

Confession and communion of the sick

The priest as part of his pastoral duty should carefully see that **none of his sick** parishioners[1] departs to the afterlife without communion of the Holy Mysteries, as the most important salvatory parting words[2] (refer to pp. 858-861).

First, here is the need of the priest, who is **ever ready** to hasten to the call of those sick or his relatives when the sick call him to confess and receive communion[3]. It happens that they present to the priest that the condition of the sick is extremely dangerous and they demand that the priest immediately go for the parting word of the sick, but meanwhile the sick is not at all in danger and could wait for the priest not only for an hour but perhaps another day or two. In these cases extreme discretion and restraint is necessary for the priest. It would not agree with the spirit of pastoral meekness and love if he openly declared disappointment and impatience, having seen that they hastily called him to the not so dangerously ill patient. The expression of this disappointment is especially not pertinent in that the error and vain fears of parishioners to hastily invite the priest to the sick will almost always happen involuntarily and has no foundation in their wrong source. Meanwhile numerous applications of this disappointment may have the consequence that conscientious people will hesitate to bother the priest when this will be demanded by insistent need, and others through this will be deprived of timely help of grace in the last minutes of his life. It is already late to appear with this help, when the person in extreme exhaustion will become unconscious. Everywhere, where the dangerous situation of the soul entrusted to his care, even if only assumed, calls the pastor, he needs to hasten to do his duty[4]. It is better to undertake unneeded labor than to be mentally anxious, when the favorable time for the salvation of the soul from his oral flock has passed, and to subject oneself to censures and responsibility[5]. If the priest is called to the patient at night, it is impossible to postpone the visiting of the sick until the morning. If a similar invitation is made in bad stormy weather, it is impossible to plead inconvenience of the way, but it is necessary, neglecting one's own tranquility, to hurry there where they wait together with him, with the saving grace of God for the soul of the one preparing to pass to the next world. The priest not only always without delay should be on sick call or its relative, but also is obligated **to inspire parishioners that** they, in case of dangerous illness of their colleague, **do not hesitate** to inform him about this, that he in due time could fulfill for him his pastoral duty and that the patient would not be deprived of the sacramental parting word because of delay in notifying the priest about his dangerous condition[6]. In this case neither the clergy nor parishioners **should be impeded by the limits of parishes** (see p. 858).

It is difficult for the pastor to visit the sick **during epidemics** or occurrences **of infectious illness**. Fear is natural from his side in this case, because of contact with the patients not to endanger him and transfer the infection to relatives in his home. The instinct of self-preservation, under the influence of this fear, induces him to evade visiting such houses, into which dangerous infectious illness has intruded. But the voice of an instinct for self-preservation should cease before the requirements of duty and before the awakening Christian love, the pastor of the Church in his activity should be so animated in relation to his flock. Certainly, it is not necessary to disregard the danger, and, so to say, to intrude against it. While visiting infectious patients it is possible and necessary to accept medical advice and to use all means that dictate prudence whenever possible to protect oneself from an infection[7]. But, having accepted safety measures, the pastor should vigorously also hasten to the infectious patient when he invites him to give the patient religious consolation in the sacred mysteries of the Church[8]. The hope of God and His omnipotent help should encourage and support him in similar cases by protecting us in all our ways. To him more than to any one, it should be known that the Lord protects his faithful servers in difficult times self-denyingly fulfilling the debt of Christian love. But if he will pleasingly allow His mercies perhaps the good shepherd to swiftly bring the sacraments in service to the infectious brother, it is necessary to humbly accept the test of God. During epidemics it will rather often happen that those who are exposed to it, not so much those who serve other patients, as those who avoid everyone and flee from any dialogue with the people able to communicate an infection to him. It is never necessary to drop from view that the Lord governs our life and death. Here, when the pastor confuses the idea and shyness seizes his soul, let him remember for the uplifting of his spirit, that in the person of every patient the Lord Himself waits for His server, as he said in the Gospel (Mt. 25:36). One these memories we place is capable to give a lot of calmness and resoluteness to the pastor, with fluctuating doubts and fear, in view of the call to such a house where the infection festers (for more details, see The Priest's Service Book, pp. 239-243).

If, **through the negligence of the priest**[9], the sick has died without having received the necessary mysteries, then the priest is released from his position and is sentenced to the churchmen for repentance and correction[10] (Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory], 183).

In many families at the appearance of the priest to bed of the sick, in particular with Holy Mysteries of the Body and Blood of Christ, they look on this as a close premonition of death and consequently whenever possible try to postpone to the last minutes the call to the priest with the invitation for him to visit

the sick, to confess and give him communion. It is clear that in this case this represents for the sick the danger to die without the parting words of the Holy Mysteries. But, and besides this, in the case of the **late invitations of the priest** to the sick, the status of the latter is that he may not receive the Holy Mysteries with such feeling as he would receive them, if it would be found in the great arsenal of powers and protected more in the freshness of the spirit. With all his power, the priest should spread his pastoral zealously of the noted prejudice[11]. In the educated classes, others **evade the invitation of the priest** to them during illness and the reception of the mysterious grace from him, owing to unbelief, so widespread in our generation, together with the materialistic antireligious instruction infecting the weak, unperceptive heads. The lowest classes, owing to an inclination for sectarianism, drive them to the cancellation of their living connections with the Church. It would not agree with this carefulness that is laid upon the pastor of the Church by the relation to all his flock, if he has abandoned those sick to fend for themselves and has not thought of their salvation in the critical minutes of their life, which may be their last minutes. But at the same time prudence does not permit the pastor to strongly tear into another's house, where he is not asked to come with the offered consolation of grace to those people who do not want to receive it[12]. As soon as the priest finds out or they inform him that this or that member living among his flock, and is alienated from the Church, during illness the spark of religious feelings awakened and he does not avoid that graceful help which the Church offers, the priest should joyfully accept the similar lead and immediately hasten to that house where the sick lies[13], perishing spiritually in alienation from the Church (for details see The Priest's Service Book, pp. 243-247).

[1] If they invite the priest to **give communion to an unknown** sick person, then he should be convinced beforehand that the sick belongs to the Orthodox Church. He should not give the certificate of confession and communion differently, as the written document is a kind of confession for them in person, so that there remains no doubt as to the identity of this person with entries registered in his passport. Without the same precaution, it is possible to confess one, but to grant the certificate of confession completely to another and, maybe, to one who has already died. In the practice of parish priests such examples have occurred (see Tobol'skiia Eparkhial'niia Viestnik [Tobolsk Diocesan Messenger] 1886, 4; Prakticheskoe Rukovodstvo dlia Sviashchenno Sluzhitelei [Practical Manual for Church Servers], 262 p.).

If the priest, by mistake of the hospital supervision of the sick, was not warned beforehand that the person for whom he has been called to administer the holy mysteries, because of deafness and dumbness, belongs to the Lutheran religion, has considered this person Orthodox and worthy of the Holy Mysteries, then he should be recognized as guilty, as Orthodox priests should not allow the confession and communion of persons of other confessions, even though it was allowed during their illness (see pp. 959 and 965).

In this case the priest should not rely on the words of hospital supervision and he would need to ask for the documents of the sick. As with the very sick, then he, according to the opinion of Metr. Philaret, after recovery should be recognized as Orthodox without the rite of the Reception into Orthodoxy (Tserkovnyi Viestnik [Church Messenger] 1892, 31; refer to note 2 on p. 924).

[2] It would be good for the **old and ailing** to come to Holy Communion during all four Lents that "the hour of death will not suddenly find them". For this purpose, owing to their infirmity, it would follow to give them communion in their homes (Fr. Popov, part 2, p. 72; refer to p. 1045).

The simple people believe that the action of grace in repentance and communion are not lost **for the duration of six weeks**, and therefore think that it is not necessary to come to the named mysteries more often, even though that person became dangerously ill (see Rukovodstvo dlia Sel'skikh Pastyrei [Guide for Village Pastors] 1888, 12). The priest should persistently inspire such of the flock that a person, not only within forty days but also within one day may sin a lot: "For who shall be pure from uncleanness? No one, even if his life is but one day on earth? says the Holy Scripture (Job 14:4, 5).

[3] According to article 97 of the Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory], all the **needs of parishioners are done** by any of the clergy. But the confession and communion of the sick are usually done by one priest (Tserkovnyi Viestnik [Church Messenger] 1894, 49).

[4] **In order to prevent deaths without the reception of the Holy Mysteries**, the Vologda diocesan authorities ordered the clergy of the diocese that priests of parishes, spread over large areas, going into the further settlements of his parish, even though by their own needs, certainly take with them an epitachelion, the reserved Holy Gifts and a baptismal kit with the baptismal accessories, that, in case of their conversion in the named settlements with requests for difficult communion of the sick and the baptism of the weak newly-born, to have the immediate possibility to satisfy the needs of applicants and that not only to fulfill his pastoral duty, but also to protect himself from the possibility of heavy accusations with responses under article 183 of the Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory] (Vologodskiiia Eparkhial'niia Vedomosti [Vologda Diocesan News] 1896, 20).

[5] Obviously the custom not to commune **sick foreigners** but only to confess them does not agree with the requirements and rules of the Orthodox Church (for more details, see Rukovodstvo dlia Sel'skikh Pastyrei [Guide for Village Pastors] 1889, 14).

[6] It is impossible to send someone to the priest with a petition for **the parting word of the sick with a loss of speech** so that when that someone came again appeared before the priest he became able to speak. The priest should immediately go to the sick, because it may happen that the sick will begin to talk, not for a few hours but as many as may be necessary, that for the priest to go and search for him (see the resolutions of Metr. Philaret in the Dushepoleznoe Chtenie [Edifying Reading], 1887, vol. 2, p. 127).

[7] **While visiting infectious patients**, it is necessary to follow these safety measures:

1) If it is possible to go to such a patient on foot, then it is not necessary to hurry up in order not to be too tired and the main thing, not to cause oneself to perspire as a tired excited organism (with open skin pores) becomes more susceptible to the infectious poison.

2) Sitting or standing by the bed of the sick, it is necessary to be careful that the breath of the sick does not go directly on the visitor. Thus it is not necessary to touch the linen, pillow and blanket and furthermore the body of the sick, or to sit by the same headboards, especially by the upholstered furniture standing close to the sick. It is safer to sit on wooden furniture because the infectious miasmas are much easier absorbed in upholstered furniture.

3) It does not follow, being found by the sick, to swallow one's saliva (it is necessary to spit it out), but equally to drink and eat anything, as the mucous membrane in the oral cavity is very susceptible to the infectious poison which together with mucous and food can easily pass into the blood and infect it. To prevent this, it is recommended before leaving the patient, but also equally after coming from him, to rinse the mouth with ordinary vinegar and to fumigate his clothing with it (by pouring it on hot bricks). Some still advise, in similar cases, to have juniper berries on one and to chew but only without swallowing them.

4) After visiting the sick, it is necessary to be, not less than a quarter of an hour, in the open air, to change linens and clothing, to wash and not to eat food after this.

5) Finally, generally during an epidemic, it is necessary to lead a moderate life and correctly, although it also does not follow to withdraw from one's usual way of life. In particular it is necessary to avoid: sleepless nights, immoderation in the use of alcohol, and equally anger, quick temper flare-ups and, in general, irritability. It is not necessary to resort, finally, to flee too often to so-called safety medical means as they can weaken the power of valid drugs. (Past. Theological Pel'sha [Pastoral Theology of Pelesh; see Prakticheskoe Rukovodstvo dlia Sviashchenno Sluzhitelei [Practical Manual for Church Servers], pp. 264-265.

[8] The priest is guilty of malfeasance because of his cowardly **fear of an infection**, that he cannot be left without punishment, for he would lead to that situation that the sick died without the parting words and having died he would remain without burial (see the resolutions of Metr. Philaret in the Dushepoleznoe Chtenie [Edifying Reading], 1887, vol. 2, p. 367).

[9] Parishioners **who have not notified the priest** about the sick, who were absent from the communion of the Holy Mysteries for more or less a long time, depending on the circumstances also of their moral condition (Kn. o dolzhn. presb. prikhod. [Book on the Duties of the Parish Presbyter], 116; refer to Tserkovnyi Viestnik [Church Messenger] 1893, 14).

[10] Church canons do not specify such cases when the layman who is found in mortal danger and wishes to receive the final words of the mysteries would be refused **by the priest**, excluding unconscious situations or the physical impossibility to receive the Holy Mysteries (Tserkovnyi Viestnik [Church Messenger] 1895, 3).

For the impossibility of the sick to partake owing to properties of his illness (comatose, madness, demoniac, suffering uninterrupted vomiting, damage of the throat interfering with swallowing and so forth), of course, there cannot be any responsibility (Tserkovnyi Viestnik [Church Messenger] 1893, 17).

The priest when it isn't his turn, on pain of responsibility according to article 183 of the Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory], should not refuse the parting word of the sick during fulfillment of services and needs for the priest whose turn it is (Tserkovnyi Viestnik [Church Messenger] 1897, 38).

For the allowance of death without the last word is to subject that priest to responsibility for which he was charged by another priest for the period of absence from his parish, even though the indicated absence of the local priest was also unlawful, i.e. without the observance of the requirement § 31 of the Instruksiia blagochinnim [Instructions for Deans], allowing the priest to leave no further than 25 versts [16.5 miles] from the place of service, without asking the permission of his dean. The self-willed absent priest, but having charged his parish to another priest (certainly, with the consent of latter) is subject to responsibility for this absence from the above indicated distances (Tserkovnyi Viestnik [Church Messenger] 1893, 17).

The priest, in the parish of which is found the patient, belonging to another parish, has no right, on the basis of § 97 of the Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory], to refuse giving communion to the sick because the latter is from another parish. And if the sick died without the parting word and the raised issue, then the mentioned priest would be subject to responsibility according to § 183 of the Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory] (See the Saratovskii Eparkhial'niia Vedomosti [Saratov Diocesan News] 1897,

19). On the other hand, in the default of this priest in giving the indicated parting word of the sick and referring of the sick with the request for the parting word to his priest and this latter has no right to refuse this parting word. Generally it is necessary to have in view, that each priest, who refused the parting word of the sick (see article 97 of the Ust. Dukh. Kons. [Ustav of the Spiritual Consistory]), in the case of the death of the latter without the parting word, is subject to responsibility according to article 183 of the Ustav Dukhovnikh Konsistorii [Ustav of the Spiritual Consistory]

[11] It happens that physicians, in particular those who are non-believers who are now many, adversely look at the invitation of the priest to the bedside of patients, and, from their side, stand around before them, that the appearance of the priest to the sick, can unnerve and upset him and, having poorly worked on the condition of his spirit, can worsen his condition and hinder his treatment. A consequence of all this is that they will not invite the priest to the sick until he is found in extreme exhaustion and is about to pass out. Needless to say, the **fear of the priest as a harbinger of death** is so very unreasonable. The priest, appearing at the bed of the sick with the Holy Gifts, carries with itself not a message about the approaching death, but the saving Divine grace, healing our infirmities and cleansing our sins, serving as a cause of our illnesses. The servant of the faith and the representative of God carries to the sick bed also the hope and trust in God and His omnipotent help, which in the matter of the maintenance of our life has much more value than the art of physicians and the medical assistance that they have. The holy religious beginning, standing before which the priest serves, by his appearance should bring into the soul of the sick not confusion and disorder but peace, encouragement and consolation, if only the spark of faith and religious feelings were not extinguished in the sick. And the physician, whatever is his attitude, should see in the priest not an enemy but an ally and assistant for him. During a correct order of things, it is not necessary to be afraid of the appearance of the priest at the bed the sick but to wish him there, and those who postpone his invitation for the patient as long as possible, do no service, but harm to the patient. Besides the moral solace, they deprive him of that salutary power that is imparted to the patient in the Holy Mysteries and how time and again not only gave relief to the ill, in even having him raised up from the bed of illness, on which the physicians looked with despair (The Priest's Service Book, p. 245).

[12] It is necessary to try **to raise up in the sick the desire of the reception of the grace of God**, offered by the Church. It is difficult and uncomfortable for the priest to enter into dialogue with people clearly falling away from the Church. He can work well on them in this case through their neighbors, relatives, and acquaintances that have not lost the good heritage of the faith. These latter, during a private turning to the patient, may raise in him through their conversations and presentations the desire for consolation (The Priest's Service Book, p. 247).

[13] Having been strengthened by his word, a good mood was engendered in such a patient, the priest may impart to him the saving mysterious grace, when he sees in him a **sincere readiness for the acceptance of this grace**. Or, if he sees him little prepared for this, the pastor may offer him, from his side, another time to come to him that would confirm in him the finding of good instructions and being more prepared to grant the Holy Mysteries of God (The Priest's Service Book, p. 247).