

Doe

By Sean P. Kerrigan

Certainly, the only thing more claustrophobic than our call cubicle were these god-awful little grids. *16, Down*. Any time now, brain. As I surveyed down the list with a heavy head there was a modest revelation waiting for me at *15, Across*. "Kleptomaniac." The ups and downs of the crossword slowly began to cascade like dominoes, echoing as they fell to the ground one by one in my empty room. In my lethargy I had allowed my pager to get subsumed in the bed sheets surrounding me as it now crackled into life and filled any remaining space in the room: "*Arrival 10:13pm, Bed 6. Female, elderly. Disorganized behavior. Jane Doe.*"

I had met several John and Jane Does in my limited time as a psychiatric resident. With many of our patients at their most unstable, "identity" seemed to be something fluid and poorly retained, like water flowing through cracks in their cupped hands. It wasn't always a surprise when the well would finally run dry. Just last week there was the law firm clerk who had left the office for lunch and wasn't found until later that evening, half-dressed and wild under suburban street lamps six miles away, eventually drawing looks through the windows of minivans as her daytime stroll had turned into the trot of a wounded animal. It took twelve hours to diagnose her as "Jane Phillips, Non-Compliant with Lithium." These were the good cases I was told, all hinging on the raw power of history taking, the Old and New Testament of psychiatric faith.

I approached my patient in the Psychiatric ED and carefully entered by sliding the thick glass door that separated us, a door I always fantasized would be dense enough to stop bullets when the time came. In this instance, however, the door was already no match for her silent gaze, which penetrated through with ease. It was unavoidable and innocent. Her hair was unkempt and abused by the sun, wrapped back tightly behind her head to reveal a smile and strong lines in her face. I never knew my grandmother but for a split second I wondered if this could be her.

"Hello, ma'am. I'm one of your doctors, a psychiatrist actually. My name is Dr. Kerrigan. What's yours?" Only the fluorescent lights flickered in response. One minute. Still no movement in her lines. No words, just a concerning stare. Two minutes. My heart beat faster as my opening question had just been pushed off a building and fallen to its death. "Miss? What brings you here?" We must have looked like mannequins in a display case to anyone strolling past that certainly bulletproof glass door. Though my psychiatric training had taught me to expect and tolerate such a silence and to avoid filling it with my own anxiety and taking away the patient's words, it was late.

Over the next 30 minutes, we wrung out the lines of experience in her face for any memory; however the rag was dry and the bucket would remain empty. No address, no ID. No past. Her eyes became heavier and fixated on her gown. It was a well-worn white. I kept *my* eyes on the clock in our interrogation room, each tic reminding me of my fatigue. Perhaps out of mercy or an inability to cope, the pager let out another scream at 11:20pm. It wasn't a new

consult, thank God, but the unnecessarily shrill sound had shaken us both. "I suppose they build these things to wake the dead," I slipped. My eyes desperately searched for any signs of life. Ms. Doe smiled and, to my surprise, reopened her lips carefully. "I've been excommunicated from my church. Also my place of living. They've seen everything I've done." She paused. This felt like a better time to tolerate the silence. "God forgive me. Of all things, medicine is not what I need. I'll need you to leave, I'm afraid. Now. Good night."

And just like that, we were both alone again. I began to Google, to make calls. "Yes, I'll hold." Of course, the ambulance "trip sheet" was missing, a document detailing how EMS found her and often offering the best clues to a Jane Doe's secrets. When I finally reached the ambulance operator, I learned they hadn't actually found her on the corner of Brookline and Washington as the paper of record had suggested. No, it was close to that, but not precisely. Approaching the corner there was a humble apartment complex, its brick face adorned with worn lines of its own since 1954. Her body had been found resting under the bushes in front of unit 89A, possibly for days, maybe weeks. The man who reported her, I came to know in time, was the long-term resident of 89A who had marked her as "that Christian Scientist from upstairs." From this point forward, my Jane Doe would be known as Ms. Lazenby whose life began to unravel as I pulled at my solitary thread.

By morning, Ms. Lazenby was voluntarily transferred to the inpatient psychiatric unit, a place where she would refuse all treatments but reluctantly seek shelter. Her guilt would appear deep and mysterious as we approached the edge of this pit together in daily sessions. I learned that she had spent her entire adult life under the roofs of Christian Science churches, served on the staff of the Christian Science Monitor, and spread the good Word for over 30 years. It seemed she too had tried to help others cup their hands and catch the water that flowed between their fingers. I learned that somehow she had committed a crime, a crime that would ultimately remain unspoken. Though her two-bedroom flat had contained fresh food, a piping hot radiator, and every clue to the contrary of her new beliefs, she was convinced the Church had evicted her for what she'd done and that the door to her prior life would remain locked. Sins had been documented by hidden cameras in the walls. They were no longer willing to nourish her body or validate her soul. It had apparently been a Wednesday when God up and walked away.

Perhaps because her faith preferred she not visit with doctors, there was no evidence of prior psychiatric need. With her age, an organic brain change appeared most obvious. The only thing that wasn't so obvious was how the labs could be consistently negative, send-out tests unremarkable, an EEG non-revealing. How the MRI that was initially refused and painfully persuaded ultimately failed to make it rain. Neurology wasn't convinced of dementia. Delirium failed to show. Our eldest attending waxed and waned over "Late-Onset Paraphrenia." Everyone was surprised again when a case for involuntary antipsychotic medication had been brought forward to the court and defeated. Though she refused to care for herself, she eventually argued her right to do so lucidly, standing up proudly in defense of her Guilt.

Before placement in assisted living, she seemed better able to reflect on the hours we eventually spent together, of me offering what I could. I begged to call it "therapy" but she could only suggest "confession." Though her secrets remained largely intact, for a short time she was able to speak to a person inside of her that previously had no name, a person ignored by her spiritual self and after 67 years demanded our attention. She hinted that this "other" had perhaps struggled with sexual longings and was finally caught exploring her own body by the

all-seeing, perhaps even by Church cameras capturing her shame. She speculated further, that the surveillance in her apartment could also see the thoughts in this person's mind, of desiring a child that would have to remain unchosen at her age, sacrificed for the good of Faith. The pit of course went deeper, but her voice still couldn't carry that far. This "other" was to be persecuted. It took me a longer time than expected to understand that this "other" was as much of a stranger to her as my John and Jane Does were to me.

Thankfully, as our therapy inevitably stalled and there was nothing left to confess, she was almost as compelled by my Crosswords. It was therapeutic for one of us at least. We could start with *6, Down*. "Nebula." She would work quickly and smirk at the sweat upon my brow. Somehow it had been easier in the call room, kept by myself to avoid the night. *8, Across*. "Truffle." I got it by the skin of my teeth, but I made her squirm. Just as we had unexpectedly crossed paths in the ER that first night, the words on the page were now being thrust together, against their will. Crossing from a distance, each struggling to coexist.

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