

## The Somnambulist

Tonight I am sleepwalking again.

I jerk awake when the sprinklers go off and I find myself in running shoes, wearing my scrubs and white coat. A stream of water from the sprinkler is hitting me directly in the face and there is water in my eyes. Somehow I can't blink; I stand paralyzed, awake, and over the rhythmic hissing sound of the sprinkler, I begin to cry. I think I was dreaming about them again, I don't remember what was going on, but I remember the feeling of the fine fine hairs on her cheeks, her tiny fingernails and the dirt under them that I was always telling her to scrub off. And I remember him; he was holding my hand and I could feel his thumb stroking my knuckles and then gently squeezing.

I go back in to dry off and change back into my pajamas. I throw my coat in the dryer. I have been doing that a lot lately-- I think that's why the stitching is unraveling,  
*Dr. June Langley, MD.*

It takes me seven Lorazepam to fall back asleep. I forget to set my alarm, but I wake up anyway-- automatically, easily-- from uneasy sleep.

The next morning I drive myself to the hospital, change into my scrubs and put on my white coat. I realize I have lost weight; I am able to take off my pants without undoing the button.

There is an intern who shadows me during patient rounds whose name I can never remember. I try to sneak a peek at her ID badge, but it only has her initial on it, and I'm too embarrassed to ask her because we have been working together for too long. Or maybe that's just what I tell myself. Maybe I just don't care. I'm not sure. Regardless, to me, she is *O*.

Once when I was sleepwalking, I woke up standing in front of the ficus in the foyer, about to put my arms around it. Even as I was waking up, I thought, if only for a moment, that it was Leila. And when I look at *O*, it feels like I've been sleepwalking, dreaming of and waking up in front of her.

*O* is much too old to be my daughter, but I think of her as a child and again I am reminded that I was-- or am-- a mother. I should not write such things in present tense, but if I were to say that I *was* a mother, *was* a wife, I am not sure what I would do. Without it, I have no purpose.

I try hard not to replay the accident. I wish it had given me amnesia. A complete wipe, because I can't forget. It's the trivial things that hurt the most.

It's a Tuesday almost two years ago. Leila loses her first baby tooth. The next day, she loses another loose one. This one is an incisor. She cries-- big crocodile tears is what Paul calls them-- and I tell him how I think that idiom is ridiculous. Leila is afraid that *all* her teeth are going to fall out so she shuts her mouth for the rest of the day. As if this way

they couldn't come loose. Paul and I laugh for hours until we finally coax her with rice pudding. She's aghast; I opened my mouth! She slaps her hand over it. Paul and I laugh at her fear, to us it's like being afraid of monsters in the closet or under the bed. We are amused.

See, you didn't lose any more teeth, Paul says to her and we laugh again.

And then there's just Paul and me. It is seven years ago; I can't remember if we are married yet or not. We trek to a home furnishing store because we're decorating our new house. I want our rooms to look sophisticated like the pictures in Ethan Allen catalogs. Paul wants practicality with a whimsical flair, like an IKEA house.

We can't agree on what color to paint the dining room. Paul wants an off-white or pale pastel hue but I want something dark and intense so that it looks sophisticated. I want plum; Paul wants custard yellow.

Why are these colors named after desserts? This is stupid, he says.

And yet you want a custard living room.

We never resolve this. Instead, we leave the paint section and go pick out chrome water faucets.

I lead my interns through the ICU, where one of my patients, Harold Payne is just being wheeled out.

Harold is my favorite patient.

I should not pick favorites, but he reminds me of Paul.

I should dislike him for that. Also, he is irritable and does not speak to any of the nurses. No one likes to go to his room. For some sort of masochistic reason, I like him more for that.

I'm not sure how Harold feels about me; I always remind myself that it is my fault he isn't discharged by now. But somehow, I am grateful for my failure. Grateful that he is still here, even in these circumstances.

I feel guilty for thinking this.

They do not look alike-- Paul has dirty-blond hair and a large asymmetrical nose that overpowers his other features. --I'm not sure why I wrote that in present tense. I think I am imagining that he is Paul.

I've never seen him stand up, but I know he is tall.

Harold looks much older than he is. His skin is slack, especially his eyelids, which droop, occluding his eyes.

Harold was a patient in the ICU and I have not been able to stabilize him fully. He has become blind, and I intubated him, but the procedure was unsuccessful and he has developed a severe infection. I asked him if he would like to be at home with a hospice nurse to take care of him, but he looks in my direction with vacant gray eyes. He can tell that I'm standing in the corner by the window. I have noticed that other patients are afraid to look me in the face. Harold is not and never was. He is not ashamed of the silence.

Why would I go home? There's no one there. Even if there was, how would it be different? I can't see them. It's no comfort. His tone is acerbic.

I am afraid to pat his shoulder or touch him at all. I think I might scare him if I

suddenly touch him. I wonder if he senses my arm moving with hesitation.

I tell him that I am going to give him some benzodiazepine so that he can get some restful sleep.

Harold says, Is the benzo also going to unblind me? He slumps over the bed tray.

No.

I imagine that he must feel claustrophobic because the only way he can perceive the room is through my voice that fills its space. It seems to get smaller, and encloses us tighter with my voice spreading out farther until it invades his senses and swallows us up.

Harold turns his head up, looks at me and almost rudely says, I think you could use the prescription too.

He is mocking me.

O. is standing by the door with her clipboard, judging me. She has witnessed patients being rude before but I know that she is thinking, asking herself why I was assigned as her attending. She thinks I've lost my grip.

I tell him I'm going to the pharmacy. I leave the room and O. follows suit.

After I send O. home, I go fill Harold's prescription. I could have a nurse do it, but they don't like him anyway.

An odd thing happens. In the morning, I wake up in Leila's room.

I have found that I usually wake up in my own bed, even if I'm wearing different clothes, but this morning, I am curled up on her small bed, knees to my chest and both hands resting heavily under my head.

I can't believe I fit on her bed. I thought she was smaller once, or maybe I thought that I was bigger. I stretch out and measure my body against her bed. Briefly I wonder if I have shrunk.

As I administer his daily medication, I tell Harold that the nurses have reported that he grinds his teeth. It can be a sign of deep-seated anxiety. Immediately I realize how ridiculous this statement is.

He looks angry.

I'll order you a mouth guard.

Why?

It's damaging to your jaw and teeth and you could accidentally bite your tongue.

I'm not going to wear it.

Silence. I don't protest this.

Do you expect me to sleep soundly?

No, but that's why we've been giving you medication.

The room gets small again.

Suddenly I reveal to him that I sleepwalk.

So you have deep-seated anxiety.

I should be taken aback by his familiarity but I don't mind. I have told him he should call me June.

So I tell him why I think my sleep is disturbed. At first, I thought it was the the

Zolpidem. It can cause create vivid dreams and make you do things in a semi-conscious state; people sometimes cook full meals or even drive places, but I know it's not the Ambien because it hasn't stopped and my dreams are just as terrifyingly real as they ever were, if not more so.

I tell him about Paul. And Leila, I tell him about our daughter. They come to me in my dreams. I say that I am a childless mother, and a husbandless wife. I do not call myself a widow.

I tell him that I have started believing that I can still find them in my waking life because I can't seem to find them when I'm asleep.

Why are you looking for them in the hospital?

Hospitals are different.

Hospitals are not like dreams. There, people were kept in enclosed spaces, and it is still. Minds and information can become finite within its walls. In my head, I think that only doctors can know people. You can see their insides on MRI's, on x-rays; you can know everything going on inside them and even how it manifests itself on the outside. The body hides no secrets.

I sit for a while, listening to Harold's breathing, ignoring the rest of my patient load. A nurse walks by and looks perplexed.

When I finally leave, I pocket some of the lorazepam syringe kits in the medical supply closet across the hall from Harold's room. No one will notice. They will think they were used to sedate Harold.

The next day, the hospital lawyer visits Harold and he asks me to be there. When the lawyer reads the documents to him, and tells him to sign, I put my hand over Harold's, and guide his pen.

When the lawyer leaves, Harold says, Why do I have to give my things away? I don't care what happens to them.

I tell him that we are going to take him off the respirator. He says nothing and the expression on his face remains stagnant.

Quietly, I untangle the coils from the ventilator and switch off the machine.

I sit in a chair by his bed for a while, watch him in repose and increase the morphine drip when he moans. Even with the respirator machine, his breathing is belabored. I can tell he's not sleeping. Every once in a while he opens his eyes and looks at me quietly.

It is midnight now. December 2nd.

He looks at me, eyes moving slowly.

Tomorrow is my birthday, he says to me and cries softly.

Finally, he falls asleep and his breathing becomes shallow.

I wonder if it is a coincidence that O. is leaving to switch off my service just after Harold has died. The chief of medicine tells me that he wants me to take time off. Instead, I decide to give him my two weeks notice.

I should know better. All doctors should know better, but I want a cigarette. I tell

myself that I'll smoke just once now that I'm leaving the hospital for good.

I tell myself that it can be different this time. I tell myself that I can cope better and that it is releasing that I found people who reminded me of them. It makes me believe that I didn't kill them and that somewhere, they could still be alive. Maybe it's a good thing that we will all leave at the same time. And again, it feels like Paul, Leila, and I are all parting ways again. Again, I'm left in the big house without them. But I make myself believe that it is better now.

I think about getting a dog.

The house is unbearably empty; there's too much space around me. It's all far too open. I long to feel claustrophobic. I want to stand somewhere, spread my arms and be able to touch walls with both palms. Even when I lie in my bed, in the very center, and spread out my arms, I cannot reach the edges of the mattress.

I think about buying a smaller bed. Or sleeping on the couch.

I go out to run some errands.

At home, I begin to paint the house. I have two big cans of Behr's paint. I have plum and I have custard. I tape the baseboards and the crown molding and lay what seems like miles of dirty sheets on the carpeted parts of the house and the wooden floors. I take one of the paint rollers and standing on a stepping stool, I start at the top, moving in wide and straight strokes, coloring the walls.

Later, I go to bed. For tonight, I sleep on the couch where I can smell both the leather of the cushions and the pungent odor of fresh paint. I look at the colored walls and

they seem to come nearer and close around me.

The couch creaks when I shift and my pajamas rub against the leather. I slide off and stand up, walk upstairs, avoiding the steps that I know creak even though there is no one there to hear it or wake up.

I go into the upstairs guest bathroom and pull out the lorazepam I laid aside. From the medicine cabinet, I take the small first aid kit and open a little packet of alcohol swabs. I tie my arm and then inject.

Once.

Twice.

Three Times. Three syringes in the trash.

My arms are weak and shaky now. After I tape a cotton ball at the entry point and apply pressure, I make my way back downstairs to the living room. It's hard to walk. My eyes take a moment to adjust to the dark and when I can finally make out the shapes of the furniture around me, I close my eyes. I feel faint.

I fall asleep and dream of nothing at all.