Sacramental rite provides comfort to the sick

By Lee Strong
Staff writer

The days have long passed in which it was a certain omen of death for a priest to arrive at bedside for the sacrament of the sick.

Also gone is the sacrament's former name: *extreme unction.*

The new sacramental rite, anointing of the sick, is intended to bring the church's strength to an ailing individual, not to serve as a final preparation for death, noted Father Thomas Mull, priest consultant for the Diocese of Rochester's liturgy office.

"It's supposed to be a sacrament of the living, not of death," Father Mull observed. Through the sacrament, "We try to strengthen the person's faith, and remind them of the faith of the Christian community," he added. "It is a sacrament we offer people who are ill, not just when they are at the point of death."

The new rite officially replaced *extreme unction* in the United States in 1974 with the promulgation of the English text *Pastoral Care of the Sick: Rites of Anointing and Viaticum.*

The document was based on a Latin decree issued in 1966 by the Sacred Congregation of Rites. The Latin decree stemmed from the Second Vatican Council's call for the rite to correspond more closely with the form practiced in the early church.

Mark's Gospel contains the first New Testament reference to anointing the sick with oil. In verse 6:13, the disciples were said to have "anointed many sick people with oil and cured them."

Yet the text that forms the basis for the sacrament is found in the Epistle of James:

"If one of you is ill, he should send for the presbyters of the church, and they must anoint him with oil in the name of the Lord and pray over him. The prayer of faith will save the sick man and the Lord will raise him up again; and if he has committed any sins, he will be forgiven" (James 5:14-15).

According to Joseph Martos' book *Doors to the Sacred— A Historical Introduction to Sacraments in the Catholic Church,* such anointings with sacred oil were not considered sacraments in the early centuries of Christianity. The rite was administered to Christians who were ill, though not necessarily to the point of death, and could be performed by lay people.

The rite's initial forms focused on physical healing. This was especially true in the early days of the church, Martos wrote, when memories were still fresh of healings by Christ and such church leaders as Ss. Peter and Paul.

These healings, Martos wrote, seem "to have been (signs) that the kingdom of God had begun in the church, and Paul mentions healing and miracles as spiritual gifts which God gave individuals for the benefit of the community."

Since society at the time perceived a link between physical and spiritual illnesses, physical healing was seen as a sign of God's power over evil and sin.

Church documents show that the practice of anointing the sick was widespread throughout the church, but until the 9th century, the form of the rite varied from place to place. In addition, the rite still was not considered a sacrament.

This variety of rites continued until the Charlemagne's reign in the 9th century, when attempts to standardize church practices led to a sacramentary, a codification of sacramental practice throughout his empire.

As codified in the Frankish Empire, the rite required a priest to administer it because it was usually celebrated in cases of serious illness, which, Martos wrote, were often fatal in the Middle Ages. Thus the rite was performed in conjunction with the sacraments of Penance and Viaticum — the Eucharist given to a person near death — both of which required a priest.

Rome soon adopted this newly developed sacramentary, and it spread throughout Western Europe.

The practice of administering penance with anointing of the sick gave the rite "a rather penitential character," Martos observed in his book, although the rite continued to include prayers for physical recovery as well as for the forgiveness of sin.

But because "anointing was rarely given to people who were expected to recover from their illnesses, the prayers for physical healing were gradually dropped from the rite and were replaced by ones that spoke only of remission of sins and the hope of salvation," Martos continued.

By the 13th century, the rite was administered almost exclusively to those near death. St. Thomas Aquinas and other theologians of the period saw the sacrament as the final preparation for death, Martos noted. And the sacrament's emphasis came to be on moral sickness or sin, rather than on physical disorders.

The leaders of the Protestant Reformation in the 15th century contested this view of anointing as a preparation for death, however. Martin Luther and John Calvin challenged use of the rite for the dying instead of the sick. They asserted that the

Philip Archer/Photo intern
An unidentified artist depicted anointing of the sick as part of a stained-glass window dedicated to St. Camillus De Lellis in the chapel of the Sisters of Mercy Motherhouse in Rochester. St. Camillus founded the Camillians, an order dedicated to caring for the sick.

practice of the time had been based on a misreading of James' epistle.

In 1551, the Council of Trent issued a document reiterating that the sacrament should be given to those in danger of death. But the council's statement also noted that "this anointing is to be used for the sick, particularly for those who are dangerously ill as to seem at the point of departing this life."

Despite the inclusion of that statement in the council's decree, Martos wrote, the sacrament remained linked to death. "The anointing of the sick, then, which had begun in the patristic era as a door to the sacred meaning of sickness, became in the modern church a door to the sacred meaning of death," he wrote.

The changes wrought by Vatican II reflected the way in which thinking about the sacrament had evolved during the four centuries since the Council of Trent. By the 1950s, liturgical scholars were calling for a return to the early church's understanding of the rite as one intended for the sick, not just the dying.

As practiced today, anointing of the sick is seen in the context of overall pastoral care for those with various illnesses. Such care can range from prayer with the ill person, to anointing, to anointing in conjunction with penance and communion, to preparation for death.

The sacrament is intended for those who are dying or face serious surgery; the elderly; patients beginning treatment for such conditions as heart disease and cancer; and those with such chronic conditions as arthritis. It can be offered individually, or even communally at church services.

Father P. Frederick Helfrich, chaplain at Rochester's St. Mary's Hospital, said he anoints about four or five individuals a day. Sometimes patients or their families ask for the sacrament; in other cases he offers to celebrate the rite when first visiting a new patient.

Reactions to the sacrament vary, Father Helfrich said, but on the whole people seem to be aware that it is no longer intended for just the dying.

Although he does not anticipate miraculous healings as a result of the sacrament, Father Helfrich observed, "Some people do seem to revive. Whether it has to do with the anointing, the medical care or their constitution, it's hard to say."

And even when death occurs, Father Mull added, through the sacrament, "There is a healing that takes place, and we enter into a new life."

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NEXT WEEK: Sacrament of reconciliation.

Alzheimer's

didn't impress her. She noted that when she toured area nursing homes, many of the clients seemed "distant."

Dodge admitted that caring for her mother at home and keeping her in Home Connection can be costly. The $75-a-day fee for the Home Connection costs more than Aguglia's Social Security checks can cover so the Dodges make up the difference.

Fortunately, four days out of each month Aguglia spends at Home Connection are paid for by the federal government through a special program designed to aid families of patients suffering Alzheimer's, Dodge remarked.

The burden of caring for her mother sometimes gets to the light-hearted Dodge, who admits that she has had her moments of doubt and resentment.

"To receive an invitation, only to know you can't accept it ... To have no way of leaving her," Dodge said, adding, "I'm not going to deny that I've felt very sorry for myself."

Nonetheless, she reserved most of her irritation for those who refuse to understand her mother's disease, or question a daughter's commitment to the woman who raised her.

"People have said, 'How much longer are you going to put up with this? When are you going to put her in a nursing home?'" To which Dodge responds: "It's my *mother!* She's not a loaf of bread. She's not insignificant."

Despite her determination to see her mother through the length of the disease, which can last anywhere from three to 20 years, Dodge urged anyone in a similar situation to seek out all the help they can get. Swallow any pride that might stand in the way of obtaining care for an Alzheimer's patient, Dodge advised.

"To deny the problem only causes delaying of getting support," she said.

Since her mother entered the Home Connection program, Dodge claimed her condition has not "gotten any worse." Yet, she still longs for the woman who used to make pasta for all the kids in Dodge's childhood neighborhood and who was quick with the right word to pick you up when you were down.

Aguglia's vocabulary has been reduced to three phrases — "no," "come on," and "wait" — but she still responds to being called "mom," a source of comfort to Dodge.

"It's just so nice to still say 'Mommy,'" Dodge said. "I want to keep her as long as I can."

EDITORS' NOTE: For information about Alzheimer's Association/Rochester Chapter, call 716/442-3820. The federal government did program the Dodges use is called ACCESS, and information about it can be obtained at 1-800-836-7600.

Correction

Last week's story about Corpus Christi Parish's plans to open a donated-clothing store listed an incorrect address for the center. Matthew's Closet will be located at 880 E. Main St., Rochester. We regret the error.