Symptoms

Louise Aronson

She drinks lime switchers by the pool while her husband swims through a ship sunk by Blackbeard in the days of the Atlantic buccaneers. Alcohol abuse, her husband, the psychiatrist, would say if he could see her now. But he would be wrong. She knows, because she’s a doctor too. More of a doctor than he is, in fact, since she treats the whole patient—body and mind—while he sits in his chair talking, labeling, judging, then talking some more.

When someone she knows approaches—another wife, occasionally a husband—she closes her eyes. Even in the shadow of an oversized sun umbrella, her pallor glows, startling and unfashionable. Brown hair hangs below her scrawny shoulders in careless wisps, but closer to her scalp it too lacks color. An inch above her ears, gray meets brown at a sharply demarcated line like the place on a hillside marking the path of a recent, all-consuming fire.

She looks at her watch and smiles. To constitute abuse, the dysfunctional relationship to the substance must be present for at least one month. She sips her drink. They’ll only be here another twelve days, twenty-two hours and thirty-seven minutes. Then she’ll stop.

The psychiatrist has come to the island for a medical conference on post-traumatic stress disorder, and his wife—as she has come to think of herself now—is accompanying him. He has been preparing for months, comparing the brain scans of Gulf War veterans with those of healthy civilians, rape victims, middle-aged Cambodians, ancient Jews, young Somalis. Here in paradise—the brochure promised unrelenting sunshine and resplendent blue waters, but also escape and the ability to anticipate a guest’s every need—her husband disappears for three hours each morning and two hours each afternoon, emerging from the grand ballroom over-stimulated and horny with triumph. She waits in their room as if stranded, responds against her will, lying like a corpse on skin-soft sheets, washing slowly when it’s over. He invited her on the scuba cruise, but she won’t go into the ocean any more than she will get on a plane. Generalized anxiety, he argued. The unrealistic or excessive worry about two or more life circumstances for at least 6 months.

They had traveled by cruise ship. He lost an extra week of work. She didn’t, because when they made the booking four months ago, she’d already quit.
For twenty-seven years, she worked in a community hospital.

Muni, they called it. Also—half joking—The Commie. Her husband’s University Hospital colleagues, she knew, sometimes called it The Death Star.

Call nights, her pager went off every twenty minutes. She got called about high fevers and low blood pressures, about slowing hearts and racing minds, and too often—once a week, sometimes every night for a week—about a death.

One of those nights, around 2:00 a.m., her husband said, “Effective supervisors set limits.”

They were in their new bed at the time, with its Italian hardwood frame and pricey French linens. She turned on the light and he covered his face with a pillow.

“This isn’t someone’s neurosis,” she said. “It’s multi-system organ failure.”

“You’ve misunderstood.”

“Of course. I’m not the famous expert.”

He lifted one corner of the pillow. “I was simply suggesting—”

“People get sick,” she told him. “They try to die.”

He let the pillow fall back over his face. “And even then, they fail.”

That anecdote, she knew, gave a misleading impression of her husband. Still, it happened.

At least she came on the trip. “Plane or boat,” their only child, a daughter, had said to her father, “no way am I going on your so-called vacation.”

An ebony man in white shorts and white gloves brings the psychiatrist’s wife another lime switcher on a tray that may be real silver. As he approaches, she smells his sweat and cologne and turns to look.

A green-gray blur, a hummingbird, hangs above the bougainvillea. A child squeals in the pool. The child is not her child. Her child is older now and refuses family vacations. Her child cheats on tests she could ace without studying, simultaneously achieving social acceptance and academic mediocrity. Her child wears a ring on the fourth finger of her left hand to honor a vow of celibacy and burns books she considers untruthful or impure but thinks nothing of piercing her nipples, nose, labia, and umbilicus with cheap silver hoops and beaded baubles.

The ebony man hands the psychiatrist’s wife her drink. The ice-filled glass contains a subtly jaundiced, not-quite transparent liquid that burns going down. It gives her gooseflesh. It warms her, then makes her shiver.
For years—five-and-a-half decades, her whole life—she thought like and love were parts of the same emotional spectrum. Now she knows they exist on separate tracts, ones which periodically intersect but don’t necessarily run parallel.

The ebony man wipes condensation from the base of his tray. He has a scar on the side of his neck that emerges, thick and pink-brown, larval and accusing, from beneath his shirt collar. The psychiatrist’s wife wants to ask where he got it and why he doesn’t do more to conceal it, but this is the real world, not work, and the answers to those questions are none of her business.

“Not to worry,” her husband had said. “A man quits and the word that goes out is nervous breakdown. But a woman? She’s applauded for her devotion to family and openness to innovative and alternative career paths.”

Symptoms she’d developed in recent years:

1. She knew the phone numbers of a patient’s four sons, by heart.
2. Families wanted to talk to her twice or even three times daily, and she didn’t mind.
3. The nurses called her even when the question was about another doctor’s patient.
4. She started telling patients and families about similarities between her life and theirs, as if what was going on between them was a friendship.

Years earlier, already a doctor but not yet a mother, she’d gone to art openings, guerilla theatre, readings of playful postmodern novels, the sorts of events where technique and interpretation mattered as much as outcome. “The thing about him,” a critic once said of a writer who lived a long, full life but wrote again and again about a certain personal trauma, “is that he doesn’t shrink from the travail of understanding, even when no true understanding can be found. With each effort, he tries to come at the same material in a crazy new way, as if by doing so he’ll eventually make sense of the inevitably tragic ending.”

But another night there had been an artist who’d spent her career exploring her life and fantasies using soft woods and pliable metals, found objects and slivers of colored glass; she created and recreated, until she could no longer distinguish autobiographical fact from fiction, until she believed she’d tasted
failures she’d deftly eluded and missed the rapturous wails and tiny tufts of
darkly bristled finger hair of men she’d never actually slept with.

She’d crossed countries off the list: “Iraq, Afghanistan, Lebanon, Sudan,
Israel, Eritrea, Nepal, Iran…”

“Hel-lo!” her daughter interrupted. “Is there anywhere I can go this
summer?”

“If you would just please make an effort,” the psychiatrist said at the end of
their first full day in paradise.

They were in the bar then: indoor-outdoor, thatch-roofed, wall-free,
calypso music coming through invisible speakers. They were watching the sun
drop through a mango-berry sky onto a slick flat edge of ocean that made the
world seem at once finite and limitless.

His colleagues scanned the crowd as they transitioned from the afternoon’s
passive learning to poolside evening cocktails or, somewhat less steadily, from
the tall wicker barstools up the two steps to the open-air, ocean-view dining
room. The glances of more than a few lingered on the psychiatrist and his wife
while they pretended to look for an errant child or a waiter.

“Perhaps if you tried to articulate,” he said, speaking in the same wounded
tone he used to say, You’re drinking again or, She’s my daughter too.

She snorted. The way he spoke. The affectation, the absurdity. He’d spent
one year at Cambridge. One year, thirty years ago. And it hadn’t even been a
Fulbright—just an ordinary year abroad.

That made her smile.

“What’s funny?” he asked.

She looked at him. She knew she was behaving badly. “Nothing,” she said.
“Not one little thing.”

After her second switcher, the psychiatrist’s wife signals for the ebony man.
When he reaches for her glass, she holds it up, then doesn’t let go.

“How many of these do you think one person can drink?” she asks.

He squints, as if she’s suddenly out of focus, but neither releases the glass
nor pulls it from between her fingers. And so, their hands nearly touching,
she tells him that she’s drinking because her father recently died, writhing
and grimacing in intractable pain. Gunshot wounds, she says. And: the wrong
place at the wrong time. The ebony man lowers his eyes and shakes his head.
He mumbles something she can’t understand, then slides the glass from her
grasp and vanishes with it, only to reappear seconds later with a new one.
After her third switcher, she tells him that she got it wrong, that in fact her father died by drowning, pink-tinged fluid filling his lungs, thrashing and gasping in a way she can’t forget, the walls of his damaged heart flaccid and unable to pump.

The ebony man puts a hand on her shoulder so quickly, so briefly—like a fly on a too-hot light, the flick of a lizard across a wall—that she isn’t sure it happened. And so she tells him that she got it wrong again and that what really happened was this: her father died well, calm and comfortable, and that she, his daughter, was present both in the traditional physical sense and in the more modern and spiritual version of the word.

But none of that is true. Though she attended each one of those deaths and too many more, her father is not merely alive but well, a nimble, athletic eighty-two, still working three days a week, still turning heads, and it’s the psychiatrist’s wife who is uncomfortable, writhing and drowning in some modern and spiritual way.

She and the psychiatrist dated in medical school. He was handsome and smart and, unlike her other boyfriends, listened to what she said, thought about it and sometimes days or weeks later, commented in an understatedly supportive way. But that wasn’t what she wanted back then. She wanted someone who took charge, someone driven and decisive. They split up during residency, married other people—she a surgeon, he a psychologist—divorced, and then, united by surprise at the smallness of their lives and achievements, married each other just in time to convert one of her last viable ova into a daughter. That was when he took the job at University Hospital. “For her,” he said lifting their wailing infant up over his head, “so she’ll be proud of us and ambitious for herself.”

In those early years of their marriage, busy with diapers and play dates, she hardly noticed as her husband began amassing awards and publications, responsibilities and prestige. What she did notice was the pannus which seemingly overnight obscured the near-sculptural wonder of his abdominal musculature, the phone call from the daycare center when their daughter waited forgotten long after the drop-dead hour on his day for pick-up, his impatience with her new, young, and not terribly accomplished but unfailingly supportive friends from the local parents group.

“Oh, please,” her daughter said when they discussed where she’d stay during her parents’ Caribbean absence. And then, pulling her jeans below her pudgy hips and peering between strands of unwashed magenta hair into her mother’s face, “Like my plan for the three weeks you’re gone, yo, is to bring home some
totally fly guy, hook up, knock boots, and let the baby gravy swim, so that when you get back we can do some serious mother-daughter bonding down at the hoovering clinic. You feel me?"

People made assumptions. They assigned values. She knew people who said Holocaust as if, in recent human history, there had been only one. Newscasters and journalists said “the tragedy of September 11, 2001” and meant New York City, as if those who that day succumbed to pneumonia or heart failure, to malaria or malnutrition deserved less sympathy because of the quiet and unoriginal way they chose to die. In the cruise ship ballroom, she winced as her husband said his study of a promising new drug showed negligible mortality, as if one death in four hundred was the same as none.

Signs:

1. Dreams in which her pager flashed a phone number and then the three digits 9 and 1 and 1, and she raced from elevator to elevator, then down one empty corridor and along another, into and out of every hospital and clinic she’d ever worked in, unable to find the right patient’s bedside.

2. The way a hand on her forearm for whatever benign reason provoked for her both an unwarranted startle and memories of a different hand, warm but insistent, and with it a voice saying stop, saying that’s enough, saying you can’t win ‘em all…

3. The ebb of her sanity and the flow of her self-absorption; the certain knowledge that she was theoretically right but pragmatically going about everything just wrong.

“For me,” her husband proclaimed one late afternoon as she cut up fruits and vegetables and laid out expensive cheeses and pâtés for his biannual departmental open house, “medicine is to life as fungus is to Stilton. For you, it’s more like the rind of a ripe brie.”

“Excuse me?” says the psychiatrist’s wife.

The ebony man’s nostrils flare. “Madame is American,” he asks a second time, though his tone is not that of a question.

“Yes,” she says, and he nods as if that explains everything he knows about her.
A perfect sky. A landscape of red rooftops and white sand beaches, of blues and greens and azures. Even the plants standing tall, slick and robust, dripping with sweat.

The heat and alcohol pin the psychiatrist’s wife to her chair. Low to the earth, she droops. She doesn’t need an infinity pool to float, to drown.

“Do something,” her husband had said, donning his swim trunks. “Do anything.”

And standing at the door with his snorkel and fins: “This morning, a propos coping skills in combat veterans, Dick Tan quoted Confucius who said ‘Learning is like paddling a boat upstream; stop paddling and you go backwards’.”

Occasionally there were saves. Right away, families brought presents—candy and flowers and fortune cookies, curries and tamales, kim chee and lumpia, cheap tarnished jewelry, hand-knitted scarves, paintings and bibles and poetry. And for a while after, the patients sent cards or stopped by her office just to visit. Years later, some still called, sent her email, invited her to family reunions, lavish affairs where she was hugged, kissed, cried over, and fed to the point of physiologic jeopardy, where she received the welcome of a sibling lost in a long-ago, far-away civil war, a folk hero, the risen dead.

She’d needed to be a doctor for so many reasons—for security and self-esteem and social approbation, or as the psychiatrist put it, for id and ego and superego—and so she was. She’d gotten good grades, she’d chosen the community hospital where she served the poor and needy, and she’d excelled there, earning recognition, a reasonable salary, and the occasional award for outstanding devotion and compassion.

The night their daughter came to the dinner table with a metal rod punched through her nasal septum, her husband said, “Identity isn’t an abstraction. It’s more like a ceramic pot, carefully molded over time, then decorated, and finally glazed and baked to maintain a certain look and feel. Break it, and no matter how well you remember the original look and feel, you have to start again from scratch.”

She hadn’t gone to medical school hoping, like the cowardly lion in Oz, to become someone she wasn’t. But she’d be the first to admit she’d imagined that knowing how to save a life would make it easy to do so. Or straightforward. Or, at the very least, more possible than not.

“It is,” her husband argued. “Crunch the numbers.”
In medicine, numbers conferred prestige and legitimacy. Sometimes she thought of Albert Einstein who said: Not everything that matters can be measured, and not everything that gets measured matters.

Her mother-in-law was very ill. The psychiatrist was very busy. The psychiatrist’s wife stayed with her mother-in-law, night and day for a week, then just days, then night and day again, then days again, then hours. Hospital, rehab, hospital, rehab. Finally, after nearly two months, her mother-in-law got better. Knowing the worst was over, she felt like she had money in the bank, food in the larder, a stockpile of marital credit. She felt entitled to her own life again. Desperate for it, in fact, like a refugee willing to trample others to catch a bag of rice thrown from a relief truck.

“It’s not about trying to feel something,” their daughter screamed. “I feel plenty. I feel too much. It’s about saying LOOK AT ME!!! and then, Fuck you, Fuck you, Fuck you, Fuck you, Fuck you, Fuck you, Fuck you, Fuck you, Fuck you, Fuck you…”

So much of life was contextual, but she wanted to believe there were absolutes as well, that some choices, viewpoints, and activities could be considered more moral than others, better by some universal standard of human decency and societal need, however unrecognized, however hopeless, and that the flip side held other choices, viewpoints, and activities that could be written off as unwise or simply wrong.

Their wasn’t one of those families afraid to call a thing by its name. The psychiatrist had no patience for false solace, half-truths or religion. Their daughter never heard the expressions ‘passed away,’ ‘with the Lord,’ or ‘moved to the great beyond’ except from her friends and in books and movies. When their cat died, they said, “Sorry, honey, but Hippocrates is dead.”

Relief hit like an endorphin rush. A switch thrown by a single unplanned thought: I could quit. She tried to be rational, but it was over. She was done. She could think of nothing but getting out. She smiled at patients and nurses, ignored pages, wrote orders for follow-up in hours, days, a week, any time when the problem wouldn’t be hers. Load lifted, the heels of her shoes touched down without sound on the speckled linoleum. As she made her way to the elevators, explosions of light and color lit the periphery of her visual fields where once there had been only clichéd art in mass-market frames, red crash carts and black-faced monitors, sliding glass doors to dimly-lit rooms.
of mechanized furniture and malfunctioning humans. “I quit,” she incanted, her lips clenched, her tongue trembling to resist the devastating allure of emotional incontinence.

The ebony man asks the psychiatrist’s wife if she wants another switcher.

“Oh, yes,” she says. “Please.”

He puts her empty glass on his tray.

“Madame’s vacation,” he says, “is for how long?”

“I don’t know.”

For a fraction of a second, his smile wavers—there’s the slightest narrowing of his eyes, a flicker along his jaw.

“Madame works?” he asks.

She looks at the pool, the palm trees, the tanned feet and pink, pedicured toenails of a passing stranger, and shakes her head, wishing she had a scar like his, for all the world to see.

It’s lonely at the top, or so the saying went, and the psychiatrist’s wife used to wonder if it had to be that way, whether nice guys really always finished last while those better able to maintain the demarcation between Self and Other would—like scum—more surely rise to the top of the sweet organic mélange which sustained them.

Her husband told her it wasn’t so. But that was decades earlier when they were peers in both stature and passion, when her mind still resembled a well-organized catalogue of scientific information rather than an endlessly unfurling memorial scroll, when she too believed that a person’s profession could and should define her life.

_**Morbid preoccupation**, the psychiatrist said, not unkindly, in the days before she stopped telling him her dreams.

_Histrionic personality disorder_, he whispered on one of his rare visits with his hospitalized mother.

_Adolescence_, he recently said of their daughter. _No longer a child but not yet an adult._

“Please,” he says not infrequently, even now. His hands touching, reaching.

Sometimes when nothing else helped, she figured the last thing she could do was to give good death. She told families she was sorry she couldn’t move things along, but if anything happened, any little thing, she’d treat it with
morphine only. No machines, no electricity, no antibiotics. And they clasped her hands in theirs as if she were an angel.

“I just want to make a difference in the world,” her daughter said. “Why can’t you understand that?”

In medical school, they’d been taught the words of the great physician Francis Weld Peabody, who said, “The secret to caring for the patient is to care for the patient.” Too late, she knew Dr. Peabody was wrong. Too late, she understood that the secret was caring for the patient—for anyone—just a little. Enough, but not too much.

The ebony man asks if the psychiatrist’s wife has come for the conference. She shakes her head. “No,” she says. Then, “Yes. My husband is there now.”

The ebony man smiles. “So your husband is a doctor?”

She nods.

“That is good,” he says. “That is very, very good.”

“Why?” she had asked her child when the piercings began.

For the longest time, until after the fourth switcher, until the ebony man with his scar and his questions, she hadn’t understood her daughter’s answer, the ‘look at me’ followed by the storm of ‘fuck yous.’

When her husband returns from his scuba cruise, the psychiatrist’s wife sits waiting on a bed stripped of everything but a single white sheet. Her brown hair is newly bleached, spike-short and stylish, a blond so pale it trifles with light and time. She’s wearing an ocean blue spaghetti-strap dress that tapers at her waist and thighs and stops above her knees. Her makeup is perfect and her suitcase is packed.