

## ***Jamais Vu (in Reverse)***

I recently ran into Mrs. X in town. She was the last person I expected to see, and I mean no irony in that. Her last correspondence with me was five years ago, a letter stating she was moving to the west coast. Having heard nothing from her since, I assumed she had disappeared into the California scene, for better or worse.

Mrs. X is perhaps the most curious case I've come across in my thirty years of practice. Not that she was crazier, or more removed from reality than others; she was, in a word, unique—not in a general sense, but in the way in which her illness manifested itself. It haunts me that I had, and still have, little insight as to its nature.

A psychiatrist, perhaps more than a layman, may be reluctant to peer at his own foibles. Mrs. X caused me to do just that. I always considered myself a man of fairly keen perceptions, but in this case I was blind to what was before me. Sadly I didn't allow the scales to fall from my eyes until it was too late to be of benefit. Even today Mrs. X would likely deem me but halfway enlightened.

I was sitting in my office the morning she came in for her first appointment. I do not remember how she looked, but I do recall with some precision *when* it was—late September of 1964, because she exclaimed about a huge *Goldwater for President* campaign banner in the window of a building across the street. It had triggered her memory of the *Daisy* television ad run a few weeks ago by the opposing Johnson campaign.

“Doctor,” she’d said, “The advertisement...that innocent little girl pulling petals out of a flower, and then...the image of an atom bomb exploding—it was just horrible. I still have nightmares over it.”

I agreed with her that the ad was disconcerting, but I kept private my opinion that it was a heinous use of television propaganda.

Fears of atomic weapons aside, the first thing Mrs. X said after our mutual introductions was “I’m not sure I’m in the right place.”

“What makes you say that?” I motioned to a chair for her to be seated.

“I just don’t think I need a psychiatrist. My husband was the one who insisted, so here I am.” She sat in the chair, smoothing her skirt over her knees. “I know I’m not crazy. In fact, I know my diagnosis: *Jamais vu*.”

“Oh, you’ve done some research on your own?”

“Yes. I’ve gone to the library several times and made notes on it.”

*Jamais vu* is not truly a diagnosis; it is an experience—the opposite of *deja vu*, in which one feels a familiarity with someone or some place he has in fact never experienced. In *jamais vu*, someone or something that *is* known to the subject seems *unfamiliar*.

She continued, “Although in my case it’s working in *reverse*. I’m not the one having the symptom, it’s everyone else!”

I smiled and said “So it’s *jamais vu en marche arriere*?”

“Pardon? I don’t really speak French, Doctor.”

“My apologies. I meant no glibness. I was simply saying *jamais vu* ‘in reverse.’ Please go on. Can you describe what you are experiencing?”

“Well...I seem to be turning into a *stranger*. In the worst cases, people look through me as though I were not even substantial...you know?”

I admitted I did *not* know—so might she illuminate me with an example?

“All right...here’s one of the first times, perhaps three months ago. I went into the lobby of my apartment building. This same man has been the security guard there for five or six years. Well, he looked my way and didn’t even acknowledge me!”

“He ignored you?”

“Not exactly, because after I said hello, he did say something. But it was odd, because he didn’t seem to recognize me. Doctor, my husband and I have lived in the same building in west Springfield since 1957. I’m in and out of that lobby every *day*.”

“Perhaps he was distracted, or if he’s older, getting a bit senile.”

“I don’t think so. He was always fine before. And he’s only about 45.”

“How has he behaved since then?”

“He seems to know me about half the time. Honestly, I’ve gotten used to it. But here’s another one. An acquaintance of mine, Fiona, works the cosmetics counter at Macy’s. I was there shopping on Saturday, and asked her for some eyeshadow to match my eyes. She brought out three shades of green, saying it was perfect with hazel eyes.”

“And...”

“Well, have a look at my eyes.”

“They look...” I adjusted my glasses, “not hazel, but blue.”

“Thank you, yes. My mother always called them *azure*. So Fiona, when I corrected her, looked straight at me and said ‘Oh no honey, they’re hazel, see for yourself.’ And she handed me a mirror. As though I don’t know my own eye color!”

“Did they look an unusual color to you?”

“Oh, you mean the store lighting, or something? No, they looked blue, just like always. But Fiona never did see it. First I thought, *could she be colorblind?* But she could tell colors on everything else. Finally she sold me some blue-violet shadow because I chose it myself. But you see, Doctor? Things like this keep happening. Like I’m being *neutralized*. Turned beige, or gray.”

As we chatted through the hour, I learned she worked in an advertising office, and she’d been married to a high school history teacher for 24 years. They had no children because it had simply never happened, and they hadn’t pursued it.

Mrs. X did not appear psychotic. She could think and communicate clearly, and if she had a delusion, it was the singular idea that she was the victim of this reverse *jamais vu*. And not only did she feel that others were not recognizing her; she actually felt *herself* vanishing or losing her identity. There was a sense of transparency, or perhaps more accurately, a *generic*-ness—the fading away of a person whom others would recognize as distinctly her.

I saw her again the following week. When my receptionist ushered her in, I was taken aback, thinking for a moment she was a new patient. I saw the woman clearly, but didn’t recognize Mrs. X until she spoke.

“Good morning, Doctor,” she said in a mildly nasal Midwestern tone that instantly jogged my memory.

“Good morning,” I replied, hoping my slip-up had gone undetected. My hope was dashed when she began to cry.

“Oh my dear, ” I said, handing her a box of tissues. “Here.”

She pulled one out and wiped her eyes. I noticed she was wearing blue-violet eyeshadow. Her eyes were blue. I remembered that correctly. But her hair...a chestnut color with a few streaks of white—had it been that color before? Of course she might have changed it. But despite straining to picture it, I had no memory of how her hair had looked last week.

“Don’t feel bad, Doctor. It’s not just you.” She dabbed her nose. “This is exactly what I was talking about last time. When I walked in just now, the expression on your face...it was like you had never seen me before.”

“I assure you—”

“No, I’ve gotten that look too often lately. Even my *husband*. Yesterday morning he was surprised to wake up next to me! Oh, he hid it well, but for that one second his face gave him away.”

This development swung my thoughts back to the possibility of a paranoid delusion. I jotted *Belief husband purposefully hiding emotions from her*.

The hour with Mrs. X was spent probing the more obscure symptoms of paranoid states and dissociative disorders. She was not schizophrenic, of that I was certain. This delusion of hers, if indeed it was one, was peculiar. It appeared to be contagious. And now I had caught it.

How would one victim's delusion reach out and ensnare further victims? The store clerk, the security guard, the husband, myself...were we all under the spell of the faulty perceptions of Mrs. X?

A few days after her second visit, I received a telephone call from Mrs. X's husband. He tried to keep his voice steady, but my ear, trained to detect anxiety, gave me a clue to his nervousness. I imagined the fingers of his free hand drumming on a table or chair arm.

"Doc, you've seen my wife twice now. What's your impression?"

"I'm afraid I can't make a diagnosis based on two visits. She's a very pleasant woman...I'd say you're a lucky man."

"I'm not asking for your opinion of my luck, I want to know what's *wrong* with her. I just don't know her lately."

"How do you mean?"

"Well, she's...like someone else. Or, maybe someone *less*. Yeah, I'd almost say she's made of less *substance* in a way. I've actually found myself startled to go into the kitchen and see this woman there. As though some stranger wandered into the house and started supper. Then she says something, and it hits me *Oh, it's my wife*. It's downright weird, Doc."

"It is disturbing, I'm sure. Has it occurred to you that the problem might be not be solely hers?"

"What?"

“Perhaps *you* are perceiving *her* differently.”

The conversation deteriorated from there, as Mr. X was unable to accept that his own mind could generate the unfamiliarity he felt with his wife. I promised to keep him apprised of her progress.

I have a habit of walking to my office. Mulling over the conundrum of Mrs. X, and recalling my own difficulty recognizing her, on my walk I began glancing at passers-by, wondering if any of them might be someone I knew, and didn't *know* I knew. Was I getting *prosopagnosia*—the inability to discern faces? But then worrying about my mental status rather than focusing on the patient seemed silly. After all, I had no problem recognizing my other patients.

No, the illness was surely not mine; it revolved around Mrs. X. And others were suffering the same...for want of a better term, *jamaïs vu* toward her.

When she arrived for the next appointment, I made a concerted effort to look her over. I studied her hair, eyes, clothing—to the point that she commented, flushing.

“Good morning, Doctor. Is something amiss? Do I have spinach stuck between my teeth?”

“No, no, of course not. I apologize. I was...just admiring how well that green suit goes with your hair.”

She shook her head. “Oh, I know better. You were trying to tell if you *knew* me. Or you were trying to memorize my features. People are doing that at the office.”

“So you’re saying they—and I—are beginning to look at you with an eye to remembering who you *are* next time around?”

“Yes. In fact, if they don’t, lately they forget I’m even there. I could be in my office, and someone will come in, drop something on my desk, and never notice I’m sitting there. I’ve tried staying silent just to see if they walk back out without ever seeing me.”

“And?”

“More often than not, that’s what happens, unless I say something. Then they’ll cover their surprise and give me a sheepish look, as though they saw me all along. I’ve turned it into a sort of game. It would be fascinating if it weren’t so frightening.”

I asked her what frightened her most about it.

“Well, how would you feel if you were slowly being erased from everyone’s consciousness? You know, we women *expect* to get noticed less as we age. I just didn’t expect to be faded out of *existence*. I wake up at 2:00 AM sometimes, just wondering if I’ll soon be—I don’t know...a *non-person*.”

“Your fear is certainly understandable. Who do you think is fading you out of existence? Is it the people around you, or could it be you?”

“Me? You mean, I’m making *myself* disappear? But I’ve done nothing different. No, it’s everyone else.”

“Do you think you could be misinterpreting their behavior?”

Her lips set, and I saw a flash of anger in her eyes. She rose from her chair and headed for the door.

Realizing my question had been too pointed, I asked her to come back.

She stopped at the door but didn't turn around. "What color are my eyes?"

"Pardon me?"

"My eyes. What color are they?" She was still facing the door.

I knew instantly what she was after. "Why..." I felt a twinge of panic. We had discussed her eye color, and I had made a point of noticing her appearance just minutes earlier. "They're hazel."

She turned around and returned to her chair. Her eyes were now glistening with tears as she stared directly at me. I could see the tears, the raw emotion, yet I could barely discern her eye color. Blue? Greenish? I squinted. Perhaps if I focused better...but the color was indistinct.

"What about my hair?"

"Of course..." But as I looked at her head, not only was I unable to see what color her hair was, I could scarcely tell she possessed hair at all. Asked to describe her an hour later, I should fail completely.

"See, Doctor? When will you, my husband, and all the rest believe me when I say I am *not* crazy? Are you going to deny your own senses?"

"No. You are absolutely right. And...I only meant to imply that your perception *could* be mistaken. I now understand I was wrong. Something is going on here that no one comprehends."

"Including you," she sighed. "Isn't that right, Doctor?"

"Yes. But it often takes many sessions to get to the source of any disturbance. Several months of therapy may be required to help you."

She got up and headed for the door again. The last words I heard from her were “You can’t help a woman you don’t see.”

Mr. X phoned me again the following week. His voice was distraught.

“Doc, what did you say to my wife? She’s been acting even stranger than before. In fact *stranger* is the right word, because that’s what she is, after 24 years. She keeps saying I don’t see her anymore. And you know what? She’s right. I may have taken her for granted, and all. Doesn’t every wife complain of that? But this is something else. She’s just not there. Not there at all.”

I waited a moment for him to say more. But there was silence.

“When you say she’s not there...”

“I mean *not there*, Doc. Gone. I’m not even sure when she’s in the house or out. When I do see her, it’s a short while before she’s disappeared again.”

I told Mr. X that his wife had left my office in distress and made no return appointment. I had only this suggestion for him:

“Sir, the only thing I might advise you to do at this point is to make your life’s aim to get reacquainted with your wife. And I mean knowing her better than you know yourself. There may be nothing that can break through this sphere of obscurity she is existing in, but perhaps you of all people may be able to.”

“All right. I’ll try. But she needs *professional* help, Doc.”

“She and everyone else, apparently,” I replied, beginning to apprehend a faint glimmer of the depth and breadth of Mrs. X’s plight.

The best I could muster in terms of a guess about Mrs. X is that she was a victim, not of an isolated mental disorder, but of a dynamic. Her husband, office workers, myself—we as a collective, *her* collective, were all involved in it. She was right; her “vanishment” was not wholly of her own making.

Several months after that telephone call I received a letter with a Los Angeles return address. It was signed by Mrs. X, and said only this:

“Thank you for trying to help me. My husband did his best to find me again, but after a quarter-century of marriage he just couldn’t change. I have legally separated from him and moved to California. I have a sister out here. Who knows, perhaps things will be different.”

I attempted to picture Mrs. X, but could not summon even a vague image of her. She seemed a distant character, someone I might have seen getting off a subway, shopping in a store, or dining in a restaurant. Someone I would dismiss from my awareness before she ever entered it.

Quite genuine was my surprise when, this very week on the walk from the office to my favorite lunch spot, I should look up to see a woman approaching. She had chestnut hair with streaks of white, brilliant blue eyes—one would say *azure*—and a confident smile. She was dressed in the new style, a brown plaid suit with a waistcoat, skirt barely grazing the knee.

“Hello Doctor...” she said. The Midwestern twang was still there, but this time it only served to complement my memory.

“Wait, say no more. Mrs. X, what a delightful surprise.”

She smiled. “Here. I was on my way to drop this off at your office, but I’ll give it to you now.” She handed me a large sealed envelope. “You can open it later. Just a little something you may find interesting.”

“How thoughtful of you.” I took the envelope and paused for a moment. “Say, I was just going to the deli for a bite. Why don’t you join me?”

“Well...” she glanced at her watch. “Why not? I have a few minutes to spare.”

Over a sandwich and coffee we talked for some thirty or forty minutes. She had made this trip to Springfield to finalize her divorce. I was curious to know what had happened to change her life so dramatically.

“Well...it’s 1970, and *times* have changed,” she said. “Five years ago I was vanishing before my own eyes, and now I’m feeling...well, *here*.” She smiled and rapped the table. “Tell me, are you familiar with Friedan’s writings?”

When I confessed my failure to keep up with the feminism fad, I was instantly admonished.

“Fad! Doctor, you must get *with it*, as they say. This is no fad, but a *movement*. I audited some courses at UCLA, and it opened my eyes. Do you know Simone de Beauvoir was in France writing a book, way back in 1949? It’s taken too long, but finally we women are coming into our own. We are becoming *aware*, Doctor.”

“This is commendable...but I’d like to know, for you personally: Was there a turning point? I mean, when you began to...shall we say, *solidify*?”

“I can’t point to any one moment. That envelope I gave you holds part of my recovery. I hope you’ll enjoy it. But as far as that goes, I’m not *quite* solid, even yet.”

“How do you mean? You look strikingly so.”

“Thank you. I’m living on my own now, after staying in Pasadena with my sister for a year. I’m working as a copy editor for a local magazine. I’ve even dabbled in some writing for myself. My boss...she’s wonderful about encouraging me. The others at the magazine seem to respect me in the three years I’ve been there. But I often feel it’s because I’m trying *too hard*—overdoing things, being more strident than my temperament warrants. Sometimes I feel a bit like a...a *phony*.”

“Sounds as though you’re simply seeking the right balance.”

“I suppose so. But deep down, I think I’m afraid.”

“Afraid?”

“—That if I act more like myself, it will come back...that they’ll stop recognizing me again.”

“I see. You may be overshooting a bit, but that is a natural reaction. You can gradually readjust your way of interacting with them until it *feels* right. And surely *quiet* resolve can be as compelling as its louder counterpart.”

“Surely,” she smiled. “That’s easy for you to say. Forgive me for pointing out the obvious, but you are a man.”

We said goodbye with a brief embrace and a promise to stay in touch. When I returned to my office I sat at my desk and opened the envelope she had given me. In it was a hand-typed monograph, authored by none other than Mrs. X, neatly bound and titled:

“*Jamais Vu* (in Reverse): One Woman’s Memoir.”



