

*God's
Grace
Grace
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Grace*



No Need for Gatekeepers

by Dr. Brad Burke

How many times have we heard the acronym, "God's Riches At Christ's Expense," without stopping to ponder what this really means, and how it relates to our medical practices?

Canadian physicians are frequently labeled "gatekeepers" when it comes to distributing medical resources, deciding for instance, which patient deserves to see a specialist for a suspicious skin lesion,

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or which patient deserves an MRI for unrelenting back pain. When it comes to God's grace, however, have we unknowingly taken upon ourselves the role of a "gatekeeper," deciding who does and who doesn't have access to the Almighty's abundant warehouse of grace?

Imagine the following scenario: You are a world renowned liver transplant surgeon having just received word that a donor's liver is 300 miles away. Your transplant team jumps into an

awaiting helicopter to retrieve the liver and put it on ice, while the next patient on the transplant list who is a suitable match for the liver is contacted. He turns out to be a thirty-seven year old male, formerly an alcoholic and exotic dancer, now unemployed, with alcoholic liver cirrhosis along with hepatitis B from his homosexual male partners. Despite several attempts to reach him, he doesn't respond to his pager.

The next patient on the list is promptly paged, a fifty-three year old dentist, father of two teenage girls, who contacted hepatitis C from a blood transfusion after a car accident on a missionary trip in Mexico. He responds immediately and is told to report to the ER.

You drive to the ER, amble through the doors, and find the dentist, his wife, and two teenage girls eagerly waiting for you—just a few feet away from the male dancer standing alone with his hands in his pockets. Both patients are jaundiced. Both look like they could die tomorrow.

Who will get the liver? Perhaps a more soul-searching question becomes to whom do you *want* to give the liver?

As a surgery resident, I worked on the liver transplant team at Cedars Sinai Medical Center in Los Angeles under the world renowned liver transplant surgeon, Dr. Ronald W. Busuttil. Recently, Dr. Busuttil was criticized in the media for unwittingly performing liver transplants in Tinsel Town on four Japanese gang figures, including one of Japan's most notorious gang bosses.

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These four transplants were completed during a time period when over a hundred American patients in the area died while on the liver transplant list.

Dr. Busuttill, who as far as I know is not a born-again Christian, released this statement to the press: “As a surgeon, it is not my role to pass moral judgment on the patients who seek my care. If one of my patients, domestic or international, were in a situation that could be life-threatening, of course I would do everything in my power to assure that they would receive proper care.”

Christ ought to have a say as to who “deserves” this grace.

When it comes to God's grace, we should carry with us a similar attitude: “It is not my role to pass moral judgment on the patients who seek my care.” When one of our patients who is a known alcoholic calls our office to request an urgent appointment for his or her toothache or back-ache, do we tell our secretaries, “Tell him I'm all booked up for a month,” when the very same day a reputable businessman calls up with the same complaint and is seen within 24 hours? Do we book consults or surgery dates sooner for the pastor than for the prostitute? Or decide, even subconsciously, how quickly to return our patient's phone calls based on their HIV or syphilis status?

If God's grace really does come at Christ's expense, it seems Christ ought to have a say in who “deserves” this grace. When Christ the “friend of sinners” walked on the earth, he rocked the boat by displaying love and compassion for the outcasts of his society, particularly beggars, lepers, prostitutes, adulterers, and unscrupulous tax collectors. Christ commanded Israel to love its enemies, a command not even found in the Old Testament, explaining that God “causes his sun to rise on the evil and the good, and sends rain on the righteous and the unrighteous.” (Matt. 5:45 NIV).

This divine, nourishing rain—this universal goodness towards mankind irrespective of behavior—is known as *common grace*, different of course from God's *saving grace* that He bestows only on some. “The Lord is good to all; he has compassion on all he has made,” writes the Psalmist (Ps. 145:9 NIV)

If there was ever a time in history that God has chosen to display his common grace on mankind, it is now. Never before in the history of the world have we enjoyed such lavish luxuries and medical discoveries designed to prevent pain, decrease disability, and prolong life. Liver, heart, and lung transplants, knee and hip replacements, spinal cord stimulators and implantable morphine pumps, prescription drugs that move patients out of hospital wards and back home with their families—even the topical freezing the dentist uses on the inside of our

cheek so that we barely feel the needle going in—all of this is evidence of God's goodness towards His undeserving creation.

This vast ocean of God's grace in the medical field was virtually unknown 3000, 1000, or even a 100 years ago. With such an outpouring of God's grace in the past 40 or 50 years, why is there the tendency for many Christian physicians to act as self-appointed “gatekeepers” in an attempt to ration this grace, as if it were the last few gallons of life-sustaining water available to a community of orphans? The beauty of Niagara Falls on the Canadian side comes from 600,000 gallons of water falling every second over a 167-foot drop-off. So it is with God's grace. The deeper and larger the void in someone's soul, the greater the flow and height of God's grace, and the greater the glory our Heavenly Father receives.

God chooses every second of every day to use doctors, pharmacists, nurses, and therapists as instruments of his goodness to rapidly dispense, at absolutely no cost to the recipient, his grace in tidy, neatly wrapped parcels bearing the hand-written tag, “*I love you. From God.*” Every injection, operation, medication, therapy, and piece of life-saving or life-enhancing medical advice we offer has a Divine origin, planned out since the beginning of time.

Lest we get too proud and get caught up in the fact that we have been personally chosen to be Divine Instruments of grace in the Master's hands, we need to consider that it is only by the grace of God that He has blessed us with

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the ability to even function as His personal utensils.

Dr. Margaret Brand, the famous missionary and medical pioneer who became a world expert on leprosy's effects on the eye, performed in India more cataract surgeries in one day than many American ophthalmologists perform in a month. She confessed, "It is the grace of God, which is available to everyone, that has enabled me to accomplish what I have done, and His grace that has overruled many of my foolish mistakes." Maybe in your office you see things a little differently. Perhaps the deluge of complaining patients who march through your doors every day, and the overwhelming number of tragedies on the evening news, has driven you to the conclusion that we are in a severe drought; that we are not really instruments of anything, but rather customer representatives in an overrun complaints department in a land that remains parched for water-crying out for even a few drops of the Almighty's precious grace.

**"The only reason the sorrow
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John MacArthur realigns our perspective when he reminds us, *"The only reason the sorrow and tragedy stand out is because there is also much joy and gladness. The only reason we recognize the ugliness is that God has given us so much beauty. The only reason we feel the disappointment is that there is so much that satisfies."* The reason so many more people die of cancer today compared to 100 years ago is because life expectancy, at the turn of the twentieth century, was only forty-seven. Today life expectancy has swelled to over seventy-seven. We are seeing more cases of cancer simply because our patients are living longer, fuller lives. In addition, it is because of God's common grace that the full manifestation of human sinfulness is restrained, otherwise the number of wars, murders, rapes, and other brutal, senseless acts of violence would skyrocket.

I'm the first to admit that showing compassion and love in my medical practice to my obnoxious and/or immoral patients is not always easy. Often it stretches my patience thinner than my latex gloves. Some doctors, like Dr. Busuttill, simply try to ignore a patient's behaviour and choice of lifestyle to focus only on the medical issues at hand.

But perhaps there is a better way; a more Christ-like way.

As Christ modeled for us, perhaps we should actively seek out those in our medical practices who would benefit the most by God's grace. Just like we would desire to give a liver transplant to the sickest patient, we

should also desire to be instruments of God's grace to the "sickest" individuals—those who by their immoral lifestyles need it the most, even if from our perspective they deserve it the least. Yes, there are times when certain boundaries must be enforced for disruptive patients. But by being active, instead of just passive, instruments of grace, by waking up each morning yearning for ways to let God's grace flow through our hands, God can use us much more effectively to extend His compassion, forgiveness, kindness, patience, and mercy to a hurting world that so desperately needs him.

The apostle Paul explains to unbelievers that "God's kindness leads you toward repentance." (Rom. 2:4 NIV) How awesome would that be, if by showing an extra special degree of compassion and kindness to those who shun God, that it may actually turn them to God in repentance?

The truth is, we are all born with a dark chasm of sin in our hearts far deeper than the waters drop over Niagara Falls. Grace is what God gives us that we don't deserve. Without sin there would be no grace, and of course all of us have sinned and deeply pained God's heart and we all desperately need God's blessing. Unlike the Canadian healthcare system, we never have to worry about bankrupting God's healthcare system of grace.

When we truly understand the fact that none of us deserve God's grace—that everything we are, everything we will ever be, everything we hope to be, is made possible only by the unfathomable riches of the grace of God—only then can we truly begin to act as instruments instead of gatekeepers of God's grace. f

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