Christina Patterson
THE ART OF NOT FALLING APART

Porochista Khakpour
SICK
A memoir
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“Ill in Paris” by Lucian Freud, 1948
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Losing your self
What happens when life turns against you

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Many people offer themselves as models for success – “If you follow my example, you too can gain wealth and recognition” – but few stand up as proud examples of getting by; yet in the complicated messy human environment, doing just okay may involve extensive, exhausting labour and constitute a remarkable achievement. Christina Patterson’s book of essays, The Art of Not Falling Apart, shames the sleek, smug
lessons of the Lean In brigade by celebrating such achievements, and the varied circumstances, uncertain fortunes and individual abilities that shape human effort.

The book begins with Patterson’s own experience of being made redundant from the Independent. She describes the shadow games that may be played within an organization when its survival is threatened. Those with power may survey those without and ferret out “deficits” in performance. “Conferences” and “appraisals” may be used as pretexts for airing diffuse and unanswerable criticism: “Your work lacks freshness” or “You no longer fit in here”. Angry and, irrationally, ashamed, Patterson suffered the loss of status and the shock of penury. She was no longer “a journalist at the Independent” but a wandering saleswoman, constantly pitching herself and her ideas. On the rare occasions when her ideas were accepted, she was awarded a fraction of the pay she had received as an employee.

This loss of “the thing [she] had spent [her] whole life building up” stimulates reflection on other
unpredictable setbacks. There was the diagnosis of lupus at the age of twenty-six, when Patterson – an evangelical Christian at the time – believed that the stares of the dermatologist and his bevy of students exposed her as one cursed by God. Subsequently, she suffered from migraines, stomach pain, insomnia and breast cancer; each illness, she believes, is correlated with personal unhappiness, such as being dumped by a man; but each time she fell ill, she got better. Recovery from the loss of her coveted position as a journalist is less straightforward.

While working for the Independent, Patterson was tasked with interviewing famous people about their successes; here she interviews people about their losses and disappointments. Ken Olisa describes the shame and anger at his very public dismissal during the AGM of a FTSE-100 company, after which “he felt his reputation was in shreds”: the board had “done everything according to the book, it’s just that the book wasn’t fair”. A family friend, Mike, reflects on how he copes with “the feeling of guilt and horror [that] fill every minute of the day” after the death of his two children, one in a car accident and one, subsequently,
by drowning; and Maxine, daughter of a Jamaican mother and white British father, charts the depression that resulted from the racism she suffered as a child: peers and teachers alike indicated, by the names they called her and by their reluctance to sit close to her, that “being brown meant you were dirty”. Patterson elicits from Frieda Hughes a rare account of her buried trauma: until the age of eleven, Frieda thought that her mother had died of pneumonia, and it was not until the age of fourteen that she dispelled a fantasy that she was adopted, and accepted that she was the daughter of Sylvia Plath and Ted Hughes. Initially, Frieda “tried not to write”; she wanted to avoid “getting [her] head kicked in by critics”. Eventually, however, she accepted the prospect that she “might never light up the sky”, concluding, “What matters is: did you do the best you could with the tools you had?”

In each chapter Patterson considers throws of the dice that vary the quality of “the tools you had”. “A change of grammar” – where “love” suddenly becomes “loved” – reminds us that even at the point of death there is good and bad luck. There is the good death of her ninety-three-year-old uncle Maurice, which came
when the time was ripe, and before he had lost the ability to connect and contribute. She contrasts this with the tragic death, at the age of forty-one, of her schizophrenic sister Caroline, who, from the age of seventeen, had been transformed by her illness and its treatments from a gentle but vivacious companion to someone whose hands shook, who “was hunched over like an old woman . . . and walked as if she was on the edge of a cliff”. In another chapter, Patterson addresses the role of happenstance in love, bemoaning with some humour the fact that the model of her parents’ loving, harmonious marriage was of little help when she was faced with the reality of dating, which felt like “slipping round on a frozen pond while Olympic figure skaters whizzed by”.

Patterson skilfully presents individual stories that ring with universal human themes. Her generalities are less pleasing. She claims that her treatment at the Independent was sexist, that dismissal for lack of freshness or failure to fit in is a special risk for midlife women; yet the case histories through which she demonstrates the trauma of job loss, and the shame of being judged a poor fit, include more men than women.
A double standard is in evidence in her response to the Cuban ballet dancer Carlos Acosta’s complaint that he is objectified: her quip “It might be a good idea to do up the buttons on [your] shirt”, with the implication that he is to blame for others’ responses, would be unacceptable if said to a woman.

For the most part, however, Patterson eschews clichés, particularly the upbeat “all is for the best” line that some of her interviewees try to take. Misfortune is misfortune, she insists. Yet the small, scattered pleasures – of her mother’s cake and coffee, Kettle chips, wine and friendship, music (Bryn Terfel’s voice is described as “a mixture of whisky and the darkest, most expensive chocolate you can buy”) – are celebrated, and she is always optimistic about incremental improvement.

The novelist Porochista Khakpour’s memoir *Sick* deals with another of life’s unpredictable setbacks. It is the story of an Iranian refugee, born in 1978, whose parents fled to California in the wake of the 1979 Revolution. It is a coming-of-age story that involves self-destructive risk, particularly with drugs. It is also
about health care in the US, which can impose a precarious existence on the sick. Above all, it is about an illness – Lyme disease – that has so many disparate symptoms, both physical and cognitive, and so many unknowns, that it risks misdiagnosis. The most common of these is somatization disorder: symptoms might be real, but they have no physical cause. The suspicion this disorder can arouse in others often leaves the sufferer feeling isolated, fearful and despairing.

Khakpour’s narrative is finely written but uneven in other respects. When she discusses her childhood (in the enclave in the West Side of Los Angeles that, in the post-1979 diaspora, became known as “Tehrangeles”), she seems to view sharing a bathroom with her family (of four) and her bedroom with her brother as markers of deprivation, and her claim to relative poverty – insisting that everyone else around her had a handle on wealth – is unconvincing in such a mixed city; her skewed perception of others’ financial circumstances is underlined when she says that she was “the only scholarship kid [she] knew” at Sarah Lawrence College, where in fact 75 per cent of students receive some financial aid.
These flaws do not diminish the powerful central story of living with Lyme disease. Khakpour documents the pervasive sense she had from childhood of something being “wrong” with her body. When more definitive symptoms arise, they are recorded with poetic and clinical clarity. In her case, each flare-up presents as a psychiatric condition: “First, the thick burnt fog of melancholy that crept slowly . . . the sticky inability to express my thoughts, hot pangs of fear and cold dread . . . a fountain of anxiety and panic”. Her sleep is disturbed, so she manages only “that light buzzy rest of drunken nights”. She develops strange skin conditions and intolerances to a range of foods. She experiences lassitude that renders her unable to get out of bed; when she tries to walk and work, she risks collapsing and losing consciousness. It is only when she suffers these acute symptoms that she can access medical care even without adequate insurance. Each A&E doctor, with varying degrees of scepticism and hubris, diagnoses a different condition: scleroderma, heart disease and delusion. Eventually one suggests a series of tests that range in cost from $2,500 to $80,000, costs that are as terrifying as the disease itself. Yet she welcomes the eventual definitive diagnosis because it makes sense
not only of her immediate symptoms, but also of her long-term feeling of dysphoria.

This condition requires enormous support and patience, and she goes through an unsettlingly long list of lovers (male and female), friends and champions. Her remark, made in passing, that a person who feels out of place clings to anyone around her who seems “real” does not account for the volatility and transience of her relationships. It is tempting to conclude that Porochista Khakpour, repeatedly complaining that she has no one to trust, may be difficult to befriend; but others’ concern and loyalty are clear from their generous financial support, which, eventually, funds the treatment she needs. The memoir she sells her editor is a good American success story about the triumph of recovery; but while she was writing the memoir, she suffered a severe relapse. *Sick* will not necessarily offer hope to others with Lyme disease, but it gives voice to their often unheeded suffering. The memoir itself, moreover, is testimony to the fact that productive creativity is possible even for those burdened by recurrent illness.