

# Inside Schizophrenia

## A Personal Account

It hadn't always been this way. I could still remember times when I'd felt the warmth of the spring sunshine through the thin dress, and the gentle buffeting of the fresh breeze, threading its way around the dense blocks of skyscrapers and converted Victorian town-houses forming the Square Mile. But this morning, as always now, as I laboured up the hill I felt a sense of loss.

Familiar details secure us all to our surroundings. The impressions received through eye and ear and touch we sorted out and understood and accepted long ago in childhood. The process was not an easy one. It is known as "growing up". But in the course of time we misunderstood, misinterpreted, neglected, overestimated, corrected and reappraised these impressions until they became such a part of us we could take them on trust. If the light is green, you can cross the street without being knocked down by a car. If you gently tickle a kitten behind the ear, it will purr. If you turn to your mother for love, you will receive it. Now our adult senses automatically relegate the familiar impressions into a solid and predictable backdrop and concentrate on dealing with the new impressions crowding in on us at centre stage. The senses, burdened and harried by the continual demand to absorb, organize, and react, have perfected astonishing powers of discrimination. New and old, known and unknown, clearly perceived and vaguely felt — the input is vast, jumbled, nonsensical, truth-revealing. Somehow, we make sense of a lot of it, but no wonder we feel satisfaction, even complacency, at encountering the familiar and welcome its security.

The basic contact of footsteps on concrete, the taken-for-granted coordination of eye and hand fastening the buckle of a light summer handbag, the narrowing of my eyes against the glare of the sun. All these actions had been reassuring and comforting for their reminder of skills mastered and stages outgrown. Then why now couldn't I feel the rough patched pavement through the thin soles of my sandals? Why did the effort to buckle the handbag strap require a conscious effort to force eye and fingers to work in unison? Why would I find my eyes turning, widening, staring directly at the sun, the protective instinct to shield them from its rays

lost or forgotten?

What happens if the familiar becomes new? The contact between senses and mind, between what the eye perceives and the mind perceives it to be, becomes unreliable, even deceitful. Skills slowly and painfully learned are unlearned — the fingers move along the frets of the guitar in arrhythmic spasms, out of sync with the listless plucking fingers of the right hand. The eyes dance up and down but seldom with the line of print. Previously lucid and flowing sentences striving for exactitude break down into disjointed, meaningless phrases and kindergarten vocabulary. Recite A B C D 5 6 7 8 20 25 30 35 40 round and round — that's safe, that's still known, that you still possess.

A sense of urgency makes me quicken my step, but my pace slackens as the slope grows steeper and I have to pause and catch my breath. I peer up hopefully to the crest of the hill. Maybe an explanation lies there. The mansion is compromisingly grey. Even the rough green tiles which cap the square wings have assumed a greyish cast. The local stone had weathered well, but the old house had not aged gracefully and the unloved air which hung about the place betrayed the fact that it was no longer a home, but had been turned into an institution.

The institutional cheerfulness of the nurse behind the reception desk jarred with the institutional monotony of the grey, identical corridors.

"Yes, certainly. Dr. Black's office is in the west wing, fourth floor. Take the elevator on your left."

My muttered thanks elicited a brisk professional smile. Skirting the elevator, I searched for the red EXIT sign and tackled the four flights of stairs. The halls and stairways were full of people, most drifting aimlessly, a few with purposeful stride.

The neat white card on the door of office 404 read 'Free' in a rushed and scrawled hand. I checked my watch. Yes, exactly on time. "Better late than never, better never late." Childhood training dies hard. I knocked lightly on the door. No answer. I was bewildered. Surely help lay beyond that door, but it remained firmly shut. I retired to an alcove waiting-room across the corridor and tried by an effort of will to calm my

pounding heart and slow the uncertainties and fears which churned in my head. The doctor had forgotten the appointment. I was in the wrong place. My watch was an hour fast. As I ran over the possibilities, anger began to surface. Really, this was too silly. I went back across the hall, fixed the 'Free' sign with a determined eye, and knocked firmly. The door flew back on its hinges and a towering bulk filled the doorway.

All I saw was bristling eyebrows and mustaches.

"What do you want?" The bass voice boomed from the hirsute depths. I shrank back and stammered, "Are you the doctor?". "Yes, and I'm busy. Why do you keep knocking? Sit down and wait your turn."

The slam of the door effectively cut short my explanation and apology. Battered and bruised, I ran blindly down the hall like an animal in full flight. The thudding of my heart filled my head and drove out all thought, leaving only the instinctual desire to run. Heads turned incuriously. In a corner of the stairwell, back to the wall, I took refuge. Gradually, I fought down the hurt and told myself how foolish it was to overreact like that. Once again anger took over, misdirected at myself rather than the doctor. And as usual, plodded wearily back up the stairs and took up my station opposite office 404.

Eventually the door opened and I found myself standing across the desk from a large man. He jerked the swivel chair back from the cluttered desk and concentrated on lowering his vast bulk into it. His fingers were stubbly and inflexible, yet he extracted his pen from his breast pocket and adjusted the half-moon glasses with a surprising quickness and deftness of hand. I refused to sit down in the chair he indicated and continued to regard him coolly. "That was really very rude," I said. "Yes?" He agreed, but was only mildly interested. "Why do you put a card saying 'Free' on your door if you're with a patient?" He pried himself out of the chair and lumbered towards the door. "You're right. I forgot to change the card." He reversed it to the 'Occupied' side and regained his seat with some difficulty. "I apologize. I've forgotten my appointment book today and that's made me irritable." The grey eyes look unrepentant. "Won't you sit down?"

The chair was hard and the wooden spokes crisscrossing the back dug painfully into my spine. I leaned forward.

"May I ask what's brought you here?"

"I've had a nervous breakdown."

"Any idea as to what caused it?"

"Too much stress over too long a period."

"What kind of stresses have you been subjected to?"

"I am a teacher." A grunt of understanding.

"How long have you been aware of being under too much stress?"

"Six years."

"How did the breakdown manifest itself?"

"Extreme tension, inability to relax ever, frequent severe headaches, blurred vision, panic attacks, and spells of utter despair. Do you think you can help me?"

"I should think so. Could you come back and see such a rude man?" The hooded eyes lifted for a second and I caught a glint of humour in the searching look. The teasing tone did not disguise the hint of challenge. The combination was irresistible. I didn't hesitate.

"Yes."

"Next Friday at 3:30 then."

The battle had been joined.

But the war had started so long ago. I must have been ten or eleven. Climbing the long flight of stairs of our Victorian house, I suddenly felt different. One part of my mind continued to act as usual, to function normally — to see, to hear, to touch — but another part of it cut out — the part that links us to our surroundings, that enables us to recognize the familiar, to feel a part of our everyday environment. For a few seconds, I felt totally detached from reality, terrifyingly alone. A deep sense of fear followed, which I tried, and soon managed, to shake off, and then things returned to normal. It was all over within a minute or two, an unexplained puzzle.

There were other infrequent but inexplicable instances. One happened the day the military parade came to town, the trumpets wailing, the clarinets tooting, and the bass drums pounding. It was a big event. Band followed band, VIPs passed in long cars and wave graciously. Crowds lined the sidewalks and jostled and craned forward for a better

view. Being still a child, I was thrust to the front of the crowd so that I could see all the colour and majesty of the parade. The skirl of the pipes was heard long before the kilts could be seen. The Scots pipes and drums marched smartly along the wide avenue and stopped, marking time, directly opposite me. The drum major wheeled right, the pipe major struck up the band again, and the entire division began to quick march towards my section of the crowd. Closer and closer they came, the dour notes of the bagpipes mingled with the unrelenting beat of the big brass drum. The sound swelled. It seemed to roll over me. The drum pounded in my heart. The rhythmic steps approached, the heavy military footfalls drowned by the cacophony of sound. Nearer and nearer. The sound filled my head to the exclusion of all else. Then I began to shake, my vision to darken, my temples and forehead to constrict. The tightness in my head brought me close to fainting. I felt weak, hollow, filled only by the strident noise of the band. I stumbled away. My mother asked, "What's wrong? You're as white as a sheet." "Don't know. Feel funny," I answered. I lay down in the first-aid tent, a rough blanket scratching my chin. Soon I began to feel better, more solid, less fragile. I walked the ten minutes home. The incident was closed.

A few years later — a teenager now — and in Germany. A country cottage on the banks of a lake, a pine forest encroaching on three sides. My family is sitting in the living-room, reading, watching T.V., sewing. Suddenly I no longer recognize them as my family. I know their names; I know their faces; I speak to them normally, but they no longer feel as if they're my family. I see them as if I were watching a play and they are actors on the stage. I feel detached from them, uninvolved with them, as if they were strangers. There follows a sense of utter loneliness, so intense and frightening that one wants to run to them, cling to them, make them reassure you of their presence, of their love, of their existence. But one doesn't. One does nothing but wonder at the strangeness of it. One even continues mechanically with the routine task one was doing. After a minute or two, the feeling vanishes as unpredictably as it came.

The peculiar feeling of isolation, of remoteness, of separateness is very profound. It seems to arise from deep inside one's be-

ing. The next time it occurred was a year or so later. I was on vacation abroad and went to the fun-fair. After exploring the sideshows and winning a goldfish at the hoopla stall, I wanted to go on the ferris wheel. My brother and I bought tickets and took our seats. The ferris wheel started with a jerk, began to revolve slowly, and then picked up speed. At first it was thrilling. The other riders screamed with mock fear and sheer delight as the wheel spun faster and faster. Suddenly, I believed I was at home again. The scene before my eyes — the gyrating crowd, the barrel-organ noise of the fair, the sickly smell of pink candy-floss — was replaced by the image of my home three thousand miles away. I could see the furniture in the hall as clearly as if I were there, the polished dining-table, the multi-paned window, the front door opening onto the long, narrow garden. I could hear the cracking of the old wooden floor as I walked across it and feel the dry prickle of the overheated air in my nose. The ferris wheel spun round and round; my brain wheeled with it and distilled clearly the image of home. The motion began to slow, the wheel came to rest. I climbed out of the seat, shaking and shaken. Quickly, my mind returned to normal. My brother noticed nothing. But the fear remained with me, deep, hidden and unresolved.

The periods of remoteness occurred often, but not always, after supper as I stood at the deep sink washing the dishes. As the illness progressed, they began to occur more frequently, perhaps every few months, and to last as long as two minutes. I could find no pattern to their occurrence, no cause-effect relation. They never occurred, for example, on waking. They didn't seem to be directly linked with stressful situations, as they nearly always happened at home and when not engaged in hard mental activity. Sometimes they happened when I was alone, sometimes when I was with people.

Another early symptom was double vision. This was especially pronounced when I awoke in the morning. I could see a faint outline along the edge of the white-painted bedroom door, a line which would broaden or narrow as I squeezed my eyes shut and opened them again, but it wouldn't disappear. It wasn't a hard line; it was fuzzy at the edges and would dissolve at one side at the line. It became sharp and clear in a mirror

image. When I looked closely in the mirror, I could just discern a thin line encircling the reflection of my face.

There were other visual changes too. Colours began to appear faded and drab. Occasionally, one could see brightly-coloured spots moving before the eyes — yellow or blue or red. Night vision became poor. Street lights were no longer bright pinpoints but glowing pools casting wide rims around their centres. At an early stage of the illness, there were times when my vision became unusually acute and clear, when, for a few moments, I could see fairly well without glasses. Often the eyes pricked, felt dry and ached. A faint white veil seemed to cover my eyes. The whiteness looked textured, grainy.

There were other sensory changes. My ears would sometimes ring faintly. Sore, tender patches appeared on the ears. They would come to a head, bleed if touched or knocked, then disappear before reappearing in the same or another spot. The senses of smell and taste faded, though occasionally one's mouth would fill with an unpleasant taste. When touched, the skin felt rough and damp. One's bones ached to the marrow. The limbs, the torso, the head felt hollow. There was an inner tremor in the arms and legs which doesn't show as physical shaking. I could no longer wriggle my toes or curl them under. I couldn't make a fist or flex my muscles. The muscles felt rigid, immobile, locked into position. My head was tender and sore to the touch. Brushing my hair was uncomfortable.

Of course, the symptoms weren't all so dramatic. Fatigue was always there. It began as tiring easily and quickly, but alternated with bursts of energy. As a child, I would begin to feel nauseous after running around playing or riding my bicycle for a while. Even as a child I would sleep for very long stretches and would not wake until ten or eleven o'clock in the morning. During childhood, I had to be bribed to eat by the promise of hearing a story. I was always too thin, and ate poorly. I would get ravenously hungry every few hours, but then would be sated after a few mouthfuls. I always woke with a prodigious appetite.

School was a continual ordeal from the beginning of high school. The mental and physical strain, the long tiring day, the 3/4 hour bus rides to and from school, and the anxiety to do everything one was told left me feeling worn

and frail. The daily routine was a great strain; so any extra demands, even one as simple as an invitation to a friend's house for lunch, would provoke an emotional and physical reaction. It was as if part of me were objecting strenuously to any further demands, yet this didn't make sense. Why should the thought of an unimportant social occasion reduce me to a state of terror? Why should simply leaving the house be such an ordeal? Emotion was at war with reason. Common sense, rational analysis, a sense of proportion — all these weapons I deployed consciously to fight the enemies — tension and anxiety. But emotion wouldn't always yield to the assault of reason. For years the battle went on, a war of attrition, a stalemate.

There were periods of truce interspersed with the heavy fighting. I still remember the ecstatic relief on the last day of high school when I realized I'd never again have to climb the long flight of steps leading to the third-floor classroom. The years of college suited me better. It required shorter periods of activity, of mental concentration and intellectual stimulation. Intense periods of work could be broken by periods of less mental stress. But there was never enough physical or emotional energy left after work was done. Social life was minimal. Shyness and tension ruined potentially happy social occasions.

At first, summer vacations, free of work and stress, were a time of relaxation, of recouping of forces. But as the illness progressed, relaxation became impossible, even when one was not under stress. The tension became so much a part of one that it was impossible to throw it off. At the beginning, only stressful situations like driving lessons and tests, visits to friend's houses, and trips away from home produced tension. But over the years the tension became permanently embedded. It didn't need a stressful situation to trigger it. Every situation was stressful.

Problems with family were chronic. Initially, I was the only one in the family to sense any problem. The others seemed unaware of anything wrong. One close family member had had a nervous breakdown as a teenager, when I was still a child, but things continued fairly normally. Superficially, all seemed well. But I sensed that underneath the surface something was terribly wrong. But

for years I kept it to myself and went on with the business of trying to make a separate life for myself and build some kind of future. After all, since no one else in the family seemed perturbed or saw anything unusual. I must be wrong. The fault must lie with me. It must be "all in my head." But stresses and strains in the family relationship continued — the parents' need for the child's dependence conflicting with the child's need for independence; the parents' desire for the child to have a better life than their own and to live for and through their children conflicting with the child's inability to come up to the standards of behavior and achievement set by the parents; the conflict between loyalty to the family and the need for self-actualization which may well call for disloyalty to the family's ideas and way of life; the pull between duty to others and duty to oneself; the desire to help relieve the misery of the family member in distress, and the impossibility of doing so — in short, all the usual problems of growing up, tackled with the belief that things could change.

But that was the trouble. Outwardly, nothing did change. No tragedies, no dramas, no histrionics — just a steady erosion of strength and hope. One disintegrates from within. You can paper over the cracks for years so that they're apparent to no one but yourself. You strip your life down to the barest routine and concentrate on continuing, on keeping going. It seems so important to keep going, but all you want to do is stop. All activity has to be cut to the barest minimum, as your stress toleration level falls. This is very difficult when you're young and want to experience everything, good and bad. The result is anger. Anger at your mind and body for being too weak to respond to the will. For years an effort of will held the tension in check. But in time, as the illness took over, the will became less effective in combating emotion.

Several years of employment and then further study ensued after leaving college. Then when I took a very stressful job, the precarious balance began to tip against me. All my energies went into the job, merely to do it competently. Getting to work by 9 a.m. was difficult in itself. By mid-day I was fighting exhaustion, alleviated only temporarily by a cup of coffee and a sandwich or cookie. I began to feel dazed as I continued

automatically day after day. My mind, which until then had been clear and incisive, became muddled and confused. It worked reluctantly now. I had to drive it on. I felt things begin to slide away from my control. I was forgetful and absent-minded. My eyes had trouble focussing. The nagging pain in my forehead or down the side of my face became a daily fact of life. I wondered vaguely if other people felt as ill and unhappy as I did and if so how they could work efficiently. But the worse I became, the more I was determined to resist, to fight, to get the better of "it". Because there was no reason to be like this, I would not give in.

Shortly before Christmas as I climbed the hill to work it crossed my mind that I must be very ill. I'd never felt this exhausted before. It took an enormous effort to walk, even more to stand. I went to bed and stayed there for several weeks with viral pneumonia; then a cracked rib from coughing. I felt a sense of relief at the diagnosis. I was legitimately sick and could stay in bed and do nothing. The recovery was slow and incomplete. I kept delaying a return to work until finally, in February, I started back to work again. Two months later I found as I tried to get out of bed in the morning that I simply could not get up. My limbs wouldn't obey me. I lay quiet and helpless and gave in.

Then began the round of doctors: a G.P., an internist, a psychiatrist. (The initial visit to the psychiatrist is described at the beginning of this article). Then followed days, weeks, and months of physical inactivity but mental and emotional activity of such intensity that it left me drained. I was incapacitated by exhaustion, depression and terror. A strange hopelessness and despair mingled with a driving sense of urgency to find out what was wrong and treat it. But visits to the G.P. and internist found nothing seriously wrong physically, but diagnosed nervous breakdown. Still my body gave me increasingly urgent signals of distress that could not be ignored. The symptoms were many and painful, demoralizing in their persistence and strength. The ill-temper which had always been part of my make-up became permanent. Well-meaning but useless attempts by my family to help were rudely rejected, as I knew they were of little use. Nearly a year of weekly visits to the psychiatrist for psychoanalysis made no appreciable

difference, but to confirm in my own mind the insolubility of the problem and the inadequacy of the approach and treatment used by the psychiatrist. Psychoanalysis didn't help, but at least it didn't harm. One psychotropic drug for depression (anafranil) did. I took one dose and felt as if my whole system had been poisoned. The other drug prescribed for me (mellaril) had a soporific, elating effect, but I believed that it only masked the problem, treating it superficially and failing to get at the root of it, since many of the physical and mental symptoms persisted. When I told the psychiatrist this, he recommended that I drastically increase the dose of the drugs. This I refused to do, as a higher dose would have reduced me to a zombie-like state, unable to function at all.

Emotion took me over. Not good emotions like pleasure, a sense of security, well-being, comfort but bad emotions like anger, hopelessness and dread. Emotion was always experienced in its extreme form: apprehension was terror; despondency, despair; sadness, grief. As the illness worsened and daily life became nearly unbearable, the capacity to imagine, to fantasize increased. At this time something very good came into my life and I seized on it and milked it for all it was worth. I daydreamed a lot of the time, was abstracted. My mind clung to this positive element. It became a refuge from the mental and physical pain, a bulwark against the reality of the illness. Left to itself, my mind would rise to leave behind anguish and exist on a fantasy level in which there was only love, tenderness, kindness, goodness, and serenity. I was always conscious of the two juxtaposed levels of consciousness and used the situation to draw strength from the fantasy world to endure the "real" world.

Two years passed, spent lying in bed or on a couch for hours a day, doing the minimum of routine tasks, preparing meals, shopping, etc. My mind could not rest, though I slept ten to twelve hours a night. I woke up feeling mentally and physically battered, as if I'd been beaten with a baseball bat. The mind didn't seem to rest at night, though I never dreamed. I would long for bed-time and go to bed at 9 p.m. in the hope of finding oblivion in sleep. After a few hours I would sink into a deep sleep. It took me a long time to rouse myself when I woke in the morning. Before I was fully awake, I would sense a black weight

fall over my mind and my heart would constrict as I wondered how I could get through another day. As I got worse I began to be terrified of falling asleep, in case I didn't wake up again. I was afraid of slipping away while asleep because I thought while I was asleep I couldn't apply the willpower needed to stay alive. My body felt as if it were struggling to exist. Even when lying motionless my heart would thud and swell, filling the hollow chamber I felt inside. The pulse was always rapid. The doctor diagnosed tachycardia, but couldn't explain it. Waking up in the morning was a long struggle back from a dark, featureless existence. It was as if my whole organism had shut down during the night as much as possible functioning just enough to ensure survival. "Gearing up" to get going in the morning meant consciously dragging myself out of an empty blackness, which exerted such a pull.

The headaches were constant and intense. Sometimes, they were sharp and splitting down one side of the head. More often, they were the kind that felt as if my crown and forehead were being crushed in a vice. They became such a part of my life that I ignored them. But they were accompanied by a permanent painful state of mind. My body and mind felt exactly as if they were being broken on the rack. They had been pulled and strained beyond endurance and broken, yet still the torture went on. As my body functioned less and less efficiently, my mind picked up speed, round and round, focussing on problems and trying so hard to solve them. But the problems were insoluble at that time, some because of their nature and some because I hadn't the knowledge then to solve them. But still my mind worried at them, driven by an unremitting sense of urgency, of extreme need. I couldn't lay aside the problems for a minute. They pressed in on me. There must be a way out if I could find it. Ideas would tumble in one on another, but when analyzed, proved worthless. But underlying all the effort was the realization that it was wasted, that I didn't have the key to solve it. Neither did the professionals that I consulted. Reassurances as to my sound physical state calmed me momentarily because I wanted to believe them. But at bottom I knew that the truth was that I was deteriorating mentally and physically. There were periods when I could ignore the truth,

when the tranquilizers gave me false comfort and masked the physical distress. But as I lay on the couch battling with all my will power to hang on to my mind, I knew I was fighting for life. Physical debilitation made it a tougher battle. Weakness and exhaustion left me only with my will to fight off insanity. Climbing a flight of stairs was a major undertaking that left me panting, my head swimming and a film of whiteness descending over my eyes. Bending down to pick something up off the floor left me dizzy and reeling, my head painful and hollow. I became very sensitive to the weather conditions. I felt worse on grey days, slightly better on sunny ones. Sunlight, or any bright light, hurt my eyes. My feet and hands were always cold and clammy whatever the weather. No amount of heat could warm my feet and ankles. Panic attacks which woke me during the night left me drenched in sweat. My vision was clouded and double.

The mental deterioration was frightening too. I could not read a newspaper article or follow the simple plot of a T.V. drama because I would not be able to concentrate sufficiently to make sense of what I was seeing. My eyes would dance on the print; no amount of effort could get me to extract the meaning from the sentence I read, no matter how many times I reread it. My vocabulary shrank. I could not recall the words I had known for years — words which could express complex ideas and fine shades of meaning. My ability to speak a second language, which had been adequate, practically disappeared. My voice would trail off half-way through a sentence, the thought lost, the word needed inaccessible. I tried to wheedle it out of my mind, but couldn't; it remained embedded in a corner I could not reach. I thought that senility must be something like this, but it was ridiculous to think of myself going senile when I was under thirty. No longer capable of complex thinking, I became childlike. I longed only for peace and for more time. But there was always the devastating feeling that time was working against me. That there was no time left, that a solution must be found immediately.

The torment was unrelenting and drained me totally. I had used all my reserves and now they too were gone. All demands that lay outside my body and mind had to be ignored. All my strength had to be harnessed for the continual inner struggle. This meant, for example, that I

only answered the phone if I felt I could cope with the demands the person at the other end of the line made. Listening to people, let alone talking, was exhausting and left me at the end of my strength, sweating with the effort. I talked little because I had little strength to talk. This left my family and friends, who had known me as talkative, puzzled.

An unmistakable symptom is the loss of a sense of humour. Nothing strikes you as funny any more. You lose the ability to extract the humour from situations. This is an important loss, as it means you've lost a weapon that helps you to keep a sense of proportion. In the same way, you lose any sense of security or stability, which, normally, also contributes to keeping things in proportion. You feel assailed from within and without. You can no longer be sure of your body — of its strengths, of its reactions, of its efficiency. Nor of your mind — which lets you down continually. Memory, thought, concentration, and language are all impaired. And you realize, but cannot comprehend, these losses.

Nor can you make sense of the personality changes which the illness imposes. For example, you want to go to see a new movie. Why then, does the mere thought knot your stomach and make you uneasy? People tell you that you don't "seem yourself." In fact, you're not yourself, not the person you really are inside — you're externally the person the illness makes you. The illness boxes you in, prevents you from expanding, denies you the chance to develop as you really want to. The illness restricts you — your experiences, your potential, your desires. So you become cramped, frustrated, resentful. You take the "easy" way out and fit your life into the limits set by the illness. In the process of throwing off the illness and moving toward recovery, you experience a tremendous (and novel) sense of freedom.

When depressed, the mind becomes incapable of perceiving anything good or positive. It is simply swamped by the presence of the illness which is entirely negative. Responding to anything good, even when you experience it, is impossible. You can perceive it as good, or beautiful, or positive in an intellectual way, but it has no emotional impact on you. Negative emotions

have taken you over completely. I was lucky. I chanced upon one good thing which I could appreciate, which managed somehow to penetrate all the doom and gloom. And, because of the illness, I became obsessed with it, but at least an obsession with something good and healthy, and this helped a lot. Obsession with something negative or harmful would have meant the end.

I was well aware of how ill I looked. I hated seeing myself in the mirror, the eyes, dark and clouded with suffering, ringed with black circles, suspicious and intent. My hair, dry, lifeless, impossible to curl, streaked with grey. I hated my helplessness. That most of all I resented. I hated the weakness, the limitations the illness imposed, the person I had been forced to become. Because I had no power to be otherwise, much as I tried, much as I wanted to be. I hated my vulnerability — to be moved to tears by the latest pop ballad, to anger by the thoughtlessness of another person, to despair by the sickness of a family member, to terror by a visit to the doctor. I tried hard to cultivate optimism, to count my blessings, to say things aren't so bad, but unfortunately I demanded evidence and there was none on which to base hope and optimism. All I could perceive was pain, desolation, and hopelessness. Except faith. Faith I could still dimly discern. It remained elusive, unclear, unattainable. But I knew it was there. And that alone brought me through the worst. When all else had gone — inner resources, professional trust, personal strength — faith remained. And faith was enough.

The turning point came unexpectedly. I'd collapsed completely again. The doctor suggested a "specialist." I agreed immediately. He gave me the address. I had to get there fast. Somehow I managed to get dressed. I was determined to get there right now — there was no time to be lost. My family came to my apartment and tried to dissuade me. Why didn't they realize how urgent it was? How I would do anything to be relieved of the pain? I tried to walk to the door of my apartment, determined to get to the doctor's myself. I was too weak and collapsed on the floor. Crying and screaming, I begged them to take me and started crawling towards the door. They still protested — I was in no state to go anywhere, they said. Why did they have to cross me on this too? I knew better than

they that I desperately needed help and needed it now. Why did they have to argue? I started crawling out of the door. They helped me up and agreed to take me. On each side they held me up and I walked outside and got into the car. My heart was pounding, but I felt calmer — if only I could get there in time. The office was open; the secretary concerned and helpful. I sat on the stairs outside the waiting room, avoiding the tension I had known for so many hours in so many doctors' waiting rooms. The doctor couldn't see me that day, or the next. I had to wait two weeks. I came home. It was impossible. I couldn't hang on another two weeks after having waited so long. Somehow I did, sustained for once by hope.

At the first appointment, the doctor said little. I took a long list of symptoms with me written on a card, to help with the diagnosis, so I thought. But he showed little interest in the card, and just asked me to tell him the problem. Haltingly, incoherently, some of the story came pouring out. Could he help? Weekly visits, a megavitamin regime and diet were his suggestions.

The initial diagnosis of hypoglycemia came as an enormous relief. After years of trying, first by myself and then with the help of the medical profession, to find the key to the baffling set of symptoms, a diagnosis came as a great relief. Here at last was the solution, here was somebody who could diagnose the trouble, and even treat it. The road to diagnosis had been a long one, and had been marked by many stages. First, the stage of ignoring the symptoms because you don't realize that they are symptoms. At one point, I had told my family of the feeling of depersonalization, and both my mother and my brother said they had experienced the same thing themselves. So I concluded that the feeling was one common to everybody, like *deja vu*. I never suspected the truth — that in fact my mother and brother were suffering from the same illness.

So there would be a spell of reassurance until the next recurrence of a symptom, and the attempt to solve the puzzle would begin again. The second stage was a gradual acknowledgement that the symptoms did indicate an illness. While some of the symptoms would appear and disappear others became permanent. The physical symptoms were alarming, but the emotional symptoms



were even more baffling. As my energy level dropped, I felt my personality changing. I had always enjoyed talking to people and been fairly sociable; now I had neither the desire nor the energy to talk. I became quiet and withdrawn. I had had many interests; now I was apathetic, indifferent to things which had previously interested me. I had always been critical of other people; now I found fault only with myself. Everybody seemed stronger, smarter, happier than me. One didn't have the energy to sustain one's own optimism, to think positively, to visualize a happy future. My mind could envisage only misery, ugliness, and sadness.

The next stage was the one of seeking help, of trying to find a treatment which would alleviate the symptoms. This stage took two years and was an emotional see-saw as hope alternated with despair, as it became evident that each treatment tried made little headway against the illness. So finding my way to a doctor who seemed to understand the illness was a tremendous relief. Here was a willing ally who would help me fight this illness.

So began another long struggle, punctuated by many setbacks and much pain. The diet was unpalatable and difficult to follow. I immediately cut out sugar and white flour from my diet and lived on meat, fish, vegetables, fruit, and dairy products. The first two years were spent under the tyranny of food. Initially, I woke two or three times a night ravenously hungry. This despite the fact that I'd eaten a large meal every two hours of the day and just before retiring. I yearned for sweets; my body and mind were in great distress as they adjusted to the diet. My energy was so limited that grocery shopping, cooking and eating were my main occupations. All trips out of the house had to be fairly short (under one hour at first) and carefully timed so that I set out just after having eaten and took food with me so I could snack often. I was acutely conscious of the way in which simply existing took up energy and I had to hoard it carefully. The daily routine was dull but exhausting. I awoke late, at 9 or 10 a.m. At first I kept a drink of orange juice by my bed to drink as soon as I woke, so that I would be able to get up fifteen or twenty minutes later. I ate breakfast immediately and then lay down on the couch or bed until I felt stronger. Often this took

the rest of the morning; sometimes it took all day until the evening. Just getting bathed and dressed, making the bed, and cooking the meal would use up all my available energy. I couldn't push my body or mind to do anything; if too much was demanded of them they simply refused to function. Going to the supermarket took a great deal of energy — walking, standing, reading labels on the grocery items, choosing, deciding, remembering the groceries needed, lining up at the checkout, counting the money, waiting for the bus home. The demands on my energy seemed enormous. At first, it was an intricate balancing act. Balancing food intake, which was large, with energy output, which was minimal. For the first few months there seemed little improvement. The effort didn't seem to be paying off. But then tiny signs began to appear. I could stand up longer without beginning to feel lightheaded. The pain in my head was less intense. I could read a sentence in the newspaper and make sense of it. I could follow a T.V. plot. All these signs of progress were interrupted by many setbacks. Two steps forward and one backward was the pattern of recovery. Inching forward to health was a slow process which at first demanded all one's attention and time. Then, gradually, it became possible to forget the illness for a while, to turn my attention to other things.

The treatment began to take effect, first to arrest the decline, then to stabilize, and then to promote an improvement. As mentioned above, the diagnosis of hypoglycemia came as a relief. The later diagnosis of undifferentiated schizophrenia was unwelcome, but accepted with a mixture of disbelief and resignation. Reconciling oneself to having a mental illness is not easy, but as the worst symptoms subside, the illness becomes less overwhelming, more manageable, and hence of less importance; it begins to yield up its tyranny over your life.

The process of recovery, like the process of falling ill, is one of many stages. In fact, by and large, it is the same process in reverse. The symptoms do not all disappear in the same order in which they appeared — the process of recovery does not reproduce the process of falling sick exactly. Nevertheless, the overall pattern is similar. I felt an immediate improvement with the first dose of vitamins. Even in the first day or two I felt

the calming, soothing effect of the vitamins. They seemed to go to the root of the problem, to the fibre of my mind and body, whereas tranquillizers seemed to have only a superficial, soporific effect which left untouched the inner pain and restlessness.

Working up to taking a total of over 30 vitamin pills a day was not easy. At first, they seemed to cause stomach pains; at the very least, they caused heartburn. The niacinamide was the hardest to take, as even a small dose caused nausea. But very gradually as I persisted and continued to take the vitamins despite the troubles they caused, I began to find that I could take them without any problems. It was impossible for me to sort out the symptoms caused by the illness and those that may have been related to adjusting to the vitamins, so I gave up trying to figure it out and just kept taking the vitamins.

The diet, too, was demanding and called for experimentation in the toleration of different foods. As I eliminated the foods I was allergic to from my diet, more of the symptoms began to subside. Certainly, over the months and years, the symptoms became less severe and less permanent. For example, after days and weeks of depression, even after treatment had begun suddenly, for no apparent reason, the depression would lift for a day or even two. Then it would come back again, but as time went on in less severe form. Then the good spells would lengthen, the bad spells shorten and finally become infrequent.

Similarly, the headaches became less painful and less frequent until I could go for a whole day without pain. Physically, I could feel myself growing stronger. My body changed shape. The muscles in my arms and legs developed, flexibility returned. My fingers and toes regained their dexterity. Over four or five years my vision cleared, and returned to normal. My thinking became clearer, my memory more reliable, my concentration deeper.

The changes deep inside are harder to convey. The most important is the new-found feeling of security, of stability, of safety. Another is an almost physical feeling of solidity at one's very core — so different from the hollowness, the vacuum experienced during the illness. Another is the sense of inner freedom, freedom to be oneself. And finally, the hard-won sense of confidence in

oneself that comes from having fought a hard battle and not been vanquished.

Returning to a workaday life was the next stage of recovery. Working from 9 to 5 was impossible for me — the mental and physical demands were too great. But setting up a routine of a few hours' regular work a day out of the home gave me something to build my life around. The first time I tried to do this, about seven months after starting treatment, it was too much for me and I had to give it up. About a year later I tried again and this time managed to keep going. This stage of recovery required a lot of persistence and self-discipline. Since I felt unwell a lot of the time, everything demanded a good deal of effort. It would have been so much easier not to make the effort and to stay home. But as my energies and interests revived, it began to feel dull at home. Sheer boredom forced me to make the effort to go out to work. Feeling bored was an encouraging sign of recovery. When I was really ill, I was too busy fighting and enduring the illness ever to feel bored.

Even so, this stage was a tricky one. After so many years of being strained beyond endurance, of forcing myself to do things I didn't want to do, and of doing more than I was capable of doing without severe stress, it felt good to have no responsibilities regarding work. I was reluctant to take on again the problems which inevitably arise in any job. But what was the alternative? To stay at home permanently and live a cramped, uninteresting, and arid existence? So, really, the choice was made for me. I had to try to get back into an ordinary, workday world.

Planning each working day took a lot of thought because I had to think ahead and organize the day around the demands of the illness. For example, I felt worse in the mornings, so I planned to work afternoons or evenings. Meals and frequent snacks had to be thought out ahead of time so I wouldn't break the diet when I suddenly got hungry and fuzzy-headed. I planned short spells of activity and frequent rest periods. I measured my productivity not by the amount of work I got through but by the number of hours of work I put in. I simply did what I could and then stopped.

Very gradually I found myself able to do more without reaching the point of exhaustion. Progress was still uneven. One day I might feel quite well and accomplish some-

thing; the next, for no apparent reason, I'd feel ill and unable to do much. But again, progress became more even as time went on and the wasted days became fewer and fewer.

Of course, problems remain, but in contrast to past problems, they are relatively trivial. Tension always had to be coped with somehow. But strategies can be learned and beliefs held which keep it in its place. Energy can still be a problem; activities have to be planned so that they make reasonable demands on one's energy level. Sleep can be elusive; it is often broken and light, but it is sufficient. Thinking can become confused, usually as a result of psychological stress or mental tiredness. Concentration has never completely regained its earlier level, but it is adequate for most of the demands of daily life. Depression can still occur, but is shortlived; it can often be warded off now by a night's sleep. The feeling of remoteness, of isolation seldom occurs now, and only to a mild degree and for a few seconds. But most important, life is now worth living, not because of what I do or what I am but because I am free of pain.

Now that the pain — physical, mental, and emotional is relieved, energy can be channelled into living a more normal life. In my case this means pursuing a career in teaching and research. Having finished the Master's study. I enrolled in a Ph.D. program, which I will soon be completing. Then I intend to teach in college or university.