



Diocese of Toronto
Anglican Church of Canada

A SUMMARY REPORT CONCERNING THE RISK OF
TRANSMISSION OF CONTAGION VIA THE USE OF THE
COMMON CUP AND OTHER LITURGICAL ACTS

In April 2003, the Bishop of Toronto, Archbishop Terence Finlay undertook the extraordinary action of suspending the use of the common cup and the handshake during the liturgical exchange of peace in response to the fear and anxiety associated with an outbreak of Severe Acute Respiratory Syndrome (SARS).

Such an action highlighted, once again, concerns regarding the risk of transmission of infectious agents via the liturgical acts of communion and the shaking of hands. Archbishop Finlay established a working group of laity, clergy and health care professionals to examine the implications of this concern and recommend interventions, which would reduce risk and lower levels of anxiety.

A combination of current literature and expert medical advice concluded:

- 1) **sipping** from the common cup represents a **minimal risk** of transmission of contagion;
- 2) sharing a **handshake** in the exchange of the peace presents a **minimal risk** of transmission of contagion.

Both of these activities fall within the parameters of the normal risks of daily living.

- 3) **The practice of intinction can be perceived as a higher risk activity.** Fingertips of intinctors may contaminate the shared wine with pathogens other than those found in saliva.

Obviously, none of these activities is totally risk free. Therefore, we need to be able to recognise those risks that need to be accepted, and those, which need to be avoided. For when the fear of risk grows out of bounds, it becomes a prison that constrains our lives and a barrier to relationships with others and with God.

Eliminating all risk is impossible. Our witness of faith is one, which embraces risk. Jesus risked his life in loving God and teaches us that when we live as a community of faith, we can embrace fully the risk of living within our world. For our faith in God allows us to move forward with the understanding that while we as a community cannot escape risk, we possess those virtues required to face risk: wisdom, compassion, generosity, courage, love and faith.

Our liturgy of faithful remembering must not make the avoidance of all risk the primary criterion – which would mean avoiding any authentic celebration of the Eucharist. After all, this gathering at table is of no practical use whatever (a morsel of bread, a sip of wine do nothing to fill the belly). But at the symbolic level, they are food for life, a meal of hope, a banquet “rich in delights and suited to every taste” (*Wisdom 16:20*). Whenever we forget the symbolic nature of the Eucharist and are tempted to be merely practical (even for the sake of avoiding risk), we run the greater risk of losing the symbol altogether and slipping into a pragmatic response to fear and anxiety.

Our devotion to the sharing of the common cup is central to our liturgy. Nevertheless, we are obligated not to be careless in our worship practice. Having sought expert advice, we are prepared to propose the following:

- 1) who are sneezing or coughing to use a tissue;
- 2) encouraging parishioners We must thoughtfully incorporate medical advice into our liturgical practice.

- 3) We must respect our faith tradition and current liturgical practices, unless science reveals them to be unsafe.
- 4) Public and even ritualised sanitising of the hands of all leaders and worshippers is a reasonable expectation as we continue to obey Christ's command to "do this in memory of me."
- 5) We must pay close attention to the information based upon current infectious disease principles and public health practice that suggests that disease transmission risks would decrease if we discontinued the practice of intinction altogether.
- 6) We must continue to follow Christ's command to partake of the Cup of Blessing as an act and statement of unifying faith.

Such principles can be shaped into the following interventions;

REGARDING THE COMMON CUP:

Effective interventions, concerning the sharing of the communion cup, are those which would reduce or eliminate residual pathogens on the rim or other surfaces of the chalice. The traditional wiping of the chalice with a purificator can remove significant amounts of these residual pathogens. However, changes can be made to current practice, which will increase the amount of pathogen eliminated, thereby reducing risk of transmission.

The risk of transmission can be reduced by:

- 1) ensuring that chalices are cleaned properly, (hot water and soap is sufficient, the use of a dishwasher is even more effective) and stored within sealed containers between use;
- 2) purificators are washed in hot water and stored in sealed containers between use;
- 3) replacing purificators frequently during communion, (possibly every 4 to 5 communicants);
- 4) changing the chalice half way through communion (if a parish has more than one chalice) thereby reducing the number of communicants who share any one chalice;
- 5) having communion ministers exercise extreme care when wiping the chalice to ensure effective cleansing;
- 6) having all communion ministers wash their hands thoroughly with a hand sanitizer (anti-microbial rinse) immediately before commencing administration. This can be accomplished discreetly at the side of the sanctuary during the use of the lavabo.

REGARDING THE EXCHANGING OF THE PEACE:

The handshake is the most common form of recognition and greeting within our society today. It is unrealistic to discourage or discontinue the act of shaking hands both within the parish in general and within the practice of worship.

The risk of transmission can be reduced by:

- 7) encouraging ill or ailing parishioners to refrain from attending public worship;
- 8) encouraging parishioners to use a hand sanitizer (anti-microbial hand rinse) before attending worship; hand sanitizers may be made available in the narthex of the church
- 9) requiring all clergy, lay readers, greeters or any person who has a role within the worship service to use a hand sanitizer (anti-microbial hand rinse) before worship services begin.

Such interventions will not eliminate the transmission of pathogens; however, they can reduce significantly the risk of contagion.

REGARDING THE PRACTICE OF INTINCTION:

That intinction remains a viable practice as relates to the administration of the sacraments to those who are ill or infirm and unable to attend public worship.

Within the context of public worship, the practice of intinction should be discontinued since it involves the unavoidable additional risk brought about by the unpredictable potential contact of fingers with the shared wine.

Where the practice of intinction is currently not observed within the context of public worship, such a practice should not be introduced or encouraged.

However, where intinction is part of the practice or culture of a parish, the following guidelines shall be followed;

- 1) There shall be no intinction of baked bread, which is broken for communion.
- 2) For those who wish to intinct, a separate chalice, or intinction cup, and paten shall be used. This can be administered by additional lay assistants. The communicant will take a consecrated wafer from the paten and dip the wafer into the intinction cup while the lay assistant shall recite **“The body and blood of Christ, given for you”**.

While this may seem cumbersome, the intent is to eliminate the potential for contact of fingertips with wine shared with other communicants. A separate paten for wafers allows the communicant to dip individually reducing the risk of contagion from the cleric or lay assistant “touching” each wafer.

While intinction is viewed by many to be a more hygienic means of administering communion, in reality, it introduces the potential of multiple contacts instead of the reduced contact of the cleric with the wafer and the chalice wiped between each communicant. Hence the understanding that intinction is not a practice suitable to public worship.