

**WHAT MUST I DO TO INHERIT ETERNAL LIFE? (LK 10:25): LIFE AS A MEETING-POINT BETWEEN MEDICINE AND PIETY: PASTORAL CONSIDERATIONS**

**Stanley EKWUGHA <sup>\*1</sup>**

**Abstract**

*The aim of this paper is to establish the organic link between medicine and piety in saving life. The desire to live (even forever) is innate in every organism. A random sampling reveals that the definition of life is elusive, yet it is desired by all. Medical interventions aim at overcoming the pang of death. The inability of medicine to conquer death gives way to the consolation theology of eternal life. Hence, medicine and spirituality aim at eternal life. The hospital is therefore not only a place for the health workers, the pastoral worker also has an important role to play since the patient as a person is a composite of body and soul. A historical analysis reveals that the dichotomy between medicine and piety was not there at the beginning. It was an accident of the renaissance. Different pages of the bible contain the interrelation between the physical and theological dimensions of life. The pastoral implication, among others therefore, is that both medicine and pastoral struggle to shed light on the question of what to do to live forever from different though not mutually exclusive angles. The patient therefore should not be seen a battlefield for the duo.*

**Keywords:** A-Mortality, Death, Life, Medicine, Piety, Samaritan

**1. Introduction**

The desire to live is innate in every organism. Every organism tries to escape from danger. Flight or fight is the double attitude here; either to run or to attack the potential destructive force. On a normal parlance no one wants to die; hence the concept of eternal life. From the cyclic imagination of the universe, through the doctrine of metempsychosis and belief in reincarnation to breakthroughs in medical research, one notices an inkling of a compensation or better consolation for a wish not realisable at the physical realm. This assertion therefore suggests that eternal life or whatever it might be is an innate desire as old as man. The first law given by God to mankind in the Bible was promulgated with the threat of death as a punishment for its violation (cf. Gen 2:17). Life as a theme runs through the pages of the Bible, beginning with the tree of life in Genesis to the same tree in Revelation producing fruits on a monthly basis with the leaves for the healing of the nations (Rev 22:2). When the teacher of the Law in Lk 10:25-37 asks Jesus the

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<sup>1\*</sup>Vinzenz Pallotti University, Vallendar, Email: ekwughastanchubby@yahoo.com, Tel: +4915218211784

question on what to do to inherit eternal life, he is not asking a revolutionary question, rather stands in the mental current of his milieu as a culture that battles with the issue of life and death as a mystery that confronts mankind at every level of civilisation. In interpreting this passage therefore, many approaches stare before the reader; the depth psychology of man as an organism that wants to preserve itself, the *Sitz-im-Leben* (life setting) of a culture that grapples with the mystery of death, the socio-ethical perspective that sees solidarity for common good as a way of preserving the society etc. Above all, it puts to question the person of the questioner as a representative of mankind of all ages. Medical interventions are also a way of combating the threat of death. The inability of science to conquer the pang of death however leads to a theological appraisal of the quest for eternity.

Today one notices a certain dichotomy between medicine and prayer. There are many prayer houses today that emphasise on divine healing even to the point of precluding medication. On the other hand, some advocates of medicine see prayer as a waste of time and rely primarily on human ingenuity in saving life. Instead of this mechanistic dichotomy, this essay searches for a common ground for medicine and pastoral in the human quest for eternity. The history of the separation between medicine and religion will be examined and an attempt made to shed light on the meaning of life, no matter how elusive. Then an exegesis of Lk 10:25-37 will help in understanding what eternal life is. It then concludes with some pastoral implications and tips offered for a collaborative ministry between doctors and pastors.

## **2. What Are They Saying about Life?**

The early philosophers, so much as we can know, inquired extensively on the origin and termination of life. Starting with the water-source doctrine of Thales to the animating soul of Platonism, life was taken for granted. To live is enough. The concern was more on dying or disintegration. Put the other way, no one was interested in the definition of life. In our opinion sampling on the definition of life, 5% of the participants simply admits that the definition of life is elusive and unpredictable, while another 5% believes that life is a mystery beyond human comprehension. A member of this segment opines that ‘... life has no generally accepted definition. Its definition is idiosyncratic. Life is vague, colourless and without meaning...’ The word used by one of them is *imirimious*, (an anglicised Igbo word for a puzzling phenomenon). When challenged that mystery is wider than life, one of them retorts that every mystery is part of the wider life. 23% equates life with existence. For this group, to exist means to live and death means the end of existence. But this definition does not put into consideration that dead bodies also exist at least as matter. 45% sees life from an existentialist point of view as being what we make out of it. Out of this, 24% understands life to be meaningless while 6% advocates for hedonism. We must enjoy life as long as we

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live. The remaining percentage is of the view that we can make something positive out of life. Thus, the colour and meaning we give life is the idiosyncratic definition. Hence, the definition of life for this group is relative. This goes down to the sophists' *homo mensura* – man as the measure of all things. From the material aspect, 16% equates life as having breath with the possibility of growth or development. For some of them, life like energy can never be created nor destroyed. That means life has no origin nor end. As an energy, it can be transformed from one form to another. 13% of the participants talks about life from the spiritual angle and understands it to be immortal. They believe that there is life before and beyond the earthly realm. A participant in this group groups life into three phases. For her, 'the first phase is the conception/formation stage... this happens in the womb, after the appointed time, we exit the womb into the earth realm and this also has an appointed time for each human... The last phase is exiting into the spirit realm and this is eternity...' When critically assessed, equating life with energy that can neither be created nor destroyed will point to a common ground with religion on immortality.

What does it then mean to live? With the publication in 1944 of the work of the Austrian physicist Erwin Schrödinger, *What is Life? The Physical Aspect of the Living Cell*, the consciousness of the meaning of life came to the fore of scientific researches of the 20th Century. However, Schrödinger's understanding of life is purely biological and never puts into consideration the possibility of the spiritual aspect of it. The materialists understand death either as a disintegration or conversion from one state of matter to another. Whichever be the case, the fear of termination was hardly overcome through any philosophical ratiocination. No matter how we rationalise it, life remains a mystery. Right from the beginning, people do all possible things to remain alive.

### **3. Medical Interventions across Ages**

From the beginning, the battle against death has had a divine dimension. The ionic philosophers paid much attention to health and metaphysics. Hippocrates (ca. 460-375BC), for example, was a renowned physician philosopher and wrote almost 70 books on diseases and their treatments. Considered therefore as the father of modern medicine, medical students today take the Hippocratic Oath before practising in the field, a practice dating back to 400BC.<sup>2</sup> Aristotle's father traced his genealogy to Machaon, the son of Asclepius, the Greek god of healing,<sup>3</sup> and he

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<sup>2</sup>J. Romankow, 'Hippocrates and Schweitzer – Comparison of their Concepts of Medical Ethics', *Arch Hist Filoz Med.*, 62.3, 1999, 245.

<sup>3</sup>Samuel Baker, Aristotle on the Nature and Politics of Medicine, *Apeiron*, 54.4, 2021, 411.

is believed to have written many medical treatises.<sup>4</sup> According to Aristotle, the end of every medical art is the health of the patient.<sup>5</sup> He noted that a medical art can create either health or disease. While health is the good of the medical art, hence virtuous, disease is contrary to the nature of the art and therefore vicious. Because of this tendency of the medical art to produce vice, there is need for a kind of giving an account of stewardship in a way similar to the Hippocratic Oath.<sup>6</sup> Meno on the other hand wrote on the aetiology of diseases. Since medicine was a branch of philosophy, Greco-Roman medicine was in tandem with the contemporary philosophy and anthropology. Added to this was the divine aspect of it. Healing primarily comes from the gods and sickness could be traced to sin— something spread across all contemporary cultures. The narrative in Jn 5:1-9 of a man that was sick for 38 years at the pool of Bethesda<sup>7</sup> mirrors this world-view. People with different ailments gathered around the pool. The first to jump in whenever the water is disturbed would get healed. The description of this pool as having 5 colonnades suggests a Canaanite pagan temple, possibly the healing pool opposite the Antonia Fortress.<sup>8</sup> That shows that pagan healing practice and faith found its continuity among the Jews.<sup>9</sup> The theological content of the narrative among others consists in Jesus replacing the pool and becoming healing himself. This corroborates with the healing miracles in the Gospels.

In the 2nd Century AD, the Greek physician Galen held sway especially with his theory that the blood carries the *pneuma* (life spirit) which is responsible for its redness.<sup>10</sup> In the 5th Century, with the centre of learning moving to Constantinople, the Church dominated the medical field. Sin was seen as the primary cause of illness. With the obsession with the soul, less attention was paid to the body and consequently a neglect in medicine and the reign of medical superstition. As put by Hajar, ‘... in this period, there was no tradition of scientific medicine, and observations went hand in hand with spiritual and religious influences. Medicine during the Middle Ages was composed of a mixture of existing ideas from antiquity

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<sup>4</sup>Van der Eijk, P., On Sterility (‘HA X’), a Medical Work by Aristotle, in: *Classical Quarterly*, 49, 1999, (490-502), 492-94.

<sup>5</sup>Aristotle’s *Ethics and Politics*, Gillies, J. et al [trans.], vol.2, London, Nabu Press 1923, *Nicomachean Ethics*, II,1094a8.

<sup>6</sup>Aristotle, *Politics*, III, 1282a1-3.

<sup>7</sup>The name of the pool is actually controversial due to its varied renderings in various manuscripts such as Bēthzatha, Bezetha, Bēthsaida, etc. See more on E.W.G., Masterman, *The Pool of Bethesda*, *The Biblical World*, 25.2, 1905, 88-92.

<sup>8</sup>Francis Moloney, *The Gospel of John*, (Minnesota, Liturgical Press, 1998), 168.

<sup>9</sup>John Robinson, *The Priority of John*, London, SCM Press, 1985, 57.

<sup>10</sup>Rachel Hajar, *The Air of History (Part II). Medicine in the Middle Ages*, *Heart Views*, 13.4, 2012, 159.

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and spiritual influence.’<sup>11</sup> There was a stagnation in medical research as any view in opposition to that of the Church was considered heretical.

After the fall of the Roman Empire, medicine was rescued from the manuscripts found in various monasteries of Europe, especially the works Hippocrates and of Galen.<sup>12</sup> Even though sin is still attached to sickness, it was only understood from a universal background of a fallen humanity instead of individual sins. Between 12th and 18th Centuries, the renaissance weighed on the field of medicine. This time around, Greek medicines were retrieved through the refraction of Arabian sources.<sup>13</sup> This era featured great minds like Leonardo da Vinci whose work concentrated on vision and sensation as well as human anatomy. He adopted the idea that the soul is located in the human brain and concluded that visual and sensory information entered the body through the eyes passing through the optic nerves to the soul. It was the age of the reign of reasoning and questioning of traditional values. At this time, religion started loosening its grip on medicine. By locating the soul in the brain, da Vinci represents those physicians that understood the soul as a material component of the body. The emergence of secular physicians on the stage of medicine began as a result of this medicalisation of the soul. As a counter reaction, more emphasis was given to the body to the neglect of the soul and sometimes its denial. This phenomenon was couched in the slogan – *ubi tres medici, duo athei* (where there are three doctors, two are atheists). It gave rise to the radical medicine of the modern era. Apart from denying the immortality of the soul, some physicians understand the human person as purely material. The reign of materialism in the field of medicine is the basis for the erosion of ethical values in the field. Despite the Hippocratic Oath, the culture of death reigns in the field of medicine through the practice of abortion, contraception, euthanasia and others.

The materialist conception of life is logically atheistic. The Jewish historian Yuval Harari believes that life is all about matters and hormones and through algorithm, medicine can conquer the pain of death and offer humanity the eternal life long longed for. As he noted, some scholars suggest that by 2050, some humans will become a-mortal and not immortal, because in the absence of certain accidents, their lives could be extended indefinitely.<sup>14</sup> Harari’s algorithm has not been without criticisms. He humbly admits mortality and compensates it with a-mortality. Despite the breakthroughs in the area of medicine, lifespan has not been actually prolonged, especially in poor countries. It is a common knowledge, for example in Nigeria, that those that have access to the best of health care systems do not

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<sup>11</sup>Hajar, 158.

<sup>12</sup>Hajar,160.

<sup>13</sup>Wesley Smith, *The Hippocratic Tradition*, Philadelphia, 2002, 13.

<sup>14</sup>Noah Harari, *Eine Kurze Geschichte der Menschheit*, Pantheon, 2013, 327.

necessarily live longer than those who could not afford them. Nature has a way of balancing things out. Even though some incurable diseases find their cure with time, the expression ‘terminal illness’ will always be there. Certain conditions can even make someone desire death and the possibility of eternal physical life on earth seen as a threat.

#### **4. Theology of Eternal Life as a Consolation**

No matter what role medicine plays in saving our lives and assuring good health, it has its own limit. It cannot guarantee us eternal life. Even if it can, the prospect of eternal life in this physical world may not be found attractive, especially when one lives with pains and on medications.<sup>15</sup> A man with an incurable disease that discomforts him, knowing that it has no cure may not desire to live forever. An old person with failing organs and nerves may wish to die. But eternal life without pains and sorrows, worries and frustrations is the one desired by every human. This is where faith comes in. In the words of George Augustin, ‘in contrast to the reduction of human existence to a this-worldliness that fragments into all sorts of joys and sorrows, the Christian message holistically proclaims the hope of eternal life.’<sup>16</sup> It is central in the Christian teaching that the resurrection of Jesus has overcome the pang of death for the believers. He has the power to raise the dead back to life and prepares the way of eternal life for the living. This theology of eternal life has been a strongly disputed theme. While some conceive eternal life to be a certain form of life after our death, there are those that believe that eternal life ‘is not more life, but this life seen under certain moral and religious modes of thought.’<sup>17</sup> Drawing mostly from the fourth evangelist, Burley, posits that eternal life has nothing to do with a new form of existence after death but rather a quality of existence that believers in Christ have here and now.<sup>18</sup> If eternal life is an exclusively present possession as he claims, then it is finite and attributing future to it is contradictory. The logical truth is that a life that is neither continuous without dying nor begins after death<sup>19</sup> is robbed of its eternity. The same goes with reducing eternal life to perception. According to Burley, ‘the experiences and sufferings, that constitute life cannot be erased and totally obliterated by death or by passing of time.’<sup>20</sup> This then lays the eternal life in the memory of other finite

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<sup>15</sup>See Benedict XVI, *Spe Salvi*, 10.

<sup>16</sup>George Augustin, G., *The Power of Mercy: Exploring the Source of Faith and Life*, (Bombay, Paulist Press, 2021), 38.

<sup>17</sup>D.Z. Philips, *Death and Immortality*, London, Maximillan, 1970, 49.

<sup>18</sup>Mikel Burley, *Eternal Life as an Exclusively Present Possession: Perspectives from Theology and the Philosophy of Time*, *Sophia: International Journal of Philosophy and Traditions*, 55.2, 146.

<sup>19</sup>Burley, 150.

<sup>20</sup>Burley, 151.

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beings instead of the owner of it. However, eternal life is more than memory. It is real and actual.

In the biblical tradition, eternal life could be a kind of otherworldly, a type that begins after this earthly life. However, it is more than that. Eternal life begins from this world of ours and has to do with the configuration of the believer into the life of Christ. This is the third point of Burley's argument which is extensively based on the Gospel of John. However, the Scripture is afloat with instances of afterlife (Lk 16:19-31, Rev 20, Jn 5:29 etc). The eternal life that begins here flows into eternity. Wholly viewed, a picture of the theological dialectics of already and not yet appears – hence the eternal life in which we participate in this life is not the only eternal life but a realised eschatology. That means, Burley's choice of exclusiveness in his presentation of the present eternal life is flawed.

**Biblical – Theological Understanding of Life**

The Christian theology teaches that life is the first gift of God to mankind through the divine inbreathing. Hence, the breath of God is the animating principle of man. The psalmist teaches that it is not only man that is animated by the breath of God. Rather, the whole creation receives its life from God and the withdrawal of God's breath automatically means death (Ps. 104:29-30). The first instance of death in the Bible is connected with the commandment not to eat of the tree of knowledge of good and evil (cf. Gen 2:16-17). The violation of this commandment not only brought about the expulsion of man from the garden, it also opens the gateway to two theological livestreams on the meaning of death. The first is the physical death that awaits all men. Some apocalyptic literatures narrate the death of Adam at the age of 930 (cf. Life of Adam and Eve 45:2; Apocalypse of Moses 22:4; Gospel of Nicodemus 14:6). In correlation with the assertion that a thousand years before the Lord is like a day (cf. 2Pt 3:8), then Adam truly died the day he ate of the fruit. Apart from the physical understanding there is also the theological, which is understood as a separation from God. Adam also experienced this type of death (cf. Life of Adam and Eve, 41:10.12). On the other hand, life means observing the Torah (cf. Lev 18:5).<sup>21</sup> Above all, it is the choice of man whether to live or to perish. To live is to observe the commandments of God and be in a fellowship with him while death means transgression of the Divine Law (cf. Deut 30:15-20). This is the theology that basically inspired the 1943 Deuteronomistic history (DtrH) hypothesis by Martin Noth.<sup>22</sup> It is a hypothesis centring on Dt - 2Kgs as a

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<sup>21</sup>Philip Johnston, Death and Afterlife, in: Bill Arnold and Hugh Williamson (eds), Dictionary of the Old Testament: Historical Books, Leicester, Inter Varsity Press, 2005.

<sup>22</sup>The English version appears in 1981 as The Deuteronomistic History.

theological corpus aimed at explaining the ordeal of the Israelites as a consequence of their infidelity to the Law of God.<sup>23</sup>

The twofold understanding of life forms the basis for the twofold preservation of life in the Old Testament. Hygiene and diet became part of the Jewish Laws especially in Leviticus while Deuteronomy focuses on moral laws. That means uncleanliness and immorality could be the major causes of illness and death with the distinction between physical and theological deaths getting blurred. Daniel-Rops notes that in the Old Testament, there is a mention of at least 50 forms of ailment.<sup>24</sup> Medical procedures range from herbs, minerals and animal plants, through isolations such as in the case of leprosy and other skin diseases to divine intervention.<sup>25</sup> This possibility of divine intervention brings to the fore, the unity of the body and soul in relation to life and death.<sup>26</sup> Leprosy, for example, is believed to affect not only the body but also the soul. Also, sin could be the cause of serious illness. Physicians were also so valued that they are considered to be divine agents (cf. Sir 38:1-15).

The lost fellowship with God as a consequence of the fall thus brings about both physical and spiritual consequences. Healing could then come about through a rediscovery of this union which is the main purpose of Christ's saving ministry. He does not only offer spiritual life, he also healed ailments and raised people physically from the dead. The New Testament, in fact, makes use of three words for life namely *bios* (material life), *psychē* (the human person in general), and *zōē* (spiritual life). *Bios* is the type of life we share in common with plants and other lower animals as *kōl Basar* (all flesh). It is life at its biological level. The second is typically human life. Only humans possess this type of life and sometimes it could be equated with the whole human person. *Zoe* is the divine life which is spiritual. It is the eternal life promised to all. These three forms of life could be threatened by natural disaster, sickness or sin and divine intervention has a role to play in each instance. Though distinct, they are not separated from each other. Every life comes from the creator. The New Testament is then filled with instances of medication. The action of the Good Samaritan who took pity on the injured man, bandaging him, administering oil and wine on his wound before taking him to an

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<sup>23</sup>Mark O'Brien, 'The 'Deuteronomistic History' as a Story of Israel's Leaders, in: Australian Biblical Review, 37, 1989, 17.

<sup>24</sup>Henry Daniel-Rops, *Daily Life in Palestine at the Time of Christ*, (London, Weidenfeld & Nicolson History, 2002), 321-22.

<sup>25</sup>Medicine at the Time of Christ, Faculty of Medicine, The University of Queensland, Australia, [www.medicine.uq.edu.au](http://www.medicine.uq.edu.au), 17.09.2023.

<sup>26</sup>The death of King Asa in 2Chr 16:11-14 seems to be because he consulted only the doctor without consulting God. That hints more on the unity of human and divine in issues of life and death.



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inn (cf. Lk 10:34) vividly presents an ancient image of a modern day first aid. It was not out of place even in the bible to prescribe wine for a health purpose (1 Tim 5:23). Even Luke himself was a doctor (Col 4:14). Thus, the biblical understanding of life and death in the Old Testament finds in the New Testament both continuity and development.

**Quest for Eternal Life**

Our concern here is the dialogue between Jesus and a teacher of the Law as recorded in Lk 10: The man asked Jesus what to do so as to have eternal life. Luke makes it clear, that he came to Jesus not to inquire something new but to put him to test. This reveals that the theme of eternal life at this point could be something very controversial.<sup>27</sup> One finds this controversy also in the trial of Paul in Sanhedrin made up of the Pharisees who believed in the resurrection and the Sadducees who denied the resurrection. So, eternal life in this dialogue is more of a theological than of a medical issue. Jesus does not recommend him to drink 3 litres of water daily, to exercise frequently or to visit his doctor regularly. Relying on the tradition that ties life to the Torah, Jesus gives him the summary of the laws and prophets (cf. Mt 22:40) namely love of God and of neighbour. This twofold love, stemming from Dt 6:5 and Lev 19:18, is presented in Mt. as the greatest of the commandments. In Mk. and Mt., unlike in Lk., it is Jesus that provides the answer and it was in the context of resurrection. In Mk., the question is a genuine one from a man who truly wants to know. The hermeneutics of suspicion, which is to put Jesus to test is in Mt. and Lk. The uniqueness of Lk. therefore, consists in the question for eternal life, the question of the law presented by Jesus and the lawyer providing the answer, then the parable. The man in Lk. does not doubt the answer given by Jesus.<sup>28</sup> He only goes further to present another question on the identity of his neighbour thereby prompting the parable of the Samaritan (vv.30-35).

Who is this man trying to put Jesus to test? He is more than a teacher of the Law. He is a man at battle with the reality of death as inevitable. He too wants to live forever. The biblical understanding of life and death sprang from a culture within a wider Ancient Near Eastern milieu and the teacher of the law is a product of this milieu. He believes that true life consists in the observation of the Law. He knows that biological life has an expiry date but does not deny the reality of eternal life. It could also, in the view of Klinghardt, be that he is afraid of losing the eternal life due to compromise in a community made up of Jews and Gentiles.<sup>29</sup> However, it

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<sup>27</sup>Birger Gerhardsson, *The Good Samaritan – The Good Shepherd*, (Copenhagen, Munksgaard, 1958), 24-25.

<sup>28</sup>François Bovon, *Das Evangelium nach Lukas*, (Neukirchener, Patmos Verlag, 1996), 82.

<sup>29</sup>Matthias Klinghardt, *Gesetz und das Volk Gottes*, (Tübingen, Mohr, 1988), 154-55.

is not clear to him what the nature of this eternal life is. He is part of the controversy as a teacher of the law. By not trying to gain a new knowledge but to put Jesus to test, he is aware of the *cul de sac* as well as partisanship involved whenever the topic comes up in the circle of the learned. He is aware that love of God and of neighbour is in consonance with the Torah. The Jewish anthropology of Dt 6:5 could have received a Hellenistic redaction with the addition of mind to the trio of heart, soul and strength. This gains the attention of Bovon. For him, the heart evokes the will and feeling, the soul the conscious life-force, the strength the personal energy and the mind the intelligence.<sup>30</sup> That means the whole person undivided – the entire *psychē* must be channelled in the love of God. Jesus told him, ‘do this and you will live.’ The living here is *zao* with its substantive as *zoe*. In other words, dedicate your *psyche* in loving God and you will have *zoe*. This could mirror the Johannine Jesus laying down his *psychē* that we might have *zoe*. More stunning could also be the definition of a neighbour at the end of the dialogue. The whole pericope is structured twofold; in such a way that the rabbi asks the questions and provides the answers.<sup>31</sup> To the first question on what to do to have eternal life, he provides the answer as the love of God and neighbour. In between is Jesus asking the man to do the same and live. To the second question namely on who a neighbour is, Jesus not only presents a contrary question but prefixes it with the story of the Samaritan forming a context for the answer. Even though the answers come from the rabbi, it is nothing but a form of Plato’s midwifery as a process of knowledge. Led by Jesus, the teacher of the law moves from darkness to light, from test to knowledge, from doubt to conviction.

The mentioning of the two cultic characters namely the priest and the Levite and their neglect of the man in need is an attempt to show the dissociation in history of ritual purity and moral probity, love of God and of neighbour, law and life. The role of the Samaritan above all is to bridge this gap of misunderstanding that all men are children of God and what could save the world is only a repentant humanity that sees reality through this lens. It is therefore the aim of the parable to bridge the gap that divides humanity not only along the line of ethnicity but also along the line of belief and ideology. Even though eternal life is otherworldly, it begins here on earth by a participation in the life of God who is love. No matter how committed Christians are to the affairs of this world, it in no way deters the faith in afterlife and vice versa.<sup>32</sup>

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<sup>30</sup>Bovon, Das Evangelium nach Lukas, 86.

<sup>31</sup>For more details on this twofold structure, see Bovon, 83.

<sup>32</sup>In contrast to John Baillie, *And the Life Everlasting*, (London, Abe Books, 1934), 45.

## **5. Conclusion**

This essay set out to inquire on the theme of eternal life. First of all, life as a concept defies any attempts on definition. The same goes with any attempts to live forever, at least at the physical realm. It is a pang old as mankind. Life is understood in the bible in various ways both physical and spiritual. However, no matter the various forms of life, they are related and should not be separated. This integral nature of life is also found in the relationship between religion and medicine, the imbalance in the Middle Ages, the antagonism and dissociation in the Renaissance and the need for their togetherness are all addressed in this essay. Finally, we ponder on some pastoral implications to be drawn from the essay.

The seemingly conflict today between medicine and faith was not there at the beginning. It began with the enthronement of reason as the ultimate measure of all things. The separation of the two aspects of human life results to the human person being a battlefield instead of a meeting point for two enterprises that have the mission of battling the reality of death. Eternal life is not totally otherworldly. It begins from this present world where *eschatos* inhabits the present as *kairos* by a way of participation in the life of Christ. Good works and commitment to social transformation do attract grace and hence are a foretaste of eternal life. That is the same with the work of the good Samaritan. Although the character of the Samaritan in reception history has been attributed to Jesus Christ as one who offers us eternal life,<sup>33</sup> the ethical approach to the story could only see the action of the Good Samaritan as that of Christians in their witness to Christ. When it applies to Christ, it then serves as a role model for the Christians. Go and do likewise then means, be Christlike and you will have eternal life. In loving his neighbour, and becoming a neighbour to his neighbour, the Samaritan secures eternal life. He does not only offer help to the man in need, he ends up being in need of the man in need. This is what pastoral workers should bear in mind.

As seen from the parable of the good Samaritan, Jesus ties mercy to eternal life.<sup>34</sup> Every human life, no matter the quality, has an inalienable dignity as a result of the divine imprint of God's image. Taking care of the sick, therefore, is not only an expression of love for the patient but also service to God.<sup>35</sup> In Mt 25, Jesus associates the works of mercy with his own person.<sup>36</sup> 'When I was sick, you took care of me' (Mt 25:36) is one of the canons of judgement on the last day. That verb *epeskepsasthe* actually means to inspect or oversee and is from the Greek word for bishop (*episcopos*). Whoever that is taking care of the sick whether

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<sup>33</sup>Bovon, Das Evangelium nach Lukas, 82.

<sup>34</sup>Augustin, The Power of Mercy, 39.

<sup>35</sup>Bovon, Das Evangelium nach Lukas, 82.

<sup>36</sup>Augustin, The Power of Mercy, 39.

medically or pastorally is overseeing him or her as a life entrusted to him or her, to which he or she will render an account of stewardship. Doctors and nurses have a special vocation of saving life and when unable, at least accompanying the patient and preparing him or her for a dignified death. What the doctor does, though materially different, is essentially the same as what the pastoral worker does. It is this formal sameness that creates in the sick person a meeting point for medicine and piety.

It is not only medicine that sometimes fight against religion. There are cases of faith rejecting medication especially blood transfusion. This is another extreme of the unhealthy dissociation. Even Jesus outrightly tells us that the sick need the physicians and carried out some medical procedures on the sick. God has given us the intelligence to make use of nature in repairing our tissues and healing ourselves of ailments. Rejecting medication is an abuse of our God given intelligence and medical knowledge. The essay calls us to repentance; to change our mindset and stop thinking that we are immortal. Eternal life is not our physical life. However, our good works like that of the Good Samaritan is an assurance of life. 'Do this and you will live' (Lk 10:28). The sick person we attend to either as a pastor or as a doctor is a gateway to heaven. We are his or her neighbours in need of him or her just as he or she needs us.