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*The Surgeon*

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With the exception of an infuriatingly large bird dropping on the passenger side window, Henrik Wold didn’t observe anything unusual on his way to work. He listened to podcasts and sipped his coffee, and as he drove, he was otherwise untroubled by unnecessary wanderings of the mind. The white morning light stretched across the expanse of the city, the indifference of the skies above could not have been any more monotonous; it didn’t help that it was spring, of course. He’d never been overly interested in the changing seasons, the weeks came and went, the days all looked much the same, room after room, hour after hour, today was Monday again, and still there was that steadfast feeling of control and constancy.

 At 07:20 he parked up behind the hospital. Following a long-winded process, he and a number of other senior consultants had been granted access to a restricted section of the car park with several charging points. It was the least any workplace could do, really, to offer this facility to its most essential employees. Though indispensability is all relative, when it comes down to it. Like most others, he too was replaceable, but he was a hard worker and at the very least deserved access to a parking space without having to hunt too hard for it. He was one of what ultimately became many, a man in a black Tesla, forced to accept that he was indistinguishable from the rest in spite of the vehicle he drove. Every so often he considered replacing it with something bigger, the latest model, but sound economic sense prevented him from acting on that thought.

 Every morning, the same tireless route through the corridors. The hospital was in his blood, in the same way that he too orbited the building. The circuit had its own rhythm, its own customs - although he had only worked there for a few years, it already felt like a lifetime, an automated entity. He fetched a clean uniform from the storeroom and took the stairs to the third floor, where he offered a brief hello to the departmental secretary before making his way to his office to get changed. He clocked the fact that his office mate Kleppe had already arrived for the day, as was his way, always five minutes ahead. They made for a good pair, the two of them, evading one another with such skill that they might be forgiven for forgetting that they shared an office with anyone at all. He removed his clothing and hung the items up in the cupboard. That was one of the advantages of being a doctor: there was no need to dress up for a day at work, it was never long before you’d changed into your uniform, and in that everyone looked the same. Clean and sterile, neutral and gender non-specific, just as anyone working in the public health sector ought to look, like a drove of helpers in green and white, virtually anonymous. The uniform passed from one body to the next, and any trace of previous wear was washed away in between use. Just like the rooms, the beds, the bedding, the white cotton sheets used in every ward and the green ones used in theatre. Everything was boiled and thoroughly inspected for stains, and anything that couldn’t be removed was discarded. The sterility of these processes supported the idea that the building itself was sterile, the notion of impermeable walls and spotless equipment, which in turn gave the impression that the doctors themselves were unparalleled, a notion that was widespread throughout society. It had a nice ring to it, unparalleled. It almost wasn’t a word at all.

 He looked at himself in the mirror, dampened his hands in the always tepid water that flowed into the rusty sink and ran his hands through his hair to neaten it up. It was getting a bit long, he’d need a trim soon, he couldn’t be wandering around looking like some kind of hippy. But other than that, he looked good. Tall and slim, with a good complexion and white teeth, not bad, all in all. Plus, he had a keen eye. It had been that way since childhood, he’d always had a sharp and steady gaze that had given him an air of intelligence and confidence, and it no doubt also indicated the presence of those very qualities. He was quick, he was on it, that was precisely how he’d reached the point in life that he had. At just thirty-seven years old, he was the youngest senior consultant in the department, and following a run of successful outcomes in complicated surgical procedures, he had already achieved a certain status among his colleagues. He was well aware of his position, and his status did not go unnoticed by others. He was also very good at reminding himself of this status. Being noticed required a certain degree of self-control. Unsteady hands could be reserved for the privacy of the toilet cubicle.

 With practiced precision he slipped his feet into his clogs and left his office, head held high, jaw clenched, making his way along the corridor at his own pace. He caught an unpleasant whiff of body odour just outside the relative’s room. It happened from time to time, relatives smelled worse than the patients did, particularly those who refused to go home and who would instead spend the night on the sofa in the relative’s room, often they didn’t have any way of freshening themselves up. It was an unfortunate situation, but not one that was easy to remedy. The hospital was the people’s home when it came down to it, in every possible way; the lights were always on and the doors were never locked. All the same, he felt a peculiarly strong sense of ownership for the place, which made for a striking paradox, all this that was his and yet wasn’t – it moved and shifted, apparently of its own accord, and all the while he carried with him the knowledge of what was required to uphold that necessary illusion. He picked up some breakfast from the fruit bowl in the department on his way to the morning meeting. If the bananas didn’t look very appealing, contrary to expectation, then he’d have an apple, or perhaps a pear, but the point was to make sure he consumed something sweet, he never knew whether he’d manage to take his lunch break that day. A man was nothing without his banana, or so he would say from time to time.

 The meeting had started four minutes before his arrival at 07:34. He assumed his work face, a mask of nonchalant impartiality, he took a seat at the table and greeted those of his colleagues who looked up with a curt nod. He hastily finished his banana and listened with feigned interest to details about patients admitted over the weekend, followed by the theatre schedule for the day. There was a certain sense of calm about these regular meetings. Something about the neutral camaraderie, the sense of belonging shared by those who dedicated their working lives to the same set of tasks, all of them dressed in the same clothing, which seemed to underline the common destiny of their distanced collegiality, in spite of the fact that very few of them had anything to do with one another outside of the workplace. Here they would sit and discuss other peoples’ diagnoses, prognoses and likelihood of survival. They might have discussed cars, buildings or furniture design in much the same manner. Their language was matter-of-fact and underpinned by logic, with no room for misunderstanding, and it wasn’t to be scorned; there’s no saying how much simpler things would be if all relationships took the same approach, if they were defined by something external, something concrete – not to mention the sense of order that existed between them, with each individual’s position within the hierarchy made evident to all. Only Ulriksen, the head of department, had a permanent seat at the table, and if there happened to be an insufficient number of chairs to go around, which tended to be the case, the spaces around the table were reserved for senior consultants. The remainder of those present, primarily junior doctors and those on rotation, were made to stand in the background, leaning against the wall – anonymous helpers, almost identical in their transparency and never speaking a word unless invited to do so. He had once been one of them, shifty-eyed, striving to be noticed, but that felt like a lifetime ago now. Sitting around the table, where a lack of inhibition had now taken shape within him, and where structural harmony was expressed through the casual way he sat and the self-assured expressions on his face, he felt at home. In his blood, in his pulse, in his nerves, it felt almost greedy. Everyone present had sacrificed a great deal, but nobody acknowledged the efforts required to achieve what they had, nor what it had cost them – they sat around the table as if it had always been obvious that they would end up here, as if their aptitude and skills were self-evident, and though their range of age and experience was vast and varied, they could be divided into just two generations, with the young battling to ascend within the hierarchy, and the old remaining staunchly at their posts. Nobody stepped down from their position within the institution unless it were absolutely necessary; there was too much time to fill in the outside world. Even the oldest among them were afraid of that other reality, members of the old guard no longer capable of carrying out surgical procedures they had once excelled at but who nonetheless lingered there, doing the occasional bit of teaching and uttering all manner of dated expressions as they sipped at the last dregs of their hard-earned respect and simply refused to retire. They cleaved to their final days, and the only reason to keep on their good side was the fact that they continued to wield a degree of social influence. Nonetheless, he did not particularly relate to them, nor did he compare himself with them; these were not the individuals with whom he was in competition. There were two at the table that he made sure to keep a keen eye on, and they were Kleppe and Lunde. Both were senior consultants in their early forties, and both had set themselves apart among the younger gastrointestinal surgeons by virtue of their professional and technical skills. They were the two most obvious candidates for the head of department position besides himself; Ulriksen was weary of the role and it had been remarked that there was a need for fresh blood. This was the current state of affairs. It was simply a case of battling on. There was no room for slip ups. No room to falter.

 Voices floated around him. A controlled cacophony of information and observations flowed through him with neither enthusiasm nor exertion, like the hum of an inconsequential radio programme playing in the background. Thus far there was nothing very exciting ahead, just a few routine procedures unlikely to present any significant challenges, but it was always possible that something unexpected might crop up. He found himself hoping that to be the case, that something difficult and interesting might occur in the middle of his day. He worked at one of the city’s university hospitals, and this was where they were sent, people who ended up in serious accidents or those with serious illnesses, knife injuries, gunshot wounds. Today was one of those days, he was primed for whatever would come his way. That tantalising, invigorating feeling of invincibility. Here I am – the man, the machine. I am an auto-reflexive persona. I am a cognitively accomplished empire. It was arrogant, perhaps, but not unnatural for him to indulge in such thinking from time to time. Up until this point in time, everything in his life had unfolded as planned.

It was an innate fascination with systems that had driven him to pursue medicine. The need to unscrew something and consider all its various parts, to fix what was broken, to restore a machine to working order once again. Not necessarily the desire to save lives, as many people believed. Saving lives was a bonus, of course, as was the high salary, but it was the technical aspect of the role that had been most appealing to him, the craft itself, which also explained why settling into a role as a GP had been out of the question. Talking to people had never been his strong suit, whether in a professional or personal setting, and the mere prospect of spending entire days in discussion with patients, as he had done during his rotation, had been enough to put him off entirely. A few of his friends from university had become GPs, and he couldn’t understand how they put up with it; even the brief conversations he was forced to endure with his patients prior to their procedures were bad enough. Some patients liked to put a face to a name, to meet the one who would be wielding the scalpel, as they put it. Certain relatives could also be particularly demanding, as was the case today – his first operation was to be on a nine-year-old girl admitted overnight with dehydration, stomach pain and fever after three days of persistent vomiting. An IV drip and course of medication designed to ease her nausea had been administered, but her condition failed to improve and the cause appeared to be appendicitis. Removing the appendix was usually a straightforward keyhole procedure, the basics could just as easily have been communicated by a theatre nurse, but the girl’s somewhat hysterical parents had insisted on speaking to him. With all the composure he could muster, he approached the coffee station in the corridor where they sat waiting, the mother with greasy hair and dark circles beneath her eyes, the father tugging at his enormous hipster beard in an agitated fashion. The conversation lasted no longer than ten minutes; he explained in very general terms what he would be doing and how the procedure would unfold, but even so, the whole experience was enough to leave him feeling vexed. Ten minutes of conversation about a procedure that would take no more than half an hour, it was an incredibly inefficient use of time. The girl was actually a patient on the paediatric ward, but staff shortages meant he would be performing her operation. Are there any risks, the mother asked eventually, as if placing someone under general anaesthetic in order to slice at their insides could ever be without risk. It took every ounce of his concentration to maintain the correct tone of voice. Your daughter will be fine, he said, offering them both a reassuring smile, I’ve done this more times than I can count.

 Over the years, both colleagues and patients had told him that he could be crass and curt, a little harsh or unsympathetic. There had even been a few occasions, not many, but three or four, when complaints had been made against him. He’d been instructed that he had to work on his communication skills. Talking about illness was a minefield; very few people spent much time thinking about their own mortality until the matter became unavoidable, and so it was a case of treading carefully when the subject arose. You weren’t to lie to your patients, but nor were you to provide any more information than they’d specifically asked for. Many were unwilling to hear the facts, they wanted to be given hope, and hope required warmth and gentleness, the odd bit of rephrasing. It was a strange thing, he thought to himself, the fact that this sort of soft-soaping should be his job, he was a technician first and foremost, not a therapist, but he had found ways of getting through it over time. That is to say, he had become good at memorising the kinds of phrases people liked to hear, he’d hit upon a friendly way of speaking to people, and he’d found an expression that worked, a calm nod of his head, and the right body language, always with his upper body leaning in towards the patient or next-of-kin, his hands unclenched and outstretched, as if he were handing them something. It was all so odd – there were codes for absolutely everything.

 He had a glass of apple juice and went to the toilet. He checked his phone in the changing area on his way into theatre, where the usual daily furore was already in full flow in spite of the fact that Monday had barely set in motion. His father had been in touch to let him know about a family get-together the following weekend, and Hedda had also messaged him, inviting him over for dinner with a flurry of cheerful emojis. Drinks at mine tonight, it read. There were a few Facebook reminders about old friends’ birthdays, and an email from his housing association with a subject line so tedious that it was enough to leave him feeling drained. An endless list of things to manage, as if life were a never-ending roster of reminders, an inbox full of offers and inquiries, orders and demands; it left you feeling that you had to sneak around to avoid stepping on anyone’s toes. He yawned loudly, felt a satisfying weariness take hold, clearly he’d stayed up too late the night before. Oh well, fortunately nothing too advanced awaited him in theatre. He slipped his phone into the drawer for personal belongings they couldn’t take into theatre, changed into his green scrubs, pulled on his hat, shoes and face mask, and scrubbed his hands thoroughly before making his way into the room where the little girl already lay unconscious, and where his team stood at the ready. The time had come for him to put on his apron and gloves.

 Are we ready to go? he asked, and he locked eyes with each masked colleague in turn. Ready, they each nodded, as always, and although the anaesthesiologist was the only one whose opinion he actually cared about, the only person of significance besides himself, he allowed them all to feel that their presence held some significance, at least in part. He lent half an ear to the nurse as she went through the checklist to ensure a safe surgical procedure, she looked as if she had a good body, and for a brief moment he thought about pussy. Estimated length of operation: thirty minutes. Anticipated blood loss: none. Questions about the procedure rolled out one by one, a smooth and steady hum of information, much like the seconds that flowed and fused to form something that could be measured in concrete actions, or not, as the case may be. Type of anaesthetic? Any risks the team ought to be aware of? Has everyone removed any jewellery and watches? Is everybody ready? He pictured a glossy substance in the endless number of neurotransmitters contained within him. It was impossible to be *too* ready. Good, he said eventually, then let’s begin.

 The sense of control was exhilarating and effortless, like taking a solo night swim through still, black waters. He could remember the very first operation he had performed to this day, the peace that had settled over him, cutting out any clamour as soon as he had entered the patient’s abdomen. As long as you were able to rely upon your skills, you were on top of the world. As long as you made sure not to let the gravity of the situation or the sense of responsibility get the better of you. It was simply a case of restricting oneself to the situation at hand. A suture was no more than a suture, and a person was no more than a case. Let’s be frank – how important was a human life, really? Success, any success, was dependent on a certain degree of personal indifference. In contrast to what people might assume, success was not the result of inexhaustible engagement and integrity, but simply sufficient repetition and a healthy detachment to whatever one was doing. The work ought to be linked to the brain and the hands, but far-removed from the heart. Too close a connection only led to vulnerability, and vulnerability only ever inspired nerves and anxiety. Fear had never proven itself to be a lucrative driving force. He knew that much.

 He held the scalpel to the white skin and sliced the curve of a smile beneath the belly button before pushing the tube through the incision in the wall of the abdomen and requesting that the gas be switched on. The tiny child’s belly inflated like a drum. Much like tuning an instrument, his sense of concentration was amplified. Everything lay dormant within him. From his fingertips to his wrist, from his elbow to his shoulder, from the nape of his neck to his pupils. The little jolt that came after a brief moment of resistance, followed by vigilant curiosity as he pushed the camera inside. Everything existed within him, all the knowledge needed to proceed. Every set of innards he had studied, every incision he had made, every suture he had stitched. He knew this inside out. He worked on autopilot. It took just thirty seconds for him to locate the appendix, but given that it was so slender and showed no sign of inflammation, he quickly concluded that this wasn’t the issue after all, and immediately began further investigations. After studying close to a metre of the child’s small intestine, he found what he was looking for. Meckel's diverticulum, he remarked to his team cheerfully, then performed a mini laparotomy to allow him to continue his work. Aware of nothing but the tickling crackle of his own concentration, he began working with the tongs; his surroundings and its many walk-on extras disappeared into the ether. Every so often he made efforts to engage in a little conversation with the junior doctor, as was expected, but he never disturbed the peace. Black and still now, as if looking through a powerful magnifying glass. It was here that he was in his element. Or, how else might he put it? At his peak. He sliced and singed, pulled at the almost transparent sutures, and just like that the infected tissue was gone and the intestine stitched together once again. He had spent thirty-five minutes working on the patient, including the conversion and everything that involved, a sense of satisfaction was justified. Would you mind closing up, he said, and nudged the elbow of the junior doctor beside him. It was a purely rhetorical question, of course. He removed his gloves and thanked everyone for their input. A nurse called after him on his way out, don’t forget the parents, she said, and it was just as well that she’d reminded him as he’d usually move straight onto the next operation and postpone his rounds until later in the day, but when it came to children or patients whose relatives required special attention, the rules were a little different. As soon as he’d changed out of his scrubs, he made his way out to see the girl’s parents, who were perched on the edge of their seats in the corridor, anxious hearts racing and fear in their eyes, they leapt up as soon as they caught sight of him. Thumbs up, he said, lifting his thumb as he said the words. When it came to relatives like these, it was impossible to overemphasise the need for clear communication, and it was always nice to see their uncontrollable anxiety dissolve before his eyes. He sat down with them and explained about Meckel's diverticulum, all while assuring them that even though it had turned out to be something other than the anticipated appendicitis, it was equally uncomplicated and relatively harmless. She would be wheeled out before too long, he said, and as soon as she’d woken up, they’d be allowed in to see her. They looked at him with the fear of God in their eyes. We don’t know how to thank you, the father stammered, tugging at his big beard, tears streaming from the mother’s eyes. Delivering good news ought to be considered a pleasure.

 He passed from one surgical procedure to the next. He removed a gall bladder, operated on an inguinal hernia, and after that he helped to create a stoma for an eighty-five-year-old cancer patient. If it were up to him, the hospital would do well to cut back on the number of the operations they performed, people had to die of something, but most people seemed to think there was a cure for everything, and they considered it a matter of course that doctors would do their absolute utmost for them, without any consideration for social economics. But as the years passed, he no longer allowed himself to become as worked up as he once had. If he were to involve himself in the financial dealings of hospital life then he’d be chronically exasperated by the whole thing, and there was no point, there was nothing he could do about any of it anyway. People were shipped in and out, abdomens were sliced open and sealed up again, the well-oiled machine operated as intended. The best he could do was to keep things moving within his own department, which he did. Very few others were as efficient as him. Balance the scales, reset. A new patient, a neutral expression once again. He found himself faced with an incredibly elderly woman with an enormous fecalith in his last appointment of the day and he had been quick to call on one of the new junior doctors. This kind of thing happened from time to time, as soon as you met your patient, you’d feel the urge to walk in the opposite direction. The last thing he needed was to get involved with a tedious extraction, and there were limits to the kind of thing a senior consultant ought to be called upon to do – a sensible division of labour based on individual skills and resources was essential for the smooth running of the department, after all. When the naïve newbie entered the room, it was evident that he’d called upon the right man for the job. What’s a fecalith? he asked, looking agitated, a pouch of snus hanging from his upper lip. These arrogant, academic brats tumbled in through the doors, devoid of any experience and so spoiled that it had never crossed their minds they might have to deal with any actual shit. What were they thinking? This was how the hierarchy worked. Not all people were equal, whether employees in a workplace or residents of a country. Equality was a construction, introduced by socialists to give people a false sense of security, just like Jesus did for his believers. Extreme constipation, he replied curtly, and as the junior doctor set to work clumsily strapping the old woman’s feet into stirrups, he left. Good luck, he said, and closed the door behind him with a smirk.

 It was two o’clock by the time he finally had his lunch. He sat alone in his office with a baguette in one hand and his phone in the other. He’d been playing a game called HappyFish recently, which involved finding treasure on the seabed. Not particularly complex, but entertaining enough. He felt quite good, he realised. The detachment he occasionally felt to the world around him, the blurry sense of absence, it was no longer there. He felt present in the moment, not simply in the tasks he performed at work, but in himself, like most others seemed to feel most of the time. Today was one of those days. He replied to Hedda’s message. I’ll be there, he wrote as he chewed on a particularly dry slice of cucumber. All those limp vegetables you were supposed to add to everything you ate, as if doing so were somehow a matter of life or death. People were forced to tolerate flavourless slices of pepper and tomato at every stage of life. Being a doctor didn’t go hand-in-hand with having a particularly healthy diet; the opposite was true, in fact, but it wasn’t a person’s intake of antioxidants and omega-3 that made such a huge difference when it came down to it. He suddenly regretted agreeing to see Hedda, she would probably make them fish. Ah well, it was too late now. The fact you had to eat what you were given was the essence of life itself.

 He looked in the mirror and checked there was no food stuck in his teeth. Any kind of decline began with the slightest anomaly – for the body as for the home, and the same was true of the mind. If the façade failed to hold strong, the contents would fracture. It could happen to anyone, plant life, animals, tiny cracks unable to tolerate the light of the outside world. When Kleppe walked in, he was quick to sit in his office chair. They exchanged a brief nod and Kleppe offered up a hollow remark that he was supposed to reply to in a polite manner, as usual. He couldn’t say why, but he’d never taken to Kleppe. There was something about his intense nature, his feigned energy. Kleppe was always a bit over-the-top, he always wanted to give more, to talk for longer, and though the two of them generally managed to avoid one another, they would pretend otherwise when they initially bumped into each other. Had a nice weekend? Kleppe asked. And so it began, the dire part of the day he spent fighting his annoyance and maintaining his good character. Fortunately Kleppe didn’t sit down, he had to go home early today, he said, and as his colleague got changed, he acted as if he were busy on his phone, seizing the moment to instil some order. Most things were unimportant, just the usual messages and reminders, but there was something amusing too, a link had been posted to a new profile in the Whatsapp group ‘Behind the Uniform’. This was a group of male doctors who had once worked at the same hospital, but who now worked throughout the country, a group with the key aim of showing off sexy female colleagues, most often nurses or doctors on rotation. As soon as Kleppe had left, he opened the group to take a look. It was a while since anything had been posted, but now somebody had discovered Siss from Haukeland University Hospital in Bergen and had shared her Instagram account, where she posed happily in body-hugging exercise gear, showing off her various curves from every angle. He chuckled to himself as he scrolled through her pictures. Siss, Siss, give me a kiss. It didn’t really take much to make a person happy. Did it?

 Fatigue washed over him once again. It settled over him like a silent autocracy, an invisible chemical transmission. Before he finished up for the day, he ought to stop by and visit the patients he’d operated on, but that could wait. He felt a faint and indulgent sense of equilibrium, a stillness. It had started raining, just lightly, an apathetic drizzle. It was a good day. A very ordinary day. He took a few quick sips of lukewarm coffee before lying back on the sofa. He needed this horizontal pause before the caffeine kicked in. Just for a moment. He felt his body receive the angry, black liquid. His tired head took leave on the hard pillow. Just empty space now, a kind of void within him, or perhaps it was simply lethargy. He closed his eyes and allowed his body to float back, weighed down, a dying battery, the sound of nothing, silence, until he unexpectedly awoke long afterwards – it was almost half past five! – and he leapt up with some embarrassment; he wasn’t the kind of man to nod off in the middle of the working day.

 His coffee was no longer lukewarm, it was cold, but he drank it all the same. He filled his cup with water afterwards, two cups straight down the hatch, then he looked in the mirror once more, wet his face, changed his clothing and messaged Hedda: Leaving work now. He’d planned on driving home, pottering about for a while, maybe changing my shirt, but it was in the opposite direction, and he was already late. He pulled on his shoes, quick steps and lungs that longed to be outside. He was hungry, he realised. On his way along the corridor, however, he found himself embroiled in more bother when he was stopped by a nurse who wanted to let him know that the nine-year-old he’d operated on earlier that day, and who had already been moved from post-op to a spot on the ward, was now experiencing a lot of pain. There were no limits to the kinds of thing that some of the nurses felt entitled to bother him with. What exactly did she want him to do about it – make a soothing bedside visit armed with a teddy bear and a couple of paracetamols? She’s just had an operation and the anaesthetic is wearing off, is it possible that the pain has something to do with that? he asked rhetorically, and moved on before she could say any more. I have a dinner to get to, he said, turning around to glance at the woman with rodent-like features he left in his wake. My God, some people, he thought to himself, absolute morons.