Homage to Oliver Sacks
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In his beautiful and deeply honest memoir, *On the Move*, Oliver Sacks claims he led a mostly solitary life. Yet generations of readers, millions of us, feel we went through twenty or thirty or forty years of life *with* him, beginning with the moment we each read one of his early books (*Migraine* or *Awakenings*), through the works that marked his mid-life and later years, to his last brief reflections on his life and death. I am sure, as we read the final three opinion pieces in the New York Times, each of us felt we were losing a trusted, knowing consociate – someone who knew us because he had spent his life as an explorer of the human condition, an analyst of the infinite variety of mind, body and brain experiences. Because he was able to show – through his stories of tics, body part appearances and disappearances, color blindness, visual and aural hallucinations and amnesias, aphasias and autisms of all kinds -- the vast array of mental and somatic differences members of our species can live with and sometimes thrive with, he documented for us the ways that we are human. In doing all that he brought out our empathy for the other. As his cancer took hold and he wrote about his impending death, he tapped into our concern for his own condition and for our coming loss of one of the finest writers about the mind/body/spirit relationship.

I read *A Leg to Stand On* the year it was published, 1984, and now, 31 years later, I still am struck by his words describing his weeks of helplessness, confined to a hospital bed. He was able to describe in frightening detail the shrinking of his field and depth of vision to include only what he could see from his bed. He wrote about that with both anxiety and a powerful curiosity. He wrote that he gave his body over to music to begin walking again, for that was the only jump-start act that worked. Or rather, he was amazed at how music, once brought into his consciousness, enabled him to walk. Most dramatically, he compared his existential panic about the feeling of *no leg there* with his doctor's brief chart note: surgical recovery: normal. Of all his books, I think *A Leg to Stand On* helped shape the kind of medical anthropologist I became.

My friend and colleague, the South African born, London residing physician and medical anthropologist Cecil Helman (who died in 2009) knew Oliver well. Cecil had contacted him in the 1980s, when he, too, was writing stories of his patients (*Suburban Shaman* 2004). Oliver and Cecil became friends, bonding over their many commonalities -- Jewish family background, physician forebears, the joys of writing about particular patients and the burning necessity to describe (in their distinct anthropological styles) their patients' ways of knowing illness, self and life. They shared a desire to mine a deep phenomenology of the illness experience. Over time, Cecil became the trusted doctor of Michael Sacks, Oliver's brother with schizophrenia. Cecil and I saw each other periodically and every time we did he told me about his most recent visit and conversation with Oliver Sacks.

At the time of Cecil's untimely and unexpected death from a fast-acting variant of ALS, he had been working on a second volume of patient stories. Hammersmith Health Books published the collection, *An Amazing Murmur of the Heart* in 2014.

Since Oliver was by then part of my life and a friend of a friend, I knew he would appreciate Cecil's posthumous volume and I ordered a copy for him. I enclosed a letter with the volume, explaining that I had known Cecil since we were graduate students in anthropology, and that I thought he would appreciate Cecil's last volume of stories. Two weeks later, I received a beautiful hand-written reply. He was thrilled to receive Cecil's stories and hadn't known the book was in the works. He mentioned that Cecil was a solace to his brother Michael over the years and he wrote : "Cecil's insight and empathy enabled him to get through to Michael's all-too-human core, while others only saw an array, if not an armour, of pathological symptoms and signs." Of course, that is exactly what Oliver was able to do in his care for his own patients.

I had always wondered if Oliver met or remembered my father, Bernard Kaufman, who was a cardiologist on the staff of Mt. Zion Hospital in San Francisco when Oliver did his training there. And I asked him about that in my letter. I can never know for certain, but he claimed to remember my dad. He added, "You clearly carry on a most distinguished San Francisco lineage and tradition." I mention this because Oliver had an exceptionally active correspondence over the years – he received and wrote thousands of letters. I think he probably had complimentary things to say as he responded to every note he received. I treasure that letter.

What I love about *On the Move*: His disclosure that he ate many solitary meals in 30 seconds, out of a sardine tin, standing in his kitchen. His struggles with writing, over many years. If he could struggle with such difficulty, well then, it's somehow reassuring for the rest of us. His lifelong love of physicality (muscle building, motorcycle riding, swimming, hiking) always with a notebook nearby. His revelation that he didn't think about his own mortality, truly, deeply, until he turned 70 and was diagnosed with eye disease. That he allowed, invited, the world of readers to share his intimate life review.

Oliver Sacks was a model of caregiving and a life worth living. He lived outside the socio-sexual norms of 1950s British society and later, outside the expectations of academic neurology. He suffered greatly on both accounts. Yet his life, and perhaps his last years especially, was filled with numerous forms of gratification – from the people he came to love and who loved him and from the many of us who engaged with the brilliant insights of his work and with the deep humanity of the man. It is gratifying to his fans that he died with peace at the end.