

Kilometer 101

by Maxim Osipov

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In My Hometown

I've been practicing medicine for a year and a half now in the town of N., the regional center of one of the districts adjoining Moscow. Time to sum up my impressions.

First and most terrible: the two feelings most powerfully expressed by patients – and for that matter many doctors as well – are fear of death and hatred for life. The future doesn't interest them: why bother? They're not living – just killing time. On holidays people celebrate, drink and sing songs, but if you look them in the eyes you won't see the least sign of enjoyment. A woman with critical valve stenosis has to have an operation – there's no point in being in the hospital otherwise. "Or else... I'll die?" Well, yes, that's the way it looks. She doesn't want to die, but to go to the district center, wade through the red tape, go to all the trouble – that's also too much. "I'm already 55, I've had my life." "So what do you want?" "To go on disability." She doesn't believe health is possible – she'll settle for free medications. "Doctor, will I make it to retirement?" (The unlucky ones don't make it, and those that do? They're all set.)

Second: power is split between money and alcohol, that is to say, between two embodiments of Nothingness, emptiness and death. Many feel their problems can be solved by money, but this is almost never the case. How can money help spark interest in life and love? And that's where alcohol really takes over. It is the cause of events like this one: recently a two-year-old child named Fedya fell from a second floor window. His drunken mother and her live-in "boyfriend" dragged Fedya back inside and locked the doors. Fortunately the neighbors saw everything and called the police. They broke down the door and the child was taken to the hospital. With the mother wailing in the customary way in the corridor, surgeons removed the boy's ruptured spleen. Fedya survived and even took out his own breathing tube (he wasn't being watched because there was another operation going on), then also pulled out his central line.

Third: In almost every family a violent death has recently occurred: drowning, explosives, murder, disappearance in Moscow. All this makes up the background against which my own family's life unfolds. It is not uncommon to run into women who have buried both their grown children.

Fourth: Almost no one I've seen cares about their job or what they do, and their apathy extends to their own health. They can't remember the names (trade, generic) of all the different medicines, and the dosages are too complicated: to take 25 milligrams, you have to split a 50-milligram tablet in half or a 100-milligram tablet four ways. It's hard – too much trouble. To weigh yourself every day and double your diuretic if you've gained weight – that's just too much. You don't have a scale, but it never occurs to you to go out and buy one – and it has nothing to do with money. People are *illiterate in practice* – they know how to put letters togeth-

er to spell words, but they don't know how to put this ability to practical use. The most common reply to my suggestion a patient read the large printed text of my prescriptions is "I don't have my glasses." Since I don't have my glasses I won't be reading anything today – that's what illiteracy is. I make one last try: "Do you understand where to go and to say I referred you?" Apparently, the answer is yes. "And what is my name?" Angrily: "How would I know?"

Fifth: it turns out friendship is a phenomenon among the intelligentsia only. The so-called *simple folk* don't have friends: not once has anyone except a relative ever asked me about a sick patient. There is no mutual support – we're the biggest individualists you can imagine. It seems our nation has no sense of self-preservation. It's a vale of tears, where it's easier to die than ask a neighbor for a ride to Moscow. "You don't have a wife? What about friends?" None. "I have a brother, but he's in Moscow, I have his phone number somewhere."

Sixth: men are almost always idiots. A man with heart failure, if his wife isn't constantly after him, is doomed. This idiocy begins in early youth and progresses from there, even if a man becomes, for example, a chief engineer or agronomist.

A man who looks after his loved ones is a rarity, and inspires respect thereby. One of these, Alexei Ivanovich, is a patient of mine. He managed to arrange a kidney transplant for his wife by selling everything they had – they spent forty thousand dollars. Usually it is quite otherwise: the Lord giveth, the Lord taketh away, funeral, memorial services.

Those who have *come up in the world* are repugnant. One of these, a woman recovering from an anterior infarction, came to see me a few days ago. The big brick house she lives in, next to ours, was built on her husband's shady business dealings. She sees me as an equal or almost an equal and therefore began by complaining that the ride over had been bumpy, "although it's a good car, a Volvo," and then she goes on like this: "I have to send my grandson to my daughter in Cyprus, she's studying there. Cyprus isn't what it used to be, you know, there's too many *gays* now." Etcetera. By the way, the atmosphere at my clinic is basically asexual, unlike most Moscow clinics, where sexual currents run high.

Another thing: the elderly receive scant medical attention. "She's seventy, whattaya want?" The same as I want for a twenty-year-old. I remember one shaky old woman at the grocery store. Groaning, she chose small pieces of cheese, butter, sausage – *shopping smart*, as they say, meaning as cheaply as possible. A line formed behind her, and the cashier, a rosy young thing, emphatically said, "I'll never live to be that old!" The old woman suddenly looked up and firmly replied, "Yes, you will. And sooner than you think." In Sparta they managed their feeble population even more rationally – and what's left of Sparta except a few stories? One might get the impression that we're economizing on resources (which ones?) in order to be able to treat the young, but this is not the case. An old person is more likely to get treatment if he is *socially significant* (the father of the head of an electrical power network, or the mother of a deputy head of the local government).

Overall, old women are the most interesting. One midnight not long ago I was inserting a temporary pacemaker. When it was finally all done, I shook my assistant's hand, and then that formerly almost breathless old woman also stuck out her hand – "What about me?" – and gave mine a firm shake.

The eternal refrain is "Easy for you to say, Maxim Alexandrovich." What it really means is, "It's easy for you, Maxim Alexandrovich – you have the energy."

The church plays virtually no role in the lives of the ill and the hospital. Even such external trappings of piety as icons on bedside tables are missing. Everybody is baptized, though, everyone has a cross around his neck, among them a frightening man called Ulrich. Ulrich has personally executed sixty-eight people (nationalists in Ukraine, gangsters after the 1953 amnesty and “you know, a little of this and that”); he’s a professional driver, a veterinarian, a healer, and a part-time FSB (formerly KGB) agent (he might be lying). He’s got a government-issue weapon, a Stechkin automatic pistol (again, if he’s not lying). Hits like a ton of bricks – a few days ago he knocked out his grown son’s front teeth. There has to be order. Order is vital, and anyone who gets out of line has to be stopped, with a fist or, if necessary, a bullet. His pension is 2700 rubles (roughly \$90) a month. Doesn’t the FSB help out? No, he’s a volunteer. Talking with Ulrich is scary: any moment he could go for his Stechkin. But his craziness (his former wife practices black magic, is harming him from her office in Moscow, and so on – karma, magnets, crystals) is the consequence of the bad things he’s done, and not vice versa. Patients like that are the exception, though – most are easygoing enough.

It’s not even worth discussing the fact of the (both regional and Moscow) government’s idiocy, only how people manage to get around it. This is the source of stories it would take Petrushevskaya’s genius to describe. Here’s one: it’s prohibited to dispose of amputated limbs other than by burial in a cemetery. Irresponsible one-legged citizens don’t pick up their amputated legs; as a result not too long ago, seven legs piled up at the morgue. Their disposal had to wait until a homeless man was buried (at state expense and without witnesses) and the legs could go in with him.

So what do I see good in all this? The opportunity to help a lot of people. Even if the help isn’t accepted – giving them the option of being helped. The absence of obstacles on the part of doctors and the hospital administration. You’d like to build a cardiac care unit? Go right ahead. You’d like to bring in medications and distribute them – please do. You want to admit a patient so his alcoholic mother will leave him in peace – by all means. The absence of traditions is also helpful. In contrast to other provincial cities, N. is not a slave to tradition.

There’s almost no xenophobia, either, although just the other day I had to tear down a printed leaflet saying “Chechens Out” from the door of a grocery store. Interestingly, the people who want to do something for the hospital are, as far as I can see, invariably recent arrivals. There’s an enormous amount of tolerance, including, unfortunately, towards absolutely intolerable things, such as the heroin trade, and people are not judgmental at all. Muscovites are crooks, of course, but that’s just the way it is.

There is respect for books, knowledge, and experience of life out in the big world, but there is no envy. And as for patients who won’t agree to a heart operation – well, who wants to have one? And it doesn’t help when the district luminaries tell them that they don’t need the operation. Every time this happens I feel that I have fallen short as a doctor, that I’ve been ineffective, I’ve failed. That’s why I have to keep my American diplomas on the wall, but first and foremost just keep trying, keep pushing myself, try to connect with each person I meet.

Another source of pleasure is seeing, if not a hunger for activity, at least a readiness for it in someone who not long ago was as good as buried. And another:

the sense that everything is happening in a hermetic environment (there is only one hospital that everyone comes to); you learn the continuation to every story, which adds to your responsibility.

There is joy in personal contact: not long ago I treated cheerful, skinny little ninety-year-old Alexandra Ivanovna for myocardial infarction (her father, a priest, perished in a camp, her mother starved to death, she herself wasn't able to get an education and worked at a nursery school). She's the closest thing to saintly I've ever seen. I tell her, "You're seriously ill, you'll have to stay in the hospital." She cheerfully replies, "What is it, the bird flu?"

A couple of days ago I had greetings from my great-grandfather, who died shortly after I was born: my patient's unusual and lovely name, Ruth, had caught my attention. "Ruth the Moabite," I said to her, and she answered, "Only one doctor remarked on my name before and he took a great liking to me because of it; he even invited me over a few times." That doctor was my great-grandfather. After returning from the camps he had to live "at kilometer 101" – meaning more than one hundred kilometers from a major city. He lived in N. for the rest of his life. Now they don't send people to "kilometer 101" anymore – you have to put yourself to the trouble.

Then, of course, I like the feeling that it's my city. I like it when people nod to me on the street. A lion among sheep? Maybe, but it's better than being a sheep among sheep. All the more so, because soon another lion will appear, and then – look there – another.

When all's said and done, it's clear that I'm happy to be working in N.

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Another year of provincial life has passed, and much has changed, in large part due to the above-promised lion – my friend and colleague. Together we're managing so nicely we're starting to run out of patients. In-hospital mortality has been halved. We're able to provide more help to patients, nobody is limiting our freedom – it would be a sin to complain. An anonymous oligarch gave us a wonderful echo machine. Our work is becoming more *doctorly*, closer to the ideal, though there's still far to go. Sentimentality (when the role of benefactor and all-around good guy is thrust upon you) is disappearing. If that hadn't happened, I would have had to view the city of N. as my compromise with entropy, as Doctor Zhivago's last refuge: not everyone who left Moscow was a Kutuzov. On the other hand my initial delight at new encounters (with people, with the town) is over, I haven't heard from my great-grandfather lately, and my view of the environs has become more sober, and therefore grimmer. Our efforts to expand to regions adjacent to N. have led to more frequent meetings with regional, district and Moscow government officials. This, as my colleague puts it, "doesn't add to the enjoyment." In contrast to evil, which always excites positive exchange (fear causes breathlessness which causes more fear, and so on), intelligent action is always accompanied by increasing obstruction.

Medicine. As in past times, medical services in Russia are quite accessible, but not very effective: "Let me assure you," said the doctor in a voice neither loud

nor soft... 'that I never tend patients for profit... Of course, I would be happy to put your nose back on, but that would be much worse. Let nature take its course, that's the better way. Wash your face regularly with cold water, and I assure you that you, without a nose, will be just as healthy as if you had one.'" That's how Gogol put it in *The Nose*, and it's pretty much how we continue to treat patients today; in five years Russia changes a lot, in two hundred – not at all. As before, doctors and patients suit each other perfectly. And then all of a sudden we show up – and off we go: one patient takes a lot of warfarin whenever he feels bad, without having blood-work done, and gets serious bleeding, while another, having just had a valve replacement, stops taking warfarin – he gets a femoral artery embolism and can count himself lucky. The cause in both cases is alcoholism and men's idiocy. Men's idiocy manifests itself in particular like this: the vast majority of men answer the question, "What seems to be the trouble?" with a shrug and an irritated, "They told me I had to go to a cardiologist."

The main problem in our medicine is *the absence of a primary physician*. The patient listens (if he listens at all) to the last advice he got. He hears one thing at the hospital, another at the clinic, in the district hospital a third thing, and in Moscow they say he has to have an operation. Who to listen to? The one he likes best? The most comforting one? The most expensive? Or the one with the biggest reputation? How could a professor, or academician, or major specialist, or distinguished doctor say something stupid? ("If there is no God, then what kind of captain can I be?" asks a disillusioned military man in Dostoevsky's *Demons*). I remember how horrified I was as a kid when I realized that adults can be fools; many of my patients have not yet come to this realization, and therefore end up getting into all kinds of difficulties.

Neither does the doctor understand what his role is supposed to be: should he decide on the treatment, or should he only render an *opinion*? In theory the primary physician ought to be the patient's local practitioner, but mostly he just gives out prescriptions and referrals, and often drinks too much and despises his work and himself. The local doctors have long ago gotten out of the habit of making decisions and approach the patient's problem like this: "You have chest pain when you walk fast? So what's your hurry?" Strangely enough, this response suits the patient fine.

There's no shortage of hospitals or medications. But we have no standards of conduct, no unified system of appeal to sources of scientific knowledge, no system of proofs and no requirements for such a system. Of course, we manage to help some people, each time almost as if by accident. The goal, then, is to transform art into craft – that's what defines progress. But as it is – what does our ability to *do* things matter in this country? For instance, recently in Petersburg a woman got a lung transplant – but we can hardly say we *do* lung transplants in Russia. In some ways our situation is worse than that of equatorial Africa. At least there, where they don't have anything, things can be brought in – medicine, machines, doctors, and given time they will settle in and something will develop. But we have a fully-developed system of laws and regulations that prevents us from changing anything for the better. How long a person will live, whether to fight against the disease with every tool known to science – these questions are decided not by individuals, but by the authorities (for example, we are officially prohibited from bringing in a neurosurgery team if the patient is over seventy), and then everybody screams "Why isn't the government taking measures?!" And the government is just a glorified po-

lice force – what does it know about medicine? They're incapable of evaluating it in any way other than by the number of office visits, length of hospital stay, number of "highly technical" interventions, etc. In short, before the Revolution the Tula region had just one writer – Lev Tolstoy. Now it has three thousand.

"Who needs us, anyway?" says one still middle-aged woman – she had stopped taking the diuretics I prescribed her and was badly swollen. "You yourself, your loved ones." She waves her hand: "It was different in Soviet times..." Indeed, who is she that the government should take an interest in her? It's not like she has any gas or oil reserves. On the other hand, do British women of her age (for example) stop taking their diuretics because Her Majesty is too busy to think about them? I don't think they do.

The lack of people capable of any single line of pursuit – in treating the sick, in conversation, in self-education – is noticeable not only in regional cities, but also at the district level and in Moscow. Recently my colleague and I visited two of the major district hospitals. One – the poorer of the two – we rather liked (the doctors work hard and read medical books, though unfortunately only in Russian). The other we actively disliked. Both hospitals, by the way, are *Judenfrei*, a characteristic not at all flattering to medical institutions in general (that was how our medical heritage was lost – with Stalin's so-called Jewish Doctors' Plot of 1953; the massive emigration and brain-drain of people to western pharmaceutical firms was only later). Doctor Lyuba, a beauty with incredibly long fingernails ("We're clinical cardiologists," that is to say, we can't actually do anything), is scheduled to be taught arrhythmia ablation starting a year from now. This is all the result of accepting Stalin's thesis, "No one is irreplaceable." (As I said, as gently as possible, to the head of our district health care department: "We have some who are.") If we must have a Stalin motto, how about "The cadres are crucial"? I'll never be able to play the *Mephisto Waltz*, even if you buy me a lovely new Steinway grand. Likewise, Lyuba is never going to master arrhythmias, even if you cut down those fingernails. The authorities refuse to understand this: we'll teach her, they say, we'll send her to Moscow – if necessary, to Europe or America. It's no use, a laurel can't bloom on an ice floe, as our poet said, and no one in America is going to learn Russian in order to tell Lyuba all about arrhythmias (she "took English in medical school"). As we drove back on the empty, snow-dusted road – it was achingly beautiful – my colleague mused aloud about genetics and molecular biology, while I looked at the passing landscape and thought, I wonder just what catastrophes are waiting for us? What catastrophes await that pretty, drunk woman standing for no particular reason at the crossroads? Hard to say, but that they wait is certain. Can she come to her senses, sober up and go back to her children, or meet a decent man?

Money. Our major myth, which just about everybody believes, is about the decisive role of money. Gossip – the engine of provincial thought – is monotonous and boring, and completely centered on money. My own arrival in the city of N. occasioned all kinds of unflattering gossip, all of which entailed some kind of economic activity (and none of which was true). In Soviet times the rumors would have been different: I'd had "difficulties" in Moscow, or wanted to run experiments on people, or had ties with the secret police (this sort of accusation is more frightening), or was hungry for fame, or feuding with my family – now nobody cares about these sorts of things. There are other vices besides avarice – carnal lust, lust for power – but these are now forgotten. The biggest rumor is that Muscovites have bought the hospital and patients will have to start paying for services. No

matter how delicately you extend your hand to people, they always see it going for their pockets.

The idea of money wreaks havoc in peoples' minds, especially men's. Money is the solution to everything: you can cure your illness, or your child's or mother's. This conviction is the source of much quiet despair. A man might think, for example, that his mother died "because we didn't have the money for treatment." I know for sure that money isn't the problem: virtually every medication is affordable for most people. TV ads fuel the despair: "Toyota: drive your dream." While you, a nothing, can't earn or – if all else fails – steal enough money to pay for your mother's care (even stealing is okay for the sake of your mother's treatment), real men are driving their dreams, and Tefal cares about them, and Dirol gum "with xylitol and carbamide" looks after their teeth. People do need money, of course, there's much they can't afford, but the main problem is extra-economic.

Emptiness. Olya M. came to the hospital with poisoning by vinegar essence and esophageal burns. (This fall the hospital has become a virtual wing of the Hotel Angleterre, site of Esenin's suicide: one patient suffocated himself right in the ward, another jumped out the window, and a third tried to hang herself twice – all in the space of two months.) Before this, Olya had tried slashing her wrists. She's 28 years old, looks 15, and works as a cleaner in a cafeteria. Grew up in an orphanage in Lyudinovo, in the Kaluga district, and now lives in a two-room apartment with her alcoholic husband, her alcoholic father-in-law, her scrubbed and tidy seven-year-old daughter (her hair was in a bow when she came to visit her mother after her first day of school) and a mother-in-law who is clearly attached to her granddaughter. I tried talking with Olya, without much success. I made her alcoholic husband hand over her identification papers, and locked them in a safe for her. That was the only sensible thing I did. I suggested she move (having no idea where, but I would have thought of something) – no, she doesn't want to. She just lies there in a funk, doesn't read, although she says she knows how. I gave her the New Testament – she gave it back (probably didn't get past the first phrase, "The book of the generation..."). I arranged for her to talk with Father K. – an amazing priest, he used to come to me from Moscow for treatment – it did no good, he said, but at least she cried a little. Someone picked up her things, and then a new man shows up out of nowhere, she's going to live with him, and off she goes, happy as can be. Two months later she's back again, she'd gotten drunk (says she only drank beer; that seems unlikely), stabbed herself in the belly, injured the anterior wall of her stomach; the surgeons sewed her up. She looks coarser now. "Frick, I coughed," she says, moaning from the pain. She looks like a classic victim, but from here on out she may be capable of just about anything, like stabbing her husband, or daughter, or just as easily me. The simplest thing would be to declare Olya mentally ill (although she is not delirious and has no hallucinations, but psychiatry is uncomfortable with questions of the soul), but would this really explain anything? When you look at Olya you understand that evil is not inherent in a person; rather, it finds a way in, filling up the emptiness, the intercellular spaces. Evil and good have different natures, and the affinity for emptiness belongs to evil. (Postscript to Olya's story: recently Olya's alcoholic husband checked into the hospital. He had a stomach wound with damage to his intestine and iliac artery. He said the handle of the meat-grinder he was using flew off and he fell against the table onto a knife that was lying there, etc.)

Other, less difficult encounters occur, too. In the city of N. people are nicer to the dying, especially the homeless. Recently an ambulance headed out in a bitter frost to pick up a “criminal corpse.” “Seems Sasha Terekhov finally passed on” – that’s how the paramedics put it. While they were on their way, the living corpse got in a taxi and showed up at the hospital simulating shortness of breath. He was hospitalized in the “welfare ward” and vanished the next morning. Another homeless man, from a family of long-ago-Russified Germans, has severe aortic insufficiency and has lived in the hospital for over three months, since there is nowhere to release him to. Outwardly he has transformed from a street drunk to a decent-looking fellow with a beard and a cane, and he doesn’t drink. During his stay his former wife also checked in, and he asked us to keep her a little longer, because the kids drop by to see her (their mutual kids, that is). He borrowed 70 rubles for an airmail envelope – he’s going to write to Germany. After all, he’s still a German, he has somewhere to turn. Certain other Moscow hospitals take a different approach: after three days of hospitalization, drifters are put on a bus and taken as far away as possible from the hospital. There are workers responsible for doing this job.

And funny things still happen, although they are becoming less noticeable because they repeat. A few days ago a woman patient brought me a gift of a three-liter jar of pickles, which she proceeded to praise up and down while I thanked her heartily. All of a sudden she says, “Maxim Alexandrovich, and how shall we manage about the jar?”

I see no sign of busy, active malevolence, just emptiness. There are scraps of an old crossword puzzle in the hospital restroom (both patients and staff do a lot of crosswords): “poor wretches” is the clue for a six-letter word. The letters are blocked in carefully in a feminine hand: PEOPLE (the authors of the crossword had “rabble” in mind). I’ve always tried to avoid that collective term “people” even before coming to live in N., but have made serious blunders in various regards (Brodsky on Solzhenitsyn: “He thought he was dealing with Communism, but he was dealing with human beings”). One shouldn’t treat the so-called “simple folk” the way one treats small children: the majority are adults, responsible in their own way. At any rate, closer acquaintance with them provokes no sense of loss or unrealized possibilities (“what a waste!”). They really do prefer the latest pop song to Beethoven (the classical benefit concert we arranged attracted almost exclusively summer people) – to such a degree, in fact, that their feelings for classical music can even be described as “inexplicable hatred.” A musician acquaintance of mine was once a patient in a psychiatric ward where he was not allowed to use the portable boombox to play classical music. The other patients were, however, allowed to play their “normal” music. “We lived without a bridge before and we don’t need one now,” Chekhov’s Lychkov insisted, and it really is true – they’re perfectly willing to have a lifespan of fifty or sixty years instead of that of people in western countries. Chekhov’s most topical story turns out to be not “In the Ravine,” but “The New Dacha”: given the democratic right to choose among themselves, people always pick the Lychkovs.* [“The New Dacha” was published in *Chtenia* Issue 11, Summer 2010]

The authorities (those to whom one may not say “no”). The simple Soviet man and the simple Secretary of the Party Committee were very different people. The difference is preserved to this day: an ordinary man versus a perfectly lawfully elected Lychkov who has devoured everyone in his way and is, according to an intelligent man’s standards (what other standards are there?), very stupid, but feels

certain things quite acutely. I'm talking with him, but in my eyes he can read the words, "I need your signature on this document so badly, I am even prepared to *drink with you.*" He's not against a drink, but not on those terms.

I have a slew of stories involving the authorities – not one of them inspires joy, but two amazed me. The first: I asked a big western firm to write an invoice for a CT scanner (our benefactors had committed to buying it) for its actual price – half a million dollars, not the million that includes the *kickback*. The sellers tried hard to dissuade me: you can buy other machines with the kickback money (sure, and those also include a kickback, and so on and so on, down to the pillowcases). It further transpired that to buy it without the kickback was impossible: there would be a scandal, it would put the authorities in an awkward position. So it turns out that not only *can* you run a red light – it's the only way to get where you're going.

The second story happened when I turned to some influential doctors I knew for protection from the authorities. "No problem. Tell us who to call, we'll fix everything up." I ask how exactly. "To be honest, we usually threaten them with bodily harm" (with the help of thugs they had treated sometime in the past). I quickly change the topic to something else: heart attacks, strokes, and other nice things.

All this weighed heavily on me, but then I started to look at it another way. The difficulty is not that "in this country it is impossible to do anything" (it was possible, after all, to make a revolution here), but that my language is as impossible for them to understand as theirs is for me. From a textbook on psychiatry: [doctor to patient] "Can you tell me what 'don't bite off more than you can chew' means?" [patient] "But I'm not eating anything!" It's the same problem between me and the authorities. "But you're a representative of the government," I say to a certain bigwig. His answer? "Government is a relative concept."

So I'm faced with two possible paths. The first would be to learn a new language, which is difficult and unappealing, and anyway the new one is so close to the one I know that I might end up not being able to tell the difference. It's not just a matter of "I'll have my people contact you," "Please hold," "That'll cost you," "sure-fire success," "cash instrument," "judicial precedent," "ecologically unsustainable," "underfinanced," and "federal funds" – it's the whole system of relations and means of proof. What I say appears to bear no relation to what my listener hears. The authorities, I have no doubt, have the same trouble with me. The second way would be to press all the buttons, one after another, like one does with an unfamiliar computer program – sometimes you hit a button that works. This seems like the way to go.

March, 2007

A Sin to Complain

To continue my notes:

"There is no such thing as too much love, or too much labor," Father Ilya Shmain (who lived and served in our city) tells us. And Mandelstam says: *All right, let's try: gargantuan and awkward, / the wheel creaks as it turns...*

Another half year has passed, and externally much has changed for the better, but I still sometimes find myself in the grip of the former utter despair: it would be one thing if we were talking about artificial hearts or literature's new direction, but here even the ordinary things are still achieved only through terrible struggle and

what seems like blind chance. *O Lord, deliver me from the man of excellent intentions and impure heart*, our antagonists would be able to say if they had read Eliot. I understand them: they've listened to more than their share of endless talk from men with unclean hands and hearts. A man of action is suspect; a sentimental observer would be much more comprehensible.

Our dream, however, has proven effective. By the means of the dream and the dream alone we are receiving instruments, and medications, and the other things we need for our work. Friendship (a phenomenon of the intelligentsia and only in that sense Russian) has done its job and now we have almost all we can handle in our present circumstances. So, let's try.

To make a life – not the abstract life “of the people,” but one's own – one needs space, and in Moscow there isn't enough. “I gave that city up,” says my artist friend. In Moscow everything is out of proportion to human size, and not in the way an enormous cathedral is – just the opposite. Living in the provinces, if you have something to do, is much better. The morning commute is two minutes, one and a half if you hurry. By a winter night's moon you can see for miles all around, and Russia's heartland gives you four seasons and more. The main thing that poisons a provincial man's life is its perpetuity. The view from your window stays the same to the end of your days, you know the place in the cemetery where you will lie, there's no escaping it. If you haven't tried living in the city, there's no comfort to be found in this permanence. It's good that the funeral processions that scared me so much when I was little have disappeared. They used to carry the open coffin through town, accompanied by a ragtag band playing Chopin's *Funeral March* off-key.

To move from the provinces to Moscow would seem to be the natural and proper thing to do, and everybody's doing it. In our town there's almost nobody between the ages of 20 and 40 besides the ones standing around in the street, beer in hand. A move from Moscow to the provinces, on the contrary, is individual and hardly replicable. That's the defect in it, if you look at it from the point of view of a westerner, for whom replication is a major validation of existence, while the misfit is most often seen as a failure.

The outsider's view of Moscow picks out all kinds of details, like this one: the closer to Moscow you get, the less distance men go from the road to take a piss (and we're not talking Old Testament *that pisseth against the wall* here) – indeed, what's to be ashamed of? Nobody knows anybody else here – everyone is a stranger. From far away, Moscow looks something like a gigantic polyp, with scattered malignant growths. But when you get really close in, you find that there are people there who are prepared to give up their time, money and effort to build our hospital the way we conceived it.

Pressing all the buttons was a mistake: our quiet and peaceable life has been turned upside down and is now sadly lacking in godliness and honesty. It all started with my talks with a progressive journalist. “In Russia,” he says, “things are better than they seem.” Ah-h! I nod sagely. He smiles, confident that he and I are among the *elite*. These days the government has been giving us lots of moral support: officials have started popping by with surprise inspections (how else can a government assert itself during peaceful times?) and just to put in an appearance.

The authorities have decided for some reason that whatever the district center does not have, we should not have, either (the head of the health department said, "Come to think of it, I'll take *you* off to the district as well!"). They're petty bosses, and I have to add, very slovenly in appearance and just plain ugly. What did these guys do when they were kids? Torture animals? Haze new army recruits? This crown of evolution is a particular biological species, completely indifferent to the presence of *content* in life. His speech, his glance, his handshake – all are devoid of meaning. Officials, especially the ones lowest down, suppose that there is no greater happiness in life than to occupy their position. In their schizophrenic, made-up world they talk about things that even though they don't exist manage to take on some sort of demonic half-existence by the power of those conversations. One thing is good, though: there's no cursed ideology anymore (someone wrote in charcoal on Lenin's monument, "Misha, this is Lenin," and no one has rubbed it off) – they don't try to govern my thoughts.

The head of our district health department (at this writing now former head, they change them frequently) is loquacious. He talks about himself in the third person ("Mr. X promises you..."), as if being district head is the essence of this pitiful human being. But he's a far cry from Blok's Hamlet: "And I die, a prince, in my native land..." A prince can be stabbed to death, but he can't be *replaced*. In counterbalance to the rhetoric of Soviet times (the heroic deed of a simple laborer, etc.) today's boss speaks about "the people" with disgust or condescending scorn: "This old granny comes to the clinic..." Who are you to call her "granny," my little man? And here's what comes of it: in a neighboring district one of the hospital's head doctors recently got five years of probation and was relieved of her duties. There had been an old crazy lady who kept coming to the hospital all the time, bothering everybody and getting underfoot. The doctor asked the head of police to do something about it (not realizing that the old lady was not "ownerless," as they say nowadays). Some policemen took her off to the forest, where wild dogs attacked and killed her. The policemen got 6-8 years.

There is one force the authorities are prepared to reckon with seriously, to wit: gangsters. To write about them is unpleasant and anxiety-provoking. "Gangsters are people, too"; "Gangsters also have their laws" – sure, and so do malignant tumors, their own laws of growth and dissemination, and tumors, too, are made of living cells. But in the process of killing its host, a tumor kills itself as well. Theologians maintain that this is the devil's barren design: to destroy the world and himself.

So far I've managed to avoid direct contact with gangsters. In our town violence is fairly unorganized, but it's as easy to get hold of a local thug as it is to go from a regular page on the internet to a porn site: a click or two and you're there. Getting gangsters' help in resolving any problem is the great temptation of our time. This role used to be played by the KGB – it was a means equally universally available and effective. Among decent people, however, resorting to the KGB was considered unacceptable. The situation with gangsters is different – I've got a very nice elderly lady telling me I should turn to a certain rich local man for support for the hospital. "He's not a gangster... although, I guess he was before..." And he contributed curtains for the library, and a local woman celebrity recites poetry on his birthday. The poetess' attitude towards him isn't "don't bite the hand that feeds you," – she feels sincere goodwill towards a "man of action." What does "not a gangster" mean? He's served his sentence? Repented? Experienced a soul-

shattering conversion? Or is it simply that he doesn't need to kill anyone at the moment? "Plus his children are at Oxford now..." Children – there's a touching subject! Then what about *the iniquity of the fathers upon the children and upon the children's children*? Evil's resources are sufficient to last a long, long time, whereas cultured ladies are far too easily entranced by power.

On several occasions I've had to treat gang "brothers." They look at me with lifeless eyes. I innocently ask, "Where'd you get that tattoo? What does it mean?" "What's it to you, doctor?" Then why get them? It's a matter of etiquette, I guess (like "in Ukraine" instead of "in THE Ukraine") – we're supposed to silently submit before it. Participation in some vile mysteries. Once in an airplane the man sitting next to me, a psychiatrist, told me a lot about it (he'd spent four years in prison): how to conduct oneself in today's prisons and in the camps so as to get out in one piece. The whole thing sounded more boring than anything else.

Fortunately, our provincial life is filled with other things, many of which are unique, many touching. You're driving to work in the morning, it's just barely starting to get light, and you pass a really little boy plodding to school with an enormous briefcase. Little Philip from Tolstoy's story, and you won't see his like anywhere in the world.

Or (O happy day!) I did a new thing (that is to say, new for me), and it went well, and then another, and then you find yourself in the center of a number of coincidences and it seems you're needed by everyone, like Evgraf Zhivago. Or a patient (especially if he is not too terribly sick) says something so funny you're already thinking about how you have to write it down before you forget. I was getting a medical history from a certain successful (and I think untalented) film director. I asked, "Do you smoke?" and with an elegant, inviting gesture he said, "No, but you go right ahead, it doesn't bother me."

It's a genuine pleasure to master something new, to do it just as well as they do in the West. This is what's at the core of our profession – our *doctorly conduct*. Gogol's doctor, by the way, comports himself in a doctorly way: he lies about being able to attach the nose (in those days they lied non-stop, which led Chekhov to call them "Byzantine"), and then advises, "Wash your face frequently with cold water..." That's how they treated things then (hydropathy). To conduct oneself in a doctorly way now means to follow western standards, which are the only safeguard against a doctor's brilliant ideas. We're not miracle healers – it's not "Abracadabra" and a wave of the magic wand. It's more like this: "Are you guys doctors by heritage or by calling?" "By training."

New people, new encounters – I've had so many of these, each presenting its own kind of Russia. Like the 30-year-old computer programmer from a neighboring town: he's neat, speaks well, remembers what happened when, what treatments he's had, and has a firm handshake. Asks for literature on his illness so he can read up on it himself. Overall, a really nice impression – it's clear that he needs the same thing we do: freedom and order.

Of course, there are painful things, too, but even these are also somehow comforting in their genuineness. Alexander Pavlovich died – he was a robust, canny 70-year-old local man. I didn't manage to convince him to get an aortic valve replacement. More precisely, I did – but too late. I couldn't scare or wheedle him

into it – nothing worked. If he saw me on the street, he'd give me a little wink ("You see, doctor, I'm still here!"), and then, when it got bad enough, he went to China (Chinese medicine). When he got pulmonary edema he finally agreed to the operation. His daughter in Magadan kept pestering me with questions I couldn't answer (who's going to look after him? what guarantees can you make if we agree?). And in the end, it was a failure.

One really ill patient, a retired colonel, lives out in the country. He's had serious heart problems, is justifiably skeptical of doctors, but yields to persuasion. A colleague and I are examining him, exchanging short comments in English in the ridiculous hope that he won't understand. When we extract the probe from his mouth, the colonel suddenly says, in English, "How did you manage to get such a piece of equipment?"

Once they even brought me a real American (he's lived in our town for a few years now, married to a local woman) – unconscious after drinking antifreeze. People don't drink antifreeze for pleasure, they do it to commit suicide. Judging by his tattoos, he's a simple man, and a Trotskyist to boot. Doesn't speak Russian, as we later found out. Why did he want to die? Did he find himself in the wrong century? We never found out – we treated him with ethanol and sent him to dialysis. This is also yet another Russia: they say there are 70,000 Americans living in Moscow these days.

A Russian yuppie suffering from boredom came to see me. There's absolutely nothing wrong with his health. "What do you do for a living?" "Business." (hmm...so he *works*...) To ask further questions felt somehow awkward.

Very wealthy people occasionally visit our town and they, too, sometimes fall suddenly ill. I got to talking with one of them (it turned out he wasn't having an infarction). He's afraid of dying, but not with the kind of adrenaline-filled terror that makes you wake up gasping for breath in the middle of the night. No, his fear is totally rational: there's just no way – no way! – he's going to be able to take his favorite toys with him. This is the kind of guy, I think, who would have himself cryogenically frozen after death. It's the height of tactlessness towards the Creator, as if to say, "Don't bother, I'll take care of this myself." When he asked what he could do to help, I almost got out of hand and gave Diogenes' classic reply, "Stand out of my sunlight." But instead I asked for a machine we needed. He's a fat, greedy boy in fashionable glasses – the kind you can hardly get to let you have a piece of his candy or a ride on his bike. "Don't give a man a fish – teach him how to fish": is this really the Christian way? Is that what the Savior did, teach people to catch fish without giving them fish to eat?

On the other hand, we have people here that everybody relegates to the lowest ranks – our Tadzhik construction workers. Already we're forgetting how we used to all be fellow-countrymen, that we learned the same things together in school. You try to keep in mind that the comforts we now have in life are bought at the price of their lives, but it's harder and harder to do: they're Tadzhiks, they're different, foreign.

My neighbor keeps cows and follows politics, in her own way. As she waters her garden: "Wish we had a hose like the ones they use to break up demonstrations in western Europe." She responded to the 1991 *putsch*, "Just look at the goings-on in our country, and now poor Mikhail Sergeyevich [Gorbachev] has come down with something." She feels sorry for everyone – for Mikhail Sergeyevich just

as for any ailing person or any little calf or piglet she's selling: "Borya," she whispers to it, "Borya, you little sweetheart," and at the same time, "Take some nice pork for shishkabob, how about it?"

My neighbor has some memories of the war, but no one remembers the '30s anymore. Recently I found out (second hand) how they eliminated Trotskyism in our town. The chairman of the collective farm (a woman with an interesting biography and the reputation of being a witch) was given a quota of five Trotskyists to turn in. After conferring with the other women, she named the five members of the All-Union Communist Party (all we had at that time). These were taken to a neighboring town and shot. Then she was ordered to give five more names. The women came up with a list of drunkards, thieves and failures. These, too, were shot. When ordered to come up with five more names, the chairman said they didn't have any more Trotskyites. She was then warned that if she didn't give five, they'd take fifteen. She wrote the names of all the men on the farm (two hundred in all) on pieces of paper and drew lots. They took away those five men, and with that the struggle against Trotskyism ended. It's a good picture of the victims of our Terror: one third Communists, one third failures (among them Mandelstam), and one third chance victims.

Our hospital yardman is sweeping the entryway with a broom made of birch twigs. I'm standing there with my friends, who have just come from Moscow in several cars. The yardman is trying to sweep so that the dust will fly our way. We move away, he re-positions himself nearer to us, muttering something not very nice and sweeping. But this is not enough to soothe his nerves – he's drunk. "Tell me – you're the head man here," (because I'm in my white coat) "did *you* survive on sawdust bars after the war?" That was all – he just wanted us to know that he'd suffered, perfectly legitimate suffering, and equally legitimate alcoholism.

The patients easiest for me to understand, and probably the most pleasant, are the intelligentsia. Of course talking with them takes two or three times as long as with other patients, and when you ask what work he does he'll tell you he's a member of six of the artists' unions, and when you ask when he started having shortness of breath he'll tell you that in the early '80s he was invited by the Union of Composers of Armenia to the House of Creativity in Dilizhan. Imagine, I've been to Dilizhan, too, and not only that, I remember my patient's film with Schubert's "Unfinished" Symphony, and I remember what Mravinsky said about how the second movement should be performed. After a conversation like this you can be sure your *intelligent* will take his prescription according to instructions. You don't even have to ask whether he smokes. Of course he does – Belomors, the cheapest brand.

What unifies this plethora of Russias, what keeps it from simply falling apart? In my worst moments I think it's no more than inertia. "It occurred to me that paradoxically, Soviet rule preserved many of the flaws of pre-Revolutionary Russia," a friend writes from Boston. We're slipping back into the nineteenth century, even orthographically. Our place in the family of nations is that of a pupil who's getting left back in the second grade. He's still allowed to stay in class until school lets out for the summer, but no one expects anything from him anymore. The other pupils are worth discussion and when necessary even judgment, but not us. This overgrown dolt sitting at his desk, the biggest guy in the class – what's he thinking

about? Who knows. A dream without meaning – sometimes that’s what our history feels like. There’s no vector, no trajectory.

It was said, “Wilt thou also destroy and not spare the place for the fifty righteous that are therein?” Let’s leave aside the righteous – are there even enough people who are simply good-willed? Or have we indeed *come to love darkness*? “Russia’s dead,” said Father Ilya, after hearing confessions at our local church. “My husband drinks and beats me, my son drinks and beats me, my grandson drinks and beats me” – that’s the subject of his unfortunate female parishioners’ confessions. How about the battle against *one’s own* alcoholism for a national idea? We have too little that is childlike, creative, genuine even if awkward, and way too much that is manly, as it were, mature, in fact almost always overripe. Heavy hearts, drinking, smoking too much, life stretching monotonously and infinitely ahead, no one new to talk to, long since time to go home, but the men go on sitting around the table, shirtless, gnawing on cold chicken that looks like a human hand – there’s our parties for you.

And in the morning your wife or daughter or maybe a nurse pats you on the shoulder: “You’re fine today.” This time you managed, you didn’t go on a binge. Alcohol – that’s our real battlefield. Love, hate, attraction, repulsion – it’s all of these together. An attempt at co-existence. Alcoholism isn’t picturesque or ascetic like Venichka’s in *Moscow to the End of the Line*, or like the guy in the metro the other day who said, “Donate ten rubles to the development of our national alcoholism.” In the hospital the men don’t pass their time in the traditional ways – watching soccer on television or playing dominos – people have just lost interest. We both admit and don’t admit the power alcohol has over us. Alcohol is omnipresent, it is a factor in almost every family’s life. The most important virtue is, as in ancient Greece, moderation – being capable of stopping after just a few. Should a man go on a binge, the victory goes to alcohol.

A binge starts like this: a man drinks himself senseless, he switches off (that’s what it really is, he switches off – it’s not that he falls asleep and then wakes up full of self-recrimination), a couple of hours later he comes to still drunk, looks for more to drink, always finds it, again drinks as much as he can (as much as there is), switches off again, and so on, until either the cycle is forcefully interrupted from outside (a night in the drunk tank, or they lock him up at home), or he gets so sick that he physically is not able to drink (can’t lift his hand). Then he gets taken to the hospital and they tie him down so that when he’s in a fit of delirium tremens he doesn’t throw himself out the window. But the calamity isn’t just the binges, or the health damage, or even that parts of life are “switched off,” lost forever. The true calamity is this constant dialogue with alcohol – *entire lives* are spent on alcohol. It’s like the dialogue with your own tiredness, weakness, laziness, dejection – but in this case there can be no victory. In the best case, you managed to limit yourself. *And men loved darkness rather than light...* A dialogue with the abyss, and it keeps growing bigger and bigger in your heart. Everything falls into this abyss: work, love, everything you’re attached to in this world. Life becomes lived as if through cotton wool. A reckoning not with your era, people, or life, but with death, the abyss and with it – with alcohol. And perhaps it would be worth it to betray the traditions of our mighty Russian literature and not go looking for the Dostoevskian depths in everyone (amazing things will come to light if you dig...), but instead just state the facts in a medical way: drunkard, fool, slob?

What do my patients think about? A mystery. It's not a matter of education. A man sits in front of me, listening and not listening, I'm telling him in my usual urgent way that he has to lose weight, get exercise, keep taking the pills even after he starts to feel better, and he wants just one thing: that I'll shut up and let him go. Sometimes he mumbles something about getting disability, asks for a letter. I answer, "Who are you going to show it to – Saint Peter?" He'll smile, even if he didn't understand. What's in his head? Probably the same as what's in mine, when I'm sitting in some office at the electric company, being reprimanded for nonpayment. I don't understand anything about taxes and fines and why I have to pay before the twenty-fifth, and I just want it to be over. In my case it's about electricity, and in my patient's it's about living, but it is possible to understand the man. I've never had such interesting work in my entire life.

And here's how it all started: two and a half years ago, late on a grey April morning I drove into our town. With me was a small suitcase containing an echo machine and a miscellany of medical supplies. I had been on that road dozens, hundreds of times, but never had I felt such exultation. The mournful beauty of early spring, the poor wooden and rich brick homes, even the pot-holed, slick road – everything filled me with joy. I felt like shouting: "Citizens, put your hearts at the ready!" These first stirrings of joy at being a doctor were new to me – before I'd always been preoccupied with some pressing goal: learning the material, impressing the professor, writing my doctoral thesis or finding the material for a book.

My new co-workers gave me a friendly reception. I got an office, modest, but my own. They gave me a little couch, two chairs and a one-legged table. The other legs came off by themselves, but this one had rooted itself in and I had to get an axe from a fitter and amputate it. I covered the bare walls with charts of doses and prices of medications, and over the biggest hole I taped a political map of the world. A nurse humbly inquired if a map of our region might be more useful (of course she was right), and I arrogantly replied that I'd looked for a map of the universe, for such were my pretensions, but hadn't been able to find one.

Specialists are always shown the *socially significant* patients first, even if they're not sick. But the litigious come even before these. Seventy-year-old Anna Grigorevna was my first patient. She had complained to Putin about her poor medical treatment, poverty and isolation – she'd written a letter to the Kremlin. The President's administration faxed the hospital: Investigate! People figured Anna Grigorevna must be mentally impaired – she sure found someone to complain to! I informed her in the most neutral tone I could muster that Mr. Putin had sent me, and asked her to undress. The old lady really was sick and untreated, but not crazy – she was just upset. "What depression? She's just *sad*," as our professor of psychiatry used to say. We're limited in our care of patients' souls to the part that's not getting enough serotonin. "How much money can you afford to spend on medicine?" I asked Anna Grigorevna. None just now, it turned out. She had some goats at home still, but her pension wouldn't come for another ten days. I looked up the price for the prescription I'd written and announced, "Vladimir Vladimirovich asked me to give you a hundred fifty rubles" [five dollars].

Then I worked non-stop all day, and towards evening the surgeons dropped by: "You're out of your mind to slave away like that! Even our Tadzhiik *Gastarbeiter* don't work that much." And we set off for a drink to celebrate my first working day. "But let's just find out if the district traffic police are on duty," the surgeons said

and called some number. “Don’t worry about a thing, doctors,” we were assured from that end of the line. I asked them to share the secret number with me. “Memorize it,” the surgeons answered, “911.”

After that I never gave money to my patients, and I didn’t see Anna Grigorevna until a year later, when she came to say goodbye. Her brother was taking her to live with him in Simferopol, and she returned the hundred fifty rubles.

“Rustle, vernal groves, / grow, grass! and lilac, bloom away! / no one is guilty, all are in the right / on such a blessed day!” Severyanin’s emotions were also mine on my first day of work. And I think they still provide for my existence today.

Much since that time, of course, has been difficulty and darkness, and sometimes you wake up at five in the morning and lie there sleepless because, probably, you yourself are out of serotonin (to be joyful you have to *be*), and all of a sudden – and the timing couldn’t be better – a call from the hospital: come right away! Outdoors it’s cold and foggy, ten minutes later you’re already hurrying into your office, you plug things in, the place comes alive, you put on your white coat, see the thinning twilight out the window and say to yourself: 1) things are not going to get better; 2) this is what happiness is.

September, 2007

A Non-Easter Celebration

It’s hard to be Chief of Staff. First of all, you have to manage people, which is not nice, especially for someone with a heart and especially in a regional hospital, where there’s no one to choose from. Secondly, anything can happen in a hospital: patients set their mattresses on fire with their cigarette butts, jump out windows, steal from the nurses, write complaints, die. The roof leaks, pipes break, the electricity goes out. Thirdly, the rules of the game keep changing, and you have to protect your co-workers and patients from the fallout of both changes for the worse and improvements. Fourthly, you have to deal with the authorities and every imaginable fireman, sanitation inspector, and drug regulator. And meanwhile you must not forget the main thing—while you’re running a hospital as an enterprise, you have to keep in mind that it is not just an enterprise, not just an “economic operator.”

Our chief of staff—a 56-year-old woman—wants changes for the better, and not only the ones dictated from above. Because of this she has all kinds of difficulties, one of which drew the attention of all Russia. We, three doctors and a few benefactors of the hospital, tried to help—both her and ourselves. As a participant in the events, it is my obligation to tell what happened.

I

On Leap Day, Friday, February 29, we opened a cardiology unit (a new one serving several regions), and on the very next business day, Monday, our Chief of Staff was fired without notice of cause. A hung-over deputy District Inspector came and read the order at our morning conference. A big fuss was raised in the papers and on the radio, television and internet—our friends began it, and from there it took on a life of its own. On Tuesday we received a police order to supply copies of our financial documents—this is how we learned about the large-scale fraud we had been perpetrating. Fears of a developing criminal case quickly dissipated: the document we had re-

ceived turned out to be a fake. The Government Newspaper's coverage played a decisive role: it was arranged that I would meet with an Important Personage on Thursday. Instead of changing into women's clothing, as Kerensky did when he fled the Bolsheviks, I set out for Moscow as Lenin set off to Petrograd—in an armored car lent to me by the Benefactor.

I won't bother describing the details of the conversation with the Important Personage. I'll say only that my position as a cardiologist from a regional hospital (lower on the professional ladder one cannot go) turned out to be an extremely winning one. I told him about the Chief of Staff: she's honest (which is why she didn't hesitate to build herself a big house—she just sold everything she had) and, most importantly, identifies with the doctors rather than the administration: we saved the patient, she'd say. The results are now well known: the District Inspector was "advised to take retirement," and his professional fate and that of the Chief of Staff would be decided by the regional council of deputies—an Important Personage does not have the authority to remove a democratically chosen District Inspector.

It was a stormy week—not even a week, just four days—the phone rang constantly, things only settled down somewhat at night, and in the grip of *the delights of the frenzy* (we must prevail! And don't ask "in order to do what?") it was easy to lose sight of the very aim of the whole enterprise—the patients. "Now you can understand public officials better, it's always like this for them—that's why they have no time for people," said the Benefactor. There's a similar fever between a death and burial—when for two or three days you go through much more than usual. People come by to express their sympathy, it is needed, somebody goes to pick up the death certificate, somebody else makes the funeral pudding.

Sympathy is expressed in various ways, but the sympathy of even the unbalanced is better than a sympathy balance of zero, so thank you, thank you very much everybody, including S. There was a time when I counted him among my friends, but we haven't seen each other for eight years. S has done pretty well for himself, but sometimes he has a few drinks and writes me poetic letters with quotations from Wittgenstein and Saint-Exupéry. I got this letter on the morning of Wednesday, March 5: *I'm observing what is happening with sadness and pain in my heart. I'd so like to help you: to look at the events from a completely different point of view...Just give me a call. It will be a great victory for you (in a metaphysical sense). Even if you can't call me just now, take as a gift this design: it will bring you good luck if you look at it even rarely. For the last three years I, having almost completely withdrawn from human affairs, have been at work making these designs. I embrace you,—and his signature. His very nice design (ribbons and stars) was in the attached file. My Colleague—I had proposed he make a diagnosis—ruled out psychiatric disorders: "This is some kind of spiritual malaise."*

"What a mess!" my American co-author wrote me delightedly. He had read about us in the *Washington Post*. I hadn't heard from my co-author in ages—he was supposed to edit and finish the chapters of an American publication of our book, and had completely dropped out of sight (I've seen comparable behavior only with corpses). And then suddenly, here he was.

And unexpected proposals come in. My former neighbor in Moscow, a biologist and store owner now living, as it turns out, on Sakhalin Island, writes: *Sooner*

or later you'll admit the futility of your efforts and go off to treat Ethiopians or Filipinos—they will have a great deal more gratitude for what you do for them. I lived in both countries for quite some time—they are populated with wonderful people.

“A non-Easter celebration”—the phrase occurred to me almost right away. Not the joyous meeting or receiving of the blessing, not the feeling of contact with something higher. Something like Napoleon must have felt upon entering abandoned Moscow. The absence of resistance from the material: “like a knife through butter,” but in this case not even butter, more like vegetable oil. The hand delivering the blow or held out for shaking remains hanging in emptiness.

On Friday, the day after the conversation with the Important Personage, after the journalists had left and the phone stopped ringing, the emptiness became frightening.

And just as Napoleon waited in vain for the keys from the Kremlin, so we waited as nobody brought us the Chief of Staff's keys. My female colleagues were all given black-and-white copies of cards of congratulations (International Women's Day) signed by the District Inspector—who had left for parts unknown. No official announcements of layoffs followed (“Call after the holidays”), and it became clear that, contrary to Pushkin's prophecy, the brothers were not going to be giving any swords back and that, quite the opposite, they were going to pronounce me insane and forcibly admit me to the “Bushmanovka,” the regional psychiatric hospital: the doctor is having schizophrenic delusions or some such—they'd figure it out there. And in this condition he's meeting with presidents and ministers, drumming up journalists, and getting public officials removed from their jobs.

But then we managed to get a fax (with difficulty, as the day before International Women's Day is an abbreviated work day)—the response to the Government Newspaper, and I breathed a sigh of relief—I wasn't going to the Bushmanovka after all. Then began the present period—the period of frightening emptiness—the one we're living in now.

Emptiness takes shape, and from it figures emerge: a few business people, very mediocre (like the majority of murderers), and the spiritual leader of our town, the Confidante of the District Inspector—she and I had run into each other before this. She owns several businesses in town, and books of religious instruction rub shoulders with *Fundamentals of Accounting* and *The Law and Municipal Government* on her shelves. The confidante has gone through some very tough times; she has pleasant manners and the voice of an angel, and she makes active use of religious cant: our difficulties are a “temptation” to her and make it hard for her to feel “reconciled.” “You don't fear God,” I say to her. And it's true that she doesn't—she considers Him obligated to her for all her suffering: the time spent reading religious literature, the hours of standing in church, the observance of fasts. The reserves of evil in the Confidante are striking. It was she who invented the fiction that we were doing experiments on people, using prohibited preparations and fomenting an Orange Revolution (“I read about the technologies”). Journalists were also helpful. Our foes probably don't remember Dostoevsky's *Demons*, if they ever read it, but the journalists do: young people appeared in a quiet provincial town with the intention of blowing it up. Here, too, we find the benefit balls, the commanding women, the literary posers, and even an aristocrat—our Benefac-

tor (“An aristocrat, when he goes in for democracy, is enchanting,” Dostoevsky wrote).

On the TV they say that the hospital is a cuckoo’s nest, the people are being silenced, and the court is bought. It’s easier to disregard what is in fact interesting: our Chief of Staff has gone to court with the District Inspector twice already, and won both times, and the locals have written a petition and have been gathering signatures for it. The liberal press is much worse in our case than the Government Newspaper. We’re compared to Soros, or to Khodorkovsky’s company, Yukos—great material for attacks on us! Solzhenitsyn wrote about this sort of thing in *One Day in the Life of Ivan Denisovich*: “But the English Admiral took it into his head—and this was already after the end of the war—to send me a keepsake gift. ‘A token of my gratitude.’ Astonishing, and damnable!”

A well-known fact: if you put a million monkeys in front of a million typewriters, one of them will eventually produce a masterpiece. Monkeys have an advantage, though: they hit the keys at random. “You mean you want me to get to the bottom of *everything*?!” a young woman journalist cries tragically. Well, yes, if you’re planning to write *about everything*. Several publishers suggested that we write it all up ourselves: “You have a way with words”—such an innocent request to make, something like, “You’re tall, could you change the light bulb?” We always declined, not out of arrogance—we just didn’t have the strength.

A lot of stupid things have been said about what is happening to us, although it couldn’t be simpler. It’s not that we’re up against “the powers of evil,” or with “the abuses of office” and the like—we’re up against people who are preventing us from doing our work. What are we fighting for? For the reinstatement of our Chief of Staff. She lets us do what we want—treat patients. There’s no politics here and almost no economics, aside from the traditional greasing of the wheels. There are authorities: they’re not allowed to say “no,” but they did. Why is it that they don’t seem to be afraid? Well, they are afraid—very afraid—but they’re fighting for the same thing we are: for the right to live their lives. The hospital became their battlefield, their Borodino—a little village absolutely without meaning to anyone except us, the inhabitants of that same Borodino.

The list of people who have supported us on the internet starts like this: *Abramova, Aizenberg, Akimova, Akulova, Al’tova, Albaum, Aldashin, Alekseev, Amelina, Andreev, Averkiev, Avilova, Azarova...* From Moscow, Lisbon, Washington, Kursk, Saint Petersburg, Beer-Sheba—engineers, doctors, teachers, entrepreneurs, students, scholars, retirees, writers. Thousands of signatures. Did it help? Who knows? But it was awfully comforting and inspiring: no matter how fast you run or how hard you hit, the fans help.

Whom are those people defending? Was it worth making such a fuss about the firing of a woman old enough to retire? Here’s an answer from a friend of mine, a teacher at the Russian State University of Humanities: “While I’m explaining the four types of verb in Hebrew I know that at the same time you are examining patients. And it seems we are working on the same thing.” So the answer is simple: those people are defending *themselves*. Of course, to fight with embodied emptiness is frightening, but this is that rare occasion when it is absolutely imperative to win. Emptiness—like the “gramps” in the military and the “wolves” in prisons—strives to swallow us up, to make us submit, while we, the cherries and fish, try to defend ourselves. We have to win, for it is on the result and the result alone—not the process, not our brave and wonderful deeds—that our future lives depend.

A number of side issues, for example this one: if we manage to pull it off, but only with the help of the really big guys at the top, does it count as a victory? Of course it does. The hospital is run by the state—who, if not the state, should help? I'm asked, "What about the locals and your patients? Why aren't they helping?" That's not my concern—we're doctors, not marshalls of an army of patients. "How are regular people responding to what you're doing?" They're dying less. An old woman comes up to me—a few months ago we'd sent her to Moscow for an operation and she's much better now. "I heard they're closing you down. Can you give me enough pills to last me?" Just as it should be: she's little, we're big, who should be defending whom? All we ask of people is that they take their medicine and live a healthy life.

Our university colleagues also supported us, even though for some it was not a comfortable thing to do. They spend a lot of time at academic advisory meetings, and we don't—we ran away from all that, for the freedom and opportunity to do everything the way we thought it ought to be done. Medicine has always been dependent on authority figures—there used to be no alternative—whereas in mathematics, for example, authority has not been important. No matter, medicine is headed in that direction as well.

Still another category of people who sympathize with us: those who have received the order of Hero of Russia. One of them—a real recipient of the Hero's Star—opens our office door with a bang: "We'll show 'em now!" He's been drunk since this morning. "We'll get 'em, we'll lay into 'em, we'll set 'em straight!" "What was that?" asked the Colleague. "A Hero of Russia. *Benya is a king, not like us: glasses on our noses and autumn in our hearts.*" It must be said that everyone—the heroes, the journalists and the professors—all did their very best. It may seem that I'm not grateful. This is not the case.

II

There have been new events. On March 14 there was a meeting of regional deputies. The Chairman, a man groomed and tanned to an otherworldly degree, proposes a compromise: a reprimand for the District Deputy, and re-instatement for our Chief of Staff. The Chairman and his wife are good people—they have helped the hospital in the past, raising money for it, standing by us. But the Chairman has only just returned from the Alps (downhill skiing)—long flight, fatigue, the time change—and didn't talk to the right people, with this result: of fifteen deputies, six were "for," the rest "against." The Chairman keeps going on about how "It's too much for decent folks," and in the course of a single day lost three pounds.

The people have spoken. Where does this uncompromisingness come from, when the mere attempt to come to agreeable terms is seen as weakness and serves as the signal for counterattack? After all, it was no more than a reprimand for the District Deputy and the return of the Chief of Staff—basically, everybody would break even. But the Chairman—it's been a while since he's lived in real time, in a situation that changes according to what you do and say.

The sense of real time—when it is suddenly discovered that the past progressive has become the past perfect, simply the past in which nothing can be corrected or changed—such was the sense during my meeting with the Important Personage or, for example, during Kitty and Levin's confession of love in *Anna Karenina*: time is running short, and this is the moment when acumen is all. That

you are in fact generally quick-witted, knowledgeable, decent or what have you belongs to the past—it increases your chances of acting astutely in the present—in what currently *is*—but guarantees nothing.

And once again we have the losing hand—should we go or stay? If we considered ourselves the benefactors of the human race, we would have to stay, until the end, so that afterwards they would name streets after us, but as it is we're free in our decision-making, we're just doctors, that's all—we wanted to make our working conditions better, and we almost did it. We slog along with our letter-writing, and are surprised that the one we sent earlier still hasn't been answered, and tell ourselves that a quantum of time in central Russia is a week. Some big higher-up is sure to help us.

“Due to the influence of this and that,” we write, “the hospital's general mortality rate has been reduced by half, and death from myocardial infarction by six times,”—which is true although it does stick a bit in our craw. What are we going to brag about a year from now, when we'll have more and sicker patients? But for the moment, in all the hubbub, they've almost stopped being sick. And the ones we do have look out of place in the newly renovated space (“War dirties uniforms and destroys order,” said Paul I). Effort is needed to make people relevant in this grandeur of tiles, smooth walls and expansive, bright windows. The Colleague has something or other to do, but for me our two offices—Big Cardiology and Small Cardiology—are nothing but phone calls and petition writing.

An elderly woman checks in with paroxysm of arrhythmia of unknown duration, not less than a week. We'll have to insert a probe into her esophagus to look for cardiac clots, sedate her, and use electric current to restore her normal heart rhythm. Over the past year we'd done all this dozens of times and with a lot of enthusiasm. But today—how to work, when our new Chief-ette of Staff will rejoice over any failure? It would be good if the rhythm corrected itself while we were still fiddling with the machine...and just then it does—sinus rhythm. “You see that? At least we got Somebody to listen.” “Don't blaspheme,” the Colleague replies. He's right, I'm guilty. We're awfully tired—it's not the very highest price for independence, but it's almost all we're willing to pay.

We leave the hospital and suddenly register that we blend better into the landscape—and the level of fear is lower—when we're on the losing side. But where else is there for us to go, anyway? To some other old Russian town? Tutaev? Kirzhach? Boldino? The story is just the same everywhere. It's clear why we have such a lousy life and such great literature.

But never mind, never mind, everything will turn out, somebody around here needs us: this is a town not only of public officials, but also of tidy old women, their grandsons and granddaughters, the town of Richter, and Zabolotsky, and my granddad Mikhail Melentiev, and the fat hypochondriac lady from the general store, and that nice teacher with some mysterious thing on her aortic valve, town of artists and of an unobtrusive Orthodox boozier with cardiomyopathy, Father Ilya Shmain's town, and Marina Tsvetaeva's.

III

Of course it was bound to happen: all of a sudden (March 19) a strong crosswind began, blowing a commission of ten to the hospital and fifteen auditors into the local government. The crosswind blew the District Inspector from his place and even the poor Chairman as well. And as if by the way a Certain Personage appeared and

read out an Order: “The Chief of Staff to be re-instated.” Emptiness was once more banished to intercellular spaces. It will, of course, take its revenge, but for us World War I is finished. Il faut travailler—back to work.

The District Inspector, in his last speech before the regional deputies (it was published in the local paper), said: *Strangers came into our house and wrecked it...What was there to wreck? When we arrived it didn't even have a defibrillator. Perhaps there had been a house once... “Keep off the grass!”—but there isn't any grass, just a trampled area, and who knows if anything ever grew there in the first place?*

Emptiness has taken up *belles-lettres*. A big, anonymously written article called “The Exercise of Genocide on a Regional Scale.” It begins touchingly: *We, the Russian people, have always been reproached for how unsparing we are of our own lives for the sake of other peoples' welfare. Such is the inborn trait of the Russian heart, engendered in us by ancient traditions and Christian love...* Shortly thereafter—little wonder—a passage about non-Russians: *The cunningly disposed outsiders contrived to make use of the kind nature of the Russian people to achieve their base and mercenary aims*—here is the main theme.

Finally. “How is it be a Jew in Russia?” asks the lady from an international Jewish organization (they have only one thing on their minds). I answer: “It's difficult, but legal.”

The non-Russians cleverly use government powers and means—created through thousands of years of effort by the Russian people—in their own avaricious interests. A column in that vein, followed by three more about the hospital, with hard data, dates of various orders, particulars from official correspondence, intricate development of the theme, made-up stories not altogether lacking in cleverness. Everything all mixed up together, like the authors on the Confidante's bookshelves. Warm words about the District Inspector (“grandson of war veterans, son of a soldier”) and—here modulating into a distant key—about Anton Chekhov, a section called “Why the Prosecutor's office went blind,” a little about me and the Colleague (“cardio-investors”; “bad-luck-cardiologists”) and a coda—about the Important Personage, about what moves him: *An antipopulist agency, anti-Russian, under Masonic control.*

“They're just ignorant,” kind people say to me. I would say it differently: they're bad. They're ignorant because they're bad, not the other way around. A jerk in a car makes a dangerous maneuver, tailgating at high speed and flashing his lights: “Move over!” Is he also just ignorant? “You're smarter, forget about them...” Fine, I've forgotten. And as for being smarter: does a higher IQ mean you're smarter? Our Third Rome is an awful lot closer to the Second than the First—the deciding factor here is not intellect. And (I'm afraid to think it): what if precisely this uncompromising attitude (not out of evil intent, but out of striving for wholeness), this endless readiness to sacrifice oneself and others, this belief in words, conquered the Poles, and the French, and the Germans...? What we need is for things to quiet down a little, there's a lot of work to be done, and we have to live together. We'll consider the recent events an initiation.

“Our life will never be like it was before,” I say to the Colleague. “No more of those meat pastries—you know whose shop that is. But that's okay, we can eat dumplings. Of course we won't leave, but we'll have to get home insurance—houses burn. They faked a document, what other tricks might they have up their

sleeve? Don't use that pharmacy—just don't go there, that's all. The municipal one is closed? All right, then, tomorrow, and anyway it'll be cheaper (actually, about the same). Put in an alarm system, build a fence. No point taking walks along the Oka—if the urge is overwhelming, we'll go to Drakino—it's just fifteen kilometers away, and it's pretty there, too, and we won't run into anybody. And anyway, what's the point of going for a walk? We can just open the windows, the air's good everywhere. What do we think we are, summer people? Far from it: we've become locals. We're locals now."

March 2008

The Cry of Domestic Fowl

Provincial life is a home life: warm, a little grubby, one's own. There is another point of view about it, an outside, superficial view—shared, however, by many who ended up here for reasons other than their own desires: the provinces are slush and gloom, and the people who live there are poor wretches—that's the most flattering thing one could say about them.

The cry of domestic fowl chases away the evil that gathered strength in the night.

Morning at the hospital. On a cot is a skinny, tobacco-cured man—a bus driver, not a poultry hen, and he's having myocardial infarction. The worst is past, and he's observing the treatment his neighbor, a semi-homeless old man with a blue sun tattooed on his heel, is being given. A shock of current—and his heart rhythm becomes normal. "The old man's doing better, he's breathing less," the driver announces from behind the divider. He and I exchange glances. Will they let him drive a bus again? And of more burning interest: how to manage so his wife and the other woman—the one who brings him shish kebob—don't cross paths on the ward? The driver also understands a thing or two about me, quite a lot, actually: wild fowl are extraordinarily acute.

A clear aspiration: to love not only my closest friends and family, but more broadly—people and place. For that one must remember, look more closely, and compose.

Here's something, from childhood: my father and I are walking a long way on a really hot day. There's a village; I'm so thirsty. My father knocks at a stranger's door and asks for water. The woman tells him there's no water, but brings out some cold milk. We drink—a lot, maybe a liter and a half, and my father offers her some money. She shrugs her shoulders, and without expression replies, "Sweetie, don't be a dope."

Place—any is attractive in its way, and one with a moderate climate all the more so. You can become passionate about it as easily as a woman can come to love a loser. "Yes, we love these cliffs," Norway's anthem sings. Our anthem also sings about geography, which given its extent is hardly decent. The anthem was composed by *others*, not by birds.

I also remember this: I'm eighteen, I'm driving a car, a messed-up old Zaporozhets, and smoke is starting to billow out the back, from where the engine is on Zaporozhetses. Something awful is going to happen, an explosion. There are people on the sidewalk. "Get back—it's gonna blow!" "Open up," says a passerby who is

maybe thirty, and he takes a rag and spends a good long while, calmly, putting out the flame, and then walks off—another non-domestic bird.

Lots of car- and more generally trip-related things come quickly to mind: domestic fowl are susceptible to unpleasantnesses on the road. Their meetings with wild, predatory birds happen here, and those meetings are remembered—whether because of unexpected kindness or unheard-of, unimaginable evil. “Murderers are mediocre people,” the police colonel will say, and you, a babe in arms, a barnyard hen, suddenly you’ll get it, you’ll understand, it’ll become your own.

Speaking of the police: the doctors here have terrific relations with them. When there’s a patient to be carried up the stairs because the elevator broke, or drunks to be kept until morning so they don’t brawl on the ward, or even to get your car pulled out of the mud—you call the police. Like us, they too wear uniforms and create the illusion of security in our community.

Near the ambulance office there’s a policeman with a suspect in handcuffs—a young man who is a little worse for the wear. He must have done something serious—around here they don’t put handcuffs on for nothing. “Why didn’t you say about the wife and kids right off?” the policeman says to him. “Instead of that ‘I want a lawyer’ and ‘my guys in Moscow’ crap.”

Together with the fellow who put out the car-engine fire, a sweaty, scruffy hockey player comes to mind. “It must feel twice as good to beat the pioneers of hockey in their own country, right?” He cracks a toothless smile: “Nah, it’s all good!” Given how well off he is, he could have new teeth put in, but apparently he can chew his meat perfectly well as it is. A very solid impression.

What else? A sermon heard on the Feast of the Protection: we have made the day our pagan ancestors were defeated one of our most revered holidays. Nothing could be simpler than to denigrate the church. It’s like, for example, reproaching Dostoevsky: it’s true of course, all true, but—all beside the point. The church is a miracle, and Dostoevsky is a miracle, and the fact that Russians have managed to survive is also a miracle.

“Sweetie, don’t be a dope”—this could have come from one of our old grannies in the first ward. “Old grannies” isn’t derogatory, it’s what they call themselves. The most seriously ill one hears voices and hallucinates: “Yura, that you?” “Nope, not me,” says her neighbor. “Who are you then?” “I’m an old granny.” “Then who’s that—Yura?” she indicates another neighbor. “No,” that one replies, “I’m an old granny, too.” There’s nothing insulting about the word “granny”—they themselves feel not like old women with clear minds, like their agemate-birds in the capital, but like old grannies.

This afternoon two cleaning women had a loud argument. One works here so she can feed herself and her animals—with the food left over by the patients; the other owns several hectares of land, travels alternately to Turkey and Europe, and got her cleaning job to have some social interaction. But it seems things have only gotten more convoluted: the first one—the poor one—went to Europe, largely using credit, and debt collectors have already started showing up.

For us—for Russians—the private is superior to the public. A tax inspector, a fellow in his twenties, is auditing us. “Oh,” he says, “it’s good you’re a doctor. As it happens just now I’m about to be conscripted... do you understand?” How could I not understand? “As an exceptional case” is a good formula to fall back on—each of us, it turns out, is in the other’s hands. Moscow may not “believe in tears,” but

around here that's all we believe in. If it comes to that, of course we'll help him, as an exceptional case.

It's disgraceful, and one shouldn't give in to it, but cheerful participation in the universal practice of deception strengthens the unity of the nation no less than good laws. Electricity, gas, telephone bills unpaid? In the capital lack of money is an embarrassment—here, it's more or less the norm. "These meters are haywire." "That's exactly my situation. And please come see me about that pain. We'll fix you up." Godparents, daughters-in-law, nieces, water and sewer, gas and electric service—it's all understood, cozy, warm. There are minuses, but on the whole it is a stable way of life. Here everybody knows everything about everyone. Like in heaven.

It's cleaning ladies and grannies during the day, but with the approach of evening you discover that whatever you managed to get done today only got done through way too much effort, and mostly things didn't get done. At dusk, angry and irritated thoughts return. In particular: where did all the thinking people go? There were plenty of them when we were kids. Out of the country? One thought leads to the next—regenerative feedback. In the night, with all its terrors, the soul is susceptible to evil. Here's another: chickadees and swallows fly into my house not infrequently—this is considered a very bad omen. But what to do? One can't just live with the windows constantly closed. Either you leave because you're afraid or you get over your superstitions. A bunch of thoughts like this until morning, with intervals of sleep.

Whether you're in Moscow, Petersburg or the provinces, life is terrifying. Let's say it this way: "also terrifying." There are things in life it is impossible to write about: how innocent victims perish, among them young people and absolute children. The terrifying, unnecessary experience of the deaths they suffer is always with us—no matter how much you cry out, screaming can't make it go away.

And then day will come, and there will be birds again: of the air, domestic, wild, every kind. The world isn't going to fall apart no matter what—that's how it's made.

September 2010