

Dear Bill,

10/16/00

Sorry you have this additional cause of depression of which I was not aware. Hope you can cope with all of them. It is not easy but it can be done. Good luck!

On the manuscripts, please see what Clay says or asks. I'll give you my understanding: it is to ~~end~~ up with a list of all of them, with all of them on CDrom for Hood to make available if he chooses and for each in any way involved with a copy and if desired, a CDrom. (I do not even know how to refer to that stuff!)

Gerry and Dennis have given us a list of what they have and Jerry is making me of what remains here and that he has. I've no idea how many were taken from here but I'm certain that some were. Saw that when first back from the so-called nursing home and well before I discharged myself from it.

So, the inventory should be of manuscripts only, whether or not complete manuscripts, which should be indicated. And whether the disks can be used. I am told that with age they deteriorate, so Clay would need to know, I guess, if the disks can be used. And if not how good the existing copies are.

On the robbing, I also thought and think it is strange. First thing I noticed was the ~~braking~~ of this typewriter. Boys, I thought, until I began to perceive what else was missing. It is, and my knowledge is limited to what was in my office, some of almost each drawer, like someone was using an attache case and could limit to what it could hold. Drawers into which I could file nothing and could not remove some have a couple of inches of space in them. And what was taken includes my will and that provided a clue to the also-missing rare silverware that bit by bit I pieced together for Lil. But I think it might be best not to print anything out other than to save it until you know if Clay needs it.

With that from my extensive experience with Lil I could make suggestions that might help with your mother but I cannot. Our experience was like that of your mother except that our real problem originated with our so-called medical care. The hospital dropped Lil, broke her unbroken hip and put two blood clots on her brain and did not even check to see if they had until after I raised ^{hell} ~~her~~ and was about to abandon ~~her~~ in the ~~next~~ emergency room. Only then was there the catscan that showed those clots the removal of which is not all that often successful in people of our ages. Lil is, as the result, an entirely different person than the one you knew.

The nursing home and the doctors were monsters and robbers. And knowingly negligent. Plus they did not need to send me to a nursing home to begin with. But the one in which Lil was was managed by the ^wife of my local critic-care expert, a man I liked as a man and respected as a doctor. And he turned me over

to, as my hospital and then nursing home doctor, ^{the} the nephrologist who was also the nursing home's assistant medical director. And the medical director of the only local dialysis center and in which he had me before he left me out of the hospital. And that, I'm told, is for life.

I could go on and on with this. Like the doctor I wound up with refusing to look at a half-dozen large ulcers on both legs and feet all the time I was in the hospital and nursing home. I snuck a peek of one in on him, and on a big toe when my ^{legs} ~~legs~~ and thighs were encased in ^{supports} ~~supports~~. And once when I

heard his voice in the corridor of the nursing home, when I could get those supports off before he entered. He walked over to my bed, ^{looked} ~~looked~~ at my legs and thighs and then at me and said, "I'm a kidney doctor, not a leg doctor." ^{He} ~~He~~ turned and left. And he left it there. ^{then} ~~I~~ got a ride to Baltimore, was driven to Hopkins, where my belief was medically confirmed and I was told to discontinue those supports, given medication, and slowly those ulcers

have disappeared, ^{ever} ~~with~~ the skin weak where they were. I got up to Hopkins again, was examined by my cardiovascular surgeon that time and he told me there was no need for me to be confined to a nursing home and I then discharged myself. I'm also satisfied that although it is likely that dialysis was a coming need that I was put in it prematurely. And that time when I was not in treatment three days a week, which knocks me out for at least the rest of that day, I could have made proper arrangements for Bill's return home, our long confinement in the nursing home having cost us the services of the fine woman who was and is ~~and~~ again looking out for us.

It is all crooked as hell now, greed, not ~~real~~ medicine based.

When the system can turn people like us, of our age, into what it has, it is the system as well as the individual practitioners that needs change, some missing form of control.

But we have to learn to coexist with it unless we can go to court and hope to find an independent judge, not one who is part of it. If ~~we~~ were 30-40 years younger I'd be tempted. But when I can't even walk out to leave or get the mail and the papers and as feeble as this indicates, the prospects that are never favorable are much worse.

Bill, the best of possible luck with the family you love so much of which does and has troubled you for some time. But as I think I remember saying when how troubled you were was first apparent, we have to try to accept what is not acceptable and to do what we can to live with what cannot be. That is what life is and brings and we need to accept and adjust to what we cannot, it being the opposite of what we want. Thanks and our hopes and love,

Handwritten signature