?"

Lynn said, "If it were me, I would want to be comfortable. Remember Aunt Jo had Uncle Bill buried in his sweat outfit and wool cap, because she wanted him to be warm."

Dad had suggested that we go out and buy Mom a new outfit. However we didn't feel right about putting Mom into a dress she had never worn. After searching through her closet, we decided upon the outfit she had worn for the Anniversary party a few months earlier. We remembered how much she enjoyed that evening and how it had been a respite from her struggle with cancer. We carefully packed the white blouse, blue slacks, soft sky blue sweater and the pink wool cap Lori had bought her for Easter and had adorned with butterflies.

"What about underwear? Do you think she needs underwear?"

"Yes, she would want underwear!" We chuckled as we thought about what Mom would say, watching our rambling conversation about her undergarments. We packed her clothes in a paper bag and set out for the cemetery.

Meeting with the planner, we awkwardly handed him the brown bag--a common gesture with an uncommon purpose. Under different circumstances, it might have been a bag containing an extra outfit for a child's field trip or someone's lunch. In our case, it contained Mom's final change of clothes. The situation was still surreal. After being so involved in meeting her day to day needs, it felt odd to leave Mom in the care of complete strangers.

The planner led us into the infamous room full of caskets. Gratefully, the selection was not so immense as to leave us pondering for a decision.

"The pink one is pretty, but silver would look better with the flowers."

"Yes, I agree, let's go with the silver one."

The selection of the headstone was a little more involved. We looked through several pages of diagrams and found one design that depicted a large shade tree over a bed of flowers.

"Oh, this one is pretty. I can see Mom sitting under the tree. It reminds me of heaven."

The planner asked us what sentiment we wanted engraved on the headstone in addition to her name and dates. Although "Beloved wife and mother" is typical, we wanted something a bit more personal. In the last week of her life, we began to call her "Sweet Mom," and during those final hours, it was our way of telling her just how precious she was to us. We decided that "Sweet Mom" would be the perfect sentiment for her headstone.

After making these decisions, Dad and Victor showed up unexpectedly. At first Dad wasn't sure he approved of our sentiment but we assured him that we would come up with some catchy title for him to match it, when the time came. As we all laughed at some of the funny ways to describe Dad, we were sure the service planner probably thought we were all just a bit nutty, but we needed those moments of lightheartedness and were grateful for the distraction.

The flower decisions were easy ones. Since we had several years of wedding and event floral experience, we had already decided to design the

casket spray ourselves. The memorial park would provide matching altar arrangements. Although the park could have provided all of the flowers, the casket spray was something personal that we wanted to do for Mom. When we thought of her, we envisioned pink roses and tulips accented with green orchids, strands of ivy and delicate fern. Lynn would pick up the flowers in Los Angeles on her way back to San Diego, and we would complete the spray on the morning of the service.

We discussed components of the service with Dad, deciding who we would ask to officiate and sing. As a family we had attended two churches over the course of our childhood and greatly valued the impact both pastors had on our family. Pastor Don Vanderpool had recently crossed our path when he and his wife Doris, visited Mom in the hospital and prayed with us. Pastor John Watson was contacted through a series of phone calls and just happened to be back in the country in between trips to China, where he and wife Bonnie were in ministry. Both couples expressed their fondness for our family and their desire to be a part of Mom's service. Katie's singing teacher, a professional soloist, generously agreed to travel the two hours on short notice to be there, expressing her sentiment, "I will do whatever you need." All of these individuals rearranged their schedules and set aside other obligations to be there for us, which we recognized as another provision from God.

Our visit to the chapel helped to give vision to the service format and details. The building itself seemed timeless, reportedly having been modeled after a church in England. Stone walls and gothic windows were surrounded by lush gardens. Large shade trees spread their canopies over the steep roof. We entered through a covered porch at the back of the chapel and stopped to admire a beautiful stained glass window depicting Christ and his angels. At the front of the chapel a second stained glass window was framed by a structural arch, where a verse from the New Testament was painted in script, "*God is love, and he that dwelleth in love, dwelleth in God, and God in him.*" 1 John 4:16.

There was sunlight streaming through conservatory windows which ran along both sides of the chapel. Under the slanted windows, stone planters contained beds of ficus trees, calla lilies, begonias and ferns. The



atmosphere was truly lovely. While we were basking in the serenity of the chapel, we were pleasantly surprised by the melodic voices of two canaries, singing to one another from opposite sides of the church. The effect was charming, and we were all in agreement that this location would be perfect for Mom's service. Nothing about it said *funeral*. Instead, it was a vision of peace and quietness.

During the week, we worked on elements of the service including a photo slide show set to the music of a Nichole Nordeman song entitled "I Am." In Exodus 3:14, God tells Moses, "I AM WHO I AM." The Hebrew meaning is described as "to exist" or "to be," indicating an ever-present timeless existence.<sup>3</sup> From our perspective the definition might be described as "God is all in all" or "all that we need." The song describes a woman's life from early childhood through various milestones and finally to her departure to heaven. At every step along the way, the Lord is her constant companion. Through childhood and her teenage years, he is described as her Superhero, Secret Keeper and Best Friend. Later, she refers to him as her Creator, Maker and Life Sustainer. By the end of her life he is called Comforter, Healer and Redeemer.<sup>4</sup> Mom's life in photos perfectly reflected the words of this song. The last slide depicted a cross over a pink rose with the name of Jesus and the verse "I am the way, and the truth, and the life."

A custom program bore the same rose and cross picture on the cover. Inside, music selections for the service were listed along with comments about Mom's life and an allegorical story we wrote about the death of a loved one who leaves our company for that of the Lord's.

*For believers, our journey to heaven is like traveling to a beautiful tropical paradise where we are all scheduled to go, but have flights on different days. While some have already gone ahead, others are just about ready to leave.*

*We take our loved one to the airport and say our farewells, sad that we will be separated for a time, but so excited for them, knowing that they will soon be laughing and eating and enjoying paradise with those already there. We are happy for them and anticipate the day when it is our turn to go.*

*We watch them get on the plane and we wave through the terminal window as their plane taxis and finally takes off. The plane becomes smaller and smaller against the sky, until we cannot see it anymore. She's at last on her way and we say "There she goes."*

*Just then, those in paradise see her plane approaching. With joyous excitement, they rush out to meet her. "There she is, there she is! Here she comes!" She is finally home.*

During the week, we learned that many people we hadn't seen in years would be attending Mom's service and we wondered if we should have the service videotaped. We weren't sure if people actually did that, but set out to find local videographers anyway. We found several wedding videographers on-line, but most required a minimum number of hours that far exceeded what we had in mind. Finally we found one who covered other events in addition to weddings. We called him, knowing that it was very last minute so he might not be available. He was very nice and found his schedule open that day. He also didn't consider our request too morbid and understood our need to record the event.

When choosing the music for Mom's service, we wanted to select songs that were reflective of her life and expressed the hope that she had in the Lord. Early in the week Lori woke one morning humming a familiar melody. But she could not remember the name of the song, any of the words, or even where she had heard the song before. The melody was like that of a timeless hymn that evoked a sense of comfort. Intrigued that this little tune could be a gift from God, we began a diligent search to discover its title.

We rifled through our own compact-disc collections, and when a few words were finally remembered, we searched the internet. What a surprise when we discovered that the song wasn't a hymn at all, but a recently written lyric recorded by the Christian group Avalon. Even more surprising were the poignant words describing our hope within the confines of our grief; a hope that can only be found at the foot of the cross.

There's a place of quiet stillness  
'tween the light and shadows reach  
Where the hurting and the hopeless  
seek everlasting peace  
Words of men and songs of angels  
whisper comfort bittersweet  
Mending grief and life eternal  
where joy and sorrow meet

There's a place the lost surrender  
and the weary will retreat  
Full of grace and mercy tender  
in times of unbelief  
For the wounded there is healing,  
strength is given to the weak  
Broken hearts find love redeeming  
where joy and sorrow meet

There's a place of thirst and hunger  
where the roots of faith grow deep  
And there is rain and rolling thunder  
when the road is rough and steep  
There is hope in desperation,  
there is victory in defeat  
At the cross of restoration  
where joy and sorrow meet

There is a place where hope remains  
In crowns of thorns and crimson stains  
And tears that fall on Jesus' feet  
Where joy and sorrow meet

The early morning provision of this song for Mom's service was clearly from God. He was reminding us that he knew our pain and shared our loss, and that it wasn't the end for Mom. It was, in fact, her new beginning. While we grieve the loss, we can experience joy knowing that she is with her Savior and finally home.

## Reflecting Her Legacy

Friends and family gathered at the chapel on a beautiful June morning, as so many mornings in San Diego are. In the chapel gardens we welcomed loved ones with hugs and grateful hearts. Guests greeted each other, some reuniting with friends they had not seen in years. Inside the chapel, sunlight streamed through the gothic conservatory windows while the canaries provided song for the instrumental hymns that played in the background. While there was certainly a twinge of sadness, there was also a strong sense of loving embrace from those who deeply cared for our family. And there was also a quiet confidence in the assurance that the occasion was a bittersweet homecoming. In fact, Pastor Don's message opened with just that sentiment.

"We're here this afternoon for a celebration!" He continued on, explaining the reason for our celebration by reading from the book of Romans.

Who shall separate us from the love of Christ? Shall trouble or hardship or persecution or famine or nakedness or danger or sword? As it is written: "For your sake we face death all day long; we are considered as sheep to be slaughtered." No, in all these things we are more than conquerors through him who loved us. For I am convinced that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, neither anything else in all creation, will be able to separate us from the love of God that is in Christ Jesus our Lord (Rom. 8:35-39).

“These verses speak of Sue, as she was more than a conqueror. She was one who lived her life, gave her testimony and let the life of Christ shine out.”

Throughout the service, both pastors recounted funny stories and warm memories about interactions they had with our family over the years. It brought about lightness and laughter and also expressed the deep love and care they had for us. Pastor Don remembered Mom’s quick smile and laugh and expressed his admiration for her straightforwardness.

“You always knew where you stood with Sue. You never had to wonder what she thought.”

At one point, Pastor John commented, “Don’t these girls look like their mama?”

The family of God is admonished to “come alongside” one another in times of need, and they certainly did that for us. Their comments reminded us of the many friends that had also “come alongside” our family in recent months, bringing food, running errands, visiting Mom at the hospital, and praying for us.

The pastors went on to describe Mom as a Godly woman, recounting verses from Proverbs 31. The “Wife of Noble Character” is dignified, wise, diligent, industrious, reliable, responsible, and charitable. She shows her love for God by caring for her family and being a blessing to them. Her interactions with friends and strangers alike are a testament to her desire to serve the Lord. She discerns what is important in life and sets her mind onto doing what is right.

Charm is deceptive, and beauty is fleeting; but a woman who fears the LORD is to be praised (Prov. 31:30).

As believers, our goal is to be a testimony of Christ and his power to transform lives. Mom understood that and lived her life accordingly. She wasn’t perfect, but she was forgiven.

Pastor John explained what that meant.

“One day, we will all stand before God, and the Father will look to the Son and ask, ‘Is he covered in your blood?’ If the Son answers ‘Yes, he

is covered. I have forgiven him all of his sins,' then we will hear 'well done, good and faithful servant.' Those who are not covered will hear 'depart from me, for I never knew you.'"

Both pastors addressed the important distinction between *being forgiven* and *being a good person*. While it is noble to do good works, humans do not have the ability to save themselves from God's judgment. The Bible states that all of us are fallen and are in need of saving. Some people ignore this fact or deny it, while others feel they can make their own way. However, the Bible is very clear about the only path that God considers acceptable, and that is through his son, Jesus Christ.

Pastor Don further reiterated this distinction, describing his experiences with people close to death.

"As a pastor, I have been with people who know Christ and those who know not Christ, and I can tell you there is a difference. For those who don't know Christ, it is a miserable time for them, struggling and searching. I pray that none of you ever lay on the deathbed without knowing Christ."

Gratefully, the way to God is not based upon what we can do for ourselves, but on what Christ has already done for us. Pastor Don read from the book of Revelation.

"And whoever wishes, let him take the free gift of the water of life." Christ is the gift, and the gift is free. The choice to accept the gift is ours to make, and our final destination depends upon that choice.

Parts of the service addressed the profound grief and sense of loss we were experiencing. The pastors reminded us that God's plan and timing frequently do not match our own. There will be situations in life, like this one, where we will not understand the reasons. During these times we are admonished to trust in the Lord and not base our reactions on our limited knowledge.

Trust in the LORD with all your heart and lean not on your own understanding (Prov. 3:5).

Pastor John continued, “Paul says we walk by faith and not by sight. Our sight sees the casket. Our sight sees the body. But we don’t walk by that. We walk by faith in the Lord Jesus Christ, and our walk in Christ is, ‘I will see her again.’”

Walking by faith means that we choose to trust in the promises of God, even if we can’t see them right now. Believers are promised a glorious reunion with Christ and with each other. While we grieve, we can take comfort in this hope and trust in the promise.

For the Lord himself will come down from heaven, with a loud command, with the voice of the archangel and with the trumpet call of God, and the dead in Christ will rise first. After that, we who are still alive and are left will be caught up together with them in the clouds to meet the Lord in the air. And so we will be with the Lord forever. Therefore encourage each other with these words (1 Thess. 4:16-18).

Listen, I tell you a mystery: We will not all sleep, but we will all be changed - in a flash, in the twinkling of an eye, at the last trumpet. For the trumpet will sound, the dead will be raised imperishable, and we will be changed. For the perishable must clothe itself with the imperishable, and the mortal with immortality. When the perishable has been clothed with the imperishable, and the mortal with immortality, then the saying that is written will come true: “Death has been swallowed up in victory” (1 Cor. 15:51-54).

Pastor John reminded us, “the mortal will put on immortality.” God promises that he will remake these decaying bodies into new ones that will never die.

Pastor Don reflected on how some of those promises were already true for Mom. “She had suffered, but in a twinkling of an eye, that was all gone. No more pain. No more tears, but in the presence of her Savior, the Lord Jesus Christ. No wonder we can celebrate!”

For all our efforts to provide a clear message of Mom's hope in Christ, an unusual thing happened during the service. On more than one occasion, the service attendant became a distraction by interjecting his own personnel commentary on what was important in life. He seemed to be purposely making an effort to derail the flow of the service and focus attention on himself instead. Even the quiet and respectful young attendant-in-training seemed mortified with his "used car salesman" demeanor (No offense toward those who sell used cars). We found this to be completely inappropriate and very insensitive to the family. After the service, several people commented about how distasteful his interruptions were. Later, we thought that since the Lord could have stopped him and didn't, perhaps there was a reason the attendant was permitted to draw attention to himself at such an inappropriate time. We then recognized that his inarticulate ramblings concerning his own interpretation of life and death provided a clear distinction between the truth of the Gospel that had just been presented and what the world would tell us about death. What appeared to be at the time just a distraction by the enemy was in fact a *refocus of the message*. Again, we saw the hand of God. In this case, he used the fiery darts of the enemy to illuminate the truth.

At the graveside service, the soloist sang two hymns as we said our final goodbyes.

Turn your eyes upon Jesus, look full in His wonderful face.  
And the things of earth will grow strangely dim,  
in the light of His glory and grace.<sup>6</sup>

All to Jesus I surrender, all to Him I freely give;  
I will ever love and trust Him, in His presence daily live.  
I surrender all, I surrender all,  
All to Thee, my blessed Savior, I surrender all.<sup>7</sup>

Pastor John concluded the graveside service with a poignant prayer.



“Lord Jesus, we can only surrender all when we turn our eyes upon you. Lord, in the days, weeks, and months to come, there are going to be moments of loneliness; times when the adversary will come in and bring despair. But when we turn our eyes upon you, we know that you are there. Because Lord Jesus, you promised never to leave us. You told your disciples you would never forsake us. We thank you Lord, that your Word tells us that there is no shadow of turning in you and that you are the same yesterday, today and forever. You bring peace that passes all understanding, Lord Jesus and you will fill the void that is within this mortal body until this mortal body puts on immortality.”

Mom’s relationship with Christ was her life and her legacy as indicated by some of the thoughts in the cards we received.

*“ . . . I want to tell you what a beautiful and meaningful service you had for Sue. Only eternity will reveal the souls that were touched or won by the messages and testimony. . . . ”*

*“ . . . I know that she will be greatly missed, but I am so thankful you all have the hope of seeing her again. . . . ”*

*“ . . . Thank you so much for sharing with us your blessing as Sue went to be with her Lord. . . . ”*

When Mom was diagnosed, we earnestly petitioned God for her healing. In fact, we begged him. It was the most painful journey our family has ever made. As we accompanied Mom down that cancer road, we continued to hold out hope that God would heal her, and she would live. As it turned out, however, God’s plan bore little resemblance to our own. While this was not the outcome we had prayed for, his intervention was clearly demonstrated during the course of the journey, showing us that we were still held by God.

Understanding and believing in his sovereignty gave us strength to accompany Mom through her ordeal and continues to give us strength as we face our futures without her. Although the loss is great, we look forward to the day when we will see her again, and we are comforted to know that she is finally free, safe, and whole. Life can be incredibly hard, but God is faithful.



Part Three:  
Resting in God's Provision ~  
Life is Hard, but God is Faithful

Do you not know? Have you not heard?  
The LORD is the everlasting God,  
the Creator of the ends of the earth.

He will not grow tired or weary,  
and his understanding no one can fathom.

He gives strength to the weary  
and increases the power of the weak.  
Even youths grow tired and weary,  
and young men stumble and fall;  
but those who hope in the LORD will renew their strength.

They will soar on wings like eagles;  
they will run and not grow weary,  
they will walk and not be faint.

Isaiah 40:28-31



## CHAPTER TEN

### *Asking the Hard Questions*

Life frequently has a way of not working out exactly how we envisioned. Unexpected situations occur that leave our world in pieces--the loss of a beloved family member, sickness or injury, the loss of a job or home, betrayal by a spouse. These losses can leave us feeling abused, rejected, abandoned or forgotten.

The Bible is full of people who, despite their faith in God, found themselves in situations that seemed hard to overcome. Joseph was sold into slavery by his jealous brothers. David was forced to run for his life. Job lost his children and then his health. From their perspectives, life had certainly taken a wrong turn. Their deep feelings about their situations brought forth heavy questions--questions for God.

Similar situations bring out the same emotions in us and we are upset, hurt, angry, frustrated, ashamed, or broken. God does not expect us to remain unmoved by life's circumstances. He knows that we have emotions, for he created them. He also knows that trying situations will bring out those hard questions, often from our feeling that it was he who let us down. He never reprimanded anyone for asking questions because

that is, in fact, what he wants us to do; bring whatever we don't understand to him.

## “Why Does God Let Some People Die?”

This question is not foreign to God. Throughout history people have approached him with their pain and their grief when the death of a loved one seemed premature. In our own minds, we generally see our aged grandparents pass peacefully in their sleep after a long and prosperous well-lived life. We expect that sort of transition and in many respects are somewhat prepared to encounter death that way. But in the real world, death is often tragic and unexpected--a parent loses a child, a young wife loses a husband, a teen loses a friend. These deaths shake us to the core. They disturb the order in our personal universe. We hold our broken heart in our hands and ask God, “Why?” “How could you let this happen?” “Where were you?”

If this line of questioning seems familiar, it is because it was asked of the Lord himself, about 2000 years ago. We find this story in the Gospel of John.

Now a man named Lazarus was sick. He was from Bethany, the village of Mary and her sister Martha. . . So the sisters sent word to Jesus, “Lord, the one you love is sick” (John 11:1, 3).

Lazarus and his sisters were friends of Jesus. He had spent time with them. He had eaten at their house. They had witnessed his many miracles and were confident that Jesus would show up and make everything right once again. After all, they were friends. That was the plan anyway, and to them it certainly seemed like a good one. However, Jesus had a plan of his own.

When he heard this, Jesus said, “This sickness will not end in death. No, it is for God’s glory so that God’s son may be glorified through it.” Jesus loved Martha and her sister and Lazarus. Yet

when he heard that Lazarus was sick, he stayed where he was two more days (John 11:4-6).

That seems a curious response. Jesus purposely stays away, knowing that Lazarus is sick. After a few days pass, Jesus tells his disciples,

. . . “Lazarus is dead, and for your sake I am glad I was not there, so that you may believe” (John 11:14b-15a).

Here we get a glimpse into his plan and see the death of Lazarus from God’s perspective. Jesus knew that Lazarus would die, and he delays his travel to insure that Lazarus is “sufficiently dead” when he gets there. When he arrives in Bethany, Lazarus is already in the tomb and Jesus is confronted by Martha.

“Lord,” Martha said to Jesus, “if you had been here, my brother would not have died” (John 11:21).

Then Jesus said, “Did I not tell you that if you believed, you would see the glory of God?” (John 11:40).

This question to her would indicate that seeing the glory of God depends upon whether or not we believe Christ to be who he said he was.

Then Jesus looked up and said, “Father, I thank you that you have heard me. I knew that you always hear me, but I said this for the benefit of the people standing here, that they may believe that you sent me.”

When he had said this, Jesus called in a loud voice, “Lazarus, come out!” (John 11:41b-43).



By permitting Jesus to restore life to Lazarus, God was glorified through his son. Jesus demonstrated his power over death so that men would recognize him to be the promised Messiah.

While the stories of our own loved ones don't end like this one, God's perspective stays the same. He still uses the seemingly untimely death of a believer to reach people who would have otherwise been lost.

Just weeks before the annual Harvest Crusade in Anaheim, California, Pastor Greg Laurie lost his son in a tragic car accident. A young husband of thirty-three, Christopher Laurie and his wife were expecting their second child. He had everything to live for, but the Lord had a different plan. Pastor Laurie addressed the thousands of people attending the crusade telling them that while he came before them with a broken heart, he came with the cure for a broken heart as well.<sup>1</sup>

We don't know why God takes certain people from our lives at a relatively early age, while others remain with us well into their nineties. Only God knows why, and while he does not leave us with answers, he does leave us with promises. We all experience moments which are beyond understanding. During those times, we can rely only on God's promises and on God's character.

In his book, *Hope for Hurting Hearts*, Pastor Greg Laurie explains how limited our human perspective is.

I was speaking with Pastor Chuck Smith about this and he made this statement to me: "Never trade what you don't know for what you do know." Those words stopped me in my tracks a little. I asked myself, "Well, what do I know for sure?"

*I know that God loves me. . . I know that Christopher is well and alive in the best place he could ever be. I know that God can make good things come out of bad. I know that we'll all be together again . . . in heaven.*<sup>2</sup>

Standing on the promises of God is sometimes easier said than done because we are fragile people, and our resolve waivers. God knows we need his help to stand and offers it to us daily. When everyone we love

is safe and secure, we are happy and our world is stable. However when our loved ones are lost, our footing slips. We are unstable, unsure, and uncomfortable. Ultimately, we find comfort in control, and death is the greatest loss of control we can experience. When our lives are in chaos, we lose heart and turn to God with more questions.

## “Why Am I Suffering?”

King David was no stranger to turmoil. Although powerful and wealthy, parts of his life were filled with loss, guilt, and fear. The Psalms record many of these feelings when he cried out to the Lord in pain or confusion. Several chapters are devoted to his dismay about the loss of control over his own life. During one of his “the-world-is-going-to-hell-in-a-hand-basket” prayers, he penned his feelings of anxiety.

“When the foundations are being destroyed, what can the righteous do?” (Ps. 11:3).

Clearly upset with his world falling apart around him, he expresses the same feelings of helplessness that many of us experience today when we face similar circumstances. However, in the next verse David does not answer the question with a laundry list of all the things a person could do to alleviate his anxiety. Instead, he makes two statements about God. He tells us where God is and what God is doing.

The LORD is in his holy temple; the LORD is on his heavenly throne. He observes the sons of men; his eyes examine them (Ps. 11:4).

God is in heaven and he is on his throne. That would imply that he is sitting. The second part of that verse says that he is also watching. So he is sitting and he’s watching. Notice it does not say that he is pacing before his throne or running to and fro, wringing his hands and wondering what he should do about us and about the problems that afflict us. We might

ask, “Well why not? That’s what we’re doing! We have problems and we are worried about them!” Like David, on occasion we can become very exasperated with our circumstances; but not God. He is immovable, steadfast, and unflustered.

Why is it that he can be so calm while we frantically need something to be done about our situation? We might see two possible reasons. The first is that he is indifferent to our suffering. That does not seem likely since he has gone to such great lengths to tell us about the magnitude of his love for us.

But because of his great love for us, God, who is rich in mercy, made us alive with Christ even when we were dead in transgressions - it is by grace you have been saved (Eph. 2:4-5).

And we know that in all things God works for the good of those who love him, who have been called according to his purpose (Rom. 8:28).

From these two verses alone, it is obvious that he is not indifferent. The second possibility is that he knows he has the situation under control and is *assured of the outcome*.

“For I know the plans I have for you,” declares the LORD, “plans to prosper you and not to harm you, plans to give you hope and a future” (Jer. 29:11).

Herein we see the answer to David’s question. If God loves us, works everything together for our good, and is assured that his plan is perfect, then our peace comes from knowing that *we can do nothing and he can do everything*. He is all powerful and knows every detail of our lives. He is watching and working behind the scenes in ways that we cannot even imagine.

“For my thoughts are not your thoughts, neither are your ways my ways,” declares the LORD. “As the heavens are higher than the earth, so are my ways higher than your ways and my thoughts than your thoughts” (Isa. 55:8-9).

His ways, his thoughts, and his plans are much more complicated than we could ever comprehend. When we grasp this concept and understand that God is not prone to hand-wringing or polling others before making a decision, we can then rest in the knowledge that he knows how to take care of us, just as children trust their parents to take care of them.

While children remain oblivious to the details, their parents carefully coordinate meals, education, transportation, immunizations, new school clothes, baseball practice, drill team uniforms--the list goes on. The same is true for our relationship with God. We don't need to know everything he knows, we just need to know that he will take care of us regardless of our circumstances.

### “Why Me and Why Now?”

The Bible describes several people whose lives seem to take a detour before getting back on the main road. In these stories we read about good things taking place after a bad beginning. As mentioned earlier, Joseph had a rough start when his brothers decided their lives would be better off without him and threw him into a pit. As a traveling caravan to Egypt passed by, they realized they could simultaneously dispose of their brother and make a quick buck on the side. From Joseph's perspective, the whole event must have seemed like a raw deal.

Once in Egypt, Joseph is sold to Potiphar, one of Pharaoh's officials. Over the years the Lord blesses Joseph, and he is promoted to oversee Potiphar's household. After being falsely accused by Potiphar's wife, Joseph finds himself in prison. However, the Lord continues to bless Joseph as his administrative skills are recognized and he is rewarded by the warden. Eventually Joseph is summoned to interpret Pharaoh's prophetic

dream. He does so, describing seven years of famine after seven years of abundance that Egypt will experience, and instructs Pharaoh to prepare for it by storing food. Pharaoh is so impressed by Joseph's ability that he promotes Joseph to head up the project.

Fast forward a few years. The famine occurs, but Egypt is ready for it, due to Joseph's diligent storage program. When other countries hear that there is grain available in Egypt, people flock there to buy it, including Joseph's family. When his family arrives, Joseph recognizes his brothers immediately. Being governor of the land and seller of the grain, he holds all the cards. When Joseph makes himself known to his brothers they are shocked, and fearful that he will avenge himself and have them killed for their past treachery. Instead Joseph extends forgiveness and reassures them.

“But God sent me ahead of you to preserve for you a remnant on earth and to save your lives by a great deliverance” (Gen. 45:7).

“You intended to harm me, but God intended it for good to accomplish what is now being done, the saving of many lives” (Gen. 50:20).

Joseph recognized that his ordeal put him in a position to save his entire family during the famine. What if the traveling caravan had not been traveling the day he was sold? What if Joseph had died in the pit instead? Would his family have starved to death in Judah? Because they lived, the family went on to become the twelve tribes of Israel.

In a similar story of survival, Esther was just a young girl when she, and many others like her, were taken to the king's palace to become part of his harem. For a young Jewess, this could not have been something she wanted to do. Her people lived in an area of Persia which was ruled by King Xerxes (also known as Ahasuerus).

While the king seemed tolerant of the Jews, others in his administration were not. Haman in particular really despised the Jews and looked for ways to get rid of them. Because Esther was a Jew, her heritage

had to be kept secret. Even in the undesirable circumstances in which she found herself, the king favored Esther and made her queen. Haman's plan to kill the Jews surfaced, giving Esther the opportunity to reveal her true identity and speak to the king on behalf of her people. Esther's cousin reminded her of the importance of her position.

“And who knows but that you have come to royal position for such a time as this?” (Esther 4:14b).

Esther recognized her situation gave her the ability to act on behalf of her people, something she could not have done otherwise. Her actions saved them from certain death. What if Esther had not been taken to the palace in the first place? What if the king had not favored her or made her queen? Although it did not seem desirable at the time, she was in the right place at the right time to save her people.

A similar story of miraculous timing occurred recently when an aircraft disaster was averted in Manhattan. After a rare double bird strike, which disabled both engines, US Airways flight 1549 proceeded to turn, miss high rise buildings, glide over the Washington Bridge, and safely complete a water landing on the Hudson River. Although the impact was hard, the aircraft remained intact. Within minutes, boats on the river arrived and began transporting people off the wings of the aircraft. All 155 passengers and crew exited the plane before it sank.

The pilot had experience in aircraft safety and gliding. Aviation experts say that everything had to go right in order to complete such a feat, and many people called the event nothing short of a miracle--the right pilot and crew, the right altitude when the engines failed, the right distance from the water, the right temperature of the water, the right place on the river where boats were available for rescue almost immediately.<sup>3</sup> Why did this event go so right when it had a much better chance of being catastrophic? A sequence of events can lead to a tragedy or to a miracle.

As a scientist Lynn is interested in the metabolic pathways that work so intricately within us and regulate every function of our being. There are thousands of chemical reactions where one molecule interacts

with another, and both of those interact with two others, and so on. The cascade effect of tampering with just one chemical reaction can have devastating consequences. Because the components of our bodies are so interconnected and so interwoven with one another, the introduction of a drug, hormone, or toxin can affect many areas of the body where no logical connection seems to exist. Not only are the chemical pathways and body systems integrated, but they interact with one another in a particular order and at just the right time.

Just as God has designed us to be magnificently complicated, our relationships with one another are just as complicated. Our lives are interwoven with those around us in ways that we cannot possibly imagine. The events in one person's life will affect the lives of many, many other people. God may put you in a situation at just the right moment to speak an encouraging word to someone who really needs to hear it.

Someone may be put in your path to meet a particular need of yours. Timing is everything. There are also events that occur which remind us "*there by the grace of God, go I,*" or "*that could have been me,*" and we are grateful that we have been spared.

But what happens when we have not been spared? How do we make sense out of the senseless?

The timing of the death of Pastor Greg Laurie's son with respect to the Harvest Crusade just a few weeks later is more than just coincidence. Pastor Laurie's message touched the hearts of many young people who needed to hear about the transient nature of life and how important it is to know God. In addition, countless others were pressed by the Holy Spirit to turn on the radio or watch the broadcast live on the internet, and came to faith in Christ as a result of Pastor Laurie's message. What seemed like a senseless tragedy to us, causing profound pain for no apparent reason that we could see, was an opportunity for God to use the situation to reach people that he loves dearly. God allows events to happen at just the appropriate time to connect with people who will be forever altered by our witness, our tears, and our pain. He knows that the heartache we feel today, he will use to reach hundreds tomorrow, next week, or next year. Although we may never see what becomes of our pain while we are here

on earth, we will be amazed when we get to heaven and see the results of what he did with it!

## “How Long Will the Trial Last?”

One of the greatest struggles we face while wandering through the valley of suffering is not knowing how long we will be there. Our timing always seems to be a bit different from God’s timing. We want an easy answer to our problem, and the sooner the better! From our point of view, we can’t see ahead and we don’t know what the future holds, so we become afraid of what will happen next. We may understand that God is in control, but keeping that perspective is sometimes easier said than done. Our position in the valley allows us only a limited view of where our path leads.

*We see our way is full of rocks to stumble over. It is hot and we are in desperate need of a bath. We are tired and we are thirsty. There is no water in sight and we are afraid of another cold, dark night in the wilderness. But from God’s perspective, he sees the whole valley from every angle, and has already placed provisions along our path.*

“. . . I am he who will sustain you. I have made you and I will carry you; I will sustain you and I will rescue you” (Isa. 46:4b).

*He knows that there is a cabin just ahead with a warm fireplace, and next to the cabin there’s a freshwater stream full of fish. The owners are preparing a wonderful meal as they happily welcome us into their home. We warm ourselves by the fire, luxuriate in a hot shower, and then enjoy a wonderful evening full of conversation and delicious food. We get a good night’s sleep. The next morning our new friends cook up a big breakfast and they send us off with enough provisions to feed an army! They also give us a compass and a map. Refreshed, we continue on our journey.*



God knows our fears and our doubts. He knows that our view of the situation is limited, and that we are easily wearied. He knows that we need rest, reassurance, and a shoulder to cry on. He knows that our strength will waver as sometimes does our resolve and even our hope. Perhaps that is why his mercies are new every morning. He knows that some mornings in the valley are harder than others. He supplies our needs daily because he knows that we don't have the ability to be strong day after day without these provisions.

## “Is His Purpose Worth My Suffering?”

What if we don't see anything good come out of the bad situation? Many times we don't know why God allows bad things to happen to us-- things that turn our lives upside down and break our hearts wide open. Probably the single most often-asked question when people suffer is, “Why did God let this happen, when he could have easily stopped it from happening?”

If we believe that God is mean and cruel and just waiting for us to mess up so he can take a whack at us, then the answer to that question becomes, “Because he can.” But if we understand that God loves us so much that he sent his son to die in order to redeem us, the question becomes much more difficult to answer. While we cannot understand specifically why certain events happen, we can take comfort in the fact that God is sovereign. He loves us and he promises to work everything in our lives together for good. He has a plan. His goal is to reconcile us back to himself, and he uses all situations to accomplish that goal. He uses the good and he uses the bad.

Some people may misinterpret this to mean that God makes bad things happen. He is not the author of evil, but he will allow painful events to happen in our lives for his own purposes. These events are situations that he could clearly stop or keep from happening, but he doesn't. So if we know that he allows difficulty in our lives, then the question really becomes, “Do I trust that his purpose is *worth* my suffering?”

One of the hardest issues we faced in planning Mom's memorial service was the overwhelming desire to make the most of this opportunity. We knew that this would be her last testimony to friends and family, and we wanted to make sure the Gospel message was presented plainly and clearly. Our goal was to focus on the Lord in whom she had placed her faith, allowing him ample opportunity to speak to those who needed to hear from him. We knew that God could take the seeds planted during her service and have them grow into something good.

As her family, we would have loved to have seen some immediate fruits of his labor. What a blessing and joy it would have been to witness the transformed lives brought about by Mom's example. We wanted to see first-hand how God would use her death to touch the lives of others. Christians sometimes get to see how God used their suffering, but this is more the exception than the rule. Most of us will not realize that pleasure until we get to heaven. Even so, considering the eternal implications, most of us would be content with the sentiment, "If it brings just one person into the kingdom, it will have been worth it."

Lynn was reflecting on this shortly after Mom's death, and it suddenly dawned on her, "What if the Lord does show me how he used her death to bring about change in someone's life, and I *don't* think that it's worth it? What if the person who benefits is someone I don't even like? What then?"

If we are honest with ourselves, we have to admit that there are some people we are quite fond of and others we are not so fond of. God doesn't play favorites but, being human, we often do. God calls us to love our neighbor regardless of whom our neighbor is. How he uses our suffering, and who he chooses to bless because of it, is a decision for *him* to make. So even if the person God reaches is someone we don't particularly care for, we know that Mom's death and our suffering were not in vain.

Ultimately our suffering becomes a question of trust. Do I trust that God is who he says he is? Do I trust that he loves me more than I could ever know? Do I trust that he has my best interests in mind when he allows me to go through those valleys of suffering? Do I trust in his

judgment enough to know that my time spent in those valleys will have been worth it?

## “What if God’s Answer is the One I Dread?”

What if our prayers don’t turn out the way we expect? What if we pray for God’s intervention, and he doesn’t respond the way we asked him to, or he doesn’t respond at all? Why does he answer other people’s prayers and not ours? Why does he heal other people and not us? Why does he spare the lives of some, and allow others to die?

We certainly have faced those questions ourselves. *Lord, couldn’t you have saved Lynn’s marriage? Why did Lori have to lose a kidney? How could you let Mom get cancer? Lord, why did you let her die?* We prayed for positive outcomes for all of those situations, and, in every one, the answer we received was the answer we dreaded.

When we see a disparity between positive outcomes of answered prayer for some and not for others, it is easy to assume that God plays favorites. We believe a lot of people struggle with what could be called the “fairness issue.” In his book, *A Table in the Presence*, U.S. Army Chaplain Lt. Carey Cash writes about his own struggle with this question. While he personally witnessed God intervene to protect some fellow soldiers and Marines, he also watched as others were not spared from death. To the families of the fallen, it might appear that their prayers went unheard, unanswered, or ignored. In their pain they might ask, “How could God let this happen?” and “Why didn’t God protect my loved one from harm?”

In his own efforts to better understand the disparity question, Lt. Cash turned to Scripture where he found an interesting parallel described in the lives of two men. Both faced life-threatening circumstances and in both cases, God intervened in a miraculous way. However, the final outcome for each man was very different.

Daniel was an Old Testament prophet who continued to worship God even though a law was passed forbidding prayer to anyone but the king. The king liked Daniel but could not repeal the law. As a result Daniel

became the Chef's Special on the menu for the royal lions and was thrown into their enclosure.

So the king gave the order, and they brought Daniel and threw him into the lions' den. The king said to Daniel, "May your God, whom you serve continually, rescue you!"

At the first light of dawn, the king got up and hurried to the lions' den. When he came near the den, he called to Daniel in an anguished voice, "Daniel, servant of the living God, has your God, whom you serve continually, been able to rescue you from the lions?"

Daniel answered, "O king, live forever! My God sent his angel, and he shut the mouths of the lions. They have not hurt me, because I was found innocent in his sight. Nor have I ever done any wrong before you, O king."

The king was overjoyed and gave orders to lift Daniel out of the den. And when Daniel was lifted from the den, no wound was found on him, because he had trusted in his God (Dan. 6:16, 19-23).

God miraculously intervened in Daniel's situation, protecting him from harm in a very public demonstration before the king.

Stephen was a New Testament believer who refused to renounce his faith in Christ as the promised Messiah. When he publically declared his faith, he was falsely accused of blasphemy and incurred the wrath of his accusers.

When they heard this, they were furious and gnashed their teeth at him. But Stephen, full of the Holy Spirit, looked up to heaven and saw the glory of God, and Jesus standing at the right hand of God.

“Look,” he said, “I see heaven open and the Son of Man standing at the right hand of God.”

At this they covered their ears and, yelling at the top of their voices, they all rushed at him, dragged him out of the city and began to stone him.

While they were still stoning him, Stephen prayed, “Lord Jesus, receive my spirit.” Then he fell on his knees and cried out, “Lord, do not hold this sin against them.” When he had said this, he fell asleep (Acts 7:54-58a, 59-60).

Both Daniel and Stephen were faithful servants who willingly put themselves in harm’s way to stand firm in their devotion to God. So why did God spare the life of Daniel while allowing Stephen to be stoned to death?

Lt. Cash describes the disparity with a new perspective.

Daniel and Stephen both remained true to their calling; both walked faithfully no matter the cost. For one, that calling would be affirmed through the power of divine protection. For the other, it would be illuminated through the heroism of sacrifice. Daniel’s account becomes a living testimony, and because of it, many will come to believe in the reality of God’s miraculous intervention. Stephen’s account is more than a testimony; it is a memorial through which humanity comes face to face with a picture of God’s perfect love.

And so the comfort may lie here: in life or death, in miracle or sacrifice, in unexplainable deliverance or the sad loss of a fallen brother, God remains in the center of it all. He is the power behind every miracle. He is the source of all heroic sacrifice.<sup>4</sup>

The point of these two stories is not the individual outcomes for Daniel and Stephen, but the fact that God himself was in the midst of their trials. It was God who decided that one would live and the other would die, and both decisions were according to his perfect plan. The family of Stephen could have become bitter and blamed God for not rescuing Stephen. Many of us do that when God does not resolve situations to our satisfaction. When unbearable pain enters our lives, we can choose bitterness or we can choose to trust that God's heart is good and that his plan is good, despite our circumstances.

So how do we do this? When we are overwhelmed with pain, how do we choose to trust him?

## Choosing to Trust Despite How We Feel

But the plans of the LORD stand firm forever, the purposes of his heart through all generations (Ps. 33:11).

Although the Bible says that God has a plan for each one of us, it doesn't say that he discusses the details of that plan with us as it is unfolding. As we struggle through particularly painful episodes in our lives, how do we trust in God's plan, when it seems from our point of view, that his plan is not a good one?

First, we remember that God is sovereign and he is a mystery. Unless he tells us why certain events happen, we will not know this side of eternity. He may orchestrate some events and allow other situations to occur, both of which happen according to his plan.

Earlier in the chapter, we read this verse, but it's important to come back to it.

“For I know the plans I have for you,” declares the LORD, “plans to prosper you and not to harm you, plans to give you hope and a future” (Jer. 29:11).

What is interesting about the verse in this context is the phrase *and not to harm you*. It indicates that God is telling the reader not to interpret bad situations as his intention to inflict harm upon them. He already knows the final outcome of every situation and how we will benefit from each one in the long run. This verse is our reassurance that despite our circumstances, God's motivation is to give us life, to give us hope, and to orchestrate events to bring us back to himself. While we cannot understand the specifics of his plan, we can trust in his purpose.

Second, we remember that God loves us with a personal and everlasting love. His Word says that each one of us is precious to him and that he loves us infinitely more than we could ever conceive.

“. . . I have loved you with an everlasting love . . .” (Jer. 31:3).

So what does that mean? What does the kind of love God has for us, look like? Most of us have read or heard the verse about how great love is shown.

Greater love has no one than this, that he lay down his life for his friends (John 15:13).

We can understand and be grateful for that kind of sacrifice made by police officers, fire fighters, and members of our military who give their lives to protect our safety and our freedom. But what about the sacrifice made by Christ on our behalf?

But God demonstrates his own love for us in this: While we were still sinners, Christ died for us (Rom. 5:8).

Many people accept that Jesus was in heaven with God the Father and gave up that status to become a man so that he could die on the cross and save us from our sins. But what did that really mean? Our human understanding is ill-equipped to fully grasp what Jesus traded to become one of us.

In order to illustrate the topic for younger audiences, Pastor Jon Courson wrote a fictional story as an analogy to describe the magnitude of the Lord's sacrifice. Author and Speaker Chuck Missler shared an adapted version in one of his recorded Bible studies entitled *From Here to Eternity, The Physics of Immortality*.

As I recall, [Jon] described this as a dream he had one night. He dreamed that the Father was passing through the universe, and going throughout the universe, showing him galaxy after galaxy. They finally zeroed in on this one particular galaxy and then on one particular planet in the galaxy, and he was puzzled. Why this particular planet? As they got closer he noticed that this planet was inhabited entirely by dogs... and then he realizes not only is this planet inhabited entirely by dogs, [but] they are nasty, snarling, vicious dogs. And he is puzzled. He says, "Father, I don't understand."

And the Father says, "Well, you see Jon, I happen to love those dogs. I know they're nasty, snarling, vicious animals, but I happen to love those dogs. In fact Jon, that's why I'm showing you this, because I want you to go down there and carry that message to them. I would like you to let them know that I love them."

And Jon says, "Well, you're the boss. You're God. Whatever you want, of course."

"Well no, Jon, you see what you're going to have to do in order to do that is, you, of course, will have to become a dog."

"Well, whatever you want, of course."

"And in fact, what I want you to do is, I want you to become a Chihuahua. . . And there's something else you need to understand, Jon, is when you go down there and try to give them that message,



they're not going to receive it. In fact, they are going to tear you to pieces. But that's okay, because I'm going to resurrect you Jon."

"Okay, you know, that's okay."

"But there's one other thing you need to understand Jon. Even after I resurrect you, you will have to remain a Chihuahua, *forever*."<sup>5</sup>

Although it is a simple story, the illustration is a powerful one. Imagine if you had to give up humanity to become not just a lower animal, but one of the smallest, most indefensible of the species. When Christ left heaven to become a human infant, the sacrifice was more incomprehensible than if one of us had been asked to become a Chihuahua. There is no way for us to wrap our minds around what Christ gave up to become one of us. Not only did he become human, but he will remain human and bear the scars of his sacrifice for all eternity. He was *forever altered*.

Understanding that Christ was still fully God, some might be tempted to think that his sacrifice was not all that hard for him. However, the Gospels clearly describe that he was in anguish. Because he was also fully human, the crucifixion was not easy for him; it was torturous. Christ struggled with his human fear and prayed for relief.

"My soul is overwhelmed with sorrow to the point of death" . . . (Mark 14:34a).

Going a little further, he fell with his face to the ground and prayed, "My Father, if it is possible, may this cup be taken from me. Yet not as I will, but as you will" (Matt. 26:39).

And being in anguish, he prayed more earnestly, and his sweat was like drops of blood falling to the ground (Luke 22:44).

Even more than the physical torment Christ had to endure, it was the break in communion with the Father that caused him to cry out while on the cross.

At the sixth hour darkness came over the whole land until the ninth hour. And at the ninth hour Jesus cried out in a loud voice, “Eloi, Eloi, lama sabachthani?” - which means, “My God, my God, why have you forsaken me?” (Mark 15:33-34).

At the moment he bore the shame of all our sins, his father turned away from him.

Can you imagine your child being tormented, crying out to you in pain and suffering, and you *chose to turn your head away from him*? What unbearable pain for both father and son. This is an example of God’s love for us--that he put his own son through that pain and that anguish of separation, so a way could be made for us to be redeemed.

And what is amazing is that Jesus didn’t have to endure any of it. He could have decided that we weren’t worth the trouble and declined to intercede. Probably most of *us* would have replied that way. But Jesus responded differently. He chose to give us life by taking our place and giving up his own. He knew what his sacrifice would entail, and *he willingly chose to make it*.

Even so, his emotions ran the full gambit as do ours when we are hurting and afraid. In the Garden of Gethsemane, Jesus prayed.

“Father, if you are willing, take this cup from me . . . .” (Luke 22:42).

Evidently, God said no. So how did Jesus deal with this? First, he was obedient to the Father.

He went away a second time and prayed, “My Father, if it is not possible for this cup to be taken away unless I drink it, may your will be done” (Matt. 26:42).

Second, he was honest about his emotions. When we read the Gospels, we can see the extent of his anguish and his pain. He poured out his heart to his father just as he was, in need. Christ is our example, and God wants us to come to him just like Jesus did when he was overwhelmed with stress. When we are falling apart, he wants us to pour out our sorrows, our pain, and our guilt to him. Letting go of that which torments us and giving it to God allows him to replace those things with mercy, grace, and peace.

When we struggle with the question of why God allows us to get to that breaking point, we need to remember that life on this planet is not safe. He does not promise us a pain-free world. But he does promise that he will be there for us when we encounter those trials and walk through those valleys.

“And surely I am with you always, to the very end of the age”  
(Matt. 28:20b).

“I have told you these things, so that in me you may have peace. In this world you will have trouble. But take heart! I have overcome the world” (John 16:33).

These words confirm that his promise is not to keep bad things from happening to us, but that he will be with us when bad things do happen. When our world falls apart, we can turn to him, and he will give us peace. This is a peace that we can't buy or steal or that can be given to us by any other person. This peace is only available from the Father through the Son.

“Peace I leave with you; my peace I give to you. I do not give to you as the world gives. Do not let your hearts be troubled and do not be afraid” (John 14:27).

This is the peace that gives us the strength and the will to trust him with our lives no matter our circumstances.

## CHAPTER ELEVEN

### *A New Normal*

The clouds released a bit of drizzle as we walked up the hill and sat down on the grass next to Mom's headstone. During our trips home to San Diego, we began a ritual of stopping by the cemetery to bring flowers and spend some time with Mom. We would take a blanket and our Starbucks and enjoy a few minutes of reminiscing. On this day the weather was inclement, but we decided to go and sit for a while anyway. Several yards away, two groups of U.S. Marines in full dress uniform were preparing for a military service. One group stood ready to receive and carry the casket up the hill to the burial site, while the second group practiced performing honor guard duties.

As the rain steadily increased, we debated whether we should stay or seek the shelter of the car. Curious to see the Marine Corps provide military honors for one of their own, we decided to stay seated. We thought that if the Marines were willing to stand in the rain, it should be our honor to brave the rain with them. With precision, they practiced rifle maneuvers, and we marveled at their ability to maintain control over the weapons in such wet conditions.

Nearby, a middle-aged gentleman also watched the Marines. He walked up the hill toward them and stopped to talk with them for a few moments. After his brief conversation, the man stepped over to the grave site and reverently offered a solemn salute. He proceeded back down the hill in our direction. As the man walked closer, we could see the Marine Corps emblem on the bill of his ball cap. He stopped again, this time to talk to us.

We learned that the man was at the cemetery to visit his mother. He also shared that he was retired from the Corps and had felt compelled to pay his respects to a fellow Marine. Our attention was diverted to the mournful sounds of the bagpipes playing “Amazing Grace.” Following the bagpipes, eight determined Marines carried the heavy casket up the steep incline. The procession ended as guests, huddled under umbrellas, slowly made their way to the grave site. The pastor began to speak, and the man turned this attention back to us. He continued the conversation by asking who we were visiting at the cemetery.

“Like you, we are also here to visit with our mom.”

His eyes filled with tears.

“I know how you feel,” he said. “It’s been eight months and it’s still hard.”

He described the difficulty of facing family members who could not fully understand the depth of his grief, and had limited patience with his melancholy behavior. His emotions were raw, and he was hurting. Even at his advanced age, the man’s mother had been a stabilizing and affirming presence in his life, and the pain of her loss was like nothing else he had ever experienced before.

“You understand. You know what it’s like to lose your mom.”

The man had no one to share his grief with. His family had encouraged him to get past the incident of his mother’s death. By doing so, they had placed a terrible burden on him to keep his mourning to himself. He was hungry for someone to talk to about his pain. He needed someone to tell him that it was okay for him to grieve.

A Marine calling out orders interrupted our thoughts and redirected our attention back to the funeral. The rain-soaked flag was removed from

the top of the casket, meticulously folded, and reverently presented to the family. “Taps” began to play as the sun reappeared. The rifle detail was called to present arms. We watched the Marines point their rifles toward the horizon and fire a volley of three shots over the grave site. The rain had stopped and the Marine detail marched in formation back down the hill.

As the man prepared to leave, he promised to watch over our mom’s grave site when we were not there.

“We’re like family in a way, because both our moms are here.”

Shared experiences can make us valuable tools in the hands of God. This man found comfort and camaraderie in the cemetery that day. The young Marines had validated him as one of their own, and two rain-soaked girls had commiserated with him in his grief. The Lord had seen his pain and provided emotional support for him through the kindness of strangers.

## He Heals the Brokenhearted

During the first week after Mom’s death, grief and sadness were kept at bay by our responsibilities to finish her life’s final chapter. Only after the service was over, the people gone, and the house quiet, did we allow ourselves to finally feel the depth of her loss. As weeks became months we found ourselves navigating the deep waters of grief.

We attended the next Women of Faith conference where Mom’s absence was both conspicuous and painful. As with past conferences, the theme had an uncanny resemblance to our current situation. Beginning with the first conference we attended, each year’s theme seemed to mirror where we were on our journey through life.

The *Great Adventure* began our struggle with CPT and the silver lining that was the web site. Following our hysterectomies and looking forward to a future without collapses, we attended *Irrepressible Hope*. Despite our recoveries, Lori’s continued unresolved medical issues found us needing *Extraordinary Faith*. The following year, we celebrated *Contagious Joy* as we anticipated Lori’s upcoming surgery and complete recovery. At the

time, we could not know the drastic changes the next twelve months would bring, or how poignant the following year's theme would be.

With heavy hearts we attended the next conference without Mom. While we missed her greatly, we recognized that she was experiencing that which God had promised to her, *Amazing Freedom*.

But, while Mom was amazingly free, we were still carrying a lot of emotional baggage including grief, sadness, and loss. We found Marilyn Meberg's message about owning painful emotions very timely. She talked about a time in her own life when she faced a devastating loss. Her emotions were so painful that she avoided feeling them, choosing instead to suppress them. As a result, she simultaneously shut God out and denied herself closure. Marilyn explained that God created our emotions with a need to vent them when they overwhelm us. She compared this need to the Dead Sea which has an inlet but no outlet. While water flows in from the Jordan River, there is no way for the water to exit and therefore the Dead Sea cannot sustain life.<sup>1</sup>

Just as the lack of water flow in the Dead Sea increases salinity preventing life from flourishing, stifling our emotions prevents us from finding the healing we need. God desires to be our emotional outlet so that he can provide healing and restore life. When we walk through a valley of hardship, God wants to meet us on that path and walk with us. Life will not always be pleasant, and there will be times when we are laden with emotional baggage. God is waiting to take those bags from us if we will only ask him to. In these moments, we experience the freedom he promises. Marilyn concluded her message.

“If we don't experience life fully, we can't experience God fully.”<sup>2</sup>

In another poignant moment of the conference, Nicole C. Mullen performed a song and choreographed dance routine that powerfully illustrated the story of our familiar friend, the Mark 5 woman. Portraying herself as the woman, she sings about her pain, her suffering and her hope of changing the situation she has endured for twelve years. Cloaked in a red tunic, she desperately reaches to touch the hem of the garment Jesus wears.

Four dancers surround her, each bearing on her jacket the inscription of a damaging emotion; fear, shame, guilt, and loneliness. In the dance they physically hold back the Mark 5 woman as she struggles to reach out her hand. Finally, she presses through and is able to touch the hem of the robe of Christ. Immediately she is made whole and gains strength from Jesus to push the emotions away. The woman sheds her red garment, revealing herself dressed in white, a woman now free from the burdens which had held her captive for so long. In her new-found strength, she pulls off the jackets of the dancers revealing new emotions of peace, hope, joy, and forgiveness. The traits and obstacles which kept her a prisoner were replaced with freedom.<sup>3</sup>

The performance was a powerful reminder of God's continuing provision in our own lives. When we first read about the Mark 5 woman, she was somebody with whom we could immediately relate. Every subsequent encounter of her story in a book, on the stage, or through song taught us something more about God's grace, his mercy, and his faithfulness. Our crossing paths with her in this way became like little messages from God reminding us that we were not alone.

We were especially affected by Sheila Walsh's message on brokenness and shattered dreams. She began by asking the ladies in the audience if their lives had turned out the way they had expected. Considering the recent loss of our mom, the answer to that question for us would have been a resounding "NO!" Without a doubt, we were not alone in our silent response.

For most of us the fairy tale fulfillment of all of our childhood dreams, does not often become reality. Disappointment seems commonplace when we compare what we wanted in life to what we actually received. In some cases the disappointment is mild. In others, it is devastating. We certainly did not envision our mom being taken from our lives at so young an age. This brought brokenness to our family which only God could heal.

He heals the brokenhearted and binds up their wounds (Ps. 147:3).



God reminded us that he knew of our heartache and was continuing to walk with us in the unfamiliar territory of grief. We found solace in relating to others who were walking the same uncharted road.

## Jesus Shares Our Grief

There are times when our sense of loss is renewed, and we are struck with the thought, “I can’t believe Mom is gone.” We often have the desire to call her, momentarily forgetting that she isn’t there to pick up the phone. Reality reminds us once again of our loss, and we encounter the pain of separation all over again.

In his book, *Hope for Hurting Hearts*, Pastor Greg Laurie described a similar profound grief, and how he would cry out to God in his pain.

. . . Sometimes the reality that my son is gone pierces my heart like a sword, and I say, “Oh, God. I can’t believe this! I can’t handle this pain!”<sup>4</sup>

As a pastor, he had participated in many memorial services, walking with those who had lost loved ones, including those who had lost children. Such experiences caused him to believe that he had come as close as possible to the pain a parent feels at the death of a child without actually going through it himself. However, when this awful tragedy touched his own life, he found that he was ill prepared for the onslaught of emotions. Pastor Laurie realized that he had no idea of the depth of grief and pain that accompanied the loss of a child until he suffered the loss himself. In this new state, he found himself the recipient of counsel instead of the one providing support and comfort to others. While some expressions of sympathy brought comfort, others were like salt in the wound.

Sometimes people may feel compelled to say something meaningful, and because they don’t know exactly what to say, they resort to platitudes which cause more harm than good. Although they want to be helpful, they cannot fully understand the depth of grief when they have never experienced it themselves. Phrases like, “Are you over it yet?” or “Is

everything back to normal?” diminish the loss and invalidate the grief. People who are mourning a loss need time to grieve. For some people this may take several years. And even after the initial sadness and suffering are over, they are never “over it.” They have just adjusted to a *new normal*.

When we don’t know what to say to others in their time of grief, it is better to limit our comments. What they don’t need, are clichés about why they suffered loss. We don’t know why. Only God knows why. What we can do is pray with them, cry with them, and ask them what they need. Then we can come alongside and just be there for them.

In his time of suffering, Job needed his friends to commiserate with him, not advise him. Originally, they started out that way and just sat with him in his misery. But then they felt the need to analyze his situation and theorize why God had removed his hand of blessing from Job. This did not help Job. He needed his friends to support him, not explain his suffering. His friends were not a comfort to him. They had the chance to help him in his time of need, but instead they squandered the opportunity, and Job was alone in his pain. Conversely, as we saw in the story of Lazarus, Jesus himself wept with the sisters who were grieving. Unlike Job’s friends, Jesus had empathy for those who were suffering. He shared their pain and grieved as they grieved.

When Jesus saw her weeping, and the Jews who had come along with her also weeping, he was deeply moved in spirit and troubled.

“Where have you laid him?” he asked.

“Come and see, Lord,” they replied.

Jesus wept (John 11:33-35).

Jesus felt strong emotions and completely entered into the pain of those around him. He was troubled at the situation. But why was he? He had purposely stayed away long enough to ensure that Lazarus would be in the tomb when he arrived. He knew that he was going to raise Lazarus

from the dead, so why did he feel such anguish? The people's tears had moved him. Lazarus and his sisters were close friends of Jesus, and their pain was his pain.

The reaction of Jesus shows us that not only do we share grief with one another, but God shares grief with us as well. He cries when we cry. He cares that in our fallen world there are so many situations that make us cry. He loves us so much that he provided a way to ensure that one day we will no longer need to cry. One day we will no longer feel the sting of death.

“Where, O death, is your victory? Where, O death, is your sting?”  
The sting of death is sin, and the power of sin is the law. But thanks be to God! He gives us the victory through our Lord Jesus Christ (1 Cor. 15:55-57).

## The Hope of Heaven

Despite the great pain he has endured, Pastor Greg Laurie continually shares the hope that sustains him in his grief. His hope is in the confidence that he will see his son again in heaven. Pastor Laurie knows that the separation from his son is temporary.

Let not your heart be troubled: ye believe in God, believe also in me.

In my Father's house are many mansions: if it were not so, I would have told you. I go to prepare a place for you.

And if I go and prepare a place for you, I will come again, and receive you unto myself; that where I am, there ye may be also (John 14:1-3) KJV.

. . . “No eye has seen, no ear has heard, no mind has conceived what God has prepared for those who love him” (1 Cor. 2:9).

Jesus wanted to assure us that the promise of heaven was true, and that it would be more than we could ever imagine. But because we mortals have never seen heaven, many of us have a difficult time comprehending it. Too often heaven is thought of as a place of clouds, cherubs, harps and, if you believe the television commercials, a never-ending supply of cream cheese!

In his book, *Heaven*, Randy Alcorn describes common misconceptions people have about heaven. Because they have been taught to think of it as a non-physical place without real buildings, gardens, cities and people, they don't feel a familiarity with heaven. However, the Bible teaches us that heaven is a real and tangible *place*. Not only is heaven full of familiar elements of our world, but our loved ones who had faith in Christ are presently there with him.<sup>5</sup> The hope we have in Christ is what keeps us going when we grieve for those we have lost. We know that we will see them again.

It has been interesting that since Mom's death, our perception or concept of heaven has changed. The way that we feel about heaven seems different than before. Previously, we knew heaven to be a real place and a desired future destination, but beyond that we didn't really spend much time thinking about it. Now granted, the subject does seem a bit more important the older one gets, but since Mom's death, our understanding seems less abstract and more personal. Now we think of heaven as the physical place she currently inhabits. She is there right now, in the presence of her Lord, and she will be there to greet us when we arrive. The concept of heaven previously thought of as an unfamiliar and abstract place, now has an aspect of the familiar.

Several years ago our good friend, Vickie, lost her husband to kidney cancer. In talking with her after his death, she described to us a feeling she had experienced during his last few months.

"It's like I had one foot in heaven and one foot on earth. I felt like a part of me was in both places."

She said the feeling persisted until the last twenty-four hours of her husband's life, when the feeling vanished and she felt within her spirit, "He's going now, and you will stay here." At the time, we couldn't really

understand what she described, but now that we've suffered our own loss, it makes much more sense.

Perhaps God allows us to feel the closeness of heaven to help us through the grief process and to remind us that one day our relationships with our loved ones will be restored, never to be broken again by death.

Christian musician Steven Curtis Chapman has talked very openly about the grief his family has suffered since the tragic accident which claimed the life of his little daughter. Like us, his concept of heaven has been changed by his loss. He captures these feelings in the lyrics "Heaven Is The Face."

... I know, it's so much more than I can dream  
It's far beyond anything I can conceive  
So God, You know I'll trust in You until I see  
Heaven in the face of my little girl

© Steven Curtis Chapman, 2009, Primary Wave Brian/One Blue Petal Music<sup>6</sup>

For many of us, our concept of heaven starts with the faces of those we have lost. While we physically remain in this world, our hearts have been turned toward heaven.

Randy Alcorn, again in his book, *Heaven*, writes about the anticipation we have of seeing our loved ones again. He paints a vivid picture of the reunions that will occur for believers, when we are reunited with those we have lost. Following this reunion we will enjoy countless adventures together, never to be separated again by death.<sup>7</sup>

Heaven will be filled with the joy of reunion. Relationships will be restored, and longings will be fulfilled. Work will be meaningful, and our ability to accomplish goals will be realized. Adventures will be abundant as we live the lives we were always meant to live.

While it is inevitable that we will experience suffering here on earth, this life is not all there is. We were designed for paradise, and *we long for home*.

## CHAPTER TWELVE

### *God Provides the Way Home*

When Lori's daughter, Katie, was five, the three of us were traveling together on the Metrolink train from Union Station in Los Angeles to Rancho Cucamonga. Sitting near us on the train, a little boy about her age was playing with a set of plastic zoo animals. Being a social child, Katie made friends easily, so it wasn't too long before she and her new friend were talking to one another as the boy's father looked on. The man said they were returning home from a day at the Los Angeles Zoo and asked Katie if she liked animals. She replied that she did, in fact, love animals!

He continued, "Do you like giraffes?"

"Yes, I like giraffes."

"How about elephants?"

"Um, yeah, I like elephants."

"Tigers?"

"Yes! I love tigers. They are my favorite animal!"

"Do you like... buffalos?"

This question caused some consternation.

“No. . . I don’t like buffalos,” she replied sadly, “People eat their wings.”

The man stifled a smile and said, “Oh, I see.”

From Katie’s limited experience in life, she had no idea that her perception of reality was wrong. Her opinions were based upon her understanding of her world, and in that world buffalo wings were on the appetizer menu at the local restaurant. With only five years to gain wisdom, her understanding of truth was severely limited.

The same concept was true for two other travelers in the Gospel of Luke. The two men are walking to a town called Emmaus about seven miles from the city of Jerusalem where they witnessed Jesus die a horrible death. As followers of Jesus, they had been hoping that he would deliver Israel from Roman rule. Their hopes now seemed dashed. It had been three days since his death and just that morning they had received word that Jesus’ body was missing from the tomb. What did it all mean? They were distraught and confused. In the midst of this serious discussion, they are joined by a stranger. The stranger asks them what they are discussing and they pour out their story and their heartache. The Gospel reveals that Jesus was the stranger and had kept the two men from recognizing him. His reply to them was probably not what they expected.

He said to them, “How foolish you are, and how slow of heart to believe all that the prophets have spoken! Did not the Christ have to suffer these things and then enter his glory?” And beginning with Moses and all the Prophets, he explained to them what was said in all the Scriptures concerning himself (Luke 24:25-27).

Once the three reach the village, they invite the stranger to stay with them. He does so, joining them for dinner. Before eating, the stranger breaks the bread and blesses the meal. Immediately the two men recognize Jesus for who he is.

Then their eyes were opened and they recognized him, and he disappeared from their sight. They asked each other, “Were not our

hearts burning within us while he talked with us on the road and opened the Scriptures to us?” (Luke 24:31-32).

The light dawned and they understood. Their perception of reality before Jesus appeared was very different than their perception after Jesus expanded their understanding. His interaction with them affirmed his resurrection, but it was the impromptu on-the-road Bible study which confirmed his identity to them as the long-awaited Messiah.

Like Katie’s misunderstanding about the anatomy of buffalos, the disciples on the road to Emmaus had a limited understanding which led to a faulty perspective. Once Christ opened their eyes, the truth of their situation was seen in a new light. Sorrow was replaced with joy, and despair gave way to excitement. With a new understanding of reality, their perspective was changed.

Frequently suffering can change a person’s point of view. It often redirects our focus, changes our priorities, and clarifies what is important. Job learned more about the sovereignty of God from his time of suffering than he did from his time of prosperity.

My ears had heard of you, but now my eyes have seen you (Job 42:5).

God values that which has eternal ramifications and knowing Job to be a righteous man, God was confident that Job would not turn from him despite his circumstances. Even so, Job’s faith was not based upon how he was feeling but upon choices he made day to day and moment by moment.

Sometimes we look at people who are suffering like Job had suffered, and say to ourselves, “I don’t know what I would do if that happened to me.” But the truth is that when it does happen, God provides the strength we need to get through it. This does not mean that the suffering is easy, but it does mean that we are not alone.



We are hard pressed on every side, but not crushed; perplexed, but not in despair; persecuted, but not abandoned; stuck down, but not destroyed (2 Cor. 4:8-9).

And the God of all grace, who called you to his eternal glory in Christ, after you have suffered a little while, will himself restore you and make you strong, firm and steadfast (1 Pet. 5:10).

When we are suffering, it is hard to remember that God's timing is not our own. Perhaps God also uses hardships to remind us that we cannot count on anything in this life--not family, not health, not money, not a job, not a house, not a car, not the government. Nothing. The only thing we can count on is God. Only God is faithful, constant, and consistent 100 percent of the time.

There is a poignant story that author Sheila Walsh shares in her book, *Living Fearlessly*, about a family who realized this concept after a tragic accident. The mother described her recent heartache to Sheila.

“My son was hit by a drunk driver,” she said. “He was in a coma for four days before he died. I gave my life to Christ in Intensive Care. . . He was the only one in the family who was a Christian. As we watched his life ebb away, a silent truth hung in the air like the morning star. My mute son was the only one who was not afraid of death. He knew where he was going. He had talked to us many times about the profound impact his relationship with Jesus Christ had on his life. He was dying, but we were lost. His father, three brothers, and I all gave our lives to Christ by his bedside. He never knew. He never regained consciousness. But we'll be together again one day soon.”<sup>1</sup>

This heartbreaking situation provided clarity for the family, changing their perspective and their priorities. And as with the travelers on the road to Emmaus, the family's new understanding brought about a joy despite the suffering they endured.

## Water for the Thirsty

The poor and needy search for water, but there is none; their tongues are parched with thirst. But I the LORD will answer them; I, the God of Israel, will not forsake them (Isa. 41:17).

“To him who is thirsty I will give to drink without cost from the spring of the water of life” (Rev. 21:6).

When circumstances change our perspective, newfound clarity enables us to recognize that we are in fact *thirsty*. It allows us to see our need for God. C.S. Lewis acknowledged that he believed in Christ not because he could see him, but because, through the lens of Christ, he could see everything else.<sup>2</sup> When people acknowledge their *thirst* for God, he opens their eyes to understand how only *he* can quench it.

So why exactly do we thirst for God? Why do we cry out to him? Why do we strive to reach him? Is it because we recognize there is a gulf between us that we cannot cross?

Unfortunately mankind has not made the wisest of choices with respect to God’s law, and so we have been separated from God for quite some time. Sin entered our world and we willingly took part in it. When that happened, a separation occurred, and we have been struggling to restore that communion with God ever since. Unfortunately, our own efforts have not worked out too well.

For all have sinned and fall short of the glory of God (Rom. 3:23).

For the wages of sin is death, but the gift of God is eternal life through Christ Jesus our Lord (Rom. 6:23).

Mankind is sinful by nature and because God is holy, our sin separates us from him. But because of his great love for us, he offered his son as a sacrifice for our sin so that reconciliation could occur. In his mercy, God extended grace to us instead of punishment, and Christ

willingly accepted the punishment on our behalf. He knew that we could never become good enough or holy enough to return to fellowship with him through our own merit, so he provided his son to bridge that gap for us. We cannot reach God with our own efforts to “follow all the rules” or insure that the number of our “good deeds” out-weigh the number of our “bad deeds.” A story in the Gospel of John illustrates this point.

A woman had broken the Law, and the religious leaders bring her to Jesus in order to test him. Her crime was adultery and the punishment under the Law was death by stoning. The leaders want to see if Jesus will support the Law or dismiss it.

. . . “Teacher, this woman was caught in the act of adultery. In the Law Moses commanded us to stone such women. Now what do you say?”

But Jesus bent down and started to write on the ground with his finger (John 8:4b-5, 6b).

What a peculiar thing to do. Jesus doesn’t answer them. Instead, he writes in the dirt. Some speculate that perhaps he wrote the names of her accusers alongside the commandments each one of *them* had broken.

When they kept on questioning him, he straightened up and said to them, “If any one of you is without sin, let him be the first to throw a stone at her.” Again he stooped down and wrote on the ground.

At this, those who heard began to go away one at a time, the older ones first, until only Jesus was left, with the woman still standing there (John 8:7-9).

With all the woman’s accusers gone, Jesus turns his attention to her.

Jesus straightened up and asked her, “Woman, where are they? Has no one condemned you?”

“No one, sir,” she said.

“Then neither do I condemn you,” Jesus declared. “Go now and leave your life of sin.” (John 8:10-11).

Although the Law had condemned her, Jesus chose to grant her mercy and forgiveness instead. The religious leaders missed the purpose of the Law. It was never meant to make us holy, but to bring us to the realization that we cannot obtain righteousness on our own. The Law cannot save us because we cannot keep it. Salvation comes only by God’s forgiveness through his son’s sacrifice. If mankind could have reached perfection by any other means, Christ would not have had to die for us. Jesus himself told us that there was no other way for reconciliation to occur.

Jesus answered, “I am the way and the truth and the life. No one comes to the Father except through me” (John 14:6).

Peter reiterated this statement in the book of Acts.

“Salvation is found in no one else, for there is no other name under heaven given to men by which we must be saved” (Acts 4:12).

The Bible tells us that if we confess and believe, God will forgive our sins and adopt us into his family bestowing upon us all the rights and privileges of God’s children.

If we confess our sins, he is faithful and just and will forgive us our sins and purify us from all unrighteousness (1 John 1:9).

Yet to all who received him, to those who believed in his name, he gave the right to become children of God (John 1:12).

And because our salvation is secured through his grace, it is not up to us to earn it.

For it is by grace you have been saved, through faith—and this not from yourselves, it is the gift of God—not by works, so that no one can boast (Eph. 2:8-9).

So then, what does it mean to confess and believe? When we confess, we are admitting that our sin separates us from a holy God and we recognize that we can do nothing to atone for that sin. When we believe, we acknowledge that Jesus is the Son of God, sent to earth to die on our behalf, was resurrected, and now intercedes for us in heaven. We seek forgiveness and ask him to be our Savior. Each decision is a personal one, and only God can see whether the decision to believe is sincere.

That if you confess with your mouth, “Jesus is Lord,” and believe in your heart that God raised him from the dead, you will be saved (Rom. 10:9).

Confess + Believe = Salvation. Could it really be that simple? The Gospel of Luke describes the story of a man for whom it was that simple. At the time of Jesus’ death, two thieves were also crucified, one on either side of him.

One of the criminals who hung there hurled insults at him: “Aren’t you the Christ? Save yourself and us!”

But the other criminal rebuked him. “Don’t you fear God,” he said, “since you are under the same sentence? We are punished justly, for we are getting what our deeds deserve. But this man has done nothing wrong.”

Then he said, “Jesus, remember me when you come into your kingdom.”

Jesus answered him, “I tell you the truth, today you will be with me in paradise” (Luke 23:39-43).

The second thief recognized his need for forgiveness and humbly came before God to ask for mercy. The result of his request was the promise of paradise from Jesus himself. Confession and belief in the Savior gave the man salvation and restored his relationship with God.

There is an important side note in this recorded exchange. The thief did not experience baptism, nor did he have a long life of service to God. He had no record of behavior that would be considered exemplary or a list of good works to recommend him. These are all good things, but they are the *results* of salvation. They themselves are not the *means* by which we can be saved. When people imply that these acts or activities are necessary for salvation, they are in error, because Jesus himself clearly demonstrated that they are not.

He pointed out this fact to the religious leaders of his day, indicating that many of the rules the people were required to follow were not given by God at all, but were imposed by men. Apparently, not much has changed in 2000 years.

Some people look for God but get discouraged when they don't find him in organized religion. And no wonder. History is filled with church leaders who abused their power and mistreated the people they claimed to serve. Some lied, stole, cheated, avoided paying taxes, and even committed serious crimes. Some went to jail for their misdeeds.

When corruption is revealed among church leaders, it leaves the common folk bitter and resentful. Their opinion of “religion” is tainted. They come away disappointed, disillusioned, and sometimes disgusted. If one equates the organized church bureaucracy with God, then it's obvious why some people give up trying to find him. How can people believe in the goodness of God when there are so many offenses committed by the people who claim to represent him? The truth is that they don't represent

God. Organized religion is a man-made establishment to govern churches. As much as some people would like to think they speak for God, they don't. God is very capable of speaking for himself and has spoken to us through his Word. He doesn't call people to join a church in order to obtain salvation. He calls them to follow Christ. Period. It's not that churches are bad, because many are very faithful and fellowship with other believers is essential for our spiritual growth. But for people who are discouraged from looking for Christ based upon the faults of organized religion, they are missing the point. In the Gospels, Jesus called on people to follow *him*.

A modern day analogy would ask why foreign immigrants want to come to the United States. Is it because of all the stellar politicians that pack the halls of Congress? Our government has its fair share of corrupt leaders, so shouldn't that oppressive bureaucracy drive people away? Using the same logic, our sometimes corrupt government should discourage people from wanting to come here, but it doesn't because people know that individual politicians do not make America the land of the free. It is our ideals, and our values that represent freedom. God is not the sum of organized religion any more than America is the sum of its leaders.

It is not the bureaucracy that attracts people, it is liberty. The same is true for those looking for God. He is not found in *religion*. He is found only in his *Son*.

Jesus told us that the way of salvation was through the grace he offered to us and through his grace alone. It is not what we can do for God that matters, but what God has already done for us.

In his book *Hope for Hurting Hearts*, Pastor Greg Laurie summarizes the point succinctly.

Jesus came to pay a debt He did not owe because we owed a debt we could not pay.<sup>3</sup>

Jesus is as close as a whispered prayer. He doesn't expect us to travel a long distance to reach him. He only asks that we take one step toward him, and he will make up the difference. He is already at the door

of our heart and just waiting for an invitation from us to step across the threshold.

Here I Am! I stand at the door and knock. If anyone hears my voice and opens the door, I will come in and eat with him, and he with me (Rev. 3:20).

Pastor Greg Laurie invites us to open the door.

God is only a prayer away.

If you want Christ to come into your life right now to forgive you of your sin...if you want your guilt removed and have a fresh start in life...if you want to go to heaven when you die, you might pray the little prayer that follows. I did that years ago, and Christ came into my life.

Lord Jesus, I know that I am a sinner. But I thank You for dying on the cross for my sins, and rising again from the dead. I turn from that sin now, and ask You to come into my life as Savior and Lord, as God and Friend. I choose to follow You from this day forward, through all the days of my life. Thank You for calling me and accepting me. In Jesus' name I pray, Amen.

Yes, it's a very simple prayer. But if you meant it, Jesus Christ has just come into your life.<sup>4</sup>

What does it mean to accept Christ's offer to take away our sin? It means that we are adopted children of God, and we now have a freedom and a security that no one can take away. We know that when we belong to God our destiny is assured. The lyrics of the popular song, "In Christ Alone," describe the newfound confidence we have in Christ when we give our lives to him.



No guilt in life, no fear in death,  
this is the power of Christ in me.  
From life's first cry to final breath,  
Jesus commands my destiny.  
No power of hell, no scheme of man  
can ever pluck me from His hand  
'Til He returns or calls me home,  
here in the power of Christ I'll stand.

© Keith Getty/Stuart Townend, 2002, Thankyou Music<sup>5</sup>

## His Infinite Grace

The story of our lives has already been written, and we are *reading* the story daily not knowing what will happen in the next chapter. But God knows what we will encounter tomorrow and in the days and weeks to follow. He knows how the story will end, and when. He knew all about us long before we were ever born and knows when our time on earth is over.

God always supplies provision, but whether we recognize and remember his provision is a different matter. His track record of continued faithfulness is what gives us hope when life gets difficult.

Throughout the course of this book, we hope that you have been able to see yourself in parts of our story and have been reminded of God's intervention in your own life.

When you find yourself grateful for "coincidence," ask yourself if perhaps it is not coincidence at all. If the God of the universe does care about every aspect of our lives, then it follows that he intervenes in those lives.

Perhaps you have been able to see his hand in your own life but are still plagued with confusion, heartache, and despair. If you have questions, seek out the one who has all the answers. He doesn't require a fancy prayer or insist that we get ourselves cleaned up, organized or under control to approach him.

God may not tell you why circumstances in your life happened the way they did, but he will give you peace about them. You can find his message to you in the Bible. If you ask him to reveal his truth to you, he will.

You will seek me and find me when you seek me with all your heart (Jer. 29:13).

Those events that occur, the people who come along to help and the resources that just happen to show up at the right time are his provisions for us. He knows about our circumstances and arranges provision to show us that he cares about what we care about. He knows about the catastrophic events that will devastate us and the little things that will disappoint us. He knows what will happen to the economy and when the next big earthquake will hit Los Angeles. From the safety of soldiers in battle to the thirst of a tiny sparrow, he is in the middle of it all.

His intervention in our lives not only reminds us of his presence, but it points to the most important provision he has ever given to us. It was a message describing his great love for mankind; a message written in blood and nailed to a wooden cross in Judea, 2000 years ago. Jesus was that message.

For God so loved the world that he gave his one and only Son, that whoever believes in him shall not perish but have eternal life (John 3:16).



## If You'd Like to Learn More...

If you prayed the prayer to ask Christ into your life or if you have questions and would like to learn more about what it means to be a Christian, please visit "How to Know God" at [www.harvest.org/knowgod/](http://www.harvest.org/knowgod/)

God bless you.



# Notes

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## About the Authors

**Lynn Willers** holds a Bachelor of Science degree in microbiology with a minor in chemistry from California State University at Long Beach. She has almost 25 years of experience as a Senior Criminalist for a large law enforcement agency. Her work experience includes research into several forensic science topics. Results of her research have been presented at professional meetings and published in the *Journal of Forensic Sciences*, the *Journal of the Clandestine Laboratory Investigating Chemists* and other law enforcement publications.

**Lori Phillips** holds an Associate of Applied Science degree from Portland Community College. She has over 25 years of licensed clinical practice as a Registered Dental Hygienist with a General practice/Forensic Odontologist. Like her twin and co-author, Lori has received continuing education through the American Academy of Forensic Sciences among other organizations.

Both authors are patients who have been diagnosed with and treated for catamenial pneumothorax (CPT), a rare form of endometriosis which causes the lung to collapse during menses. Their collective science backgrounds, analytical skills and research experience have given them the tools necessary to become their own health care advocates, allowing them to take an active role in their treatment plans.

They are co-developers of [Catamenial-Pneumothorax.com](http://Catamenial-Pneumothorax.com), an on-line resource for information about CPT. Since 2003, the web site has enjoyed top search engine ranking with Google, Yahoo and MSN. Weekly, the authors correspond with CPT patients (and some doctors) from all over the world.

## How can we find hope that carries us through the difficulties in life?

At some point all of us face times of hardship, suffering, and despair that can turn our lives upside down and break our hearts wide open. During these trials we may feel alone, overwhelmed by circumstances, and afraid that God has abandoned us. In the fog of adversity, we hold our broken hearts in our hands and cry out to God, "Why?" "How could you let this happen?" "Where were you?"

Catastrophe can shake the stability of our world, leaving us to wonder about God's love for us, and raising even more questions.

Why am I suffering?  
Will this trial ever end?  
How will I get through this?  
Does God even see me?



In *Held by God*, the authors share their own struggle with these questions as the family travels an uncertain road through three serious medical challenges; catamenial pneumothorax, renal artery stenosis, and cancer. Written in a conversational style that weaves Biblical truths throughout the narrative, the book intertwines the authors' story with the accounts of Job, Paul, and King David, among others, to provide unique examples of God's unchanging character. Understanding God's faithfulness and recognizing his provision, allows us to find rest during times of turmoil and gives us a hope that endures.