

# A Brain Operation

## *A Brain Operation*

At some time in the future, an operation will be discovered that will cure depression. This operation will be performed on a routine basis, as an outpatient procedure in doctors' offices or in a part of the hospital not normally reserved for operations — in one of the basements, say. A typical operation will go as follows.

There is a large room with gray walls, gray floors with black rubber mats, overhead pipes and ducts. Black electrical cords hang down from the ceiling. The time is mid-morning. Silver-gray light floods in through the grimy, warehouse-like windows. The air is cold. At one end of the operating area hangs a thick plastic curtain once transparent but now translucent from grime.

The surgeon is sitting on a wooden stool, his hands between his legs; he looks despondent. The truth is, he wants to sneak out for a cigarette — he is a chain smoker — but the rules require that he be present when the patient is brought in. The surgeon wears a white surgical coat which has a big, roundish yellow stain in front on the lower left. The coat appears to be stiff, as though it had been wet and then frozen, or as though the laundry staff had attempted to compensate for a careless cleaning job by applying too much starch.

The surgeon is a young man, perhaps in his thirties, blond, but losing his hair (and, from his expression, not much caring about it any more — it is another failing in a life that is full of failures). He looks tired, anxious, bored. He has bags under his eyes. Behind him is the operating table, now covered with a white, plastic sheet with a black strap running across the middle. The table has no legs, of course: these would interfere with movement around it. Instead, there is a single, vaguely elliptical *stanchion*, or mounting pod, also gray, underneath it at the center.

The room is filled with the noise of casual work. Men are banging metal somewhere in the background, dragging a sack across a gritty floor. Someone is whistling. There is the sound of music from a defective radio (or whatever the equivalent will be in those future days). Outside, there is a chuffing sound, then the loud metallic thuds of a pile driver.

Gathered behind the operating table, and hence behind the surgeon, are several nurses. They are smiling as they look at him; they stifle giggles at times.

Then there is a noise in the room to the left, a sound of shoe leather (or whatever shoes are made of then) shuffling, scraping, on the gritty floor. The patient is wheeled in, on a gurney, through the heavy plastic curtain. He wears a gray patient's uniform, which includes a comical-looking gray cap. The color matches the walls. He is animated, eager to convince the surgeon how brave and confident he is, although it is obvious that he is just barely controlling his anxiety. As the white-coated attendants — each wearing black belts identical to the one around the operating table — bring him forward, we see how wide-eyed with fear he is, his forehead shiny with sweat.

"Hello, doctor, hello" he says, trying to smile. He seems to have a speech impediment, or else his fear has gotten the better of him, so that his tongue has a way of jamming wetly and crookedly in the lower part of his mouth.

The surgeon does not get up, but merely looks up at him, and says, clearly attempting to be comforting though in fact he is bored stiff and has his mind on things far away, "Good morning. How are we?"

"Fine, just fine, doctor. I know this won't take long."

"A few minutes", says the surgeon. "Have they told you about it?"

"Yes, yes," the patient stutters. He is holding on to the arms of the attendants. It is clear that he feels that, having made this positive reply, this reply that the surgeon no doubt wanted hear, that this will make the operation be over even sooner, and with less pain.

The surgeon, suddenly coming to himself and the business at hand, slaps his knees with his

## *A Brain Operation*

hands and stands up. “Well, let’s get to it.”

The attendants carefully help the patient, ridiculous in his gray, shapeless gown, and the white strings flapping from his cap — help him over to the operating table. They lift him up — he looks nervously about for a place to put his hands — and then carefully help him lie down. He is lying right on the black strap.

The nurses come forward, suppressing their previous smiles. The surgeon has taken rubber gloves out of the pocket of his coat; he undoes their wrapper, slides them out and puts them on.

“Now you know”, he says — his voice is surprisingly deep, but this may only be his professional voice — “You know that the operation has a side effect.”

“Yes, I know”, the patient nods eagerly, from his horizontal position on the bed.

“Your depression — I understand you tried to commit suicide.”

“Yes, many times.”

“ — your depression will be cured. No doubt about that. But there will be a side effect — well, two, actually, but you need not concern yourself with the second one, since you won’t notice it. Here the surgeon gently removes the ridiculous cap from the patient, revealing the patient’s completely shaved head, and takes an ominous-looking black helmet from a tray held by the nurse standing next to him, and carefully fits it onto the patient’s head. An attendant plugs wires from the helmet into a gray metal console with old-fashioned dials that is located behind the operating table. One of the attendants wipes a patch of skin on the patient’s upper arm with a piece of cotton, then inserts a needle attached to a single black rubber tube into his arm,

“I’ll be here with you the whole time,” says the surgeon

The nurses stand in background, arms folded against the cold.

One of the attendants, from behind, reaches over the top of the console and there is the click of a switch (he apparently has done it so often that he knows the position of the switch by heart). A quiet whirring begins.

The surgeon now goes around behind the operating table, adjusts several knobs on the console while keeping his eye on the upturned face of the patient, who is wide-eyed and seems to be in a kind of ecstasy due not only to the prospect of an imminent cure but also to the fact that there is no pain. Once in a while, a puff of some sort of dust emerges from under his black helmet.

In the background, the sounds of banging metal and of sacks being dragged across a gritty floor continue. Someone continues whistling off-tune. The radio is now nothing but static. Outside, the pile driver continues its work.

Finally the surgeon, adjusting a few more knobs while never removing his eyes from the patient’s face, says, “There, that should do it. How are you?”

Patient: “Fine, fine. I didn’t...a thing. Is it over?”

Surgeon: Yes, it’s over.

Patient: “And I ... cured?”

Surgeon: “Yes, you should find that your depression is gone.”

Patient: “Yes, it seems to be. Oh ... you, ... you, doctor.”

The surgeon merely shrugs, nods to the attendants who have been standing near the plastic curtain. They help the patient sit up, still with the black helmet on his head.

The patient calls out jubilantly: “I still ... speech! I still ... talk! There is nothing ...with me! Oh thank... There is nothing...with me.”

The attendants, saying nothing, detach the wires from his helmet, lift him gently onto the gurney, wheel him out. “Oh, ... you, doctor,” the patient calls out. I am ..., ..., at last!”