**Nina Lykke**

**Natural Causes – A novel**

**English sample, chapters 1-5**

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1

NO ONE CAN SENSE the undercurrents of a populace better than a general practitioner. I have seen it all, gluten free, lactose free, sugar free, every online or newspaper headline attempt to get healthy people to think that if only they stop eating bread or cheese, everything will fall into place. Middle-agers can’t fathom why they’re so tired all the time. It’s because you are starting to get old, I tell them, but they think this aging thing doesn’t apply to them, just as death doesn’t apply to them either. They think they are the exception. They’re certain their body will continue to function without a hitch, and they appear flabbergasted on the day when this no longer holds true. On that day when their stool no longer flows smoothly, sleep fails to come, or their muscles refuse to cooperate. Forty-seven is not old, my forty-seven-year-old patient tells me. Well, I say, forty-seven is old enough that you can’t keep doing things the way you used to. But they refuse to go along with this way of thinking. They want to keep doing things the way they’ve always done them, and so they go out and buy a special juice or green powder online, or get tested to prove they’ve contracted a particular allergy or food intolerance so they will be able to continue doing things the way they used to if only they drink the juice or consume the powder or cut out some food product or other or stay away from furry animals.

They don’t want to listen to what I have to say, which is that they need to calm down, be content, eat a variety of foods, and keep moving, in that order. I am tired of saying it, and they are tired of hearing it, but it’s the truth, and it is boring.

It’s Friday morning, the time is five to eight. In five minutes, all hell will break loose. Send the enemies in, as one of my colleagues puts it. And even now, after all these years, it happens that I am sitting here at my desk at the health center, on the third floor of an old building off of Solli Plass, and suddenly I can’t understand why there are people outside my office waiting to be let in to see me. These people have taken time off from their jobs to come all this way, but why? My head is empty and silent. Some papers are stacked on the desk where there is also a computer screen, beside it is a stethoscope, and over there a sort of big machine on wheels, but what are they for, all of these things, and what is it that’s supposed to happen here, what is it that’s expected. Why am I here. To the left is a window, behind me a bookshelf holding periodicals and books, posters hang on the wall in places, illustrations of human bodies—by all appearances this is a doctor’s office, but where is the doctor, I am the only person here. Where are the adults, how did I land here. This must be a misunderstanding. Maybe I could just leave. Act like I have to go to the bathroom, sneak past the people waiting out there, and simply vanish.

But then the world is turned back into focus and I cross the space of the floor and open the door and call in the day’s first patient, of course I do, back into the rhythm, and soon after I’m standing there with gloves on, smearing lubricant onto my fingers. A man is lying on his side on the examination bench, his pants around his knees and his white back end sticking out, and as I pull his cheeks apart, I can both see and smell that he hasn’t wiped himself properly, hasn’t wiped himself at all in fact, following his last visit to the toilet, even though he knows he is going to the doctor due to hemorrhoids and anal itching, and it’s no problem for me to be professional and examine the hemorrhoids before casually sticking a finger in and checking his rectum and prostate, while we are at it, and then pulling the finger back out again, throwing away the gloves, walking over to the sink and conducting a very thorough, nearly surgical handwash, and topping it off with three pumps on the antibacterial dispenser.

“I hope it’s okay if I open the window,” I say. “I just need to air out the room.”

In the meantime, he’s gotten dressed again. Now he sits there looking like a completely normal person, the blueish-red lumps around his unwiped anus once again concealed behind a pair of black ironed pants.

“Sorry about that. But I don’t really want to wipe much at the moment, I’m worried it’s going to burst.”

“It’s fine.”  
 No, it’s not fine, Tore says.  
 Tore is a full-sized human skeleton standing over in the corner between the sink and the door. He is made of plastic and is my only witness to what goes on in here. When I bought him, I named him Tore and for fun put a black hat on his head, that was back when I was interested in such things, the role of humor in the doctor-patient relationship, the significance of laughter for healing. The way we were in those days, we were going to change the world and the Norwegian healthcare system and regard the patient holistically and blah blah blah. We also believed we were an exception, that we were something special, and that this health center was going to be something completely unique, and maybe this is what, in the end, motivates all of us and forces us to get up in the morning, this unflinching belief that we are special, that we are the exception.

It isn’t fine. Not at all, Tore continues, he could have dampened the toilet paper and wiped himself carefully. There are several options. He could have bought wet wipes over at 7-Eleven and wiped himself off before coming here. But he didn’t do any of those things. And if he is capable of sticking a behind full of fresh feces into the face of a stranger, what else might he be capable of? What else is he hiding, what else might this man be concealing?

As I listen to myself going on to the man about motion, fluid intake, and fiber, I attempt to drive away both Tore’s agitated voice and the strong odor that filled the room only a few minutes ago, and which continues to linger.

During my studies, I took extra shifts at a nursing home. That is where I learned to compartmentalize, and in only a week, I was able to go straight from washing feces off of bodies and walls and wheelchairs to eating a hamburger down in the cafeteria. I erected a leakproof barrier between here and there, between then and now, and not least: between myself and the patients.

But I can’t cope with anything anymore. Just like everything else that has grown worn and weak with the years, it’s as if my ability to keep things separated has also started to fail, and now I actively have to work for something that, only a few years ago, came naturally.

I talk myself through the clear images that play out their own lives on my retinas. I talk about salves and suppositories, type in prescriptions on the computer, but the images continue to appear, and they are getting worse, they are indescribable, it is my own sharp teeth biting down on the hemorrhoids so that blood and feces splatter on the ceiling. Where is this coming from? I didn’t used to be this way. I’ve experienced much worse, I have emptied abscesses that splattered not only those of us standing around, but, in many cases, also the ceilings and walls. I have dressed wounds. I have seen every kind of bodily fluid and smelled every kind of smell that a human is able to produce, I cannot allow myself to crack now because of a little bit of excrement. But the barriers are no longer leakproof and all of it is waiting to explode and splatter everywhere. If I don’t pull myself together, it is going to be a scandal, which in turn will mean that I won’t get to stay here, and then what will happen, now that this office and this uniform are all I have left.

Take it easy, Tore remarks. The scandal already happened.

But not here, I reply. It didn’t already happen here.  
 Hemorrhoid guy leaves. I update his case notes, open the door and call out the name of the next patient. But the only person sitting outside is a man with glasses and a ponytail, and he shakes his head. I look up and down the corridor, I even walk out to the big waiting room and repeat the name there, but no one looks up from their phone.

As I head back into my office, ponytail-guy gives me a challenging look that says: Well then, can’t I come in now, seeing as how the previous patient never showed up? No, you cannot, says my taciturn bearing. I am going to take a little break now, I’ve earned it.

In the past, I would have called him in. To get ahead, gain control and oversight, plow through my patients. But then I realized that it didn’t matter how quickly I worked or how many patients I saw. It just increased, as if from an open faucet. There was always more where that came from. There was no end to it.

I sit down at my desk and stare off into space. It’s okay, I manage to think, you have to make the most of these small pauses throughout the day, it’s important to . . . but then my cell phone buzzes, and now I remember it was buzzing earlier too while I was standing with my fingers inside of the hemorrhoid guy.

There’s an entire row of unread messages on the screen. Many of them from Bjørn.

*How are you, why won’t you answer?*

I don’t answer to that one either, the way I didn’t answer the ones he sent yesterday. Or last night, it seems, because now that I’m flipping through my apps, I see he sent messages both here and there, and at midnight as well as at three and four in the morning.

That is the new tactic: Don’t reply, don’t pick up the phone. This is what I’ve been doing since yesterday afternoon, when I as usual stood there with my thumbs ready at my cell. But then the words wouldn’t come. What should I write, who was it sitting there on the other end waiting for my reply, or what was the meaning of it all.

Let them do their thing, I thought, and put the cell phone on the bookshelf. They’re going to do it anyway.  
 With each passing hour I felt myself growing calmer, and now it bothers me that I’ve had to live in this world for over a half a century before understanding that the best and most effective thing to do is to keep from saying or doing anything at all.

But you can’t just pull back now, said Tore, who likes it when things happen, and therefore Tore wants me to keep communicating with all of them, with Aksel who is sitting at home in Grenda, and with Bjørn, who has been called back to his marriage in Fredrikstad, and with Gro, who has spoken with Aksel several times, she’s dropped mention of it now and then, and in the messages she has sent, to which I also no longer reply.  
 *I don’t think he is doing very well*, Gro wrote to me yesterday, the way she used to say it about her ex-husband. And then: *He really needs someone to talk to*. That womanly excuse that is several million years old, and which can be brought out to explain anything away: *He needs me.*  
 Now I picture her, my former neighbor and drinking buddy, alone in her enormous villa, and there is Aksel sitting alone in the townhouse and now, for the first time, I recall the way Gro would straighten up each time Aksel came into the kitchen, where we tended to sit. I don’t think she was aware of it herself, because if she had been aware of it, she would have tried harder to conceal it.

What have you decided to do about it, asks Tore.  
 About what?  
 About the fact that Gro might be, in this very moment, lying next to Aksel on the bed that you paid for in part and helped to carry upstairs.

I don’t know. I don’t have the competitive instinct. If there was a famine, I would be one of the first to go.

You have to do something before it’s too late.

What is there to do? It all has to take its course. If I do anything now, it will only make things worse. It would create a friction that would really flare things up between them.  
 Just wait. At this moment, each of them is sitting in their own respective house, having been abandoned by their spouses. It couldn’t be more fitting. The table is set. The world loves to condemn every shadowy affair that dares go against papers and agreements and fixed ownership, but that same world will just as eagerly applaud and throw itself behind whatever now lies in the cards for these two. So what.

But Bjørn, Tore continues to prod, unhappy with my lack of response. What about Bjørn.

Bjørn is in Fredrikstad, back with Linda, his sovereign. Which goes to show that dependency is greater than anything. Greater than anything is the urge for submission, the urge for chains. Following the American civil war, many of the slaves were unwilling to leave the plantations, and that isn’t so strange if you think about it. The stranger thing is that so many of them chose to leave for something new and completely unknown and possibly much worse, for all they knew.

Many of the messages are from Aksel. *I can’t stand to see your clothes hanging in the closet*, he writes. Apparently Aksel was also awake early, and it’s soothing to see him in such an agitated state one message after the other. *I can’t stand having them here, I put them in garbage bags out in the garage. You can come get them when you want, but don’t come inside.*

Of course, the house belongs to him now, I realize, and the thought doesn’t even quicken my pulse. All these years I have worked on this house in Grenda, cleaning and refurbishing and opening up the loft and working on the cellar, and now here I am, giving it away. Albeit with a clause stating that it has to go in full to the girls, and that Aksel can’t even take out so much as a penny on loan without their consent, but still.

If you remain still and passive for long enough, things start to happen of their own accord, and soon another message arrives from Aksel, even though he’s probably at work by now, and now the threat becomes visible, like a worm that creeps out of a hole and spins its head around toward the light: Ida called yesterday and asked when we are going to Hvaler this summer.

Translated, this means: We are going to have to talk to the girls soon, tell them what happened. If you aren’t going to take the initiative, I will. And then I get to tell my version first.

I still don’t reply. Tell your version first then, Aksel. I am the villain in all of this, in any case.

Tore: But at some point, you’re going to have to answer, speak, negotiate. And when it is your turn to tell what happened—what is your version? Your final version, that is?

Tore cackles in his special way, and continues, helpfully: That you got yourself a lover because Aksel didn’t see you? That you were unfaithful because Aksel was too busy with his cross-country skiing, isn’t that what it was? Or that you entered into this relationship with Bjørn because you saw in his gaze the reflection of yourself as a twenty-two-year-old? Because you are afraid of dying, because we only have one life to live and is the point that we should merely...

Be quiet.  
 Or because you were fed up, plain and simple. To be fucking fed up is very pervasive, but we call it something more complicated in order to stand living with it. Have I forgotten anything?

I don’t respond, and Tore continues. You and Aksel were doing well, weren’t you? What about that summer afternoon when the kids were playing out in the garden or running around in Grenda, and you were both standing in the kitchen cleaning up after dinner, and then you took off your underpants—it was warm and you had on only a short dress—and you jumped up on the countertop. The sight of your tan thighs was more than enough for Aksel back then, and soon he was inside of you. You both stood there in the kitchen with the neighbors and kids outside, anyone might have come inside—that’s how it was for you, and if anyone had walked in on you, it would only have made you both more attractive than you already were, an attractive couple who have standing sex in their own kitchen while their children play in the yard. You left the dishes in the sink and went up into the bedroom and did it one more time. Take a look at the former life you lived and took for granted. Weren’t you content?

Yes, I was content. And I didn’t take anything for granted, on the contrary. And still I have gone from not understanding how I could have ended up here to not understanding how I could have kept at it for so long up there in Grenda. All that I’ve ever been afraid would happen has happened, and yet it seems more fitting and right for me to live here, to fold down the IKEA bed and make it up every night, than anything else I’ve ever done. As if this is where I have been headed to the whole time.

2

ON THE FIRST NIGHT of the new chronology, I lay awake on the examination table listening to the tram coming and going in Solli Plass. The last tram rattled past around one thirty a.m.

After work the following day, I took the bus to IKEA and bought an armchair that could fold into a bed. I also bought a large trash can at IKEA, that’s where I hide my sheet, comforter, and pillow.

On the second evening, I was desperate to talk with someone, anyone, about anything. I tried chatting with the cleaner. I asked about her life, did she have children? I stood there sipping coffee and looking at her while she answered my questions. Yes. Her name is Maria. She is five years old. She is living with her grandparents in Poland. Yes, of course I miss her.

Don’t bother her, said Tore, that was the first time I heard him speak. I didn’t react to it then, so much else had happened. To start conversing with the old, plastic skeleton over in the corner felt like a natural thing to do, and I replied, though silently, in my head, but as if he was a living person: But I’m curious about the lives of these Poles. They are often well-educated, how must it feel to be at the bottom of the ladder in Norway, working as cleaners and movers, painters, floor-sanders.

It’s not enough that she has to clean your office, you are going to pump her for information too.

But, she’s answering my questions.  
 She doesn’t feel she has a choice. She’s the cleaning person.

Still, I mean well, talking with her, and I’m tired of seeing through myself. If you do it long enough, there won’t be anything left. Behind everything is something else, and behind that is something else, it never stops.

I’ve been living here now for three weeks. The IKEA bed is flat and hard and every night I wake up about once every hour. But I don’t allow myself to get up until around five, because four o’clock is nighttime, and five o’clock is morning, and if it is a quarter past four, I have to wait until it’s at least ten minutes to four thirty. Only then am I permitted to put on my uniform and sneak over to the toilet in the hall. On occasion I’ve run into colleagues at that time, and when that happens, I act like I’ve come in early too, only slightly earlier than them. No explanation, no excuse. Never complain, never explain. We just give each other those looks: Yep, that’s how it is now, general practitioners forced to work around the clock!

“You’re making the rest of us look bad,” someone said one day. “You’re always here. Have you started living here or something?”

“Yep,” I said. “I thought I might as well move in. We should stop resisting and move in all at once, better sooner than later.”

We had a nice chuckle about that. He he.

If you’ve got something to hide, it’s better to stick to the truth as much as possible. Tell the truth and see what happens. But nothing happened. My colleague laughed and kept going.

Sometimes I pee in the sink in my office instead. After that, I put away my comforter, sheet, and pillow, fold the bed up so it’s just an armchair again over in the corner. Drink water, brush my teeth, open the window because you can smell that someone has been sleeping in the room, slip over to the cafeteria to get some coffee. Don’t turn on the coffee maker, at least not every day, but use the kettle to make instant coffee, black. I used to take milk in my coffee, but I’ve decided that milk, just as with a soft bed, is a luxury I no longer deserve. Plus, it’s one less thing to remember.

In the cafeteria, the risk increases of running into someone, since we share the cafeteria with the medical center one story down. One morning a psychiatrist, a specialist in eating disorders, was standing at the counter.

“You look terrific,” she said. “Have you lost weight?”

“Maybe,” I said.

“What’s your secret,” asked the person.

“I stick a finger down my throat after every meal,” I replied, and we laughed.

Humor is important, I thought on my way back to the office. It’s important to laugh. Every time you laugh, it releases substances that...

Oh, shut up, said Tore as I came in. Oh, shut up.

Every morning between five and eight o’clock, I listen to the radio, drink coffee, and do paperwork. I look at blood test results and go through case histories and notes from the hospital. I am so tired that my head hangs above the keyboard, and still this is the best part of my day. Through the window I can hear the first tram coming and going through Solli Plass, and while I write doctor’s notes to the Labour and Welfare Administration and various insurance companies and fill out forms that get more nitpicky and detailed with every passing week, I listen to the NRK P1 radio station on low. My nervous system cannot handle emotions so early in the morning, nor for the rest of the day for that matter, there should be no shocking or stupid advertisements, no too-old or too-new music. There should be nothing but well-edited, well-respected, state-financed sounds.

Everything is okay, is the message from the low murmur of the radio. Everything is okay.

It used to be Aksel I would ask, either at home or via text, for example after a difficult consultation. Do you think everything will be okay? And unless he was standing in the middle of an operation, he would always reply: Yes, it’s all going to be okay. Of course it will be.

Now I can’t ask him about this anymore. If I were to decide to send Aksel a message like that now, it would, because of the way things are, be perceived as a declaration of war. As if I had, for all eternity, forsaken my right to receive assurances that everything is going to be okay.

Every now and then I find myself about to text Aksel to tell him something, it could be anything, maybe something new about a patient I’ve told him about before and know he might be interested in, and I get as far as picking up my cell phone before I remember it’s no longer an option, and then it comes: *What have you done, what have you done.* I look around me, grasping for help, trying to gather together memories, conversations, events that altogether would draw the certain conclusion that *it all would have happened no matter what*. Like a married couple who were patients of mine whose son died of a congenital but undetected heart defect: *It was going to happen no matter what.* In their case, yes, in my case, no.

Those first days, I woke up with a gasp and had to lie in a fetal position for an hour in order to breathe. Each time I thought it’s all over now, now I am going to die, and the third or fourth time I called Aksel and told him he could have my share of the house. That is, I sent him a message, so I wouldn’t be able to take it back. When the panic attack came the next morning, at least I would be able to tell myself: But, I gave him my share of the house.

At this point, Aksel had neither called nor picked up the phone since I had moved here—now the tables are turned, but in those days, he was the one who refused to pick up the phone—but this time he called me back immediately. Later that same day, when we were sitting at the kitchen table up in Grenda; the expression on his face when he realized he would become the sole owner; it almost made everything worth it.

The lawyer sent us a new deed, we signed it, and it didn’t change a thing. And why should it. But at least the girls would get to keep their childhood home. One of Aksel’s arguments was that he couldn’t afford to buy me out. That was one of the first things he’d said when everything blew up. Here it was again, this focus on money and real estate, and every time I recalled this trait of Aksel’s, the tension in my throat muscles would soften for a little while.

The panic attack went away, but once all of the practical stuff with the deed and the lawyer and the registration was over with, it came back again.

Which means that you paid about a half million kroner per anxiety-free morning, says Tore. Or, two hundred thousand per each illegal intercourse with Bjørn, because of course that’s another way of looking at it.

I don’t respond to this, and Tore continues: What you’ve got is a bottomless pit, it’s never going to be filled, no matter what you do or how much you give away. When are you going to get it? The feeling of lugging around a debt is something you were born with, it’s going to follow you to your grave. You’ve got to learn to live with it without doing so many weird things all the time. You’ve got to learn to live with it the way other people live with sorrow. One step at a time, one minute at a time.

I still don’t say anything, and so Tore tries another angle: I can’t get over the fact that you gave away your house. How dumb can a person be. Now you’ve lost the only bargaining chips you had.

I don’t want to have any bargaining chips. I don’t want to be anywhere where someone uses words like *bargaining chip.* Or phrases like *repair the marriage*.

Recently, the attacks have started to come in the middle of the day as well, and then I have to lean all the way forward with my hands on my knees and concentrate just to get air into my lungs. There is a limit to how long the body can take such contractions, and this is a comfort, that there is a limit, because that means it will stop at some point.

The important thing is to gather all of your remaining strength and keep your chin up, I tell myself in the mirror, because it is possible to program your brain. Thoughts, feelings, with time the brain activity is able to forge new paths and patterns. This goes both ways. Depression can sneak up on you. In the beginning, it is tempting to indulge in it, but once it’s got a foothold, it becomes much harder to get rid of it than if you had withstood it from the very beginning, this is what I tell my patients.

Calm down, be content, eat a variety of foods, and keep moving.

I smile so widely at my reflection that I can see my gums.

Do you think everything will be okay, I ask Tore, but he doesn’t reply. He just stands there smiling his arrogant skeleton-smile that goes all the way up to his ears, and I think about something that one of my professors once said during my studies: *Deep inside of us we are smiling all the time.*

Aksel went skiing too much, I could have said that, and I wouldn’t be wrong. But what if there is no explanation, what if there are no coherent stories, no heroes and no villains.

You were both doing pretty well, weren’t you, Tore creaks again.

Aksel can get over this, we can get over this. It’s happened before, that a couple has gotten over infidelity. That they are even better off afterwards.

Don’t forget about the interview you read the other day, where a marital therapist was asked if she would recommend infidelity as a cure for an exhausted relationship, and she replied: *Not any more than I would recommend cancer.* And now here you are, with complete metastasis, hoping the cytotoxin will work.

Aksel doesn’t know I’m living here. I haven’t lied, I’ve simply left out information, as I’ve done the entire past year, and that is why he believes I am living in my childhood home in Oscarsgate. Which would make sense, now that my mother is in the nursing home and the apartment at Oscarsgate is uninhabited.

Every evening I think I should go over there. In Oscarsgate there is, as opposed to here, permission to live, and in addition there are good beds, in two bedrooms. But every evening I prefer staying here. There’s something alluring about the in-between, and not the least the forbidden, yes perhaps especially the forbidden. A childish delight in creeping beneath the radar, all of the gambles I have to take so as not to be found out.

Like I said, I don’t sleep much at night, but if I have a couple of spare minutes during the day, I might take the opportunity of lying down on the examination bench. I put my legs up on the stirrups that are used for gynecological exams, and there, in the midst of the every-day clamor and with a slack, drooling lower jaw, I sleep more deeply than any other time of the day or in any other place.

So, why can’t I simply lie down and fall asleep on the examination bench at night too? But it’s no use, because if falling asleep on the examination table, with my legs on the stirrups, is to become the new norm, a new prescription, something I should and am going to do, then I will no longer be able to fall asleep there either. I don’t know why, I only know that in order to fall asleep on the examination table, it is necessary to view it as something improper, something I should not do. Oh no, I think, I can’t lie down here, my patients are sitting outside and might knock and the door will burst open, I should update case histories, I should... and this is the point at which I tend to drop off to sleep.

Over fifty years old, and still I find myself with this old, childish feeling of defiance, as though a teenager-ish part of me has been slumbering somewhere deep inside of me and now it’s risen up and swallowed the adult part of me in a single gulp.

3

I must have nodded off on the examination bench, even if I can’t remember lying down here, because I am woken up by a knock at the door.

“Two seconds,” I call, and am over at the sink in a blink, splashing cold water in my face and noticing from the clock on the wall that only ten minutes have passed, which means I am still on time, and soon the man with the ponytail is sitting across from me.

“And what can I do for you today,” I ask with a smile. I’ve read somewhere that if a man and a woman behave in exactly the same way, the woman will be perceived as more unfriendly than the man, and so in order to present herself with the same mood, women must smile and nod more often than men. On the other hand, we live longer. And we don’t lose our hair. If women were to lose their hair in their thirties—as it appears that the gentleman in front of me is on his way to doing, which is most likely why he has grown himself a ponytail—then you would see what life can really be like.

Ponytail man does not smile back.

“I need a referral to a psychologist,” he says, staring at me with bulging eyes behind his glasses.

“Alright. But before I can give you a referral, I need you to tell me a little bit more about why you think you need psychological help.”

*Look at them, listen to them*—this took me so many years to learn. One day, many years ago, after summarizing a consultation in my dictaphone as usual, as we did in those days, I forgot to turn it off and it recorded the entirety of my next consultation. When I listened to the tape, I couldn’t understand where that sharp voice was coming from, who it belonged to. Up until that day, I had, for some reason or other, imagined myself to be a good listener, the kind of doctor who was safe and steady. My ideal was to be like the NSB train conductors, helpful, but not overly friendly. Now I could hear myself, and I sounded like a manic crow, shrill and smug. My voice reverberated throughout the room, I laughed at my own cleverness and didn’t let the patient get a word in edgewise, but interrupted and snatched the sentences out of his mouth, and in the end, I could hear how he finally gave up.

It was like getting a sledgehammer blow to the back of the head. Where else would that gap be located, this discrepancy between the way I saw myself and the way I truly was?

From that day on, I tried to listen whenever a patient was speaking, and I discovered how new and unfamiliar it was to wait to speak until they had finished speaking. Don’t interrupt, don’t finish their sentences, let them speak until they don’t have anything else to say. In the beginning it made my entire body itch. Staying silent required every last bit of strength and patience that I possessed, but eventually it felt like coming out of a fog.

But the ponytail man does not want to speak.

“Because I’m depressed.”

He had originally tried to do it via email, I now recall, because like many others, he thinks I am only a gatekeeper of sorts to the real doctors, that is, the specialists, and that a referral from me, his GE, gatekeeper, secretary, is a mere formality that can easily be concluded with an email or via sms. But this is not the case, and therefore I asked him to set up an hour appointment with me.

“Can you describe how your depression manifests, what you think causes it, things like that?”

His wrists are white and narrow, with black hair. He’s skinny, his clothes look worn, and there’s a waxy whiff of something or other around him, unwashed scalp maybe, and something else that is rancid, something fishy. Sardines? My sense of smell has gotten so sharp these last years, but what good is that. This body, this helpless casing inside of which we squat looking out onto the world. The body is the cage in which we live, and every now and then, without knowing why, we go over and rattle the bars so the whole cage shakes. And now he wants to go to the psychologist. The mantra of our times: Go to therapy, go the psychologist. Why not just wash your hair a little bit more often, why not brush your teeth after eating sardines, and now I’m picking up another smell, what is it with all of this stench, don’t people clean themselves anymore, the odor reminds me of something, and now it hits me: It’s the same smell that occurs whenever Aksel forgets to take his workout clothes out of the washing machine. A blend of mold and decay.

That *was* the smell that *occurred* when Aksel *forgot* to…, Tore comments, You don’t live together in Grenda with Aksel anymore, you live here now.

But we’re still married. We’re not even separated. No documents have been signed.

No. Only the deed on the house.

Ponytail man looks at me.

“Why? Can’t you just give me the referral?”

Ponytail man is a teacher, which is a professional group that, alongside lawyers and other doctors, are the most challenging kind of patients. Teachers because they try to take the lead in a way that makes them difficult to treat. They are also cheeky. If I may be permitted to speak, they say. Look at me when I speak to you. A teacher said that to me last week, she was the same age as my daughter. Lawyers because they understand every little creepy crawly of laws and regulations, and doctors because doctors know how little doctors can do and how little doctors know. Fortunately, most doctors never go to the doctor. I certainly don’t.

Ponytail man rolls his eyes.

What happened to the respect that people used to have for doctors? Oh, how I miss it. Oh, how I hate these modern times, where the individual is at the center and the customer is at the center and the consumer is at the center and it’s about service and quality on every level. Oh, how I hate the well-fed and pampered little consumers sitting there stretching out their fat little fists for more and more social benefits, oh, how I hate it that they are allowed to choose their own doctors, their own hospitals and treatments, because that’s what it’s come to, yes, that’s what it’s come to, but our brains aren’t equipped to make all of these choices, and I hate the internet and text messages and email too, the whole damn thing, and oh, how I hate all the people who think they know, all of the puffed-up self-certainty out there. Self-worth, they say, but there is too much self-worth, that’s the problem.

“If I am going to give you a referral to see a psychologist, I need to know the reason that you want psychological help. I have to write it down in your record, and it also has to be noted on the referral. Therefore, I would like for you to please tell me a little about your life and why you think you need help.”

Ponytail man sighs, sits up in his chair and begins to count out the reasons on his fingers.

“I sleep poorly, I don’t like my job, I’m lonely, I don’t have any friends, at least no one I like, I don’t feel like working out, it’s beneath my dignity to run around like an idiot, I’m not attractive to women, at least not those I want. I hate my students and I hate all of my neighbors in the building I live in. The dogs that shit on the sidewalk. People who don’t keep their dogs on leashes.”

“I see. So, you’re lonely?”

“Yes. Women these days are too picky. Every one of them has a checklist, and if you don’t fulfill one of the criteria, it’s bye-bye Bonzo.”

While he is talking, he stares at me. He is measuring me up and down, those wide-open eyes behind his glasses roving up and down, and soon they land on the breast region and that’s where they stay. The way he stares, openly, without blinking, as if it’s my fault that he has to stare. As if this, along with everything else, is out of his control. The world owes him something that he is not getting. And this is the spirit of the times: Everybody is owed a debt they want to cash in. It’s a pity for everybody.

Ponytail man tells my tits that he has met one person after the next on Tinder, but that it never comes to anything.

“What do you think is the cause,” I ask, suppressing the urge to pull up both my lab coat, tank top and bra and pinch my nipples while sticking out my tongue and wagging it back and forth.

Tore: Do it, do it.

Instead, I grab my desk with both hands to keep hold of myself while Ponytail man tells me in detail how picky women are these days, that they don’t know a good opportunity when they see one. But this doesn’t apply to the old ones, the ugly ones, the overweight ones. Because there are, apparently, several women who really want this guy, including one of his colleagues, the only problem is that he doesn’t want her, because Ponytail man has his preferences after all, and while he goes on about how the young, thin, and beautiful women these days should place more emphasis on genes and intelligence when choosing a man than on superficial things such as appearance, charm, and profession, I listen to his droning, nasal, arrogant voice and picture him to myself out on the town, didactic, self-righteous, humorless, foul-smelling, and I brood over the fact that neither charm, attractiveness, luck, bad luck, or suffering are handed out in equal measure among people. I have families come in who are full up on cancer, loneliness, psychiatric problems, car crashes, drug abuse, suicide and chromosomal disorders, and other families where the only thing that’s wrong is a broken arm or a little migraine. I have entire families who are easy to like, and I have patients like this man. People who don’t know how to behave, people who are constantly struggling with their existence.

Tore: He doesn’t need a psychologist. What he needs is to take a course in basic, civilized behavior. And a shower, clean clothes, and dental care. And, for god’s sake, cut that ponytail off!

I: Those who need the most, are often those who receive the least.

And since I have to be careful what I let myself get stirred up about, because my energy is limited at the moment, it’s necessary for me to sympathize with this guy, if for no other reason than simply to get through the consultation, and therefore I try to affix this phrase in my mind: *People who need the most are often those who get the least.* It doesn’t work. The urge to stand up and roar and topple the desk and throw him out in a stream of expletives is just as strong as it was before.

So, I try another tactic: I pretend he has cancer. With metastasis to the bone. Poor man! And so young! I got the idea when I read an obituary, full of accolades, as most obituaries are, and it struck me, not only how many fabulous characteristics the dead seem to have had in life, but also how much relief obituaries seem to contain in them, that some of the exultant tributes that one reads both in and between the lines, may in fact stem from a sense of relief that this person is irretrievably gone, never again to wander amongst us. Death can be a cleansing bath. Terminal illness can allow us to lift our gaze and see the bigger picture. And why not use this tactic when people are healthy too, why should we only put it to use just before and after they’ve died, why not use it in the middle of average daily life. All of the sacrament and sparkle that encompasses death, black, shiny coffins lined with silk, everything is elevated at a funeral, you would never harp on about little things like a musty odor and goggle-eyes at a funeral.

After lecturing for ten minutes about the state of things and a world which always and every single day neglects to fulfill Ponytail man’s expectations or even his most basic needs, I can’t get through it after all and so I give him the referral he wants, and as I am handing him the envelope that he snatches away without looking at or thanking me, it strikes me that the patients I don’t like often get whatever they want, simply because I can’t wait to get them out of my office.

4

Why am I here. How was it again. I test an elderly man who wants to renew his driver’s license. I write a sick note for a high school student. I cross off blood test charts and update case histories, open doors and call the next person in, but I don’t respond to any of the messages that are constantly pinging into my cellphone.

Why haven’t I done this before, simply neglected to answer? No discussion, no exchange. I’ve only been silent for a single day, and yet it feels like I’ve turned off of the main road with all of its chaos and am now walking alone along a barely visible path through the woods.

Here, in the silence, the questions start to come.

When did all of this begin. How did I get here.

And last but not least: When might I have taken a different choice.

Female, born 1989, here for a gynecological exam. She behaves normally. Most people are normal, after all. Most of them are trying their best. Isn’t that right, Tore. Most people are trying their best. All of us are.

And its hotter in the sunshine than in the shade, Tore replies and then stops talking for quite some time.

It is not far off to say that it all began that Friday evening precisely one year ago, even if there are several factors to indicate that it began long before that, and that what set things into motion on that evening was only a single point on a large and extensive net with threads and connections going out in every direction. Still, this was how it began, concretely, with me lying on the sofa and clicking a button on my phone, in the middle of what I thought was a perfectly normal day in a normal life. After all these years as a general practitioner, I of all people should know that there’s no such thing as a normal day, and there’s no such thing as a normal life.

Golly, I thought, when Bjørn’s face appeared on the screen; is he still alive? I hadn’t spoken with him for almost thirty years. Beneath the photo of him was a kind of virtual button, and with my cellphone in one hand and a glass of wine in the other—a wine glass the size of a goldfish bowl, which I had bought for myself so as not to have to lie any more than necessary when I told my patients that *it is healthy to drink one glass of wine a day, that’s what I do*—I clicked on the button, because in those days I didn’t know that when it says “People you may know” and you click the button under their picture, what you are doing is adding them as your friends, you are actively sending them a *friend request*. I knew so little about Facebook and all the other social media in those days and so I thought it was Bjørn who had taken the initiative, Bjørn who had reached out to be friends with me. It was only after I received the message that “Bjørn has accepted your friend request” that it dawned on me what had happened, but by then it was too late.

The next thing that happened was that an image of a waving hand popped up, accompanied by the words “Bjørn is waving at you.” The movement of the waving hand was animated with small back and forth jolts, and only because I wanted to make it stop, I clicked on “wave back”.

So, it was you who first contacted him, says Tore, you were the one to initiate it, you who added him?

Tore pretends that he doesn’t already know this. He speaks with feigned surprise. In the beginning, I tried picturing Tore as a kind of mild, fatherly figure, a sort of old, wise priest but over and over again I get the feeling he doesn’t want the best for me.

But I didn’t mean to. It was a misunderstanding.

You could have ignored him, says Tore. You could have ignored the waving hand.

Why? Since I was the one to add him as a friend, it would have been very strange not to wave back.

You could have acted like you didn’t understand social media, which you honestly didn’t back then. But you were curious. Deep inside you were curious about Bjørn and about how his life had been, and his quick response, as if he had been sitting there waiting for a signal from you for thirty years, made you feel suspicious, and you thought: He has some kind of problem in his life. And then you had to see if you were right. The conclusion: It was your vanity that brought you down, because you had to find out if you were right.

But it would have been impolite not to wave back. We were two middle-aged adults who had been together for a year thirty years ago, that was it. The people we once were no longer existed, also for the reason that the body’s cells replenish themselves every seven years. And how was I supposed to know what was going to happen? Everyone has a weak spot, a blind spot, an Achilles heel. A spot that we don’t even know about until someone sticks the knife in, deep, and by then it’s too late.

Tore doesn’t respond.

Obviously, I should have ignored Bjørn from the very beginning, ignored all of his messages and all of the waving hands, but that’s no different than saying that after colliding with a drunk driver in a crash that leaves you paralyzed from the waist down: I shouldn’t have gone out that day. If that’s the case, then none of us should ever get out of bed. We should stay in with the curtains shut and all the plugs pulled out of the sockets and not answer the door when someone rings.

Tore still doesn’t say anything. He doesn’t have to either, because his goal, namely that I should sit here with a speculum in one hand and a swab in the other with my face a mere thirty centimeters away from the genital opening of female, born 1989, babbling away and defending myself silently in my head, sweaty and uncomfortable and with an increasing heart rate, has already been achieved.

Mere seconds after I clicked on “wave back”, I received a message from Bjorn:

*hi*

Without so much as a period. I stared at the tiny word, which felt like a heavy paw on my shoulders, with no desire or purpose.

I don’t think it is just something random when people choose to send these kinds of meaningless messages. They want it to appear as if they’ve just dashed off a casual message with their left hand because they’ve got more important things to do. That’s how it is: We act as if we don’t care about what we care about, and act as if we care about what we don’t care about.

Nice try, Bjørn, I thought, but I know what you are doing, and I replied:

*Why, hello Bjørn! How’s it going? Are you still living in Fredrikstad?*

Full sentences, capital and lowercase letters, exclamation point and question marks. The way it should be done.

I switched my phone onto silent and tossed it on the coffee table, already regretting it. Why did I have to go and write all of that? I asked myself where did it come from, this endless feeling of always being in the red—not only when it came to money, and patients, Aksel, the girls, but also by social reckoning—which had just pushed me to reply to a weak and unengaging message with way too much enthusiasm and way too many words. I should have just answered with an equally weak *hi*. Instead, I let my hands flit across the keyboard all on their own.

I took a few solid sips of wine. Who cares what happens on Facebook, that infantile universe. It reminded me of elementary school, with year books and passing notes during class. I had signed up for Facebook because the girls said I had to, but I was nervous about all the pictures that had subsequently popped up, pictures of people from the old days who I must have thought were dead, the way one often thinks about people from the past; that since you haven’t seen them for a couple of decades, you can’t imagine that they, just as you, have been living their lives, for all these years, most of them maybe even in the same city as you. When some of my more boundaryless patients began contacting me and ask for prescriptions and general advice via social media, I stopped checking it at all. Facebook, Messenger, Instagram, in those days all of it was something far removed from me, an artificial and uninteresting world, totally closed in on itself.

Between two patient appointments, I see that Bjørn has sent several new messages. I only scan the most recent one. *If you don’t see this before eleven thirty, it’s best you don’t answer at all*. He is over there now, in Fredrikstad, at his IT job, sweating in front of his screen and worried about why I’m not answering. Up until now, I’ve always replied. Maybe he thinks I’m dead.

Soon he will to go to lunch with Linda, it’s their Friday tradition. That’s probably why he wants me to answer him before eleven thirty, because when it comes to social media and smartphones, Linda is—paradoxically enough, seeing as how Bjørn is the one working in IT—much more skilled than he is, and he doesn’t want to be receiving messages from me while they are seated there across from each other, in her cafeteria or his.

Tonight, they have something with the grandchildren, that’s always on Fridays, and all the rest of the day, and now I can no longer remember what it is about Bjørn’s life that I found so interesting this past year. It’s dizzying to feel as if all of this has vanished too, and before I call in female, born 1999, I pick up my phone and read the most recent messages from Bjørn after all, so as not to lose my footing completely.

Just think how important this once was, says Tore. You can’t just stop cold turkey now.

*I’m getting worried*, writes Bjørn in one of the messages. *Can’t you just send me a sign of life, I want to know that you’re okay.*

But nothing is okay. Nothing has been okay for a long time. The fact that he even expresses it like that, who is this person for whom I have destroyed everything, and who expresses himself so perversely? It’s like in one of those American series I watched once, where everyone is always asking each other: Are you OK? A woman stands in the ruins of her burned-down home, surrounded by her charred dead family, and someone asks her: Are you OK?

There’s no reply for questions like that. And that is why I do not reply.

5

On that Friday one year ago, Aksel and I were the only ones at home in Grenda. No children and no dogs. Two years prior, Ida had moved out to study medicine in Tromso, and two years before that, Silje had moved out to study medicine in Bergen.

At the time when Ida moved out, Mom had finally become too much of a danger to herself and others that she had been given a spot in a nursing home, and I no longer needed to stop by Oscarsgate every day after work to make sure she wasn’t wandering around the stairwells in her nightgown or that she’d left the stove on. The only thing I had to do now, was to visit her at the nursing home every Thursday, and this was mostly for the sake of appearances, since she rarely recognized me and never remembered that I had been there.

In other words, there was no longer anything hindering me and Aksel from pursuing our hobbies, which in my case meant drinking wine and watching TV and in Aksel’s case meant jaunting about in the woods, with or without skis on, depending on the season.

If we happened to be home at the same time, we would often have long conversations, about patients, colleagues, the girls. We laughed a lot, and sometimes I lay in the crook of his arm on the sofa, and sometimes he also put his arm around me while we slept. But we had both grown more or less impotent. Lately intercourse had become hard work, and even if it would have been simple enough to get hold of estrogen, Viagra or some other remedy, it was easiest to sneak up the stairs and go to bed without further ado. Although we hadn’t discussed it, we were both on the same page on this matter. If we had been a bit older, we might have thrown in the towel for good. But we were only a little over fifty. And Aksel could be snatched away at any moment by one of his colleagues at the Riks hospital. I often hear stories like that, both about the Riks and the other hospitals and medical centers around Oslo, and from other cities as well, the hospital-rumor-mill spreads like wild fire across the entire country, and so I knew that I had to get a grip, that I had to do what I was always advising my clients to do, to start with strength training, a balanced diet, estrogen, the whole nine yards. And, not least, to lighten up on the drinking, I was starting to lose control.

Every morning I might awaken filled with goals about one thing or another, first and foremost about cutting out drinking, or at least cutting it down drastically. But then the afternoon would roll around, and my head would be filled with my patients’ questions and my replies, and after that came all the arguments for and against what I had told them. The arguments rattled off full blast, and wine and TV series were the only things that could drown out all the noise. I had stopped following the news and stopped reading books. At some point or other, I had also stopped being social, with the exception of a few evenings with Gro, either up at her place or down in my kitchen in Grenda.

Following an eight-hour work day, the most expensive bag-in-box-Chablis at the Vinmonopolet was the only thing that could really make me relax. To lie on the sofa with a half-open mouth as one episode after another rolled by on the screen was at the end of the day, really the only thing I wanted to do. Many of the shows were familiar ones, and I tended to have a vague, but at the same time completely clear sense of what was going to happen at any time. I knew what the characters were going to say before they said it. I thought I must be very smart for my ability to outwit the TV shows in this way, me who was able to see through the screenwriters’ tricks, until I realized that the reason was quite simply that I had already watched the entire series once already, albeit with such a high blood-alcohol concentration that I’d had to watch with one eye shut so as not to see double.

Every now and then I said to Aksel:

“I’m going to stop drinking now.”

“You’ve said that before,” he replied.

“But this time I mean it.”

“You’ve also said that before.”

“Don’t laugh.”

“I’m not laughing.”

“I can see that you want to laugh.”

“But you’ve said that so many times before. And it’s not as if you drink that much anyway.”

Three days was the longest I was able to hold out. By the fourth evening, I could be found lying on the sofa, a half-full fishbowl sitting on the table in front of me, indicating that I must have filled the glass and worked on it in a half-sleep state, at which point I might as well polish off the rest, and then the cycle started again.

It was the same machinery that is behind every kind of abuse, I knew this very well, that we all, even healthcare personnel, yes perhaps especially healthcare personnel, are brimming with all the same explanations, the same need to rest and recoup, reward, pressure, the same laziness and self-indulgence. I hammered these words in, *laziness and self-indulgence*, *fear of pain*, but it didn’t do any good. Once the day’s final patient had left and the most important paperwork had been done, my legs propelled themselves of their own accord over to the liquor store, and each time I was there, I experienced the same fascination over the fact that we are allowed, completely legally, without any risk of arrest, even without a prescription, to enter a federally-regulated shop and buy a powerful addictive and thoroughly poisonous intoxicant, and in addition to be greeted by polite, friendly, knowledgeable and cultivated people who, together with the beautiful bottles all in a row, comprise that portion of the world of alcohol that is always so pleasant to inhabit, and which has as much blessing and approval from a governmental level and Parliament as the royal family and the public broadcasting station.

I always selected the most expensive box, with the name of the wine producer pronounced in bronze, and below the name a tasteful and discrete watercolor image of a castle. It was all so lovely and appetizing, and as I carried the box over to the cash register, I thought about how we are helped and encouraged in our various substance abuses, be they food, alcohol, the internet, gambling, or money; we are always flanked by professionals along the way, full-time employees whose entire profession and work hours are filled with cheering you onward, pushing you even further along, and on the day you decide to quit, they encourage you to keep at it, full speed ahead, drink for the pleasure of it, drink to accompany your food, have fun with the gambling games, the shopping, *you only live once, everyone deserves to relax, where’s the harm in that?*

At home in Grenda, I would fill up the first glass before I’d even taken off my jacket. I’d drink the second glass while eating dinner in front of the television, a dinner which, on four out of five days, consisted of crispbread with Gouda and cucumber slices, and once dinner was over, I would pour the first official glass of the day, since by that time Aksel would be in the kitchen eating oatmeal and watching. Isn’t that supposed to be a red wine glass, he might ask, nodding toward the goldfish bowl which I stood holding onto with both hands so as not to shake when I lifted it to my mouth.

For the rest of the evening, while Aksel dashed back and forth in his training clothes, unless he was downstairs tuning his cross country skis or repairing his roller skis, or buzzing around buying new gear whenever the sport shops had sales, or researching online for a special kind of poles based on ground-breaking new technology, or doing something else that was related to running or skiing, I would lay stretched out on the sofa gaping at the TV screen, toward all of those illuminated points that flashed and lit up and moved.

And since Aksel was consumed by his training mania, which as an orthopedist himself he knew he was taking to the extreme, he usually left me at peace with my drinking. Of course, sometimes he would stand in front of the refrigerator, take out the wine box and ask: “When did you buy this, wasn’t it only yesterday?” And then he would lift it up and act like his hand jerked up in the air, but mostly he did this to be funny. Aksel knew that if he were really to start in on my drinking, it would permit me to take up his ski obsession, which had much more of an impact on our family life and our budget. At least I was at home, even if drunk, and my wine boxes only cost a tenth of all of his gear and trips.

Aksel had set up a professional ski waxing and tuning station in our basement, and whenever he wasn’t sleeping or working or skiing or running, he could be found downstairs in this workshop. He would work on his skis while listening to Metallica, and if I needed him for anything, I had to go down the basement steps and stand directly in front of him miming that he should take out his headphones. I seldom bothered, and so each of us carried on, in two different corners of the house, in a kind of balance of terror: I won’t chastise your insanity if you don’t chastise mine.

During the winter months, he participated in ski races at least one weekend a month. The season began in the beginning of December with a race in the alps that I never can recall the name of. And then there was the Marcialonga at the end of January, and in March he always had to choose between the Vasaloppet and Birkebeineren because we had agreed he would only go to one per month. Aksle tended to argue that since he didn’t get to race in February, he should be allowed to go to *both* the Vasaloppet and the Birkebeineren in March, to which I would reply the same thing I tell my patients when they want to have expensive tests run because they haven’t been to see me in a while: *The system is not based on quotas*.

At the end of April, he traveled to Svalbard and skied in a marathon, at the beginning of May there would be a race on Iceland, unless he had over the course of the ski season acquired incurred injuries, ligament damage, trouble with his achilles or something else due to everything he was pushing himself to do, and which his colleagues were waiting in the wings to treat if he wasn’t able to treat it himself.

I was tired of trying to hinder him. He was a grown man and the past few years I had thought to myself: Why not just let him go to both races within a single month, why not just let him go off to the Vasaloppet and the Birkebeineren and the alps and Russia, why not just let him keep at it, *if that’s what he wants*?

Aksel and his skiing reminded me of a dog we’d once owned, an English setter with a single, all-consuming interest: to eat anything it came across. It spent every hour of the day sniffing around for food. On several occasions, I considered buying fifty kilos of ground meat and just letting the dog dig in. Letting it eat itself to death. Why shouldn’t I, if that’s what it wanted more than anything?

I was sick of trying to regulate Aksel, the same way that I had gotten sick of regulating the dog. Whenever we would walk down one side of the street, she wanted to be walking on the other side, and vice versa. And letting her get her way didn’t help, because then she only wanted to go back to the other side again. Back and forth, back and forth. Breathing and panting, her muscles taut and her long, pink tongue fluttering out of her mouth, tugging and pulling on the leash, and in the same vein that I had considered letting her eat herself to death, I also considered letting her go, letting her frolic off into the traffic, in front of a car, bam.

Every now and then, Aksel would sit down next to me lying on the sofa, and then the sofa would start shaking from his restlessness, and I would say: “Why not go out for a run?” Aksel pretended it was nothing, but the shaking had already started to subside. He would keep quiet for a little bit before responding, but finally he would cough and say: “Hm, I didn’t think of that, but maybe I will go,” and just like that he was out the door.

I let him carry on, he let me carry on. *We’ve all got our stuff*, my mother would have said. *No one is perfect*, was another of her expressions. “We’re only human,” I said, toasting the television. After a long day of patients, my cheeks were tired, my brain was tired, my soul was tired, and I felt an inner clawing and itching, as if I contained a mass of living beings inside of me, each one with its own, special personality and will. And while I was filled to the brim with voices and buzzing, I also noted the sharp inhalation between every single electron in my entire body.

I liked watching TV without having to negotiate what movie, what show. I liked to stagger back and forth between the sofa and the refrigerator and fill up my goldfish bowl over and over again, without fear of being seen and remarked upon. My own remarks were more than enough. *Alcohol induced dementia*, I thought. *Cirrhosis of the liver*. But it didn’t work. I forced myself to picture one after another of my many patients who I knew drank too much, the bloated skin, the blood pressure, diabetes, cholesterol, liver values, but that didn’t work either. I looked down at my body, things were growing a bit compact around the midriff, but my legs were still slender. I looked at myself in the hallway mirror on the way to the kitchen: still a bit pretty, at least for my age. I filled the goldfish bowl and balanced it back to the sofa and the TV. *I just need a bit of anesthesia. I’ve been listening soberly to people all day long. It’s my turn now.*

So, there I lay on that fateful Friday one year ago, dozing beneath my heat blanket, a sofa cushion propped up under my knees, drunk as usual—extra drunk since it was Friday—and having forgotten all about Bjørn. Instead, I was watching a TV series the girls had recommended, about a woman who passes through a rock in 1946 and ends up two hundred years in the past. In 1746, she meets a Scottish clansman and after that comes sex and violence and love and torture and war, and multiple time-travel excursions, and at first I had scoffed at the entire concept but it didn’t take more than a half an episode before I was completely consumed.

The phone was on the coffee table for several hours before I checked it again. In those days, my cellphone was nothing more than a distraction in my day, but soon I was to become like everyone else who bumbles around on the streets and in shops while holding the dumb little object out in front of them. Not to mention my patients, who sit hunched over in their chairs, shoulders rounded, like vultures, each one curled over their entertainment-device. They are often so checked out that they don’t even react when I call their names to come in. But soon I was to become just as absent as they were, and the phone that Aksel gave me for Christmas, and about which I knew absolutely nothing and was still only using a fraction of its features, and which the girls had to help me with every time they were home, was to become for me something that I was as closely tied to and dependent upon as an arm or a leg. But I didn’t know anything about that yet. How pure and undefiled I still was then, lying there on the sofa, in the midst of my past life. I thought I was an old drunkard. I didn’t know that I was living in the age of innocence, the same way that people in ancient times didn’t know they were living in ancient times.

It was only when I was walking upstairs to go to bed that I saw a new message from Bjørn. This time with both punctuation and capital letters.

*So nice to hear from you, Elin! I still live in Fredrikstad, but I’m often in Oslo and would love to grab coffee sometime, if you’d like to and have time? I’ve been reminiscing a bit about the old days…*

The message was several hours old. Coffee, yeah right. Reminiscing a bit about the old days. I had no intention of grabbing coffee with Bjørn. For what purpose. And why at this moment. Why all of this commotion, all because I clicked a button on the stupid phone. I disliked my phone then, and I hate it now. It is to blame for everything that’s happened. It pretends to be modernity and development, but in fact it is the devil’s handiwork. Satan has taken up residence in these objects in order to lure us with green and red dots offering up the message that we are desirable, that our existence and opinions matter, but which in reality lead us to sin and depravity. We just can’t see it. We’ve been colonized, we just don’t know it. We’ve been colonized by Satan.

Take it easy now, says Tore. It wasn’t Satan who colonized you. It wasn’t your cellphone either. It was your own lust, your own greed, your own desire and passion that was your downfall, and nothing else. You always have to exaggerate. A few years ago, when the girls started to get more independent, then everything became all about the renovation. You expanded the basement, you expanded the loft, you paid down the new loans in record time, and when there was nothing left to do, you started drinking and binging TV. And then it wasn’t talk of a few tiny sips of dry white wine while watching one, possibly two max, episodes of a show, no, it was an instantaneous switch to entire boxes of wine and entire seasons of shows that you shoveled into yourself with the same earnestness and work ethic by which you had raised your children and built up your practice and renovated your house.

All the while that I am having a conversation with myself, and with Tore, winding myself up more and more, I am also speaking aloud sentences that I have spoken aloud so many times before that I have them memorized.

Such as that man, born 1987, complaining of a pain in his back, does not need an MRI. That was the first thing he told me when he came through the door five minutes ago, that he wanted an MRI, because nowadays everyone wants an MRI, more specifically magnetic resonance imaging, an advance radiological pictorial representation of the body’s inner organs and structures. Not long ago everyone thought they had diabetes and then they would come wanting to have their long-term blood sugar measured. As if this medical center is some kind of club house for people whose hobby it is *to listen to the body’s signals*, this idea that’s become so modern these days, but which, and this is something that anyone working in the healthcare sector knows, is nothing less than a shortcut to both madness and suffering and, ultimately, to the collapse of the welfare state.

No, man, born 1987, you do not need an MRI. What you need more than anything is to avoid sitting down for eight hours at a stretch at work, after which you go home and lie down on your couch and spend the rest of the day’s waking hours playing computer games. Instead man, born 1987, should go for long walks on uneven surfaces.

“But I think I have a prolapse,” says man, born 1987. “And besides, the computer games are for relaxing, there was an article in the newspaper that said playing computer games wasn’t as harmful as they say, in fact it even said that…”

And so on and so forth.

As I put in the order for an x-ray for man, born 1987—the last thing he asked for was an MRI for his knees, *at the very least*, as he put it, like a kid begging for candy, and I felt his knee and said okay, but first we’ll have an x-ray done in-house, and while all of this is going on, I’m continuing my arguments with Tore over there.

Alright, I say to Tore. But at least I’ve stopped drinking.

Something you managed only because you got yourself a new obsession. Quite simply, you exchanged your boxed wine for Bjørn.

People are only capable of denying their passions if the passions aren’t too strong, I reply. But if the passions are too overwhelming, there’s really no choice in the matter.

That there is nothing but a pure repudiation of responsibility, Tore says in a high-pitched, accusatory voice, and I am taken aback because both his tone and his word choice are unlike him. But then I realize that it wasn’t Tore who said it. The sentence is an old memory from those first years we were living in Grenda when I once mentioned that I didn’t know whether I should vote yes or no to joining the EU, and someone said: *That right there is nothing but a pure repudiation of responsibility*.