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POPULARISH



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POPLORISH publishes fiction, poetry, creative nonfiction, art, and comics, striving to provide a voice for authors living in or writing about the Pacific Northwest. Submissions are accepted year round. Please visit our submission guidelines for more details:

<http://oldgrowthnw.org/poplorish/submissions/>

Chantel Ames is a fine art photographer, living and working in Seattle. She strives to capture the interplay between dark and light, illumination and concealment, to search out beauty; and finally to create images that evoke a sense of the sublime. Her work has been shown in Seattle, Portland, L.A., and New York.

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letter from the editor

Every Seattleite (ie [via Urban Dictionary] any person who hates it when Californians drive through Washington and cry about the rain and the cold) knows there are only two seasons in the PNW West of the Cascades and we have settled into our Fall/Winter/Spring Season, albeit very late this year. This year our summer lasted uncharacteristically well into October and there was much rejoicement. And frisbee, lest we forget the frisbee in the park.

As sweater weather is in full swing and the color drains fantastically from the trees and the world, the same cannot be said for what follows here. Our literary selection here is as vibrant as ever, even in blacks and whites. What better way to stem the tide of the dreary Fall/Winter/Spring Season than a little escape into Poplorish?

So read our fall issue. While we only have one season in Seattle, we do have three issues of Poplorish. Rejoice.

And wear a raincoat. It's what Jesus would have done.

Cassandra Sims Knight
Editor-in-Chief



Meteor Shower

Anne Whitehouse

We lie on blankets in the grass
grateful for the scratchy wool
in the sudden chill of night
deep within the virgin forest
at a family reunion far from our homes.

Scanning the sky for falling stars—
there goes one! and there another!
Persistent trains, bright fireballs—
in the great immensity
a crescent moon crosses to Jupiter,

and snatches of conversation fly up
more intimate now
we are hidden in darkness
and can express what
we might not say otherwise.

At every instant we are
what we have been and will be,
our forebears who live on in us
we remember, we resemble.

Everything in the world is mysterious
formed of tenuous substances
evanescence and oblivion
the equivocal element of time.

With a stone I dug up a clod of dirt
a little farther away I laid it down silently
and under my breath I whispered
“I have changed the earth.”

The deed was minimal, the words exact,
and I needed a lifetime to say them.

Anne Whitehouse's poem "Meteor Shower" was inspired by a family reunion on the Olympic Peninsula, in the most beautiful forest she has ever seen. She is the author of five poetry collections—*The Surveyor's Hand*, *Blessings and Curses*, *Bear in Mind*, *One Sunday Morning*, and *The Refrain*, as well as a novel, *Fall Love*. She was born in Birmingham, Alabama, and lives in New York City.
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The Sunday Papers

five quick vignettes before the end of the world

by Brian Michael Barbeito

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One

It's the old sound and feel of public transit. I find there are floods of memories. Knowledge of when it will get busy and when it will know some spaciousness. Different pairs cosmopolitan not provincial stand in front of me.

This is the way the world is.

These are the ways of the people of the world.

Astute and incredibly so. The copy you can get from the earth by sitting still, a wallflower or mouse on a subway train in a major metropolitan city.

Two talk about mortgages. They are male. Once can easily pay more on his mortgage than he does. This would pay it down at a faster rate. Then he can borrow against it

again. Or, as he is currently doing, he can just pay less and have more cash in hand. They are about thirty but I'd say not over thirty five for some reason. At the lowest twenty eight. I get the number thirty three but it does not matter. They are the kids I always avoided. Nice. Well. Quietly ambitious. A fair representation of thousands if not millions.

They will be wildly successful.

It is in the cards, but you don't need cards, because it is written all over them, on every inch.

Wildly successful.

Yes.

And wildly mediocre.

The second two, oddly enough, are actually



book publishers. Two women. White. Late forties. Measurably stressed.
At least it is Friday afternoon late or early evening. These hanker for the glass of wine.

Also, one day, someday, (though it could happen at night), the sun will burn out and everything will be over.

When a project comes to their office, it is 'up for grabs,' and almost anyone can choose to work on it. This worked for a time, but is no longer going well. What the one wants, and the other agrees (they seem like the top brass), is for a writer to be immediately directed to a certain person, team, or department.

They pause.

This is the path we chose, says the air somehow and with a resigned dutiful candor, but it doesn't feel too joyous.

They are on the pulse of the business side of things- writing and publishing. They are also honestly trying to take care of their writers as they say as much and the wallflower mouse has petal-ears that hear.

Women self-actualized and productive.
Curt clicking heels and strong leather bags.
Knowing all the right things that the city and beyond can offer.

Yet something is missing, and in a quick glance I see more crow's feet and worry lines than they should have at their age.

An electronic voice calls out my stop.

My fragment self and my fragment sentences get up and leave.

The future is here.

In more ways than I can imagine.

Two

The place we are at is good enough on paper. This is the next stop for my old friend and confidant. A sparse apartment with four walls, a bathroom, a linen closet, kitchenette, and so forth. This is life, after all, not a mythic yogic dream.

But the area is worse than bad.

Low level vibrations.

Rigs or fits. Waste. Actual garbage strewn. Remnants of a fire the city or owners or both have not cleaned up.

Questionable souls.

Every interaction or approach a cause for concern and worse.

We have a problem. Well, what can be done? Soon the real evening arrives to compliment the vibratory dark. I stand in the middle to give the best blessing I can muster. He stands perhaps ten feet behind. I shall just need a minute, I say. I am going to be speaking inside my head, so you will know I am done when I turn around, when I tell you.

Okay. Thanks man.

No problem.



In the name of God and Jesus, I ask for the protection of Arch Angel Michael. I ask for him to come here with his sword and cut away all possible darkness from this room, from this place. I also ask for all available angels to come and protect this place and my friend here and during his journeys. This is not a good place I know and can see, but this is the path currently, so it is accepted but I ask that any force for light and goodness and that comes from the true one divine God, transform it as much as possible and help with the safest and best outcomes to all situations arising. Thank you.

Then I turn.

I am done. I said the best I could. I think I did alright. In any event, the intention was there. Thanks. Thanks honestly.

Let's get going.

Yup.

And we go and in a flash are on the top patio of the establishment down the way.

It is rain laden soon, and a foggy mist covers the city. At that moment there is the taste of beer and possibility. The woman that looks like a man but not in a transvestite way, keeps staring at us. One and then the other. Her masculine face is not ugly. She is reading and writing which does not fit. I don't know whether it is pretentious or else honest to read and write in the poorly lit rainy patio smoking area.

I tell Lee to talk, see what she wants.

It's all good but a bit of a bore. She is playing games. Some of them do that, but not all.

Inside Lee makes friends with the film students. Four males. A writer, an editor, a cameraman, and someone else. They have some of their equipment with them. They are in the middle twenties. Two whites, a Filipino fellow, and a black. They have never heard of one term I list from cinema verite to the Italian Neo Realist movement or anything else. One throws a decorated baggie small across the couches to the other and the other goes to the bathroom and throws something back at the first thrower.

They all leave for a while.

There are others, many others.

The Moosehead rep that Lee goes and talks to. Dark, gracious, lithe, dimpled, denim, fast sure movements.

What did you tell her?

I told her that you are madly in love with her but that it cannot be for various reasons. But I never said anything like that at all.

I know, but she's got to know.

Got to know what?

She's just got to know.

The Cinema 101 class comes back. All are red and pie eyed and now drinking again. The writer one talks a bit of sense, though he is much narcotized. He talks about Borges, and then asks to do a pitch. What he calls an



elevator pitch. I say go ahead.

A woman has an affair with a younger man and they run away together. There is the murder of the woman's husband and some kind of inheritance or something monetary is involved. And it works out, but only for a while. In the end circumstances and each other catch up to both and they both end up dying.

I listen and just sit quietly. I feel nothing for this either way but am glad for some reason that they both died. I wonder at that. Someone got theirs. Good. I sit hoping I don't have to talk.

I look at him. His eyes are red and he is waiting for an answer.

Luckily the conversation gets broken up by one of his cohorts and the place is busy. They go outside. Lee and I go along streets paved with rain but there is some grime you just can't get off.

The globalists have painted the city in electronic billboards that show many bright arrays. There is a woman in a private sort of jet or train and she wears fancy patterned black pantyhose and a short autumnal hued skirt of some sort. Her legs face the audience which is the city at night. She is vaguely eastern European or possibly Greek or Italian. She is writing in a journal but looking up. The hair is wispy and just so. I hate to admit that they created quite a scene. It's sluttish and gorgeous at once. Rich and full but you can't tell why. I wonder at how many shots they had to take.

And her eyes are all sex.

And it's not a projection.

And she is forty feet tall.

She wants you.

And she wants me.

But she stays there forever above the dirt and grime and false hopes of the city at night. She wants but does not need the city.

She has a place with the angels though she is possibly and probably an agent of darkness.

What eyes though.

And under the skirt, well, as is sometimes said, forget about it.

Three

Streets varied and some sour and some sweet. Early Christmas and Christmas-like lights. I go to here or there wandering just a bit. Grime windows. Neon. Outskirts of bars. Pizzerias. Crack heads. A lady comes up from across the street in a B-line.

Lee, I say, she is coming to your back left. You talk to her. I am tired.

No. You do it.

I turn around and look. She is big and she is about our age but looks older and wears a black coat and she is not involved in sex and not a big user or if she is her eyes are clear



and she is wiser somehow through culture or experience than your average street involved person who can and is usually very wise in their own way indeed but I am getting tired and don't want to play games so am firm and quick enough and I instead tell her what she wants and she responds in the affirmative though I don't know what she was originally going to say but she saw something in me she could not identify and was cautious which is a safety protection and it kicks in automatically and comes from millennia of existence simply in the galaxy even at the lowest levels of interactions.

You want a cigarette?

Yes.

And I keep walking after drolling.

Then I sense something.

You also want a light.

Ya.

There.

I walk.

Hey.

Ya. (but I say it in a statement instead of a question.)

Are you guys okay?

And I know exactly what she means. Ya. We are fine. (and I turn and walk).

Cause I am holding the primo, primo, right now.

We are good. Thanks anyway.

And she leaves it at that and we go and go. We are supposed to call it a night, and so we head towards the front steps from the street but mostly on my decision we loop back a couple of buildings- one building actually, about fifty yards if that, for a last nightcap. We have stayed away from these types of establishments and it hasn't been a problem. I pass three guys out front, and pause...

The door slams open against the dirty white brick stucco at that second (I swear on my true and one grave) and they carry out a patron in a headlock (they do not use cpi-nonviolent crisis intervention technique) on that street corner, and carrying this guy while striking with fists and when out completely they strike him more and more and more also for making fun of a disabled person.

But there are sounds and sights both, and it is not what you would want to hear or see, and I sometimes have walked upon these things the first time as a kid outside of Chesswood Arena and it was over a woman then and alcohol really does thin the blood, blood that then and now and in places at night and sometimes even in the day is all around the world on the curb and on long sidewalks that couch are troubled ways and even let us travel to it. Bright thin red and we have learned nothing and we are nothing. The paradigm shift and the rest of it can have themselves I think then, because they are not real- only make-believe hoop la- and we have lost and were not a good idea all you



have to do is look and see the blood that does not belong on the outside of the body or on city streets but is there. Look, I tell Lee, this is ominous either way. I can handle this, but I would rather not. Let's just go. And we swing on foot around and go away to the room where there is a white candle and the fan blows the air out and a man keeps coming every hour to call up to someone but nobody answers.

Lee talks about a woman I used to know and how she said he could drive her home because he could just go along Finch Avenue. But he had wanted to take the highway and could not say no. He knew her before me and she wore a red coat, a coat that was or that looked like a pea coat. Who wears a coat like that? Lee asked, unless she is from Montreal? And she had long hair and she had short hair and she is a woman now but will always remain seventeen as we talk about her. Strong mind. Determined. Snow is falling in the past- Lee is talking in the present, and I am fading out, remembering the girl. There are posters in her closet, things cut out from magazines, and there are bowls somewhere, and red fruit juice, which is funny, because I used to drink red fruit juice in Pompano Beach not a hundred yards from the Atlantic Ocean blue and chiming in the universe the calmest sounds in the morning long before high tide and dangerous undertows. Man. I click in. He is talking still. What were we talking about I think? Oh. The girl. Yes. What of her? What do you mean?, I say. Did you remember the coat? No, I say, and it is the truth. I don't remember a coat like that, and I knew her well. There is a pause. Nothing else much is said but there is almost a damned fire because the candle drips a flame onto newspaper.

But I loved her, I say. (He is fiddling with the candle, trying to see if he can stave off the fire but still keep the candle burning.) Long pause. And I don't think I ever told her.

Really..., he says.

Yes. Really. And once I love someone, I love them forever, cause that's just the way it is.

Poof. He was unsuccessful and with a strong almost vexatious gesture shoots air from his mouth and extinguishes the candle.

I dream of trying to fix a broken chair. It is looking like I shall be able to do it, but then it does not work out. There is an integral part, under the cushion as I lean over it, that I didn't think had to be cut. I had cut the plastic packaging parts only and thought I was careful yet useful. But someone beside me, an unnamed voice, says- You have to cut those parts also. And I see that they look like parts of the actual chair, but I do have to cut them. I cut them then. Yes I cut them. It is damaged too much and falls apart in my hands near the end. There is nowhere to sit. It looks like I shall be standing. The world is out there, and I can sense it and even hear just a little bit of it in the dream, but I am not in it and I am not in the chair. I stand and wait and wait and stand.

Four

In the morning the sun comes as if only out of some tired habit and presents as a hazy and lazy half forgotten sort of thing and glows only shallowly on a now polluted city of actual



physical pollution and also of difficult psychic discordance that has settled like a willfully troubled populous declaring squatter's rights. I notice also that it is strangely quiet and not even the sound of traffic is present. For a moment it's like waking up at a cottage or lake, but this cannot even be a real moment. Maybe a third of a moment. There is a sinister buzz coming from somewhere, and life, if it could be called that, is about to start again.

We are walking and I buy breakfast. We sit in a place where the window is for some reason round like a big ship's window. I was once on the actual Love Boat, and watched Gorillas in the Mist and Tucker and listened to the Doors on my earphones.

This is not the Love Boat.

A woman walks past outside twitching. Beyond the street there is a building with no door and different men keep carrying things out of it. Yet, just in front of them a woman appears with a scarf and boots, with an attaché case and well washed finely tuned blonde hair. The middle class is absent. There keep appearing only the marginal or else the ones 'with.'

We walk past the Moss Park Armory and Arena and I remember that I used to play there in the summers as I practiced with the second team. The first girl to ever play hockey in a boys league became my defense partner. I know the smells of the rink, and I know that summer and what it stood for, for me anyways. I knew that they kept playing the song-Black Cars Look Better in the Shade, and also for some reason Prince's Raspberry Beret. When the song said:... she wasn't too bright

but I could tell by the way she kissed that she knew how to get her kicks, I thought of a girl like that named Natalie, from far away, from another summer altogether. For now I secretly thanked my mother for driving me to practice at such a hell hole.

Period.

Eventually we make our way briefly to an army surplus store with a high energy OCD manager that does not realize it but is basically pushing people out of the store with his over-zealousness. A while later we are in front of the Eaton Centre. I made it, and I am alive. Through the couple days and nights.

And through a twenty year span. I am thirty nine in actuality even if a Windsor journalist that introduced herself to us earlier guessed forty five.

I tell Lee we have to go to The World's Biggest Bookstore. We walk a block to Edward Street. It's just like it always was. We take a few pictures.

Tourists in our own lives.

Lee and I part ways. Our journey through the city is done for now. Urban Exploration he calls it. I caution him remain as safe as possible. I go back in the store and browse for one hour. I always thought a secret to life and death must be hiding in those pages somewhere so found it hard to leave. It was like telling a person that the winning lottery ticket is in the pages of one of the books. Watch the enthusiasm then.

Going.



Mirrors and funny lights outside. I find myself in Indigo. The courts and the trucks that take people to courts and the grey day and buildings are outside. Across. I find the juxtaposition frightening and almost unbearable. There is something wrong, and nobody sees it but me, so I keep quiet about it.

This is not the way the world was meant to be. I see that Brad Park is talking at the top of the stairs and I listen to him for a while. He was a defenseman with the Boston Bruins, a left shot like me, who grew up in Toronto or Scarborough and played for the Marlies. I remember seeing him play on College Street against the Leafs. Those were the days. Before Indigo Bookstores, pop and bubble gum digital connections, cell phone towers, and a hundred other questionable things.

I leave. I am light headed. Vertigo of the body and spirit. I order a Big Mac and sit with the people. I see much. Everything happens at once. Beside me I ask a girl the time only because I do need the time and she opens her bag and shows me the time on her phone kindly but without saying anything. I get the impression she does not actually speak and there is some evidence that this might be so. She has her name and some other information taped to a water bottle or something. But make no mistake, she is well dressed and carries boutique bags. She also has prayer beads wrapped around her wrist, and is reading Leaves of Grass but she is underlining it which is not right. I don't say a word. She is I notice then actually beautiful, mulatto. I finish and leave and head home. There is nothing worth saying really.

The world has moved on. It gobbles everything up, or else clears the table with time and someone else comes for a meal. We are always leaving whether we know it or not. Some just can't see the door yet so they think the dinner hour will last forever.

But it's only a dinner hour.

And we are being escorted out into the hands of the future.

Each on their own path in time.

Five

The Northbound train comes like controlled wind through the tunnel. I go and sit and the time is getting later. It will be the end of dusk when I come out of the tunnel at the other end, having traded the urban day for the suburban night.

I feel a whirling of memories in my brain and my head starts to hurt. Nothing that I have seen is so great, but in the going I was able to check on myself and my progress in time. I worry about my friend, but have to release him to his own destiny and the certain amount of darkness that is around him through circumstance and a karmic destiny I know nothing about- not its origins or current progress really and certainly not its conclusion. He has a strong if quiet light inside and I hope this will sustain him. Like many others, he is a sensitive person caught in what is often a chaotic and nonsensical world.

After Lawrence Station and on the way to-



wards Shepherd Station the fog and vibratory level of the downtown corridor physically actually really and most certainly lift and dissolve. For this I am grateful. I think that the best the world has to offer is yet to come.

I hope inwardly that this is most absolutely and unequivocally so.

I have some information from the 'inside' but can't know for sure.

Following the bus route at the end of the line, above where the train kisses the last wall of the last station and then gets ready to leave again, I listen to the announcements of the streets. My birth mother the one time I met her mentioned that the streets there were named for horses because that was all a large acreage where they kept such. That was about all she said. That and one question was asked.

Were you raised on a farm?

No.

They told me you were being taken to a farm. And that you would grow up around horses...

I walk along there in the new dark. It's gotten mild and if you just look quickly it could feel for a second like an early spring night. But the leaves then tumble and it's not spring and you can't fool yourself or time or anything at all really. The streetlights blink on. My real mother, which is the one that raised me, used to say, - When the streetlights are on, you should be home...

I am almost at my truck now, and will hop into it and drive another forty minutes out of

the old suburbs to the new suburbs.

There is a horse that lives at the end of our neighborhood.

Go figure.

Brian Michael Barbeito is a Canadian writer. He is a two time Pushcart nominee with work that has appeared in various print and electronic publications. He is the author of the book *Chalk Lines*, [FOWLPOX PRESS, cover art by Virgil Kay (2013)].



JESUS AND I

Rachael Stoeve

i.

jesus and i
met on the fourth of july
he was setting off illegal fireworks
on the playground of my elementary school
i had walked down there to remember
to sit on the jungle gym and marvel
at the difference between
the size of my memories
and the shape of real life
and there he was
all long limbs and hair flying
lighting fuses
running away and turning
just in time to see the explosion.

ii.

jesus and i
get along pretty well, i'd like to think
we don't argue often and we compromise a lot
and i think that's the sign of a healthy relationship
but sometimes
he looks at me and i can tell he's not happy
it's that darkness you can see
behind the eyes of someone you love
when they're running out of time
and know it
sometimes late at night
or in early morning, i'm never sure
i find him sitting in the kitchen
staring out the window at the streetlights and fog
he's usually saying something under his breath
and i can never make out what it is even though i listen
so closely
i only see his lips forming the words
over and over
he doesn't know he's doing it
and i get this feeling in my heart
like someone has grabbed hold of that organ
and squeezed it
so tight.



iii.

jesus and i
spend a lot of time talking
mostly about our fathers
and how we are both still trying
to walk on water
one day we end up on the subject of love
and he confesses he doesn't believe it exists
not anymore
and i tell him i do
because i have to
i need to
i want to
and he says he wishes he still had that kind of faith
to trust something he cannot touch
and i ask him what he believes in, if not love
and he answers
"you."

iv.

jesus and i
have a lot in common, it turns out
we love the morning light when it has rained
the night before, the sweet melancholy smell of spring
and talking to people-- "if the messiah thing hadn't worked out
i would have been a psychologist"
i laugh when he says this
and he shrugs
i think he is joking but
over time i learn
he always tells the truth.



v.

jesus and i
go on a road trip
and wind up in joshua tree national park
on a hoodoo rock watching the sun set over the mountains
the horizon melts across the edge of the world
like igneous rock
and the night unrolls like a curtain
the cold creeps in but I don't feel it next to him
i fall asleep, deep
and wake up with my body curled around a stone
and for a moment
i think i have become stone too because
my bones will not move
but slowly i uncurl and sit up, every joint cracking
i think i can hear the world's heartbeat
but it might just be the blood rushing back to my brain
and then i realize
jesus is gone
i panic and then i see him
down on the desert, waiting for the sun to rise
his lips are moving
but i can't hear his words
as the light hits him he starts to dance
and i realize i am holding my breath
i let it out and when i breathe in again
i am something more than human
something mountain
something desert
something stone and i watch as
jesus handclaps in the dust
a forgotten dynamo burning
burning
burning with all the hope
and suffering of the world.

Rachael Stoeve is a poet, writer and activist born and raised in Seattle, where she currently lives. She has eaten a rattlesnake, camped in the redwoods, and traveled alone through Europe. She has previously reported for YES! Magazine and TruthOut. Her essays have appeared in Fifth Estate and Quail Bell Magazine. This is her first published poem.



Autumn Wind

by J. Scott Coatsworth

Lightning flashed hot across the dark Northern Arizona sky, sending Critter into a gallop and erasing the hard work of hours that Jason had taken to calm her.

He pulled back hard on the reins, but the mare wouldn't heed him, spooked as she was by the sound and light raging all around them. He wished he'd taken out a more seasoned horse for the day's work, checking the fence that marked the edge of his father's steading.

All had gone fine 'til the storm had blown up out of nowhere, sending him all in a rush back to Critter and his ride home.

Things don't always go as you plan 'em, or so Cody always said, and he was learning the truth of it now.

"Come on, Critter," he pleaded, "turn 'round, now. That's a good lady."

But the mustang plunged on into the open desert with a will of her own, refusing to heed the cries of her self-appointed master.

Jason weighed the idea of just jumping off and letting her go: likely she'd make it back to the ranch house of her own accord, but if she didn't, her loss would be on his hands.

Pop wouldn't like that.

Also, it looked to be a nasty drop from up here, with the rain and the speed she was making.

Besides, he decided, the walk home would be just too darn long.

Mother'd wash my mouth out if she caught me cursing so, he thought with just a little shame.

'Tweren't nothing on how that girl, Betsy, made him feel, all tongue tied and foolish like a sheep who'd just been sheared of all his wool. He was seventeen, and she still made him feel like a young whelp.

Another sharp crack, and it was like the skies had opened up, and the rain began to pour down in earnest, soaking his back and shortening his view by a hundred paces. Still, the mare didn't slow, and the desert passed by them in a blur.

The rain-smell was strong, sharp in the air, the creosote smell that always portended rain in these dry climes.

Critter was starting to smell a sight, too, as her coat soaked up the August monsoon rain.

It's nothing to what I must smell like right about now, he thought, laughing a little at his calm attitude during a crisis. After climbing up and down this beast half the day...

Critter stumbled, almost throwing him off, but he held tight with his hands on the reins and his legs locked tight around the horse's barrel frame. She'd finally come to a stop, but the ground slipped away from beneath her, and



she danced back, trying to keep her footing.

Jason saw all this in flashes of light.

The yawning precipice that had opened up before them without notice.

The loose ground shifting under the mare's panicked hooves.

Her loss of footing as the earth she stood upon gave way.

The last thing he remembered was a dull throbbing in his leg as she fell, screaming, into the dark gully below.

#

Ahote put more dry wood on the fire at the mouth of the small cavern, and tested the greenthread tea his mother had taught him to brew, and her mother before her, and so on back to the time of passage, when the Hopi people had first set foot on this new land. He said thanks again for this gift from Mother Earth, which he had gathered from the four directions - North, South, East and West.

The white-skinned stranger groaned again, rolling a little on the pallet of dried grasses Ahote had hastily erected to cushion him. The broken leg was still swollen and blue, but it looked better today than it had the day before. The other boy had yet to awaken.

Leaving the tea to brew, he took a thickly woven rag, and dipped it into the cool water that lay in a water-proofed basket next to the sleeping boy for just this purpose. He wiped the stranger's brow gently, letting the cool cloth linger on his raised cheekbones, willing the

cool into the boy's body, to chase out the spirits of heat that possessed it.

Carefully pulling back the blanket, he ran the cool cloth over the boy's chest. Young, like his own. *Perhaps he is going through his own testing?* Ahote wondered.

The boy's eyes flickered open, and registered surprise. He looked around wildly, but Ahote put a hand to the boy's lips, whispering "Shhh-hhh."

The boy tried to sit up, but immediately laid back down as lines of pain crossed his face.

Ahote went to his fire, on the edge of the little cavern where he was to live for the duration of his testing, and brought back a small earthenware cup of the bitter tea he'd brewed. He mimed drink to the white-skinned boy, and held the cup to his lips.

The boy looked up at him uncertainly, and then took a sip.

"PPthhh," he said/spat, sticking his tongue out in distaste.

Ahote held the cup to his lips again, a stern look on his face. This time the boy swallowed.

When the contents of the cup were gone, Ahote passed his hands over the boy's eyes, pulling the lids gently shut.

The fever is passing, he judged, as the boy sank back into sleep without further urging. *In the morning, his head will be clear.* Satisfied, he pulled the blanket up over the boy's shoulder, and settled himself in to pass the lengthening desert night.



#

Jason tossed in his sleep, dreaming fitfully about the storm, rain falling like hail all around, and the dreadful feeling of the ground slipping out from under him...

He awoke with a start, the pain in his leg less than it had been before. He wasn't in his own bed, he realized as he stared up at the rocky ceiling above him. He wasn't even at home.

He turned his head to see the dark-skinned boy regarding him curiously from across the room. The boy's skin was a deep, beautiful brown, much darker than his own, even as sun-baked as he was from all the harsh hours under the desert sun.

He remembered, at once, the night before, the cool touch of the cloth on his burning skin, the bitter drink he'd almost spat out. Well, he had spat out some of it...

"Sorry," he said to the stranger. "I'm not myself..." He winced again as the leg pained him. *Must be broken*, he thought, managing to stay mostly calm. "You know what they do to horses when they break a leg," he could hear Cody say.

He wondered what had happened to Critter.

He looked over at his host again. "Who are you?" he asked, but the other boy just looked at him blankly. Jason looked around the room, seeing all the Indian boy had here. There were several coyote skins stacked on the far side of the cavern, next to a little fire. An assortment of earthenware jugs and canisters might hold just about anything, as could the beaver-skin pouch that hung from a stick on

the wall.

The morning light streamed in from the narrow cavern entrance, only a man's width wide but extending twice a man's height up to the ceiling.

"Well, whoever you are, I'm glad you found me," he said, a little uneasily.

"Ahote," the other boy said so softly that Jason almost didn't hear him.

"What?"

"Ahote," he said louder, and pointed a finger at his own chest.

Jason nodded. "Jason," he said, imitating his host. He lay back once again and let sleep claim him, more exhausted by the simple exchange than he usually was by a full day's work.

#

Though he'd violated his oath of solitude by bringing the light-skinned boy here, Ahote couldn't feel sorry about it. The stranger had needed his help.

Though surely his mother wouldn't see things that way. "Our People should help our People, and he's not one of us," she'd say, but then she hadn't seen him laying helpless on the edge of the precipice, his leg partly crushed by the weight of his horse in a fall. Ahote had known, even then, that he couldn't leave the boy there, white skin or not.

The swelling in the boy's leg had gone way down, and the setting looked proper. With



the will of the gods, and a little good luck, he might walk on it with little trouble, someday soon. Though he'd always feel the spirits of the weather, or so it was said. Ahote's aunt, who'd broken an arm as a girl, could always tell when a storm was brewing from the ache in her bones.

The boy was watching him now, eyes glinting in the firelight as Ahote cooked the grains that would make a warm morning meal. He could feel the boy's stare on his back, almost as warm as the fire itself, but he gave no outward sign that he knew he was watched. The boy, Ja-son, was probably frightened enough, after his injury, to find himself in the company of a stranger.

At last, he turned, smiling, at Ja-son, who gave him a half smile in return, and his eyes lit on the bowl in Ahote's hands.

Ahote set the bowl down, and helped to prop the boy up against the wall. The boy winced, but only slightly, a good sign.

Ahote handed him the bowl, but Ja-son needed no urging. Taking it in his hands, he used his fingers to scoop up the cereal, and shoveled it into his mouth.

Ahote laughed. "You're hungry this morning," he said, but the boy just looked at him quizzically. For an answer, Ahote retreated to the back of the little cavern, and pulled out a basket filled with dried berries. Bringing these back with him, he sat beside the other boy, and began to feed them both from the basket. The boy said something unintelligible, and Ahote just nodded, unsure how to respond.

It was good that he had an appetite, though.

Ahote leaned forward to wipe off the other boy's forehead, his face close to Ja-son's. The smell of him was clean, strong.

Ja-son jerked back a little, and Ahote retreated, studying the boy intently.

There was a little fear in his eyes, and uncertainty too. Ahote bowed. "I'm sorry for offending you. I guess your ways are different than ours."

Hastily, he turned away and quickly left the cavern, ashamed that he had frightened the boy.

Perhaps it was best to leave him alone, for a while.

#

Jason watched him go, his mind reeling. *He tried to kiss me*, the boy thought, his face flushed with shame, and something else.

His entire body was hot, racing along with his mind on this new tangent. *He tried to kiss me*, his mind said, while blood rushed through his arms, his legs, pounding in his skull remorselessly.

What was happening to him? Dad never mentioned anything like this.

He tried to kiss me. And I wanted him to...

#

Ahote returned to his cavern home at last, as the sun was passing halfway through the azure bowl of the desert sky.



The rains had been plentiful this year, and his people would eat well all through the winter. The turning of the seasons did not escape him, even though he was away from his home and the family he loved.

Though there was little enough to mark the changing of the seasons in this land of harsh heat in the summertime and bitter cold of long winter nights. But still, the signs were there for those who knew the weather.

The storms of the autumn time were here, the monsoons that swept out of a clear blue sky in the early afternoon to bring rain to a parched land, only to leave behind a clear, crisp night. There were clouds on the horizon even now, and with luck there'd be rainfall before the sun had crossed another quarter of the sky. He could smell it coming, smell the thick oil of the creosote bush, the harbinger of desert rains.

Ahote had gone back to the place he'd found the boy, unconscious above the arroyo that rushed swollen with the heavy rain. He'd guessed the boy must have been riding horseback, for he'd had spurs on the back of his boots, and there were deep hoof marks at the edge of the ravine.

Today he'd found what was left of the horse's carcass, rotting in the desert sun in the now-dry waterway. The scavengers had been at it, and there was not much left to see, mostly bleached bones tattered with a few pieces of drying hide.

He knew Ja-son would miss the horse.

He pulled back the hide that covered the cave entrance, and was surprised to see the boy sitting up against the cavern wall. He said some-

thing Ahote didn't understand, then gestured to the fire.

One of his clay pots sat there, filled with water from the water skin and assorted herbs and dried meats the boy must have found around the cave. All of this activity must have considerably pained him, but he was smiling as he watched Ahote take it all in.

"Soup," Ja-son said, and gestured for him to try some.

Ahote knelt down and dipped his finger into the mixture. It was warm and thick. He brought the finger to his mouth and tasted the 'soup.'

He suppressed a grimace at the saltiness of it, but managed a smile for the boy before he turned away to take a quick gulp from his water skin.

The cool water washed the taste away.

He must be feeling better, Ahote thought as he knelt to examine the boy's leg. The leg was still a little swollen, though the color was not as bad as it had been.

The boy winced as he touched the purple skin. Obviously it was still painful.

He set about preparing a poultice to put on the leg, and some more of the pain-relieving tea, aware that the boy's eyes followed his every move.

###

Days passed, while Ahote took care of Ja-son, and waited for the time of his own testing to



end.

They shared some words, though neither was adept at the other's tongue, but even when they were silent, Ahote felt a kind of serious companionship growing between them, binding them like two brothers at the souls.

Jason felt it too, along with the strange stirrings in his body and heart. As the days passed, soon he was able to hobble about on his injured leg, though it still pained him. He sometimes made his way to the cave mouth to watch Ahote leave on his daily outings, and would wait there like a lizard basking in the warmth of the sun for the Indian boy's return.

The late summer monsoons continued without any particular pattern, and the desert began to bloom with orange and yellow wildflowers. Even the driest desert plants grew green with the water from the rains. From his perch at the cavern mouth, Jason often saw the jack-rabbits and road runners he'd ignored before, saw the stirrings of life in the desert all around him.

Soon he'd be able to make his way back home to his Father. *Pop must be worried sick about me*, he thought.

Back to mending fences and tending livestock. Almost, he wished he could stay here, with Ahote, in a desert cavern forever.

And then Ahote would return, and they would share a meal together of whatever the Indian had caught during the day, and retire at last at the darkness of night.

#

Jason's eyes flickered open, and he edged

himself up onto his elbows to look around the cavern.

The fire had died down to embers, which provided the only light in the enclosed space. Ahote slept on a pallet a few feet away.

Outside, the night was black as pitch.

It must have been weeks since the accident, he thought. *Where am I? I don't even know how far I am from home.*

The pain in his leg had subsided to a dull ache, and it did look much better. Whenever the boy touched him, shock waves ran up Jason's body, and not from the pain.

He reached his hand out across the distance between them, wanting to touch the other boy, softly, to feel the smoothness of his skin. He reached across the space...

Ahote shifted in his sleep, turning over on his side.

Jason jerked his hand back, cursing at himself under his breath.

What is wrong with you? What would Father think? What about Betsy?

There was no answer from the surrounding walls, only the soft, warm light from the fire-place embers to calm his shivering form.

#

Ahote was awakened by some sixth sense that told him something was wrong.

The boy, Ja-son, was shivering in his sleep.



The rain had cooled the heat of the day, and now that the clouds were gone, the night was all the colder.

He crept over to the other boy's side, and pulled the rough loom-woven blanket up over his shoulders to warm him.

The boy still shivered. Ahote's hand on the boy's forehead confirmed what he'd feared. Ja-son had the chills.

Carefully he settled himself over Ja-son's shivering body, taking care not to jostle his injured leg. Then he lowered himself down, putting his arms around the boy to warm him.

At first the shivering seemed to get worse, and Ahote could hear the boy's teeth chatter. He set his cheek against Ja-son's, and at last the boy's body settled down.

Tomorrow was the last day of his testing, and on the following morning he would return to his own people. The boy will be well enough by then to take care of himself, he thought. He must be well enough.

Ahote's eyes slipped shut, and he was aware of nothing else until morning.

#

Jason watched Ahote hungrily, as the Indian boy prepared something for them to drink by the fire. The hot, bitter tea did not taste so bad as it had on that first night. He was slowly growing used to it, and it did help the pain.

The swelling was almost gone, and he could touch the skin now without wincing. It looked like Ahote had set it clean; he would walk normally again, before long. The thought filled

him with joy.

He remembered the touch of Ahote's cheek against his, the warmth of the other boy's body from the night before. He had given up trying to rationalize it, to understand these strong new feelings that were coursing through him. All he wanted was to hold Ahote to him, to feel the warmth of that golden brown skin against his.

Ahote returned to his bedside with two cups of tea, and handed one to him. Jason took it gladly, letting his hand brush softly against Ahote's in the process. The nervousness inside him seemed to settle a little as he sipped the bitter brew, felt it trickle all the way down to his stomach.

When he'd finished the whole thing, he set the cup aside, and reached out to take Ahote's hand.

The boy looked up, and his eyes seemed filled with a knowledge and understanding far older than his years. The wisdom of his people spoke to Jason through those dark eyes, and he heard the voices of a hundred-hundred years.

Beside all this, the memory of Betsy's face seemed pale, unreal.

Slowly he drew Ahote's face toward his own, and touched the other boy's lips with his. They were warm and soft.

They shared a kiss as a long, static moment passed, and finally Jason let him go, not sure of what would happen next.

How did Ahote feel? Did he long for Jason the way that Jason longed for him?



Ahote's lips were quirked up in a slight smile. The rain started to fall outside, softly at first, then harder, a pattering drumroll that blocked out all other sound from the world beyond the cavern.

It was as if they were all alone together, in this perfect place at this perfect moment. He drew Ahote down with him in the firelight, and this time the other boy responded with an ardor to match Jason's own. Jason felt safe, connected, loved, electric as he began to explore Ahote's body with his hands, his tongue tasting the salty masculinity of the other boy, feeling his firm muscles taut underneath his beautiful skin.

They fell through time together, and Jason finally let go of his fears, his doubts, as their bodies entwined.

The fire slowly flickered down to embers, but neither Jason or Ahote cared.

#

The next morning, Jason awoke to find his lover gone, leaving him all alone once more. "What the hell?" he said, repeating one of his Dad's favorite curses. But, as before, there was no one to give him an answer.

He made his way to the cave mouth and peered out, but Ahote was nowhere to be seen. He sat there, watching the rain cascade across the desert in wide swaths, watched the lightning racing from the sky to the earth like spears tossed by the gods. The thunder rumbled ominously closer, but still he did not move.

By nightfall, Ahote had not yet come back.

Resigned, Jason left his watch at last, and set about making something for the two of them to eat.

If Ahote ever returned.

#

Ahote waited until late that night to re-enter the cavern. He gathered his belongings with the stealth of a desert bobcat, not wanting to awaken Ja-son. He would miss this child of the other people. They had shared something beautiful the night before, a joining that would never be repeated.

They were from two different worlds, and Ahote knew there was no place for either in the other's lives.

Silently, he left out enough foodstuffs and water in a basket to get him through another week or two. By then, he should have found his way home to his own people, with whom he belonged.

I have my own people to go back to, he thought, wishing still that he could spend just a few more days with Ja-son. But my own world is calling me home. It was the night of the new moon, when he was to return to his mother's hearth and become a man.

He left one more gift for the boy, perched atop the stores of wrapped meats and grain.

Still he lingered a moment more, watching Ja-son's sleeping form. "I'll always remember you, Ja-son," he whispered. Then he was gone, a ghost into the Indian night.



#

Jason awoke to the first light of the new morning, and stretched luxuriously, pulling the ache out of his muscles.

He looked around the cavern expectantly, and sat up in alarm.

Ahote's things were gone, except for a few bundles left at his bedside. "Ahote," he called, but there was no answer. "Ahote!"

He'll come back. Maybe he's only gone out for a while. But he knew better, knew in his heart that he'd never see Ahote again.

He lay back on the pallet and wept, all the while knowing he was acting like a child, not the man his Father wanted him to be. Not a man like his brother Cody was.

But he didn't care. He cried for the loss of a friend who had somehow been more than a friend.

For the possibilities he'd tasted and been denied.

For someone he never really knew.

At last, no more tears would come.

He didn't know how long he lay there, only that the sun was nearing its zenith when he returned to himself at last. He sat up slowly, groggy from the sleep and tears, and used some of the water Ahote had left behind to rinse his face and hands.

It was only then that he saw the other gift Ahote had left for him.

He picked it up and turned it over wonderingly. It was a little doll, shaped of dried reeds, in the form of a miniature horse.

Jason smiled, then laughed out loud at the toy. Somehow, Ahote had known about Critter.

He stood and shouldered the basket, tied the water-skin to his waist, and made his way out of the cavern one last time without looking back. His Father's ranch couldn't be too far away.

As he shuffled away from the cavern mouth, he knew he was a different man than the boy who had fallen off his horse weeks before.

And he would remember the taste of Ahote's lips, the smell of his warm body, the feel of his muscles under his golden skin, and the smell of the rain on the autumn wind for the rest of his days.

Scott is an honorary resident of the Pacific Northwest - while he actually lives in Sacramento with the love of his life, his husband of 22 years, Mark, he has a strong affinity for both Portland and Seattle, and visits them regularly. He loves writing and amateur photography, and was lucky enough to have his first story accepted the same week that his first photo was chosen for publication. For their day job, Mark and Scott run a web design company, and also learn a little Italian on the side. As for sleep? "Time enough for that when I'm dead."



Final Monologue

Robin Wyatt Dunn

1

Though I am gone, I am with you.

I am the last but there are so many finalities in life; one more can hardly hurt.

I visited Portland once; a girl broke up with me there; I loved her too much.

It's a gloomy little town, full of that Western euphoria at the simple fact of freedom, the worst curse you can have, freedom, juicy and chewy and scrumptious buddly umptious, like a brunette in your mouth, like god comes for a visit and brings ice cream, just some vanilla ice cream, or chocolate.

I'm going, but why?

Wim, are you there?

Peter?

I love you guys.

Berlin?

I'm coming—

2

At first I saw her eyes. Looking at me over the stone, and I thought, finally, I made it, a real hottie. And then I saw her body, and I knew she was dying.

I went over to her, and I said—

What does it matter what I said.

The last person in the world and she was dying in my arms, and all I could think



about was that her blood was going to mess up my shirt.

But this Apocalypse is no punishment for me, I know that. I'm a petty evil man in a long history of them; my Y chromosome compels me to them, to all of my evils.

And so let me rejoice in them, though everything I've known is gone, let me rejoice in them, with you.

Whoever you are.

It is good to be evil!

It is good to be as evil as you can be, if you survive!

And as we survive together, let us be evil together! And let us hold hands in our evil together!

And let us pass into this passing away, together, together as a mighty frame on the Earth, written in an alien language only God can read, indestructible, mightier than the mightiest storm, huger than heartache, my loneliness nested next to your own.

Though my end is coming I can say to you that it has its own strange joy to it, that it is a birthright to die, the only guarantee, and so joyous for that, that we are made this way, made this way and made sooner, sooner than be imagined, faster than light, my love for you over these quarks the radio transmissions tight beamed into your soul, Portland,

Portland you are the port and I am the transmission and I am coming home!

Do you read me?

3

I thought I got you with that one. I guess this is still going on.

I guess we still made it, for a while.

For a while, a while, a while.



I loved this woman and now she's gone.

We're all gone.

All gone away, my purity, my purity is only a word,

Death make me filthier!

Filthier than a sore!

And death to all the priests!

All these priests who made us what we are! What am I saying, they're already dead!

And this message will destroy you, whoever you are, I've put that kind of love in it, that little self destruct code.

If this message is reaching you, I am already dead!

I am light from the last storm, sent to you, for your entertainment. . .

Tell me, how is Portland?

Is the rain musical and untoward?

Are your women beautiful still, in some time without meaning, are they still frustrated by everything? Even beer?

Take me to you and make it right, make it all the right that you might need when you too are gone into this breeze not storm or wind but air, air everywhere, filled with your voices, Portland—

Don't tell me that you didn't know!

Don't tell me that you didn't know and did nothing!

I can see you with the scimitar—



Robin Wyatt Dunn was born in Wyoming in the Carter Administration. He lives, writes and teaches in Los Angeles.

Our Unconscious Hours

Janelle Rainer

Spilled drinks
glisten on the floor
like oil spills.

The whiskey, the wine
brings us
to our knees

like the bedtime prayers
of our childhood.
The writhing bodies

on the dance floor
are shadows
pulsing together,

arms outstretched
to the starless night.
The dance

is a sacrifice
for good fortune,
for summer wind,

for this night
to never end.
Time is music,

the grinding pulse
of seconds.
Time becomes

something measurable,
a concrete thing.
The brave

and gritty sound
strings together
our unconscious hours.

Janelle Rainer is a 24-year-old poet and community college teacher living in Colville, Washington. Her work has appeared in Harpur Palate, Steam Ticket, Script, Sugar Mule, and elsewhere. She earned an MFA in Poetry from Pacific University in Forest Grove, Oregon.



Disease of Trochee

by Christopher A. Sanford

It is not us who are God's favorite children, but words; we are but the messy means by which they are sustained.

Florence K. Becker, *The Man-Eaters of Ogondo*, 1931

I met Mr. Latimer during my second year of residency, while rotating through the neurology service at Harborview Medical Center in Seattle. I was a family practice resident and, frankly, not a lot was expected of me. I was to round on the in-patients in the morning, see clinic patients in the afternoon, and prepare the occasional talk for the conference on M&M—morbidity and mortality. It was a time when I measured my affection for a service by its call schedule and consequent ability to deprive me of sleep, and by that criterion my month of neurology was genteel, a respite: 8-6 weekdays, no overnight call, no weekends.

Among physicians there exists a stereotype, always pejorative, for each medical specialty. Internists are compulsive, indecisive, favoring deliberation to action. Orthopedic surgeons are cowboys. Radiologists are cautious, reluctant to make definite diagnoses. (It is said the official plant of the National Radiologist's Association is the hedge.) General surgeons are abrupt, bad dressers, given to sweeping aphorisms, self-important, "often wrong but always certain." Family practitioners are amiable but dumb. Psychiatrists are weird.

Neurologists are smart but ineffectual. They can delineate a lesion—diagnose the cause and locale of injury—but then cannot do much about it. As with the other stereotypes, this characterization is inaccurate and unfair, born

of the need to denigrate an unshared expertise. The neurologists at Harborview were bright, fanatically methodical, occasionally goofy, and conscientious to a fault. None of their patients were curable per se. The neurologists settled for small gains, partial successes. A Parkinsonian, shuffling gait was sped up a mite, seizures made less frequent, tremors less trembly. Their interventions were never as flashy as starting a stopped heart or as concrete as straightening the fragments of a shattered bone but with their cautious, unheroic care the neurologists eased the lives of their patients, and I respected them.

During mornings rounds we saw those patients sufficiently debilitated to require hospitalization: patients with strokes, spinal cord injuries, brain abscesses, and meningitis. Afternoons in clinic we saw the ambulatory patients: limps and stutters, palsies and twitches. We saw apraxia, ataxia, aphasia—symptoms that sounded, to my ear, like alternate names for continents. Every weekday at eight a.m. we assembled by the nurses' station on Four South. Seven of us rounded. The role of Dr. Harper, Associate Professor of Neurology, our attending, was to be mystically brilliant. He had read everything, he retained everything. He could glance at a particular limp, or listen to a particular impediment of speech (so Cassie Alpert, the fourth-year resident, told me) and predict the results of the brain MRI with complete accuracy. His dress was dapper, even elegant. No one ever



saw him read a textbook or journal. It seemed he absorbed the most recent research findings by some unseen, effortless process, as an executive at a coffee processing plant might come to exude the aroma of coffee while never actually touching the stuff. Apparently his combination of intelligence, decades of practice, and ongoing presence in the hospital sufficed to keep him abreast; the coarse chore of reading texts and journal articles was left to those of us with lesser minds.

Hal Ocherman, the neuro fellow, possessed an excess of forehead and large, widely-spaced eyes, giving him the countenance of a contemplative Holstein. He was in his fifteenth year of higher education—four years undergraduate, four years medical school, five years neurology residency, two years neurology fellowship—and, as might be expected, was a bit off. A minute after you stopped conversing with him, he would smile and say, “Yes, right,” then chuckle, as though the impulse to respond to conversation took an unusually lengthy and circuitous path in his brain. It was an odd verbal tic, actually, and I wondered what we might make of it if he were the one being examined and diagnosed. I do not recall much of what he had to say on the topic of neurology, but I do recall that he could twirl a reflex hammer on one finger, a feat I found impossible to reproduce.

Cassie Alpert, the fourth-year resident, seemed pathologically healthy, if that state is not too oxymoronic to exist. (Or, possibly, my need to apply a diagnosis to every person I encountered said more about my state at that time than about the person of Cassie Alpert.) She was fit and moderately optimistic, pragmatic, the mother of two kids, possessing neither substance abuse problems nor adult-child-of litanies. Her focus was to obtain a slot in a neuro-

logy fellowship. During rounds she scribbled on vast application forms for fellowships and grants. Only her physical person and not her mental presence, it seemed, was required as we visited the in-patients. Occasionally, Dr. Harper would direct a question to her, and she would answer concisely and correctly—her knowledge of neurology was obviously encyclopedic—then return to her paperwork.

Ron Delacroix, the intern, was skinny and hunched, efficient and pitiless. Like a P.O.W. who has resigned himself to a lengthy incarceration he spoke only when spoken to, performed all tasks demanded of him with neither complaint nor enthusiasm, and volunteered no information about himself. He seemed to be a decent guy—he never used the pejorative “gomer” for an elderly person, for example—and I would have liked to have gotten to know him better but clearly he did not have the time or inclination to form a friendship.

Dustin and Justin, the medical students, were perky and useless. Fresh from two years of lecture, they were stuffed full of pharmaco-physiological trivia but could not apply a Band-Aid without getting it twisted and stuck to their fingers. Their role, as understood by themselves, was to learn the fundamentals of neurology and ascertain if it might be the specialty for them; their role, as understood by the rest of the team, was to stay out of the way.

And finally there was myself, who, as I have said, was a second-year resident in family practice. I was still numb and disinterested from the abuses of internship and my goal, sadly, was not to learn neurology, but to get through the month, to jump through the requisite hoop. I found regular, sufficient sleep to be intoxicating but it did not occur to me to apply my newly



acquired energies to the study of neurology.

Given all that manpower it would have been reasonable and just to divvy up the labor between us but in fact Ron, the intern, performed the bulk of the work. Ron arrived at the hospital at five-thirty a.m. to round on the in-patients; it was Ron who wrote the lengthy initial admit notes, the daily progress notes on the in-patients, the consult notes, the hospital discharge notes. He was responsible for knowing all lab values on all patients, and performing all “scut”—tasks without educational benefit, such as drawing blood or phoning social workers about patient placement— requested by the resident, the fellow, or the attending. It was as though he were the sole frat pledge at a large, malevolent fraternity and hence the sole target of prolonged hazing energies.

We were a congenial team, free of the one-upsmanship and tantrums that plague some services. Dr. Harper was inspirational. Hal Ocherman, the fellow, spent most days in his lab, analyzing neurotransmitters in a gas chromatograph and annoying rats. Cassie Alpert, fourth-year resident, filled out byzantine applications for neurology fellowships. Ron worked and was near-silent. I rounded on the patients, wrote brief notes in charts, and left for home on time. Justin and Dustin were assigned brief talks on neurologic diseases by Dr. Harper; tasks, I believe, designed to keep them busy and out of harm’s way. We all felt a little bad for Ron—he did more work than the rest of us combined—but it did not occur to us to offer to help. The abuse of interns is a hallowed and inviolate tradition in medicine. His misery seemed the status quo, and like many long-standing traditions it seemed to require no justification.

We were asked to consult on Mr. Latimer



when pulmonology noted a peculiar defect of speech. He had been admitted two weeks prior with pneumonia, which was now healed. Initially he was mute, and when he did begin to speak his speech was odd and incomprehensible, and the pulmonology service wondered if he had had a stroke.

We clustered around his bed. He was wan and thin with monk-pattern baldness. His eyes did not meet ours. As per tradition none of us introduced ourselves or offered to shake his hand. We spoke as though he could not understand us, indeed, almost as though he were not present. “Dustin,” commanded Dr. Harper, “present Mr. Latimer.”

Dustin spoke in a rapid, nervous monotone. “Mr. Latimer is a white male who appears to be in his late thirties who was admitted to this facility for fever and a productive cough. He responded favorably to IV ceftriaxone—”

“Dustin, what’s wrong with him?” asked Dr. Harper.

“You...we don’t know.”

“No, I’m not asking for a diagnosis. What’s wrong with him?”

“He had a left lower lobe pulmonary infiltrate—”

Dr. Harper interrupted. “Dustin, no. We’re neurologists. What’s wrong with him? Why were we asked to see him?”

“He has an expressive aphasia.”

“A what?”

Dustin shrank. There is nothing so embarrass-

ing as attempting jargon with a specialist in that specialist's field of expertise then hearing that specialist express lack of comprehension. "He talks...he talks....he talks funny."

"Yes. He talks funny. A rare syndrome. In fact, unprecedented. Predicted but never documented."

"Sterilize the longitude," said Mr. Latimer. "Rotill the destiny." He moved his head up and down a little as if keeping time to a song.

"It's an odd lesion," said Dr. Harper. "The rhythm is trochaic, that is, consisting of two-syllable feet, each stressing the first syllable. He alternates three-syllable and one-syllable words. It's nonsensical. Note the absence of adjectives."

"Detonate the parable. Vilify the janitor." Mr. Latimer's tone was deliberate, unhurried. A stroke could cause expressive aphasia—inability to speak—or receptive aphasia—inability to comprehend speech—or paralysis or sudden death but a stroke could not, to my knowledge, make a man chant gibberish like a cheerleader.

"Televise the bugaboo. Subsidize the mineral."

"Note the rigid grammar, the fixed syntax."

"What's...." I touched my head. "What's—"

"He appeared in the ER two weeks ago," Cassie said, flipping through his chart, "with a cough and a fever. No one with him."

"Verify the parapet. Purify the viaduct."

I had heard of grandchildren dumping grannies in the ER and heroin addicts dumping victims of overdoses but I had never heard of anyone dumping speakers of cadenced nonsense. Per-

haps it was a new trend, a consequence of shifting health care insurance. A wife checked her insurance booklet and learned that alterations of speech unaccompanied by other symptoms were exempted from coverage, and, fearing fiscal catastrophe, pushed her husband from their car at the ER door and fled.

"Annotate the curlicue. Paraphrase the hominid."

"At first he wouldn't say a word," she continued. "They didn't know if he was retarded, or stroked out, or what. Sputum grew out Klebsiella, sensitive to about everything. He gets better than two days ago started talking in what the pulmonology intern called 'short, inappropriate sentences.'"

"Desiccate the embassy. Amplify the Styrofoam."

We watched as Dr. Harper performed a thorough neurological examination. The mental status section was impossible to conduct as Mr. Latimer ignored questions. His speech occurred without prompt or relevance to antecedent comment. The palpation of Mr. Latimer's neck elicited the comment, "Castigate the polyglot." Dr. Harper watched Mr. Latimer's pupils constrict in response to his penlight, and observed Mr. Latimer's big toe plantar-flex as the bottom of his foot was scraped with a car key. At the conclusion of his exam Dr. Harper wrote a lengthy note in Mr. Latimer's chart and Hal began his exam.

A patient at a teaching institution is examined by the attending, the fellow, the resident, the intern, and medical students. Ultimately, excellent care is the norm, but its delivery is tedious and redundant. And pity the patient who is interesting. The above litany of examiners is that of the patient with a routine illness. If the



illness is rare, or atypical in its presentation, or lurid in its mechanism of injury, why, half the physicians in the hospital and the entire student body of the affiliated medical school will find cause to visit, examine, probe, prod, interrupt meals, and prevent sleep.

Everyone examined Mr. Latimer. First-year medical students pulled gleaming new reflex hammers from their new leather doctor's bags and tapped on his knees. Second-year students attempted psycho-social medical histories for their class, *The Art of the History and Physical*. "How many bowel movements do you have per day, Mr. Latimer?" he was asked by a sincere and respectful student with a natty goatee. Silence. "What is the frequency of your sexual relations?"

"Emulate the neoprene. Theorize the somersault."

"Has the consistency of your bowel movements changed recently?"

"Implicate the trapezoid. Quarantine the concierge."

Despite the unsalient nature of reply, the student continued his litany of questions. Apparently he was unable—whether from lack of permission or lack of insight, I cannot say—to realize the futility of his interview and cease his efforts. Given the total absence of sensical discourse between the two, the medical student seemed as much a nonsense-spewing automaton as did Mr. Latimer.

I took to using his room as a library annex. Afternoons I sat in a chair in a corner and read my neurology text and listened to Mr. Latimer's proclamations. I felt I had a rapport

with him, although I admit this may have represented a one-sided affection on my part. His words seemed softer when we spoke, his pacing slower, his choice of words less technical and obtuse. When accosted by a mob of white-coated, jabbering physicians-in-training, as he was each day, his speech became terse, rigid, monotone. But in the late afternoons, myself his sole visitor, he grew more garrulous, almost expansive. Looking back through *Fundamentals of Neurology, Third Edition*, Witherspoon and Funk, I can read his suggestions, commands, exhortations which I copied in the margins. Next to the discussion of multiple sclerosis, I wrote:

"Complicate the laundromat.
Simulate the bayonet.
Jettison the moccasin.
Isolate the pilgrimage."

And next to a description of the seven clinical variants of metachromatic leukodystrophy, I transcribed:

"Mutilate the amulet.
Amortize the neophyte.
Gratify the fuselage.
Orchestrate the cellophane."

It seemed at once nonsensical yet imbued with some latent, subterranean meaning: an oblique liturgy, an opaque haiku. Sometimes I would attempt reply, but I do not know if I can say we had conversations. We alternated speaking, and if that defines a conversation, then we had conversations. But if by conversation we mean interaction and exchange of ideas, sequential and related comments, then we did not. We talked at each other. I understood none of his remarks; what he understood of mine was unknowable.



I watched as medical students and specialty teams shone lights into his eyes and ears as though a label for his illness might be written in plain sight. They percussed his chest and listened to his heart, pushed on his belly and twisted his calves this way and that. So many people banged on his tendons with reflex hammers that a small swelling developed on one knee and the nurses were forced to post a sign on the wall of his room: “No patellar tendon reflexes please.” But not everybody read the sign, and medical students would periodically note the swollen knee and his wince when they bapped it with the hard rubber heads of their reflex hammers. This was the only “positive finding” on physical exam, the only abnormality; otherwise his physical person was unremarkable.

We only knew Mr. Latimer as he existed in his hospital bed, in our hospital, eating hospital food, surrounded by doctors. Perhaps his odd speech was a response to a medical milieu, a grammatical equivalent to white-coat hypertension. Perhaps at his home, with his family, he was verbose. Perhaps he was a professor in elocution, his truncated sentences a phobic regression induced by the presence of medical personnel. Who knew?

As the physical exam did not reveal the cause of his pathological speech, and obtaining his past medical history was impossible, we turned to laboratory analysis. We obtained a computerized tomography study of his brain, which was normal. The magnetic resonance imaging of his brain was normal. The positron emission tomography of his brain was normal. His blood sodium, potassium, bicarbonate, chloride and glucose were normal, as were his liver function tests and thyroid studies. Titers for Lyme disease and syphilis were negative. He did not

have malaria, or AIDS, or dengue fever. He was found to be free of kuru, a progressive and fatal neurologic disease limited to the natives of the highlands of New Guinea.

He was, in the cruel parlance of residents, a “fascinoma:” an interesting case, something rare, a teaching case, a patient about whom an article could be published. Inevitably, there was a turf battle. The neuro service wanted to keep him. Psych, pointing out the plethora of negative tests, claimed he fell into their domain. Pulmonology, noting he had originally entered the hospital onto their service, made noise about reclaiming him. Such was the clout and pull of Dr. Harper that Mr. Latimer remained on the neurology service, albeit with a multitude of unrequested exams, consultations, and opinions. Every day a dozen notes appeared in Mr. Latimer’s chart. Each bore a title: Gastroenterology Resident Note, Otolaryngology Attending Note, Psychiatry Fellow Note. The Pulmonology Intern’s notes stated that Mr. Latimer’s lungs remained free of the pneumonia which had been the initial cause for his admission. Psychiatry Resident notes described his patter as “metered word salad.” The chart soon came to resemble an oversized, underedited novel with multiple narrators and an inconsistent tone. “No narrative arc,” a literary critic might complain. “Protagonist’s motivation unclear.”

Chart notes often quoted a line or two verbatim. “Amputate the bombardier,” Mr. Latimer told the social worker, Phyllis. “Magnetize the émigré,” he said to Dr. Lhasa, the attending pulmonologist who had first referred him to our neurology service.

Mr. Latimer spoke in his funny way and we spoke in ours. Medical school can be viewed as



a Berlitz school for nascent physicians and by graduation each of us was fluent in the multisyllabic, agglutinated latinates of medicine: lengthy terms made lengthier with glommed-on prefixes and suffixes, arcane borrowings from French and German. We could say anything such that only another physician could comprehend our speech. Even the simplest of concepts, already adequately described by extant and widely understood words, are given lofty medical terms. “Idiopathic” means of unknown cause; “innominate” is the inadvertently paradoxical term for something which does not have a name.

During residency I learned the actual terms and slang of each specialty; street medicine, as it were. A cardiologist says “squirt” to mean “pump,” as in, referring to a bad heart, “It don’t squirt.” Anesthesiologists use the verb “tube” to mean to intubate, to put a breathing tube into someone’s throat. Emergency room docs refer to ambulances as “rigs” and to anywhere outside of the hospital as “in the field.” A man who is unconscious in the field for unknown reasons receives the working diagnosis of “man down” and the paramedics are instructed to “load and go” or “scoop and run,” i.e. to grab the guy and get back to the hospital ASAP. An internist might refer to a ventilator as a “blower.” Pediatricians use FLK and GLM for funny-looking kid, good-looking mom. Psychiatrists use the verb “spark” for electroconvulsive therapy: “If the antidepressant doesn’t work, we spark him.”

Words become acronyms, acronyms become verbs. Patients are TURP’ed and CABG’ed. Syllables are added to words for no reason. “Dilated” becomes “dilitated,” “doses” becomes “dosages,” “oriented” becomes “orientated.” Neurologists, of course, have their own par-

lance. A “deficit” is a specific inability; a weakness here, a numbness there. An “event” is something bad, e.g., a stroke. “Progression” means to worsen, as in the progression of the symptoms of a stroke. “Lesion” refers to the physical ding in the brain that gives rise to the deficit.

The parlance of neurology struggled to describe the pattern of speech of Mr. Latimer. Dr. Harper shook his head when Dustin suggested we might use Tourette’s as a working model. “You mean you think these are complex phonic tics?”

Dustin shrugged and folded his shoulders forward, his gesture saying: I know I’m wrong, it was just an idea, don’t make me defend it, don’t expect me to argue with you, I’m too ignorant, you win, I’m a dunce.

“Tourette’s? No, no. Cassie, how do we know that Mr. Latimer does not have Tourette’s Disorder?”

She looked up from a fat application. “Both motor tics and phonic tics must be present for the diagnosis. Mr. Latimer does not twitch. And the complex phonic tics of Gilles de la Tourette Disorder are characterized by the shouting of obscenities— coprolalia—or the repetition of someone else’s words or phrases— echolalia—or the repetition of one’s own utterances, particularly the last syllable, word or phrase in a sentence—palilalia. Mr. Latimer’s speech falls into none of those patterns.”

“Yes. Thank you. And—anyone—what was Gilles de la Tourette’s first name?”

“George,” said Hal and Cassie in unison.

“Right. Anyway, Mr. Latimer does not have



Tourette's Disorder. But you may be correct, Dustin, in thinking that the primary diagnosis is psychiatric."

Dustin deshrank, smiled.

"Could this be autism?" asked Dr. Harper. Dustin wanted desperately to give the right answer. It was painful to watch him. He screwed up his face—

"Mollify the obelisk," said Mr. Latimer. "Disembowel the acolyte."

"Uh, no," ventured Dustin.

"Yes, it could be," said Dr. Harper. "We don't know an age of onset, of course. To establish a diagnosis of autism, his symptomatology would have to have surfaced before the age of three. And schizophrenia must be included on the differential. Tomorrow, Dustin, could you present a five-minute talk on schizophrenia and its psychopharmacology of treatment?"

"Sure," said Dustin.

I appreciated the harmonious, collaborative nature of our neurology team all the more when I witnessed the verbal fisticuffs of the other services. Interns were yelled at, called "Moron!" and worse. I watched as an intern, on the neurosurgery service, I believe, developed a heated discussion with her attending, something about the utilization of a particular protein in cerebrospinal fluid as a marker for risk of developing Alzheimer's Disease. The intern pulled a copy of a journal article from her white lab coat pocket and showed the salient paragraph to the attending, proving she was in the right. The attending glared at her and muttered, "Well, I suppose even a stopped clock is

right twice a day." The intern was not bright for being right; she was dumb, even broken, her minuscule region of superiority reliant on an accident unlikely to recur. And I watched as a general surgery attending, upon receiving an unsatisfactory response to a query on some fine point of anatomy, hollered "Grab that!" and gestured to a bedframe. An intern grabbed the bedframe. "You just hold that! Hold that till I tell you to stop holding it! It might just roll away!" I found myself wondering, not for the first time, if we were examining the right people.

We had other in-patients, of course. Tony Neuhaus a bony, diapered young man with AIDS dementia could only repeat, "Kuh-rook, kuh-rook," a dispirited, desultory mantra. We fed him through a tube in his nose and hoped for permission from his family to stop his feedings, stop his IV antiviral drugs, and allow him to die. I overheard Dr. Harper tell his parents, "We're not saving a life here, we're prolonging a death," and I recall thinking that that was a good line, I would use that. And I remember Mrs. Katrina Isselbacher, a writhing middle-aged woman with Huntington's chorea, who produced grating, grinding sounds like cracking walnuts. Every day Dr. Harper's note began, "This unfortunate woman...." and I hoped I would never be the victim of a disease that necessitated my physicians to acknowledge—daily, and before any statement on my condition, as a sort of disclaimer—their inability to offer benefit.

But above all others I remember untanned Mr. Latimer in his hospital-issue thin green cotton pajamas, observing the wall opposite his bed as though gazing into the Copper Canyons of Chihuahua and Sinaloa and pondering his place in the cosmos. When he spoke, always without preamble or prompt, he sometimes took on the



impassioned tones of a political leader pleading with his constituents to keep faith in the difficult times ahead. At other times, when Mr. Latimer's voice grew more reflective and intimate, I would close my eyes and imagine myself at a poetry reading, or at a service of an obscure, near-defunct religious order led by a charismatic whose cryptic proclamations could be interpreted only by high and holy priests, as tea leaves and goat entrails are decoded by shamans and mystics.

Every day we rounded on Mr. Latimer. The rhythm of his speech never varied. At times he seemed to issue tense, coded commands to security or military personnel: "Terminate the leprechaun. Activate the debutante." I could imagine a secret service agent in a suit and sunglasses chanting into his lapel. At other times his patter seemed a prophecy of accelerated entropy, or a series of commands intended to incite apocalypse. "Cultivate the arsenal. Extricate the infidel. Retrofit the petroglyph." Retrofit the petroglyph? Did he say that for the rhyme, or the rhythm, or the meaning? More often his speech was utterly nonsensical, without theme or organization save inviolate rhythm. "Coalesce the misanthrope. Notarize the trampoline. Laminate the deity," and I was sure his speech was as bereft of semantic content as a song on a flute.

One day on rounds Dr. Harper—his pacing leisurely, as befitting the beginning of scholarly discourse—said, "Trochee is defined as a foot of two syllables, a long syllable followed by a short one in quantitative meter, or a stressed syllable followed by an unstressed one in accentual meter. And what are the other types of meter? Cassie?"

She placed a finger on the center of a long

paragraph on an application form. "Iambus, anapest, dactyl, spondee, pyrrhic, tribrach, amphibrach, cretic, paeon, bacchius, and, and...." "Ionic a minore, and choriamb," said Dr. Harper. "Very good."

Justin and Dustin scribbled on their clipboards.

"This isn't testable, gentlemen."

Justin and Dustin put their pens in their pockets.

"It sounds more like dactyls to me," said Hal. Only Hal was bold enough to contradict Dr. Harper. "All his longer words are three syllables, each stressed on the first. That's a dactyl. Or, if you include the 'the' and the pause between sentences, he enters paeonic meter." "No," said Cassie. "Listen to him. It certainly isn't dactylic. That's one-two-three one-two-three. Waltz time. Sometimes he does enter into the paeonic—one-two-three-four—but more often he alternates syllables, accenting the first, which is trochee. Bip-bip bip-bip bip-bip bip-bip." She clapped her hands with each bip. "Trochee."

"Vivisect the alibi. Copyright the ladybug," said Mr. Latimer.

We turned to Dr. Harper to arbitrate and judge. "As you know," he said, "the language area of the brain lies—where? Ron?"

Ron was slumped in a chair, asleep. He stirred at hearing his name. "What? What? I'm sorry. What was your question?"

It was permitted to let one's mind wander during rounds but it was considered poor form to fall asleep. "The language area of the brain," Dr. Harper repeated. "Where is it?"



“In the cortex that surrounds the Sylvian fissure in the dominant hemisphere,” said Ron.

“Yes. And where is the center that generates speech? Students?”

Justin and Dustin shrugged their shoulders and looked at Ron. Ron shrugged his shoulders and looked at me. I looked to Cassie and Hal.

“Broca’s area,” said Cassie and Hal in unison.

“Yes. Which lies in the third frontal convolution, just anterior to the face area of the motor cortex and just above the Sylvian fissure. And the center of language reception?”

“Wernicke’s area,” they said, again in unison, “is in the superior part of the posterior temporal lobe.” Listening to the two scholars speaking in unison was unnerving, like overhearing some secret and hallowed rite of a clandestine fellowship, and worrying that an inviolate regulation of this covert assemblage is that anyone who overhears the sacred chants must join the fellowship or be put to death.

“Yes. Neuroanatomists have not as yet elucidated centers within that area which give rise to the generation of different rhythms of speech. There is no known anatomical region of trochee or center of dactyl. The distinction about which you are quibbling is without clinical significance.”

Goodness. Not only did Dr. Harper know everything, but what he did not know was not important. “An injury to Broca’s area,” he continued, “yields a language disorder characterized by deliberate, telegraphic speech with very simple grammatical structure though the speaker may be quite clear as to what he wishes

to say. An injury to Wernicke’s area results in speech which is typically fluent but empty of content, and characterized by circumlocutions, a high incidence of vague words like ‘thing,’ and sometimes neologisms and senseless word orderings. Could Mr. Latimer have one of these two varieties of aphasia?” Dr. Harper’s gaze fell on me.

“Well, yes,” I said. “The first. Deliberate, telegraphic speech with simple grammatical structure. That sounds like him.”

“No. For Broca’s aphasia to be present, there must be damage to Broca’s region of the brain. Our CT, MRI and PET scans all indicate the lack of physiologic damage to the cortex. And his speech is not truly telegraphic. In telegraphic sentences, function words and inflectional endings are omitted. His sentences are grammatically correct.” I nodded and recalled that it was not my role to provide correct answers or to be insightful on rounds.

Mr. Latimer continued to be a hospital-wide sensation. A fourth-year medical student, Stacey, caused a brief tumult when she claimed Mr. Latimer said “Ascertain the malady. Diagnose the dialogue,” a clear indication of cognition and a link between his words and milieu. But on her return to his room, with a resident in tow as witness, they were greeted with “Terrify the broccoli” and his prior remarks were judged to have been unintentional, the verbal equivalent of a chimpanzee typing a few lines of Shakespeare by chance.

There soon developed two camps of opinion in the hospital regarding the utterances of Mr. Latimer. The majority held that his comments were random, noise, words but not language. The opposing camp believed he chose his words



with care and spoke in some fixed cipher; when his personal Rosetta Stone was discovered and elucidated, meaning would become apparent. I fell into the former camp, with those who believed his words were merely noise, but I noted I gravitated socially toward denizens of the latter camp, who believed his words conveyed some message, however submerged. Interestingly, the camp of believers, who intuited his speech was meaningful but merely untranslated into recognizable sense, was comprised of medical students and a few interns but almost no residents, fellows or attendings. It seemed the faculty for belief without objective evidence died a steady, inexorable death during medical training, while the ability to view events as chaotic, without design or intent, was instilled. Those early in training were optimists and believers, still able to make decisions from their hearts, or guts, or some other locus of impulse and opinion so derided by our profession for its inferiority to the brain. They were wrong, but they were better people.

The psychiatry team rounded on Mr. Latimer, as did the teams of internal medicine, infectious disease, cardiology, gastroenterology, and rheumatology, each examining him and speculating as to the causation of his fancy patter. Even orthopedics made an appearance in the form of Thurmon Mackaulay, a third-year orthopedics resident, who planned a fellowship in maxillofacial surgery. It was my understanding that phrenology had been debunked for a number of years but nonetheless Thurmon palpated the skull and neck of Mr. Latimer for some time, periodically pausing to make notes in his spiral-bound pad. I half-expected him to produce a pair of calipers, and, like the old doctor at the opening of *Heart of Darkness*, measure various distances on Mr.

Latimer's cranium. I did not think the palpation and measurement of bones would do much good; as that old doctor said, even as he measured, "The changes take place inside." Thurmon's chart note was brief, noting a few normal findings then concluding, as did so many other notes, that the speech of Mr. Latimer could not be ascribed to any pathology within his field of specialty.

The most incomprehensible note was written by a graduate student in linguistics, Rutger, who had heard word of Mr. Latimer down at the main campus. After attempting conversation with Mr. Latimer he wrote a lengthy chart note in tidy block lettering. It was a waste of legible writing. I assume another linguist could appreciate his doubtless erudite observations on the speech and person of Mr. Latimer, but not even Dr. Harper, heretofore unstymiable, could ascertain the meaning Rutger's verbiage. Hal read aloud from Rutger's note: "Segmented discourse representation," he said. "Near-zero polyvalence." We all shook our heads at the wonder of it all. "...an idiosyncratic glossolalia, characterized by absence of metonymy, minimum of synaesthesia and near-reduplicative features. Were there an entire cohort of speakers of this anomalous dialect, it would be interesting and possibly insightful to perform variants of glottochronological and lexicostatistical studies, noting not a shift in key cognates, but in *jus et norma loquendi*." Rutger used a number of terms with which we were familiar—"syncope," "ventricular," etc.—but it was obvious from their context that all had meanings differing from those assigned by physicians. At one point, Rutger wrote, Mr. Latimer told him to "Juxtapose the Polaroid," and that was the one portion of Rutger's note which made us feel we were on familiar terrain.

Over the next several days I was to learn that



Rutger confined his distancing jargon to the written page; in person his thoughts were refreshingly graspable. “Essentially,” he told me one afternoon as we ate sandwiches in Harborview’s basement forest of Formica cafeteria, “Mr. Latimer is operating by some rogue grammar that generates commands which are anomalous and semantically unacceptable. A lot of what he says, well, he can say it, but he shouldn’t. I don’t get it. Why are his verbs locked into the imperative voice? Why is every damn sentence three words long, exactly, always?” I shook my head and recalled my grandmother’s explanation of the behavior of an oddball relative. “Oh, that’s just his way.”

As in other areas of study, there exists an inverse relationship between a specialty’s ability to impart tangible benefit, and that specialty’s linguistic convolutions, philosophical contortions, and professional posturing. At one extreme is orthopedic surgery. Their operational algorithm might be stated as: bone broke—fix bone. It is a hands-on specialty yielding quick and tangible results, and its practitioners feel little need to engage in verbal acrobatics or philosophic frenzy.

At the other end of the spectrum are psychiatrists. The benefits of psychiatrists’ ministrations are subtle and resistant to quantification; hence psychiatrists are the most articulate of physicians. Possibly this authorial and oratorical supremacy is slipping as specific biochemical aberrances are correlated with psychiatric disease states and psychiatrists move closer in mindset and parlance to that of other specialties, but even so it seems a required rite of ascendance to board certification in psychiatry must be a visit to Ireland to kiss the Blarney Stone. Whereas the internists dismissed Mr. Latimer’s speech as “nonsensical” or “incom-

prehensible,” the psychiatrists characterized it as “linguistic hieroglyphics,” and an “intermittent incantation.” The psychiatrists were also more astute students of the speech of Mr. Latimer. They noted the inflexible syntax, inexorable meter, varied lexicon, and the absolute absence of repetition of verbs and nouns. A second-year psychiatric fellow went so far as to speculate that after Mr. Latimer utilized all the words that fit his form he would cease to speak.

The psychiatrists were also the only consultants to note his varied moods. He was, in turn, irritated, angry, complacent, serene, as evidenced by the pace of speech, the tone of his voice, and his facial expressions. He whispered, he yelled, he cajoled, he never, ever made eye contact. One factor behind the insights of the psychiatric team, I believe, was the simple fact of their spending considerable time at the bedside of Mr. Latimer. Most medical teams would appear, lecture, and examine. They might note his first few utterances, but once the nonsensical nature of his comments was determined, most would ignore his further attempts at oral communication, write a note in his chart, and depart. The psychiatrists, by contrast, sat and listened and attempted to converse. Janis, a second-year resident, had a conversation with Mr. Latimer thusly:

“Good morning, Mr. Latimer.”

“Diagram the lollipop.”

“Do you like lollipops?”

“Video the idiot.”

“Are you angry?”

“Weatherproof the daffodil.”



“I’m not sure I understand you.”

“Vandalize the platitude.”

“What are your favorite platitudes? I’ve always liked ‘Do unto others as you would have them do unto you.’”

“Optimize the camouflage.”

“I see....”

I admired her patience, her persistence, her assumption that sense resided within the habitus of Mr. Latimer. To me, he seemed to circle sense without entering the domain of rational discourse verbatim. One afternoon he declared, “Sabotage the atmosphere. Booby-trap the pollywog,” and for a moment I was sure he was addressing global warming, the depletion of the ozone layer and declining frog populations. But his next words were “Vindicate the hydroplane. Desecrate the stadium,” and I was again certain that his speech—neither pretty nor profound—was chaotic, motivated by some desire other than that of conveying semantic information. The jagged smoke of a plane struck by flak.

I listened for concepts and themes, logical connections. I attempted to tease out meanings from his broken parlance but generally I was baffled. His speech was acoustically pleasing but semantically empty, words chosen for sound, not meaning. Or were they? “Centrifuge the continent.” It was just sounds, rhythmic words. You could almost dance to it. Sometimes he would smile slyly after a comment, as if waiting for us to get the joke. “Commandeer the imbecile,” he said once, and winked at an invisible person to my left. “Promulgate the supplicant.” At other times he

was agitated, even angry. “Obviate the buffalo! Conjugate the guillotine!” But more often he spoke in the even, patient tones of one who is attempting to catalog every impulse in the universe. “Contemplate the boomerang. Pacify the apogee. Instigate the discotheque. Reconcile the subterfuge....”

It was difficult for me to accept that someone with his vocabulary could be speaking nonsense. One morning on rounds I pressed my fingers into Mr. Latimer’s hands. “Squeeze my fingers if you can understand me.”

Nothing. He continued to watch the TV.

I switched the TV off. He continued to gaze at the dead olive screen. I looked at the TV screen and saw the reflections of Mr. Latimer and myself staring back at us. “Mr. Latimer,” I said, “I’m trying to help you.”

“Circumvent the isotope,” he murmured, and closed his eyes.

We were all baffled. Dr. Harper said on rounds more than once, “This is beginning to smell psychiatric.” This denouncement absolved him of any responsibility to offer a diagnosis. He was saying: the disease from which this man suffers is not a neurological one, therefore, its diagnosis is not my task.

There remains a rift as deep as the suboceanic chasm which gives genesis to Wallace’s Line between psychiatry and other medical disciplines. Non-psychiatrists view psychiatric illnesses as neither real nor treatable (although, interestingly, when they attempt to impugn or denigrate these illnesses by calling them untreatable, they are tacitly admitting their existence; a non-entity cannot be considered untreatable). A lexicon of pejoratives has evolved to refer to the morass of psychiatric disturbances. “Supra-tentorial” refers to the tentorium in the brain,



above which lie the cerebral hemispheres, such that when a physician categorizes symptoms as supratentorial it is understood that it is all in the head, and hence less real, or not real at all. Freud's preferred term was "hysterical." The most common contemporary term for brain-generated symptomatology is "functional." If a physician states someone's back pain has a functional component, it is being suggested that the patient has something to gain by this symptom, and may be exaggerating or even inventing it altogether. Functional, in this context, means, in a word, bogus.

Was the locution of Mr. Latimer bogus? Was he putting us on? No. I never thought it for an instant. It is difficult for me to characterize his nature and deportment. "Sincere" is inadequate. His presence, his words, were clearly inevitable, governed by some inner force as fundamental as gravity. But what inner force? And to what end? Certainly it was not irrelevant that his every utterance was a command. To whom was he talking? Whom was he commanding? Himself? Us? His children, or business underlings, or students? Did these unending commands stem from a desire for control—or—the opposite—were they the extension of a life-long habit of supervision? And why were his commands so bizarre? And why was rhythm—meter—his sole constant?

We yearned for data about his life prior to the hospital. Was he a computer programmer, or a pilot, or a minister? It seemed that any detail—a divorce, a business failure, a history of mental illness—might have comprised the foundation for a plausible theory for his behavior. But, as in most situations in which speculation exceeds facts, our surmises were wildly varied, hugely uncertain; less theories than guesses dressed up in doctorly phraseology.

"ICU psychosis," said Cassie Alpert. "He wasn't in the ICU, of course, but it should be high on the differential. The timing is about right. Twelve days after admission—he's sleep-deprived, in a foreign milieu, no familiar cues, circadian rhythm all screwed up, and zing!—psychosis. It's well described." In the middle of her answer, Hal chuckled and said, "Yes, right," and I was reminded of communications with space probes on Mars, with prolonged gaps between commands and responses.

"Could be a response to advertising," said Hal one morning. "All day we're bombarded by ads which order us around. Buy this. Be that. Just do it. Be all you can be."

Ron, incapable of speculation and too fatigued to gussy up his words, said "Beats the hell out of me. Maybe he's nuts, and he's always been nuts, and this is the way he talks."

"It's like Dr. Seuss," said Dustin, "with bigger words."

"He's like a record that skips," Justin said. "Except that what he says changes."

"It's like, one time I was helping my brother move," said Dustin, "and we set up the stereo at his new apartment and I dropped a beer on the turntable and the needle went way-ew way-ew—" He made a to and fro motion with his hand. "And you just heard a word or two from different songs, and it didn't make any sense. Like that."

We looked at Dustin. None of us nodded. "I guess it wasn't very much like that," he added. It wasn't very much like anything. We ordered more studies: nerve conduction tests, and a repeat EEG. A biopsy of the brain was considered, then rejected as exceeding a reasonable



risk-benefit ratio. Besides, no one could think of any diagnosis a brain biopsy might uncover that would give rise to his manner of speech. As the list of negative tests mounted, attention in Mr. Latimer waned. Many a physician's pulse quickens when presented with an opportunity to examine a patient with a rare disease. Most of us are bored, truth be told, by ingrown toenails and sinus infections, but given an opportunity to examine a patient with ornithine transcarbamylase deficiency, or Merzbacher-Pelizaeu disease, we are excited and attentive, grateful for the addition to our personal list of examined disease states. But unlabeled and undiagnosed as he was, Mr. Latimer was a bird of unknown species, a coin of unknown worth, and as such was regarded warily. He might turn out to be suffering from something as common as obsessive-compulsive disorder, or multi-infarct dementia, in which event any time spent on his case would not further anyone's bragging rights when the topic arose of "patients with rare diseases I have seen," as it invariably will when physicians assemble.

The number of daily chart notes lessened. Only the students, Justin and Dustin, rich with time as they were, continued to describe his speech in significant detail and speculate as to its causation. Dr. Harper chastised Dustin for making a comparison in a chart note between Mr. Latimer and a computer. The offending sentence read, "It's as though he has a bug in his software."

"Fifty years ago," said Dr. Harper, "they compared the brain to a vast telephone switchboard, because that was the most complicated thing of which they could conceive. And now we say the brain is like a computer, for the same reason. Well, the brain is not like a telephone switchboard and it is not like a com-

puter. In fifty years we'll have another metaphor, equally inappropriate, I'm sure." Dustin, desperate to indicate his enlightenment, nodded emphatically, and I doubt he used another simile in his charting for the remainder of his medical career.

Those who were not physicians or physicians-in-training were less amused by Mr. Latimer's speech. One afternoon a young clerk from dietary with a brisk, expedient demeanor stepped into his room and, pen hovering over clipboard, asked, "Chicken or fish?"

"Liquefy the pedestal. Barricade the satellite." The clerk, no stranger to nutcases, persisted. "Chicken or fish?"

"Comprehend the cofferdam. Improvise the sparrowhawk."

The clerk spoke more slowly, with exaggerated enunciation. "Chicken or fish?"

"Guarantee the pirouette."

"Chicken or fish!" I wondered how long this non-conversation might continue. They went back and forth a few more times. Finally the clerk said, "I'm going to give you fish. You like fish?"

"Fumigate the chatterbox," said Mr. Latimer, with some finality.

No force is so insidious as simple rhythm. Watching TV ads that month, I began to hear echoes of Mr. Latimer: "Customize the vehicle!" The presence of meter lent a heightened veracity to any proclamation, more so if rhyme, or assonance, or alliteration, or any other pleasing musical feature were present as well. "Max-



imize the merchandise!”

And, oddly, the scansion of Mr. Latimer infiltrated the commands and dictums of morning rounds and noon lecture. I distinctly heard Dr. Burkart, Professor of Surgery, exhort us to “Auscultate the abdomen. Minimize the laxative.” An attending in infectious disease instructed us to “Memorize the regimen. Vaccinate the traveler.” Dr. Fred Wong, Professor of Endocrinology, said we should “Analyze the chromosome. Scrutinize the insulin.” It was as though our cryptic patient were surreptitiously recording and distributing language tapes, and all of us were attempting to master the language of Latimer so that should we foray to his native land we would not appear unschooled.

“Dr. Harper?” I asked one morning on rounds. “You said this disease was predicted?”

He touched the Windsor knot on his tie. “Yes. Helmut Gierke, a German neurologist, published a case study in 1906 in which he describes a patient, Werner S., who spoke in iambic pentameter. Werner was an actor and, amazingly, was able to transfer his Shakespearean cadences to everyday speech, in both German and English. He became unable, actually, to speak in ordinary or random meter. When asked to read a sample of ordinary, unmetred writing he would mispronounce the words, forcing them into iambs.”

“Iambs?”

“Iambs. What was your undergraduate major?”

“Biochem.”

His look said dolt. “An iamb is a prosodic foot of two syllables, a short followed by a long in qualitative meter or an unstressed followed by

a stressed in accentual meter. As in—you’ve read Shakespeare, yes?”

I shook my head. “Did a book report on *The Tempest* in high school.”

“In the opening scene of *The Tempest*, when the boatswain says, ‘You do assist the storm,’ he’s speaking in iambs. Or in *Matthew*, Chapter 1, an angel of the Lord appears to Joseph and says of Mary: ‘For that which is conceived in her is of the Holy Ghost.’ Iambs. Or in *Moby-Dick*, when Ahab—Ahab, he’s the captain—when Ahab says, ‘Talk not to me of blasphemy, man; I’d strike the sun itself if it insulted me,’ again, iambs. Do you hear it? Duh-duh duh-duh duh-duh duh-duh.” He tapped his fingers together. “Helmut Gierke hypothesized that if a man could speak in iambic pentameter, well, another man could speak in trochee, or anapest, or spondee, or any other rhythm.”

It seemed remarkable that a physician could predict the existence of a disease he had never seen. It was like Einstein predicting the existence of as-yet-undiscovered subatomic particles, or an astronomer noting an unexpected wobble in the orbit of an outer planet then predicting the presence of another planet more distant still.

Not long before my month of neurology was to end I stayed late one night to research a talk on trigeminal neuralgia. When I left the hospital library it occurred to me I had not seen Mr. Latimer during evening hours, and I had wondered if he watched TV, or turned in early, or stared at a wall and spoke in his exacting cadence. I stopped in the corridor just outside his room and listened. I heard not one voice but two, both speaking in that compelling rhythm.



“Harmonize the atheist,” said Mr. Latimer.

“Monitor the surgery,” said a second, familiar voice.

“Insulate the azimuth,” said Mr. Latimer.

“Concentrate the specimen,” the second voice intoned.

I would not call it conversation. It was more like two drummers alternating solos, or two birds exchanging identically-cadenced songs. I stepped into Mr. Latimer’s room. Ron, the intern, sat at bedside.

“Navigate the blasphemy. Suffocate the catacombs,” said Mr. Latimer. His eyes did not rise to meet Ron’s but he turned his head toward him, and this was the greatest sign of social interaction I had yet seen him make.

“Specify the protocol,” said Ron.

I stood awhile in the doorway, listening, feeling I should comprehend more than I did. Ron, despite his chronic exhaustion, was the only one of us capable of answering Mr. Latimer in his native tongue. Perhaps this is the function of internship. The intellect is so pummeled that it instinctively responds to any voice in reflexive mimicry.

“Confiscate the firefly,” Mr. Latimer replied. Ron glanced at me. He did not smile or wave or say hi.

“Dr. Harper calls it trochee,” said Ron. “I call it four-four time. One-two-three-four- One-two-three-four.” He slapped his hand on his thigh. “It’s rock ‘n’ roll.” He paused, and for a moment looked ineffably fatigued. “I gotta go,” he said, and stood up.

Mr. Latimer returned his impassive gaze to the wall. I felt my presence—my intrusion—had broken something: a charm, a mood, a precise duet. Again I thought that observation corrupts, even destroys. Ron walked from the room. Mr. Latimer would not talk to me.

During my final days on the neurology service, Mr. Latimer spoke less frequently. Possibly he correlated his unusual speech with the unwelcome exams, and reasoned a mute man was less interesting. Or perhaps that second-year psychiatry fellow was right, and Mr. Latimer was running out of words. As his speech extinguished, so did the surfeit of exams, consultations, and bedside lectures. Only one note each day appeared in his chart, by Ron, always stating that Mr. Latimer’s lungs were without evidence of pneumonia, and that his verbalizations were infrequent.

And, penultimately and ingloriously, the status of Mr. Latimer became “dispo,” a problem of disposition. He was stalled and parked with us during the wait for a bed at a nursing home or a residential care facility. We had made him as well as we could (which, as regards to his mental state, was no better at all) and the question was now what to do with him. Every day we called the social workers, every day they told us they were working on his placement but all potential beds were full.

His words were slower, quieter, infrequent, his song an intermittent dirge, as though he were undergoing an incremental lobotomy. His speech became, if possible, less sensical than before, deteriorating into nursery rhyme babble. “Pit-a-pat the bugaboo,” he said with utter indifference. “Rub-a-dub the bric-a-brac.” Finally he ceased speaking altogether and was still and inert, a charred remnant of a burnt sparkler. And then one morning he was gone, A.M.A., against medical advice, that is, he left.



We phoned his description to the Seattle Police as we were unsure he could care for himself. Ron's lengthy discharge note described his "discharge diagnosis number two" (discharge diagnosis number one being his pneumonia) as "aberrant speech." He made no mention of his own visit to that aberrant state.

Looking back (utilizing the retrospectometer as we say) I feel badly that I failed to act to lessen the burden on Ron. Seeing his day-to-day misery was like witnessing a slow-motion prison beating. I am ashamed to say that I was so relieved to no longer be the pummelee, and so afraid to draw attention to myself (the applicable maxim would be the Japanese' "The raised nail gets hammered down") that I pretended to not notice his suffering. I pretended our treatment of him was normal, in his best interest. I pretended I was powerless to alter the quality of his life. In fact I was beaten down and self-absorbed, but I would like to think that should I again witness the abuse of an intern, I would intervene.

At the time I did not pay much heed to Dr. Harper's reference to the 1906 article by Helmut Gierke that predicted the existence of what came to be known as Disease of Trochee.¹ It was Dr. Harper's role, after all, to be preternaturally and impossibly knowledgeable concerning all aspects of neurology. It had not surprised that he would be familiar with a 1906 article published in German. But recently, made normally inquisitive by regular sleep, I asked a librarian at the University of Washington to find the article, and in a day I possessed a copy of an English translation of "The Case of Werner S." from the April 1906 Zeitschrift der Nervenerkrankungen (Journal of Nerve Illnesses). Helmut Gierke wrote: "[...these patients] favor rhythm over reason, sound over meaning....

Their heretofore rich language becomes uni-faceted...and certainly if the speech of Werner S. can be reduced to meaningless, metered verbiage, it can be anticipated that other, similar neuro-psychiatric insults could yield speakers of related patterns of speech: trochee, pyrric, and the like. It might be illuminating to attempt to correlate insult with meter: which suppressed desire causes the lilting, indirect, uprising iambus, and which the direct, confrontational trochee."

Helmut Gierke attributed the disorder to a desire to return to the womb. "Meaning verbatim becomes too painful (schmerzhaft) and the patient regresses into the babbling of a toddler, albeit in the vocabulary of the adult. The rigid adherence to a specific meter suggests a fear of loss of control....

"During the nine-month internment in the womb, from the meeting of gametes to birth, the developing fetus hears naught but the steady 'bap-bap' of its mother's heart. Is it any wonder we hearken after the solace of simple rhythm?"

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Soho Press published his first novel, Sutures. He published two books in 2008, both non-fiction, both on travel and tropical medicine: The Adventurous Traveler's Guide to Health (University of Washington Press), and The Travel and Tropical Medicine Manual, 4th Edition (Elsevier), which he co-edited with Dr. Elaine Jong. He's been faculty at the University of Washington since 2000. He's a family medicine doc; he has a secondary academic appointment within UW's Dept. of Global Health.



