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## The Pastor at the Bedside of the Backslider

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## The Pastor at the Bedside of the Backslider.

How difficult it is to perform our duty at the bedsides of such as have turned away from their Savior! It is often difficult to approach them, even if no personal matter between patient and pastor has caused the former to forsake God and His Word. Permit me to present three cases from my own pastoral experience together with my treatment of them.

Mr. J., who in early youth had been privileged to attend the Christian day-school in a sister congregation, where he had also been confirmed, married a Polish Catholic woman. Soon after marriage he was on the downward path. No longer did he attend public worship. His own home was soon disrupted, as his wife left him. He began to drink heavily, going down deeper and deeper into the mire of sin and iniquity. But how strange are the ways of the Lord! A daughter of this home who had been reared in the Catholic faith made the acquaintance of a young man of my parish. Being sincere in his Christianity and firm in his convictions, he insisted that, if they were to wed each other, she must be willing to be instructed in the Lutheran faith and accept it. This she did.

One day, a number of years after their marriage, she came and announced the serious illness of her father. He lay at one of our public city hospitals. She requested that I visit him. At the same time she told me that she feared I might not be welcome inasmuch as one of our city missionaries who had come to see him had been roughly shown the door. "But, pastor," she pleaded, "will you not try? It might mean the salvation of his poor soul." I promised to see him, and she left.

I took the case of Mr. J. to our Lord in prayer, asking Him to lead the way and open the door. In Ward 33 of the County Hospital he lay, all alone. "Will I be admitted? Will I have an opportunity to speak to him? Will he treat me roughly? Lord, have mercy on me—have mercy on him." With such and similar thoughts I approached him. "And you are Mr. J., are you not? Your daughter told me of your affliction. Yes, your daughter Rose.—And you are quite ill, are you not?" "Yes, indeed," and as he spoke, he uncovered his limb, saying: "All black, it is rotting away. I do not know what will become of it." "Yes; that does not look very good," said I; "but did your daughter not tell me that you at one time lived near 19th and Halsted Street?" "Yes, I did live there at one time, and I also attended school there." "Was it the Lutheran school, and was possibly Mr. Ruhland your teacher?" He smiled. "Yes, that was the school and the teacher, and Pastor Wagner was my pastor; he confirmed me. Did you know both of them?" I told him that I was acquainted with them and added that I, too, was a pastor. And

his eyes grew larger and larger when I said: "If you attended the school at 19th and Johnson Street and were confirmed by Pastor Wagner, then no doubt you still remember some of the little prayers you learned. Do you still remember '*Christi Blut und Gerechtigkeit*'?" He immediately said: "I know it, I know it. I'll never forget it." "Oh, let us pray together. Can you pray alone?" And he did. And I am sure he prayed as he had seldom prayed before. The ice was broken. At this bedside I had the most wonderful opportunity to lead the patient to Christ, the Friend of the sinner. With tears in his eyes he talked of his past sinful life and of his ingratitude toward his Savior, but he also expressed the hope that he would be saved. I had two more opportunities on two successive days to be with him. And he died safe in the arms of Jesus.

Let us make use of any and all legitimate means to gain entrance to the patient and win his confidence. True, not two patients are alike, and therefore the manner of approach will be different in every instant. Permit me to relate another incident.

Mr. K. and his family had been visited quite frequently at different occasions. His wife and children were active members of the church, but he himself never attended the services. Time and again I had invited him and admonished him because of his neglect of public worship and also because of his affiliation with a lodge. Though he had at all times seemingly accepted the words of admonition, even admitting that our practise in the lodge question was strictly in accord with Scripture, he never severed his connection with the anti-christian organization, nor did he ever attend public worship. Years rolled by until finally Mr. K. was suddenly stricken with paralysis. Yet he was conscious and could make himself understood, at least to the extent of saying yes and no. Soon after he had been stricken, the family notified me of what had happened, at the same time requesting me "to give him Holy Communion." As soon as I reached his bedside, I realized that he readily understood everything I said. It was then for me to hold up before him his sins, his utter disregard for Jesus, His Word, and His Church, to tell him that the Lord now had found him, and to warn him no longer to resist, but to repent. I then asked him a few questions; however, as he could not speak, but was only able faintly to say yes or no, I so formulated my question that only yes or no was required. I asked him: "Do you realize that you sinned against God by neglecting to hear His Word? that you gave grave offense to your beloved wife and children by despising God's Word? that you sinned in retaining membership with the lodge?" When he answered these questions one by one in the affirmative, I further asked: "Are you sorry that you sinned and gave such grave offense? Are you willing to leave the lodge? Are you ready to answer these questions in the presence of witnesses? Do you desire to

partake of Holy Communion?" Again he answered yes to all these questions. After presenting to him the Gospel in all richness and fulness, we prayed, coming before God as truly penitent sinners. I left his bedside. An hour later I returned with one of the deacons, telling him at the bedside as to what had happened. I asked him the same questions that I had put to him before and also received the same answers. After a brief preparation he partook of Holy Communion. The same evening he died.

But why demand a witness in addition to the members of the family? That it was my good fortune to have one of my members present at the bedside of the patient when he made his confession became evident at the next regular meeting of the voting members. It had been my intention to inform the congregation of this incident. But before I had an opportunity to do so, a member excitedly rose to inquire why the pastor had officiated at the burial of one who was known to be a lodge member and had never attended church and partaken of Holy Communion. It was no difficult matter to request the deacon to tell all that had happened. It was not necessary to add anything to what had been said, and all were happy that a soul had been rescued like a brand from the fire.—

You will bear with me if I relate another experience. The circumstances were quite similar. Mr. L. was stricken, indeed, at death's door, when I arrived at his bedside. In no manner did he indicate that he understood what was said. Nevertheless I thought it might be possible. So I spoke to him of sin and of grace and directed his attention to prayers which he had learned in his childhood days. I prayed "O Bleeding Head and Wounded," "For God so loved the world," and "The blood of Jesus Christ, His Son." I continued to pray, putting my words in his mouth, seeking forgiveness and mercy. He died without having regained consciousness. It was too late.— At the bedside of patients in a state of coma or unconsciousness let us not forget to make use of prayers, Bible-verses, and hymns with which they may be familiar. Let us not think that our efforts are in vain, but conscientiously perform our duty at all occasions. A most glorious experience may be awaiting you, similar to the one I wish to present in the following.

It was at 10 o'clock in the evening when a stranger rapped at my door. In the French section of our neighborhood lay a woman of thirty. Together with her husband, a Frenchman, she had located there. Formerly she had communed with a sister congregation on the North Side of the city, but gradually she had drifted away from God and her Church. Ten days prior to my visit at her bedside she had fallen on the icy sidewalk with seemingly little or no ill effect. Contrary to expectations, paralysis had suddenly set in. Speechless and rigid she lay on her bed. Her eyes were open, but were motion-

less. A sister who had hastened to her bedside insisted that she partake of Holy Communion inasmuch as she was still able to swallow. But what assurance could we have that she was conscious, that she was truly penitent, that she herself was desirous of Holy Communion? As usual, I presented the one thing needful. I prayed. But there was no response. I sat and pondered. Meanwhile the home was literally filled with friends, all Catholic. A wonderful opportunity indeed to present Christ Crucified. But my first duty was to do for the patient what I could. I tarried for an hour, hoping to get some response. When finally I asked whether the patient might be able to move any part of her body, possibly a hand or a finger, her arms were placed above the covers. And, lo and behold, when I asked her to lift a finger if she understood me, she lifted one finger. Will you lift your finger twice? She did. Did you hear me pray a little while ago? She answered in the affirmative by lifting the finger. When her sister now asked her whether she wished to partake of Holy Communion, she again answered in the manner indicated. In the presence of that strange assembly, under these most peculiar circumstances, the usual preparation was made. As the confession was spoken, she answered by raising a finger. And though her eyes, the open mouth and the lips were rigid, she was able to swallow a small portion of the wafer and a teaspoonful of wine. With a brief word to all, a blessing, and the Lord's Prayer I departed. One hour later she died.

Chicago, Ill.

F. C. STREUFERT.

## Theological Observer. — Kirchlich-Zeitgeschichtliches.

### I. Amerika.

Aus unserer norwegischen Schwestersynode. Das englische Organ dieser Synode meldet, daß P. J. E. Thoen den Beruf angenommen hat, seine ganze Zeit und Kraft der Redaktion der synodalen Zeitschriften *Lutheran Sentinel* (englisch) und „Luthers Tidende“ (norwegisch) zu widmen. Der Präsident der Synode, P. S. W. Tjernagel, teilt das Annahmeschreiben P. Thoen's im *Lutheran Sentinel* mit und fügt hinzu: "With rejoicing and gratefulness to God we hasten to acquaint all readers of our official organs with the above [dem Annahmeschreiben]. It means that all readers of our papers will get the full-time services and the benefits of a veteran commander's experiences gained through a long campaign against the powers of darkness. It means that a mind schooled in strife and suffering for truth's sake will speak to us every week [*Sentinel* und „Tidende“ erscheinen abwechselnd wöchentlich]. It means that a heart that knows no hope but the blessed hope in the crucified and resurrected Son of God and Mary, Jesus Christ, will bring into our homes, through the printed page, weekly admonitions to love, serve, and obey Him; for 'there is none other name under heaven given among men whereby we must be saved.' It means furthermore that our present editors, who for many years have served us