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December 1993

Dear Friends,

I have a little Christmas present for you. No, it won't come wrapped in pretty paper or adorned with a bright colored ribbon. But I believe you will enjoy this little remembrance. You are, in fact, holding my gift in your hand at this moment. It is a true Christmas story that will touch your soul during this blessed time of the year.

Do you have time right now to read something simply for enjoyment? I doubt it. We are all so busy during the holidays that we can hardly pause even to receive a blessing. Nevertheless, I am suggesting that you take a few moments just for yourself. You deserve a break today. Situate yourself in your most comfortable chair—perhaps with a cup of hot cider and a few (low-fat) cookies—and read the inspiring words of Dr. Frederic Loomis. This obstetrician's story is included in an outstanding collection of writings entitled *Christmas in My Heart*<sup>1</sup>, compiled by Dr. Joe Wheeler. If this little piece doesn't light your fire, you have wet wood.

These are Dr. Loomis' own words, recalling the delivery of a baby many years ago, before caesarean procedures were commonly used to rescue infants at risk. He called his story "The Tiny Foot."

Two years after I came to California, there came to my office one day a fragile young woman, expecting her first baby. Her history was not good from an emotional standpoint, though she came from a fine family.

I built her up as well as I could and found her increasingly wholesome and interesting as time went on, partly because of the effort she was making to be calm and patient and to keep her emotional and nervous reactions under control.

One month before her baby was due, her routine examination showed that her baby was in a breech position. As a rule, the baby's head is in the lower part of the uterus for months before delivery, not because it is heavier and "sinks" in the surrounding fluid, but simply because it fits more comfortably in that position. There is no routine spontaneous "turning" of all babies at the seventh or eighth month, as is so generally supposed, but the occasional baby found in a breech position in the last month not infrequently changes to the normal vertex position with the head down by the time it is ready to be born, so that only about one baby in 25 is born in the breech position.

This is fortunate, as the death rate of breech babies is comparatively high because of the difficulty in delivering the after-coming head, and the imperative need of delivering it rather quickly after the body is born. At that moment the cord becomes compressed between the baby's hard little head and the mother's bony pelvis. When no oxygen reaches the baby's bloodstream, it inevitably dies in a few short minutes. Everyone in the delivery room is tense, except the mother herself, in a breech delivery, especially if it is a first baby, when the difficulty is greater. The mother is usually quietly asleep or almost so.

The case I was speaking of was a "complete" breech—the baby's legs and feet being folded under it, tailor-fashion—in contrast to the "frank" breech, in which the thighs and legs are folded back on a baby's body like a jackknife, the little rear end backing its way into the world first of all.

The hardest thing for the attending doctor to do with any breech delivery is to keep his hands away from it until the natural forces of expulsion have thoroughly dilated the firm maternal structures that delay its progress. I waited as patiently as I could, sending frequent messages to the excited family in the corridor outside.

At last the time had come, and I gently drew down one little foot. I grasped the other, but for some reason I could not understand, it would not come down beside the first one. I pulled again, gently enough but with a little force, with light pressure on the abdomen from above by my assisting nurse,

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and the baby's body moved down just enough for me to see that it was a little girl—and then, to my consternation, I saw that the other foot would never be beside the first one. The entire thigh from the hip to the knee was missing and that one foot never could reach below the opposite knee. And a baby girl was to suffer this, a curious defect that I had never seen before, nor have I since!

There followed the hardest struggle I have ever had with myself. I knew what a dreadful effect it would have upon the unstable nervous system of the mother. I felt sure that the family would almost certainly impoverish itself in taking the child to every famous orthopedist in the world whose achievements might offer a ray of hope.

Most of all, I saw this little girl sitting sadly by herself while other girls laughed and danced and ran and played—and then I suddenly realized that there was something that would save every pang but one, and that one thing was in my power.

One breech baby in 10 dies in delivery because it is not delivered rapidly enough, and now—if only I did not hurry! If I could slow my hand, if I could make myself delay those few short moments. It would not be an easy delivery, anyway. No one in all this world would ever know. The mother, after the first shock of grief, would probably be glad she had lost a child so sadly handicapped. In a year or two she would try again and this tragic fate would never be repeated.

“Don't bring this suffering upon them,” the small voice within me said. “This baby has never taken a breath—don't let her ever take one. You probably can't get it out in time, anyway. Don't hurry. Don't be a fool and bring this terrible thing upon them. Suppose your conscience does hurt a little; can't you stand it better than they can? Maybe your conscience will hurt worse if you do get it out in time.”

I motioned to the nurse for the warm sterile towel that is always ready for me in a breech delivery to wrap around the baby's body so that the stimulation of the cold air of the outside world may not induce a sudden expansion of the baby's chest, causing the aspiration of fluid or mucus that might bring death.

But this time the towel was only to conceal from the attending nurses that which my eyes alone had seen. With the touch of the pitiful little foot in my hand, a pang of sorrow for the baby's future swept through me, and my decision was made.

I glanced at the clock. Three of the allotted seven or eight minutes had already gone. Every eye in the room was upon me and I could feel the tension in their eagerness to do instantly what I asked, totally unaware of what I was feeling. I hoped they could not possibly detect the tension of my own struggle at that moment.

These nurses had seen me deliver dozens of breech babies successfully—yes, and they had seen me fail, too. Now they were going to see me fail again. For the first time in my medical life I was deliberately discarding what I had been taught was right for something that I felt sure was better.

I slipped my hand beneath the towel to feel the pulsations of the baby's cord, a certain index of its condition. Two to three minutes more would be enough. So that I might seem to be doing something, I drew the baby down a little lower to “split out” the arms, the usual next step, and as I did so the little pink foot on the good side bobbed out from its protecting towel and pressed firmly against my slowly moving hand, the hand into whose keeping the safety of the mother and the baby had been entrusted. There was a sudden convulsive movement of the baby's body, an actual feeling of strength and life and vigor.

It was too much. I couldn't do it. I delivered the baby with her pitiful little leg. I told the family the next day, and with a catch in my voice, I told the mother.

Every foreboding came true. The mother was in a hospital for several months. I saw her once or twice and she looked like a wraith of her former self. I heard of them indirectly from time to time. They had been to Rochester, Minn. They had been to Chicago and to Boston. Finally I lost track of them altogether.

As the years went on, I blamed myself bitterly for not having had the strength to yield to my temptation.

Through the many years that I have been here, there has developed in our hospital a pretty custom of staging an elaborate Christmas party each year for the employees, the nurses, and the doctors of the staff.

There is always a beautifully decorated tree on the stage of our little auditorium. The girls spend weeks in preparation. We have so many difficult things to do during the year, so much discipline, and so many of the stern realities of life, that we have set aside this one day to touch upon the emotional and spiritual side. It is almost like

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going to an impressive church service, as each year we dedicate ourselves anew to the year ahead.

This past year the arrangement was somewhat changed. The tree, on one side of the stage, had been sprayed with silver paint and was hung with scores of gleaming silver and tinsel ornaments, without a trace of color anywhere and with no lights hung upon the tree itself. It shown but faintly in the dimly lighted auditorium.

Every doctor of the staff who could possibly be there was in his seat. The first rows were reserved for the nurses and in a moment the procession entered, each girl in uniform, each one crowned by her nurse's cap, her badge of office. Around their shoulders were their blue Red Cross capes, one end tossed back to show the deep red lining.

We rose as one man to do them honor, and as the last one reached her seat and we settled in our places again, the organ began the opening notes of one of the oldest of our carols.

Slowly down the middle aisle, marching from the back of the auditorium, came 20 other girls singing softly, our own nurses, in full uniform, each holding high a lighted candle, while through the auditorium floated the familiar strains of "Silent Night." We were on our feet again instantly. I could have killed anyone who spoke to me then, because I couldn't have answered, and by the time they reached their seats I couldn't see.

And then a great blue floodlight at the back was turned on very slowly, gradually covering the tree with increasing splendor: brighter and brighter, until every ornament was almost a flame. On the opposite side of the stage a curtain was slowly drawn and we saw three lovely young musicians, all in shimmering white evening gowns. They played very softly in unison with the organ—a harp, a cello, and a violin. I am quite sure I was not the only old sissy there whose eyes were filled with tears.

I have always liked the harp and I love to watch the grace of a skillful player. I was especially fascinated by this young harpist. She played extraordinarily well, as if she loved it. Her slender fingers flickered across the strings, and as the nurses sang, her face, made beautiful by a mass of auburn hair, was upturned as if the world that moment were a wonderful and holy place.

I waited, when the short program was over, to congratulate the chief nurse on the unusual effects she had arranged. And as I sat alone, there came running down the aisle a woman whom I did not know. She came to me with arms outstretched.

"Oh, you saw her," she cried. "You must have recognized your baby. That was my daughter who played the harp—and I saw you watching her. Don't you remember the little girl who was born with only one good leg 17 years ago? We tried everything else first, but now she has a whole artificial leg on that side—but you would never know it, would you? She can walk, she can swim, and she can almost dance.

"But, best of all, through all those years when she couldn't do those things, she learned to use her hands so wonderfully. She is going to be one of the world's great harpists. She enters the university this year at 17. She is my whole life and now she is so happy. . . And here she is!"

As we spoke, this sweet young girl had quietly approached us, her eyes glowing, and now she stood beside me.

"This is your first doctor, my dear—our doctor," her mother said. Her voice trembled. I could see her literally swept back, as I was, through all the years of heartache to the day when I told her what she had to face. "He was the first one to tell me about you. He brought you to me."

Impulsively I took the child in my arms. Across her warm young shoulder I saw the creeping clock of the delivery room of 17 years before. I lived again those awful moments when her life was in my hand, when I had decided on deliberate infanticide.

I held her away from me and looked at her.

"You never will know, my dear," I said, "you never will know, nor will anyone else in all the world, just what tonight has meant to me. Go back to your harp for a moment, please—and play 'Silent Night' for me alone. I have a load on my shoulders that no one has ever seen, a load that only you can take away."

Her mother sat beside me and quietly took my hand as her daughter played. Perhaps she knew what was in my mind. And as the last strains of "Silent Night, Holy Night" faded again, I think I found the answer, and the comfort, I had waited for so long.



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I read Dr. Loomis' story at dawn this morning as tears streamed down my face. When Shirley awoke a few minutes later, I shared it with her, and she quietly dabbed at her eyes with a hanky. We both thought of the 30 million unborn babies who, though entirely healthy and brimming with human potential, have been denied the opportunity to live and love and learn. Undoubtedly among them were future musicians, scientists, teachers, ministers and homemakers who were never given a chance. What a tragic loss to the human family!

Dr. Loomis' story also spoke volumes about the worth of every child, especially the handicapped and needy. Jesus once referred to such individuals as "the least of these, my brothers." Each of them is precious. Since my years of service on the staff of a large children's hospital, my greatest respect and admiration have been reserved for the mothers and fathers, like those in the story, who have devoted their lives to the task of raising a physically or intellectually challenged boy or girl. If that is your circumstance today, you may not receive the acclaim you deserve in this life. The media and the world outside may not even know you are there. But the Lord has seen your sacrifice. If you remain true to your calling, He will say those incredible words on Resurrection Morning, "Well done, thou good and faithful servant."

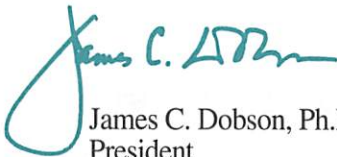
There is another profound lesson tucked within the story we have read. It focuses on God's sovereign will, which is preeminent whether or not we understand or agree with it. Dr. Loomis almost overlooked that truth. He apparently concluded that Providence had made a disastrous mistake, tempting him to take matters in his own hands. But there was a purpose—a divine plan—unfolding in that delivery room that he failed to comprehend. We simply must not attempt to "play God" in matters of life and death, which are the exclusive prerogatives of the Creator. Our obligation is to trust Him even when the pieces don't fit. As I attempted to say in my newest book, God makes sense even when He doesn't make sense. There is an order, an intelligent design, to the universe even when everything seems to be swirling out of control.

This Christmas, we celebrate the birth of the child who brought that symmetry and meaning to the human family. Jesus came to bring life, and life more abundantly, to whosoever would simply believe on His name. By His advent, by His death 33 years later on a cruel Roman cross, and by His resurrection we are adopted into His family and given the promise of eternal life. What a blessing! Indeed, every good and perfect gift is linked to that miraculous event in Bethlehem some 2,000 years ago. All the transcendent values in which we believe, including our reverence for human life, find their origins in the words of the Master. Even the story we just read evoked these eternal themes, which is why I shared it with you. I don't know if Dr. Loomis was a believer in the lordship of Jesus Christ, although I think he must have been. His compassion for a tiny, deformed baby certainly reflects the teachings of the One who said to His disciples, "Suffer the little children to come unto Me."

Merry Christmas to you and to your loved ones. Many thanks for caring about the work of Focus on the Family this past year, and for helping to provide its support. We, like you, are simply attempting to do what God has asked of us under somewhat trying circumstances. If He has been able to use this ministry to bless your life or help meet a specific need, then for that we are grateful. We exist to serve you.

Please let us hear from you when time permits. The mail we receive from our friends is the fuel that keeps us going. Even a note or a card would be appreciated.

In the Name of the Christ child,



James C. Dobson, Ph.D.  
President

P.S. I hope you will plan to come by and see us sometime in 1994. We'd love to show you around the ministry. More than 20,000 of our friends have already visited us so far in 1993. Come join the celebration sometime during the new year.

1. From *Christmas in My Heart, Book 2*, by Joe L. Wheeler. Copyright Review and Herald Publishing Assn., 55 W. Oak Ridge Dr., Hagerstown, MD 21740. Used by permission.