Dear Oliver,

I once wrote you a letter in the mid 1980s after reading and being bowled over by your book, “The Man who mistook his Wife for a Hat”. I said that you wrote like an anthropologist-ethnographer, *only better*. You replied in a handwritten note sent the old fashioned way by post — it is somewhere in my files. You replied that you *were* an anthropologist, of sorts, and left it up to me to figure out what sort that was.

A year or two later I tried to cajole you to come to Berkeley to give a lecture to our medical anthropologists. But I said that I had an agenda: what I had in mind was a position that had opened for a senior medical anthropologist, and I asked you to consider applying for it. *What chutzpah!* You declined, but ever so kindly. And promised to come at another time.

I didn’t know at that that you were not a ‘traditional’ academic clinician-scholar who wrote magnificent books. There is long genealogy of clinical doctors who were also powerful writers. But you were in a class by yourself, a free-spirited itinerant participant-observer who loosely affiliated with various hospital departments – of psychiatry, neurology, neuropathy & neurochemistry as well as specialized units on headaches, Parkinson’s disease, epilepsy, and *encephalitis lethargica*. These units were your ethnographic field sites. You loved hanging out deeply in these spaces where you could fill up your notebooks, draw sketches, and take as many hours, weeks, months or years to understand the dilemmas of your patients who existed on the far side of neurology, ‘neurological freaks’ one of your critics called them, exposing the limitations of normative neurology.

Even after you finally settled down to a sort-of regular appointment at Albert Einstein College of Medicine in NYC you were never beholden to the normative obligations of a clinical professor. You were just as likely to be in the poorhouses and clinics run by the *Little Sisters of the Poor in New York City*, the same nuns who have now so irritated liberals and feminists for their refusal to distribute contraceptives under Obamacare. But it was in their clinics that you were given all the time needed to engage with your ‘subjects’, and that led to the cascade of books and essays that are at one and the same time literary, philosophical, existential, neurological, pharmacological, ecological, and cosmological in their scope. Later in your career you took a position as “Artist in Residence” at Colombia University, which must have pleased you a great deal.
When you did finally come to Berkeley in 1994 to give one of the *Foerster Lectures on the Immorality of the Soul* you were the first neurologist to do so following a long list of distinguished philosophers and theologians, an odd task for a dedicated atheist such as yourself, albeit the most soulful of atheists.

At that lecture you said that you liked the word soul and that you did believe in immortality of sorts. Mozart’s music is immortal even though Mozart the person is not. (San Busman were said to have wept upon hearing Mozart for the first time.) You thought of nervous systems as traveling through time in space. McClintock's “a feeling for the organism” had to lay at the heart of medicine and of life itself. You embraced all forms of life, human, animal, plants (especially tree ferns), and elements (minerals), to which you would return at the time of your death. Your career began as a scientist with a laboratory study of earthworms gathered from Central Park. Always a bit clumsy there was an accident and luckily for us, you were declared a menace in the lab and told to get out and work with patients, “where you could do less harm.”

From earth worms to earthlings was not such a broad step for you as you carried your naturalist’s eye from the laboratory to hospital wards, clinics and asylums to observe and minister to patients with severe conditions, debilitating migraines, Parkinson’s disease, Tourette syndrome, *encephalitis lethargica*, autism, and deafness. You also brought dissatisfaction with the normative medical binaries of normal/abnormal and mistrust of reifying diagnoses that put patients inside a cage of sorts. “Don’t ask what kind of disease patients have but rather what kind of persons the disease has”, you said. It was the ‘style’, the ‘flavor’ and the content of individual lives buried within a ‘diagnostic category’ that interested you. You argued that there was a ‘tourettic’ style; an autistic style that was embedded in the personality and that had a feel, a texture, and often-special forms of creativity.

So, before rushing in to fix things, you said, one must take stock of the varieties of neurological experiences, even those that might strike one as unbearable. The colorblind individual was not necessarily pining for color. Indeed, if we gave them color instantaneously they would not know what to do with it. Their visual world was exceedingly beautiful, even for those with monochromatic vision who see only delicate shades of black, grey and white and they would be assaulted by ‘our’ brash, grotesque colors.

You told us about a professor of mathematics, who suffered from debilitating headaches throughout the day but by early evening the pain disappeared and was followed by a luminous catharsis during which he was totally energized, and able to work at the height of his mathematical creativity. When he agreed to be treated with powerful psychotropic drugs, the migraines disappeared but with it so did his mathematical genius. Another of your patients was struck by lightning and experienced a near death experience that was so profoundly beautiful and sensual that he did not want to be resuscitated. But on recovery he became a musician, a talent he never had prior to the lighting bolt.
The arts are not drugs, you said, but art and music were capable of releasing the creative impulse in people with severe neurological conditions. The power of music is everywhere in your case studies. Tourette syndrome with its cascade of tics and kicks and impulsive and implosive profane glossolalia is in medial terms a problem of chemical imbalance, too much dopamine. It could be controlled. But you found that “if you damp down the chemicals, you can damp down the person himself” and destroy the Tourette’s personality, his body-self. While Tourette’s could be seen as a form of possession that has traumatized the self, that possession becomes deeply personalized. Where medical science saw abnormality, Sacks saw a neurological style, one that carried risks to be sure, but also enhanced perceptions and skills. You always positioned yourself on the ‘other side’ of disease. Your famous patient, ‘Witty Ticky Ray’, who named himself, taught you that clinical medicine had to be pegged down a few keys, more modest and far less invasive. There were symptoms linked to the condition that enhanced creativity and skills (like being a drum virtuoso in Ray’s case) that patients were loath to forfeit. So you worked out a deal with Ray so that he would take his meds to manage his Monday to Friday workdays but to be drug-free on the weekends when he performed as his other self, his witty, ticky self who could amaze an audience by liberating the beat of his distant drummer inner self.

You had to rethink your boldest experiment when you introduced a new drug, L-Dopa, on the mostly elderly patients in a special ward of encephalitis lethargica catatonics, hypothetically linked to an epidemic that followed WW I and the 1919 influenza epidemic. Descending on the ward with your L-Dopa wand you magically awakened the frozen, sleeping patients, calling them forth like the dead Lazarus from their morbid stupors, some who had been trapped for more than twenty years. Some who had suffered too many years with too much damage to their nervous system could not handle their rebirth and their screams and shrieks turned the ward into a bedlam followed by a relapse of the sleeping sickness. These dramatic misadventures were made famous in your book, Awakenings, and later in a Hollywood film with Robin Williams as your alter ego, although it was Robert De Nero who stole the show as one of your encephalitic patients. Left out for the most part were the less dramatic cases of patients who made accommodations to L-Dopa. You found that simple gifts, bringing color and art, work, and music into the ward helped the awakened patients to recall and relearn basic skills. Thus, there were patients who could not speak but they could sing to music that could not walk but could dance as long as the band played on.

Your work was central to teaching medical anthropology. All my undergrads knew that if they signed up for Anthropology 115, medical anthropology, they would be reading your latest work. For some, that was the ONLY reason WHY they signed up. Over the years I began to notice that my students were a bit more diverse than usual. And, they were quite willing to talk about their own neurological, cognitive and other differences in class and to do so with gusto, humor, and panache.
Sometimes I had to close the door because we were having such a good time. We began holding end of the year public conferences rather than have final exams – I
hear that’s not forbidden, the word must have gotten around -- and people from all over campus came to hear the students’ papers. One student was so extremely shy that she could only present her paper with her back to the audience. No one seemed to find this the least bit strange. It was a brilliant paper and she got a well-earned standing ovation. Another student had to deal with a cascade of verbal and other ticks. Her paper used performance theory to illustrate the ability to play hide and seek with their compulsions. Your work has been liberating to a great many young people. And I want to thank you for what you have given my students and me over these years — a pathway to radical hope and radical freedom.

I was moved to write this note after reading your essay on "My Periodic Table" in the Sunday Times and picking up your memoir, On the Move that kept me up through the night mesmerized by your story. I recommend the latter to our dissertation writers, some who have taken years to complete their work. I was sure that they would love your tales of draft manuscripts the got lost, burned, rejected and then stolen by jealous senior colleagues only to be rescued, published, and acknowledged by some of the world’s greatest writers and scientists for the visionary and magisterial work that it was.

I was amazed how many years it took you to publish The Man who Mistook his Wife for a Hat and A Leg to Stand On. I read “Leg” in a hospital bed at Mass General in Boston in 2008 when my bicycle had an early morning run-in with black ice and speeding car that threw my bike in the air and shattered my left foot and ankle and left me sprawled in the middle of Garden Street waiting for another car to finish me up. Luckily 'the boys in blue' got their first and I was taken to Man’s Greatest Hospital.

Your beautifully told tales of battles with addiction, sexuality, family dilemmas relieved by your free spirit days at Muscle Beach, your passion for life, your tactile care for your patients and for the live of their bodies, minds and spirits are a gift to the world.

******

Oliver Sacks is gone from the here and now. “My Periodic Table’ was both a nod and a recognition of Primo Levi’s memoir, The Periodic Table, that tells the tale of his survival in Auschwitz through the elements in the periodic table. The chapters titled Argon, Hydrogen, Zinc, Iron, Potassium, etc. tell Levi’s story through his love of chemistry which also saved his life in the camp when he was assigned as a slave worker in a Nazi chemistry factory. In his essay Oliver Sacks shared his excitement about scientific advances in nuclear physics, which, he said, mattered to him much more than breakthroughs in human consciousness and neurology. The science of neurology could never capture the meaning of life in the way that physics and cosmology could. Here was where for Oliver Sacks immortality could be found. He concluded his essay:
“A few weeks ago, in the country and far from the lights of the city, I saw the entire sky “powdered with stars” … such a sky [that] could be seen only on high, dry plateaus like that of Atacama in Chile… It was this celestial splendor that suddenly made me realize how little time, how little life, I had left. My sense of the heavens' beauty, of eternity, was inseparably mixed for me with a sense of transience and death”.

His essay calmed my turbulent spirit about the loss of a spiritual and intellectual mentor who understood that animals, plants, minerals, and humans shared a universe. Perhaps animism – not theodicy or technology - can save our planet and us. On some of these precious fall evenings in Berkeley I swear I can see the old Jewish, gay, atheist science-not scientist winking at us from a distant galaxy- Oliver in the sky with diamonds.

Epilogue

Following my 96 year old father’s funeral a two decades ago, my brother's son, David, an industrial artist in Baltimore read a poem written by a street poet. Its irreverence would not have bothered my Dad who once played honky-tonk music in a Brooklyn speakeasy. I think Oliver would appreciate it as well.

Tonight I’m eatin stars
And yer not gonna stop me
Traveling through bars
With glitter on my stockings My body parts are shimmerin
As I move through my own galaxy
My high heels kick up moon dust
I got Saturn’s rings for jewelry
Yeah, I know that times are hard
And you got yer shovel waitin on me
But tonite I’m eatin stars
So you can shove your goddamn gravity
The dun fell down my pants
And I'm gonna dance till Gabriel blows
Search all night till I find myself
A couple of celestial bodies
Go on- you can dig yer hole
Cuz tomorrow I’m eatin stars
And motherfucker you can’t touch me

Farwell, Oliver, and thank you for giving us your poetry, yours science and your wisdom, but most of all thank you for giving us a  a leg to stand on.