Paul Gottlieb, a successful publishing executive struggling with a mood disorder writes:

Where I worked, if you had a heart problem or cancer, you’d never find a more sympathetic, supportive group of people ... but for years I had to be secretive about my mental illness because I was in control of millions of dollars of the corporation’s assets, and I couldn’t run the risk of having my judgment mistrusted.

Fred Frese says,

I was diagnosed with paranoid schizophrenia when I was only twenty-five ... [F]or the next ten years I was in and out of various mental hospitals ... . Today I am the Director of Psychology at Western Reserve Psychiatric Hospital ... [T]he thing is, people do recover.

Molly Cisco says,

I can remember lying in a snowdrift ... when I was six, looking up to the stars, I can remember lying in a snowdrift ... .

The patients who tell their stories in this book are old, young, urban, rural, and from various cultures and socioeconomic strata. Many feel anger toward medical or legal systems for failing to understand and help; others feel rage and despair at the postmorbid changes in their sense of self. There are stories of hope, of the persistence of severe mental disorders, and of suicide. As a psychiatrist I was deeply moved and informed by the candour of these narratives. The direct power of each voice to convey the raw material of life, the truth of mental illness, is penetrating and profound. The reader follows each narrative, peers into the photos, and senses anguish. This text is essential reading for medical professionals and the public.

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Room for a view

Between five and six

The hospital is a huge beast that eats but does not sleep. Its silent night-time chambers lie heavily, pressing all around. Slowly breathing. The in drawn swell of air, the exhalation of steam from grated vents, is a tide that slows at night. The weight of the beast settles more heavily in these hours; there are fewer souls to hold it up. The hour between five and six am is when the hospital comes closest to a sleep state. But it does not sleep.

Neither do you.

Somewhere there is a bed, a narrow and lumpy mattress that leans dangerously and has a plastic covering that keeps the sheets damp with sweat. There is no sleep there, only tossing and turning until your pager goes off. The labour of dragging yourself up-right is worse between five and six than if you had never lain down. Better to float along the quiet and mellowly lit hallways, alone. Better to shy from the fluorescent light.

Fluorescent light is an assault between five and six. Those who work in it are angrily awake. It scour the eyes, throwing ugly, dark, half moons under them. It yellows skin and glistens in the thin grease at the hairline. Every unsavoury detail of being awake so late is heightened under fluorescent light. Feet in wool socks and sandals smell sharp; socks stiffen at the heels. The cheap, ropy collar of your surgical heighten under fluorescent light.

The winter air outside is becoming clean outside in the parking lot, even the frozen vomit, pink with yellow corn. The hospital will begin to shift and stir soon enough, but for now its thoughts wander.

Perhaps it, too, looks outward, at the world. In this quiet moment, you watch another day being birthed between the cars in the parking lot.

Somewhere, deep inside one of the seven stomachs of the beast, an anesthesiology resident sits, wearing scrubs, on the lid of a toilet. Snaking out from each arm is a clear plastic tube. The bathroom door is locked. He turns and places his wire-rimmed spectacles on top of the toilet tank. He won’t need them where he is going. The beast holds its breath. The anesthesiology resident closes his eyes for a moment. At last he leans forward, perhaps with a small, relieved smile. He leans forward, and opens up each of the IV lines wide. First the left, then the right. Fluid and medicines flow into his veins, and he leans back against the tank, loosing a papery sigh. He has been trained exactly how to do this; to first anesthetize, then paralyze; to numb, then cut.

Now the quiet beast stirs. The hallways seem to widen a bit. The pressure
of its fleshy weight lifts, ever so slightly. Bulbs set to timers flicker, then illuminate, pushing corners away, widening the atrium. The scrub nurses are arriving, their mouths set in firm lines that will not waver under their surgical masks all day. Custodians and cleaning crews arrive in blue uniforms, stamping snow off their boots. Riding the elevator up to the cafeteria, you fall asleep on your feet. You miss your floor; you sink back down, awakening in the lobby. You push the button again; this time you stay awake by laughing in the empty elevator. You laugh with a quiet solitary ferocity, your eyes shut, your head leaned back.

The cafeteria is still closed. It is empty in the hall, except for an ancient-looking coffee machine; the huge kind with large tan-coloured buttons and a dusty looking picture of coffee beans on the front. It drops a paper cup into which it morosely dribbles a mix of boiling amber fluid and artificial creamer. You take the cup by its top and bottom edge; the sides are too hot. You walk back toward the elevators. The coffee is too hot to sip just yet so stand there, and notice another window. You notice the light growing behind it. You suddenly yearn for that light, feeling desperate and small.

The elevator dings and rumbles open, issuing a plume of brightly dressed nurses, bringing wisps of the cold outside air with them. They are out of place, smiling and too loud, their hair freshly washed. Their scrubs are purple and red and new, their makeup bright. Their smells, hairspray, powder and perfume will quickly succumb to the high vinegar of the cafeteria. They file past without so much as a glance; you stay camouflaged in dull shades of yellow and amber. A trial sip of coffee singes your tongue. A hiss of pain, and then the pager erupts. Between five and six is over. The elevator stands open, waiting. You walk into the elevator without giving the window a second look. The hospital closes its walls around you.

Sean Gupton
Emergency Physician
Minneapolis, Minn.

_Lifeworks_

Lost on the voyage

It's that _fin de siècle_ thing. Just as Matisse was poised to assume his rightful place as grand patriarch of the Moderns, Picasso stole the show. Now it seems he's upstaged by the likes of Fantin-Latour: father of the supermarket still life. Will the humiliations never cease?

Above all, _Voyage into Myth_ is a scrumptious peek into one of the world's greatest collections of art and a rare chance to stand in front of paintings that made history. As might be expected, the patterns of inclusions and emphases are an exercise in art-historical revision, revealing as much about 2003 as they do about 1903.

“Come on, great is great,” you might protest as we regard Cézanne’s _Mont Sainte-Victoire_ (1896-98). It’s hard to argue the point from this vantage. Even the damage along the top and bottom edges of the canvas (was it rolled for storage a few too many times?) doesn’t detract from the mesmerizing but unassuming beauty of the picture. Maybe it’s the uncanny sense of fluidity he conveys in his perspective, or the simultaneous evocation of solidity and ephemerality in his subjects, but once you let Cézanne under your skin, he stays there.

As the widely acknowledged fulcrum of 19th- and 20th-century Western art, Cézanne’s works are pregnant with tendencies and latent suggestions that artists of all stripes claim as precedents. Not comfortable with the informal composition or the apparently casual subject matter of his peers, he said that...