

The Happy Jug

A novel

The Happy Jug

Nathan Jones

1.

A sagging of your face. A high-pitched noise like several insects turning on at dusk close to your left ear, certainly. And it is unlikely many of the symptoms of the neoplasm will stop once the neoplasm itself is removed, so although the removal is essentially inevitable the results it produces are permanent in the main.

Channels which carry waste, filth from the surface, protective scum, bottlenecks, headaches, lack of consciousness. Clone themselves from within having little relation or reliance on the surrounding environment other than to apply pressure.

Depression, possibly.

Does not have a suicide button.

Excessively arrogant policies.

Four years became five. Becomes ten.

Fifteen at least.

Hallucinations could be a result of this temporal compensation taking place when it is not required.

A built in excess of capability, which some see as an inevitable redundancy in certain zones.

Proliferates despite its being having all the qualities of that which should not survive.

Suggestion: Enticement: Enforcement.

The brain is a complex system and we understand very little, representatively, about how it works. The cellular makeup of the neoplasm then is as ideologically homogenous as it is diverse in its symptoms. The holes around the fish's mouth adding air and speech to the water as it fell from the mouth, coming into the glasses, spilling onto the table. You couldn't simulate them at that point. The pathways to essential services are eventually closed off by this pressure, nerves which run across the territory are splayed out over the surface of the central power causing irrational behaviour, winking, nodding, an insincere smile.

The pressure was initially born by the most vulnerable in society, and unlike an infection it is unlikely to spread, having the growth pattern which leads to only illusory, relief, for example when the pathways which surround the neoplasm tactically renegotiate their position, or are otherwise compensated. They absolutely plundered the language of 3D simulation. It's so masculine, so. All they can do is wait for when they get to blow something up, or make some big breasted elf woman.

We had thought when they first came to power. How much damage can they do in this short time. Which raises the question, how is power wielded at all?

Z

2.

fridge
moss
tooth
uh.

silk

uh

soil

Okay,

ship
rug fan
cheek
haze
dice
bothe
welt

jot
moon

again

dug
witch

jail

cheek

bite

get...

...

...

...

shhown...

.

.
.	...
.	dat.....
.
.	...
.	...
bbboommbb...	...
....	
....ah
Good.	
Going to	rooot
go qui	
eter	
	hhive
again.	
....	
.....	get
.....	
....	
.....	
....	
.....	
.....	coat
...	
.....	

to	heal	
	break	
job	goes	
	sad	
Okay. Um.	poll	
	june	
Go to the		
left now.	Good.	
So you	Going to	
might be	it.	make
able to hear	a bit louder	
the		
rushing		
	noise	...
in the right		
...	fill	
	catch	
	thumb	
bib	heap	

gasp
rave
gloat
shone
bed
juice

thigh
wake

Quiiiieter now.

bed

touch

kill

Well that's shown the right is fine. Your left is not as fine. The nice thing about that words test. Is it allows us to see not just how much of your hearing is left. But how you use that hearing. You did manage to score at 100% on both. Sometimes with acoustic neuroma. You never get to 100%. Because of the way the tumour is pressing the nerve it won't let the sounds through no matter how loud it is. In which case, what's the point of the left if you're only scoring 20-40% no matter how loud it is. It *the outcry* helps with the management of that area. In your case you just need to make it a bit louder. So it helps them decide whether surgery is an option or not. Less likely in your case, because you scored 100%. Although it was at 30db higher than on the right.

I'll get all that finished off and hand it to.

Sorry about that, I just, it sounded a lot like one of Nathan's performance peices.

It sound ed a lot

like one

of my per formance

peice.

He's a performance

Okay.

Thank you.

Thanks a lot. bye.

3.

What we think most likely acoustic neuroma.
It arises from your balance. That's the popular
name for

its it's misleading.
We call it the vestibular schwannoma. Because it
arises from balance nerve. We don't know
how long it's been there. I know you had a scan
done could be. Ten years or ten months.

It has grown for a while.
It looks like it has stopped growing.

24 there. Oh, actually.
It has grown.

Sorry.

You have to get the cuts exactly matching.
So it has grown.

It has grown from 24mm–27mm. It looks massive
on the scan. The scan is magnified. If it was much
smaller. It's not huge. We have some which

are smaller. We have larger. Yours is on the
large end. If it was smaller then we would say we'd
keep doing. Scans and scans and scans and scans
and scans and scans and scans and scans and this
is what we do with a lot of people. But a

lot of people's are smaller. It is larger, and is
growing, then we have to discuss treatment
options. One is radio therapy. If it was below
20mm have radio therapy. Controls things in about
9/10 people. Keep scanning you. And if you
happen to be one of the out the ten that
it fails then we have to intervene. However. In your
case it's larger than that. Um.

You have these little look on the scan here.

You can see there's the white bit and dark bits if
you look on the scan here. If there are dark bits.

The dark bits indicates pockets of
fluid. You can have a whitewash tumour, or ones
with little cists. And if you have the cists then it's
unlikely to respond to, it will keep on going.

And also its very close to these bits. These bits are
quite important bits of the
brain. Here you have. You have a brain stem.

****inturruption_ door creak_****

Do we have

Miss!

Ask you a question,
do we have anything
specific for tinnitus?

We have a tinnitus

counseling clinic

This is the brain stem it controls breathing, heart rate and that sort of thing. It's very close if its very big and very close. Some of the radiation goes onto that. This part is called. The cerebellum it controls balance and that sort of thing. And once again you can get radiation. I hate to the way yours is looking the best option would be. Operation. Its not a small operation. Its quite a major operation.

It involves two teams working together. Myself an endoscopic surgeon. And miss viscous who is a neurosurgeon. This is a lot of information to take on board if you want me to stop at any point just say so okay. What it involves is we go through behind the ear. We take away the bone that houses your ear. So you do have some hearing.

I have got good hearing. In both ears.

push out of the way. So that means that that's at risk. With this size of tumour we're talking about 10-15 out of 100 chance of damage to that nerve and that damage may be temporary. So it may recover. So it may take a few months for it to recover. So it may be permanent. And the risks of permanent damage are at least 5%

Yeah. You do. So you would loose that.

Okay. You would have no hearing in that ear. If you are getting tinnitus. There's a good chance that will carry on. Because for some bizarre reason. Even if you kill the hearing completely. The tinnitus carries on. It does involve brain surgery. Effectively. And one of the risks of the surgery both from the ear surgery and as well as the brain bit. We have this nerve here which moves the muscles of the face. One of these things is it has been affected already. Which is quite uncommon with these sorts of tumours. Its very rare in fact. For the facial nerve. Looking at it on the face of it its recovered. There's only a very very tiny tiny amount of weakness. Not a huge amount. But that nerve basically it comes out sort of here. But has quite a complex route it goes through the bone here. A complex region and it goes through the same canal where the tumour is and then it's draped on that side, or that side or that side. We have no idea how its sitting the tumour is based around it. And often its thinned and its splayed onto the face of the tumour. Which means that its not a nice cable that you can

so 5 out of 100. If this we would you know. If you hadn't had this already. But it has caused facial weakness we can't guarantee. That it will not do that again. And whether or not your recovery. It will be back to normal we don't know. Because if the nerve is stretched and the blood supply is quite. Thin to it. It could compromise and the nerve might not work as well.

The other risks are that. There's this clear fluid that's around your brain. The black gaps here around and there. The nerve there's come clear fluid which protects. It called csf. With the surgery we block all the passages which we think that could come out of but despite that and occasionally. And in our unit the risk is about one in ten. Some escapes and your nose and we block your ear And you end up with a tiny little hole. O And at initially there's a stump there and then that. With time withers away. And you end up with a shallow ear hole and the rest of your ear. You take away. Um. So there is a risk of csf leak. If there is there's a chance of a bug to go in. And for you can develop meningitis. And the chances of that are very small. So we have to paint. The worst case scenario out to you I'm afraid. Because its brain surgery there's a small risk of stroke. Small risk of damage so. The reason i was checking these nerves. The size of the tumour it's grown upwards it's. Its grown.

There's various other kinds of nerves. The nerve that moves the shoulder. The moves. The muscles of your tongue your voice. Can affect your swallowing that sort of thing. They're at risk of damage, ahye if the tumour carries on growing. And bee if we operate its a smaller risk. Okay you can end up with breathing problems there's this chance. We might need to put a tube in for your breathing. And if there's problems with swallowing we might need to put a tube in for your swallowing. And so forth. And this is if everything goes wrong.

Okay and because its brain surgery there's a tiny tiny tiny

Tiny

Risk of deat. Okay. So we have to warn you about okay. So that's a huge amount of information. We're not asking you. Going to ask you to make a decision today. We're going to bring you in. Back so we can sit down and. Soon as you walk out you're going to have about 12 billion different questions. I'm going to pause now so you can.

4.

The dissembling qualities of a migraine include symptoms which are akin to those of a stroke. The aura migraine sufferers describe, I think of as part of the conscious, the soul, coming detached from the head where it usually resides and hovering around it, visible by its inhabitant for a moment as it expands to exceed itself. We saw the milky way one night on our honeymoon, the third night after driving home late from a lakeside beach and carrying the children in, already asleep, laying their bodies out on the beds in a sinister fashion. People describe 'seeing the milky way' in the sky as this special phenomenon but essentially we are within the experience of seeing the milky way all the time. The aura escapes the receptacle of your head, in which it forms the void which contains your life, as a kind of rift, or glitch in which the outside and inside are confused in anticipation of the phenomena of the headache which is to come – the sickness, blindness and pain which victimize its constituents.

In devotional art, saints are depicted with their aura surrounding them, captured as though permanently on the verge of a migraine.

Possibly the worst thing about migraines is the anticipation, and trying to couple this with life, the optimism required to plan something

positive for the day ahead. In the lead up to the general election. I checked the polling websites more than ten times a day, for example continually checking for spasms which might evolve into a trend.

None were forthcoming and I grew bold as the days wore on and the election got closer, more fearful, but also with a larger aura of confidence surrounding this fear, which I suppose I projected onto the world around me, my immediate surroundings achieving a kind of beatific ignorance which collapsed that day on the train back from London when the first exit polls landed. The agonizing, debilitating disbelief of it. But there is nothing which you would have done differently, or else you would never get the two children out of the house, you wouldn't be able to enter any space with strip lighting, and when you found yourself getting hungry you would take pain killers rather than eat.

A hunger pang / a reverse aura, where the soul shrinks, inspecting the world from within itself, revealing in place in parts, as densities, the ribs as they line up against each other, the canals of the legs and spine, the encasing body a constellation in the distance. What you are seeing is the limitlessness of that which limits you.

5.

It seems like her body, or rather the space-time of her mind, as reflected in its thought the MRI scan, was the material in which the happy jug has left its footprints at the moment it coincided with itself. The Happy Jug then, much more than the material fact of the jug itself, shimmering through the other substances that surround us like a virus as it smashed.

I brought the happy jug home the day I found out about a grant, which would eventually lead me to write the novel I'm going to include this in. The grant is a Paul Auster style narrative device, in that it makes me unanswerable to the material demands of labor, and projects my life into a boundedlessness vertigo dropping into the text.

The happy jug then, the tip of this freedom device I use to navigate a world flooded by choice. If the soft but insistent blows I'd received prior to this grant made me tender, the happy jug, was a concrete fact, a marker of my vulnerable but precise re-emergence into the world of matteringlessness, theory. Flushing through me, like some kind of leakage in my head and through all the cells in my body the good news. Rain in the sunshine. I went to get pizza from the Italian Club for us to celebrate. I was panicked, because I'd not been used to any kind of lightness which was actual, all the positivity of my life manufactured

from the endless store, plasticity and sacarine. This sweet news was like a drug. And I bought the jug then.

Ordinary water bubbled abundantly from the lips of it's fish-shaped mouth as though the water were pre-tasted and ordained. We were pleased at the frivolity of it. A jug which costs £35! If it was possible to back engineer the decision extending that vulnerable object into the root system of my life, while retaining the happiness itself, I would.

Sorry, I?

I broke the jug. I knocked it off the kitchen counter without touching it and it broke into three pieces. It's in a box in the kitchen, with a small tube of superglue like a charm or translucent tongue in its splayed jaw. A few weeks after that we found out that Nina has this a brain tumour, or rather we found out the scan had been changed. They said this is a clerical error. A change of surface appearances is what it was. Except the surf.time. And the swing from the pre-election polls to the exit polls. The way it released the dark filament of the public conscious.

What

was?

So you know there was that MRI, and then it was a year before we saw the results.

Right.

Did you know about that?

So I

wasn't there on
the first appointment
was I. I usually try to
be there.
So no I

didn't

know

about that delay.

What happened was, I went to GP, then ENT, then they referred me for MRI. Then I didn't hear the results. I saw the GP one other day. The polls at that time also were showing Labour returning to power. About something else and she said you have had an MRI. She said There was an abnormality on your MRI you know.

So there was this rift between what we experienced, the headaches and the unbearable pressure, and what the MRI actually showed, and what the exit polls showed about the people that surround us when the train shoots up through middle England on our way between Labour strongholds. And now it was like we were looking at the other side of the object. But it was still the other side, because we'd turned it.

The thing we were experiencing, she phoned and said it's an acoustic neuroma, you know. She didn't put it like this, but undoubtedly in the scan, which is flat and it's only revealed a section at a time, more like an spill of light on an ocean of oil, which gets bigger the deeper you go into the dark areas. The viscosity of the mind itself pushed aside as though by some bacterial seepage. The Happy Jug, the tumour, the election, they're all elements of in this apparent flatness being separate, the same object depressing the facial nerves and parts of the cerebellum, pressure on the flow of care from one human to another, cracking into three pieces. A narrative device changes the course of time. Causing fatigue as the mind finds new and ways of coping with the fracture of the jug and its expansion, not a collapse of the state, but a burden on its ability to function properly, collective depression which isn't experienced collectively. The mesh by which we perceive things, just a slice, really into which these same elements protrude, lonely like heads on a beach.

Yes.

So that's the other side then, she was experiencing this other side of the tumour, but I couldn't see it. Whatever it is that was not having a tumour. There is no easy dividing line. How tired you are, and your life and your tiredness itself. It's sticky, and it's inside you. You couldn't distinguish between what the polls did and what they meant.

The right and left, a pain in one tooth which spreads into new parts of your mouth because the nerves are overloaded. The Happy Jug is a broken tooth and it was raw inside – its roots extended down into her brain through her fatigue – it did things, and it also meant something.

So that was in
2014?

Right. They showed us a piece of paper the MRI engineer had written on, and it said “must see a surgeon urgently”. It was flushed right through the system then. Like climate change, we didn’t really notice its qualities, but that URGENT written a year ago was traumatic, rather than terrifying because it’s already happened hasn’t it? But the election, what is actually traumatic about that, that hasn’t happened.

No.

And what this tumour is, hasn’t happened either has it?

No.

Or it’s hopeful.

o.

6.

Trauma was never confined to the tumour itself. Happiness cut through the jug.

Just as hope cut through the general election.

There was never any hope in the election. But that didn’t mean there isn’t hope. The tumour itself wasn’t traumatic. That void of anything taking place in the brain. The symptoms it causes, which come bubbling off its surface. They make me think of London, the cellular proliferations in which nothing happens pushing down and outward. Happiness and the jug were just circumstances for each other. Examples of each other.

The election was a vessel, but not for hope or even trauma. _ny more than the tumour. The circumstances for the mesh of trauma and hope which the tumour appears on, along with the surgical instrument as it bleeds onto the unspeakable plane of the brain’s own ability to participate in the sensory dimension from which it is so removed. That dimension an election feels the dark corners of the social conscious, a vase is reached by an elbow which never touched it.

And that was at the royal,
2015, and then the May
2014, okay.
So obviously you came back.

*So then he phoned me
and said we've got an
appointment for you.
And then, it's moving quickly.*

Yes, your second
appointment was in April,
and between April and now.

The exit polls and then the result itself.

Distant, in the sense that we only live in the places which voted Labour. Facebook shimmering above like the fake sky in a tropical swimming area. But those corridors move through something. And that something, from the moment the first diagnosis came through, the extent of the dark voter outside, the pragmatic, hungry dead eyed squall. The exit polls I received on my phone on the train running through the night, revealing the extent of these colonial cellular proliferations, how much they press onto the consciousness. The extent of that pressing collapse, the places the train wasn't going so close up to the windows as to be effectively inside the train. There were people on the train at that moment travelling there.

It seemed like we didn't know. And then we knew, the diagnosis itself wasn't the thing, it was the treatment. And both were completely different from how they were supposed to be. We didn't know, and then we knew, but we couldn't believe it.

It was based on a strong
showing from something in the end
which didn't really exist.

A bubble bursting, but we call
that a hemorrhage – here the bubble.

*And it's been really difficult. A feverish rapture
in time. Which happens when something
comes into contact in that way – re-
ally experiencing itself. It's like the
stigmata: I Catherine of wherever bleeding
from the wounds of the jug, except
this was the statistics just popping into
three pieces. It's not that
anything touched it.*

Yes. It's not. It doesn't
take a lot.

Here's the scans now
you can see them both.

It has grown hasn't it. It definitely has.
Because I was listening to a recording with
the surgeon, typing it up for this, this novel.
And she said it hasn't grown and then she
went oh, it has.

It was just the first moment when there was a
clerical error, like a hologram, if you shine a
little light on it, if you cut it, if you write it down,
it contains all the misinformation you need. It
was like this whole story really. Just ambiguous.

It's plumper. You have to line up the scans. And you can't do that.

She said it had grown 3mm.

Right.

Did everyone agree, in the meeting?

What we do, we present you.

me ?

Or we present all the information about you. You're young, you have got a young family. You've got a whole life, the pressure is only going to build, unless we debulk this cloning apparatus.

What about the hearing.

Can you tell us about what will happen when the left can't hear at all anymore.

How people experience that. some people can think they have phantom hearing, like there is a Left, when only really there is just the Right. Even when we've taken that left away completely. That's the brain tricking itself. They're so used to hearing both sides. 'fter that feels like , dead in some way. a simulated full ness pressure. Internal swelling and then the brain realises it's not getting the signals from the left at all anymore.

A sort of depression. That's what depression is, you know. Nothing is getting through any more to or from you.

There's this rift between what you should be feeling, notwithstanding, as a member of society, and what is actually going on.

If you just have one ear, can you hear which direction things are coming from?

If a jug smashes?

On the left.

Some patients find it difficult to pick up some sounds. Whether you hear that immediately, whatever that instruction is when a jug smashes. Whatever its telling you. And it sends you round. With you because you have very good hearing in one side. If you hear that instruction. A lot of it is. Your hearing on the other side will get more acute.

So really the further that sound of the jar smashing, that side of it which you can't hear it on. It's a kind of hi-definition on the other side.

But you won't necessarily be able to, or need to make the distinction at that point, because it appears to you as the phenomena and you can only respond.

And recedes into the past, the more its effects actually are dispersed in the future. Your brain will realise it is only going to get messages from one side and adapt. As though the dispersal of hearing between two ears, is.

About the fatigue.

Your brain is having to work a lot harder. We are all working harder at the moment. The signals are being squashed between us, distorted.

Do you think once.

That might get better?

Potentially yes. We are under pressure at the moment. We're having to compensate with every aspect of our lives. Having to work harder. But some of these technologies, the same ones that really make you tired, they really have reduced the need for work,

blurred the previously fragmented edges between work and free time what was a map a coastline, the relationship between work and wages. The coming wave of automation, currently stalled because the brain is going round, it can't cope with it – will. Not just to subsist, but...

It is really bad at the moment. I hope it improves.

It can't get much worse, really. It just hits sometimes, she'll be fine and then. You're having to think and work harder, your brain is unable to rest. It's a form of contagion which is pressing on all these functions in the base of the brain in the spinal column to work harder to send its signals, to breathe and move around. There's lots of different things which are making it harder. But almost unnoticed, in the niches and hollows of the system, whole swaths of signal are beginning to move to a different rhythm. Parallel currencies, time, cooperatives and self-managed spaces have proliferated, and often as a direct result of the shattering which has taken place.

The happy jug? Or the shattering of her skull when you go in through?

There's always been these things,

perhaps. There's no link, or the happy jug and the tumour are somehow the peaks of ripples at a subquantum level. Some sort of statistical array in which that could be possible. There's no explanation. It's like global warming I, so, so diffuse and unlocal in that way you can't. People feel they've got symptoms and they feel there is something going on. The number of patients going through the g.p system with headaches migranes and no ideology behind it.

*Some people struggle
for years don't they.
I just said I had migraine,
hearing loss, and some
facial palsey, some
depression which isn't
connected.*

There isn't a metalanguage which we can speak about these things. You are the tumour speaking, and before that you are bodies within a system informed by conservative values, and we are both citizens in which the jug being broken is, so to speak of it otherwise is. There's no pathology. Information is corroding the market's

ability to form prices correctly. That is because markets are based on scarcity while information is abundant. The system's defence mechanism is to form the giant cellular clonal proliferations on the scan here – on a scale not seen in the past 200 years, yet they cannot last the pressure they apply to people's lives. It's a fragile edifice at odds with the most basic need of humanity, which is to think freely.

*And that what we call reality
is the result of a belief. That
these fictions can change.*

There is no such thing as the loss of the left. Because there will always be there, even _as_ a loss. So we don't have a language with which to talk about language. So we can't hear. So the jug can't hold anything anymore. It is still a jug. You will still be you when you come out.

But that's s

7.

Felicity says, we should fix the happy jug. She makes me show it to her, broken in its box. I tell her that I am writing a novel about the happy jug, and it has to say in the box as it is until I document it properly in its broken state. When I have written the novel, I say, then I will have the time to fix the happy jug, and also I will be able to fix the happy jug. I imagine us doing it the night of the surgery, together in the darkness, but lit up, the curtains open so the entire flat looks like a lamp on a dark shelf. Inside the lamp a man and his small children struggle near the flame to hold together the pieces of their fragmented happy.jug for long enough for the glue to set. It is unclear whether we're passing time until the phone rings with some news, or if this is why we are up so late, so deep into summer when the darkness is so rare. But I will not have finished writing the novel that night anyway because I plan to use speech from the surgery, the meetings prior to the surgery, in the performance itself.

Time, anyway, is only ever flickering in relation to fixing the happy jug. Time is always in abundance, and never in service of the fixing of the happy jug. Perhaps because the horizon at which we discover whether the happy jug can be repaired, is in fact the one which signifies the death of the happy jug, more definitively than the smashing of the happy jug into pieces could ever do.

The two teams, clustered: One, a man and his two young daughters, their happy jug in pieces on the table. The glue, like a tiny carafe of water, poised in the man's hand, each girl holding piece of the jug as its void draws into focus.

One, a retired male consultant and two female neurosurgeons, surrounding a woman whose left ear has been smashed to pieces by a drill, her brain exposed, nerves spread across a tumour so it looks like a bloodshot eye which has rolled back to dream.

8.

Okay so considering
you've got a lot of
hearing
We met again and we
decided a retrosimoid
approach
will give us a small
chance of preserving
the hearing

Thank you!

Because of the scan
it looks like it may be
stuck in places. There
is an outside chance
we may be able to give
you a tiny chance of
preserving the hearing.

Yes

The cuts are going to
look pretty much the
same. We don't want to
give you false hopes.
But we thought with
you being a mu-sician
and so on.
We had to try. Okay?
We just had to try.

Thank you
Thank you

So if you wake up
and you have some
hearing or there is
good hearing that's
a bonus.

Is there more risk

It takes longer?

Slightly, theoretically
more a more risk of
doing damage to the
facial nerve going in
through the back. But
then there's a good
chance things are going
to be stuck down. So
we have to leave some
of the void there.

That in either approach
means there is a good
chance of less risk to
the nerve on balance
of probability. So we
go through the risks
again. We have to take
it because otherwise
it's going to grow. The
risks again. otherwise
it's going to grow.
The risks are having
an infection, leakage.
through nose or ear.
hearling loss we know.
Balance problems. or
your life. On the other
hand. What's going to
happen. Everything is
going to happen.

Yes.

Okay. So. You are
young. Whatever
happens. We are here.
We are going to be here
to take you through
this. In return we just
ask you to be positive.
But we are happy we
need to crack on with
this.

Okay.

Okay so this your left
side yes?

*Yes. That's something
we've spoken about.
Once we'd worried
about everything else.
I lay there thinking.
What if they open up
the wrong side of
my head!*

Okay.

I hope you have a
nice relaxing night.
Don't worry we go to
bed at nine o clock.

Okay. Bye.

Thank you.

They're so beautiful.

*Ask them if we
can
have a picture with
them.
Ask them.*

O

*

[]

The brain is
retracted away to
expose a brain fluid
sac called the cisterna
magna
Which is opened to
drain brain fluid

9.

As you lie on the table with
your head open and your brain exposed to the
healing
intelligent hands
of Miss and Miss O

I wander about all day
wondering about
how we have opened our bodies
exposing ourselves to each others less intelligent,
more intuitively
grasping hands

letting each manipulate the nervous system of the
other until we are happy
a continuing project

This allows brain fluid
to brain away and the
brain to move away
from the acoustic
neuroma

The brain is now
retracted to expose the
acoustic

An ultrasonic surgical
dissector is used to
remove the

we entered each others lives in a completely
unrealistic kind of way
like a hand covered in soap entering a bubble

there are crows nesting in the cherry tree
the candle you bought from the cathedral is
melting its own container
a pat of butter appeared on the rug

what does it all mean what does any a great
hyperobject this anxiety
which leaves its prints in everything
you see
we have definitely entered
a moment we will never forget anyhow, either
way, any way,
composed of things that interrelate in ways that
only you would believe
I believe you even expect things like that

internal bulk of

ultrasonic

The collapsed acoustic
tumour is retracted
away from the adjacent
major vessels
and they are dissected
off the mass

but you will never be any more material than
you are now

the children are playing with my mum in the
living room

second hand toys scattered around the hall
are they like miss _ and miss _?

the rug exposed the toys an opening
can't do anything or say anything I certainly
can't award you this card now it's nothing

More dissection is
carried out around the
brain stem and the
lower cranial nerves

I am making the bed I am putting the washing
away stopping to do this
not doing anything not writing this birthday
card message
nor a poem for a play

the incoherence of this form is the incoherence
of my anxiety

A neuropattie is placed
over the facial nerve to
protect it

Next the back
wall of the ear bone is
drilled away to expose

they said that including normal life cheapened art
and now art is cheapening our normal life

and now the phone shut down and lost the earlier
portions of this poem
so I have had to reconstruct them from
perhaps they are reconstructing you now

the children asking when they can visit
I don't know what to tell them or,
as with the butter in the living room, my phone
shutting down
before the earlier portions of the poem were
saved, the candle's own casing slumping around
the flame if it matters

the huge amount of stress it is causing me to
write this poem
a huge amount of stress one undergoes when
ones wife is undergoing brain surgery

what did the candle mean, the recording of it
I am lost in a symbolic-functional maze
the pattern drawn by my anxiety on meaning

Progressively smaller
drill bits are used to
expose the back end of
the acoustic
neuroma

The tumour is gently
dissected
off the facial

your three oclock alarm went off / and then off
again even simple words aren't working now
what does it all mean
or rather what does any of it mean
and following that what can what that means
be used as a protocol to discover whatever it
all means
or keep me occupied until I am told
I imagine the elation of knowing now
as though it is the elation of receiving the
phonecall from the surgeon
that everything has gone well
searching for it in a kind of mad and not
useful way

that only way I have of expressing my love for you
the only way I have ever this
spewed, sprayed birthday card message
of expressing my love for you
it is too powerful for its own occasions
I think

but what does that mean?
I'm delirious
and just now by the sink it became clear I am also
dehydrated
as if water all we need, something to

& cochlear nerves

The tumour is
peeled off the brain
stem

The trigeminal (5th
cranial nerve which
supplies sensation to
the face is peeled of the
tumour
is very adherent stuck
to the facial nerve

The facial nerve is
being maintained as
one tubular structure
after the tumour is
removed
the nerve

pour in this cryogenics of feeling as long as is
not spilt and therefore doesn't produce any
more symbols for this poem, hyperobjects to
distort proceedings

those beautiful summer dresses blowing
I know they won't just be wearing their
summer dresses to do surgery in
our beautiful girls

god I just went into the room and felicity was
standing with a bird on one finger saying
'where's my mamma' 'where's my mamma'
it's all too much the crows in the cherry tree
the and I know its stupid and doesn't seem
like any way of coping at all

but what is it then

both and neither the 'poem as birthday card
message written when the recipient is under
anaesthetic' genre and the birthday card message
as consequences on our material bodies

I hope it relates to you the rising panic I am feeling
in this moment when everything that matters is
taking place

as percentages

that I am without you and life becomes calculative
and futile

and somehow this is romantic

an alchemy which words undergo in the furnace
of the deeply spiritual

is still transmitting
electrical impulses
shows that the nerve is
intact and stimulating
at

to avoid any minor
bleeding
A trampoline suture is
used to close the tough
outer lining of the brain

an artificial dura

An artificial bone

(cranioplasty is used to
fill the bone defect and
this is kept in place with
super glue

Finally the wound is
thoroughly washed and
closed in 3 layers to

prevent brain

fluid leak

that's it. it's gone. I'm finished. I couldn't
write forever for any longer.
I just love you and I want you to be okay.

I'm thinking about you.
I'm thinking about you, I'm thinking about
you, I'm

thinking about you
repeated over and over
with the voice, in the head, being typed.

My mum, something about the battery on
her phone.

All irrelevant.

It's happened! You're alright.
You're alright. I'm coming.

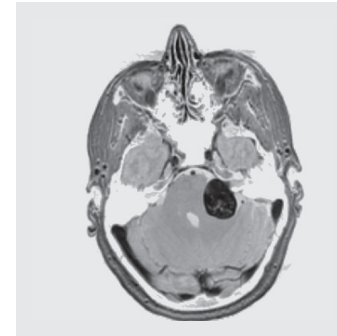
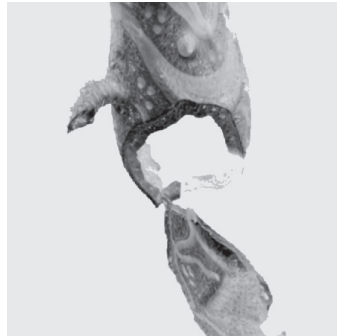
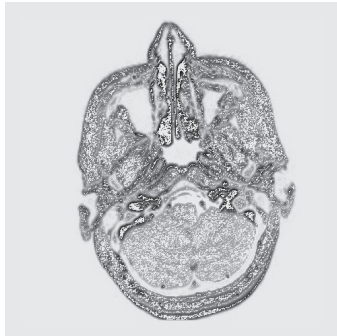
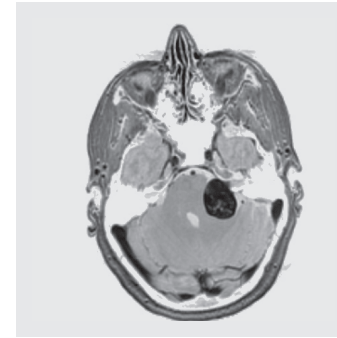
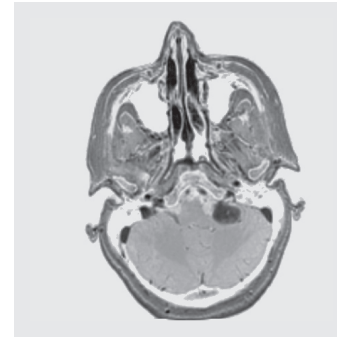
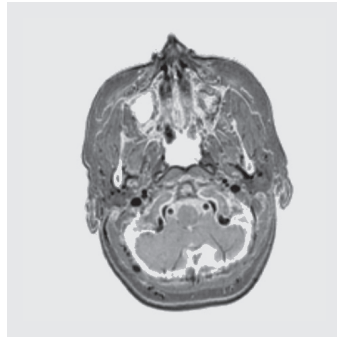
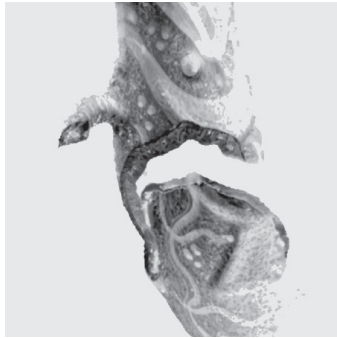
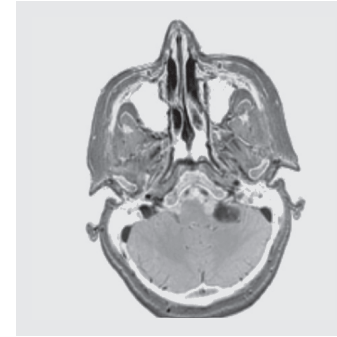
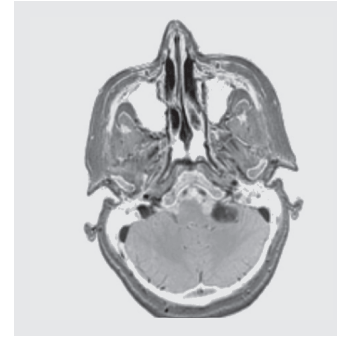
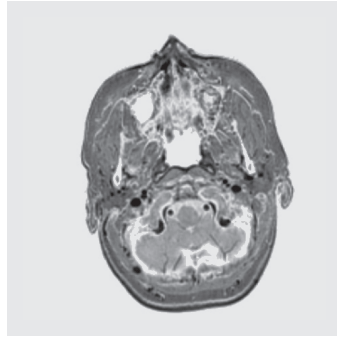
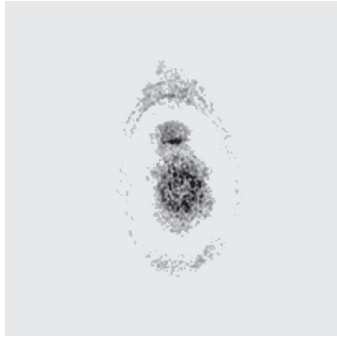
I'm coming.

You're fine

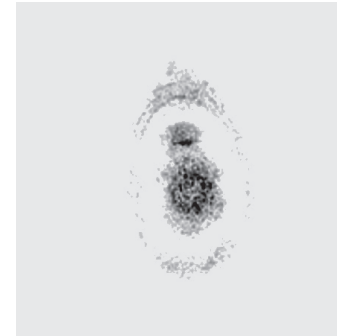
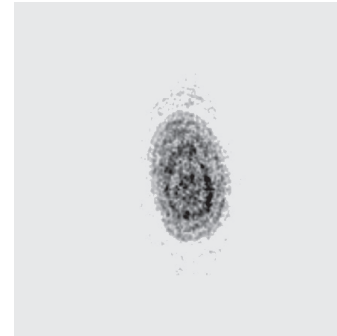
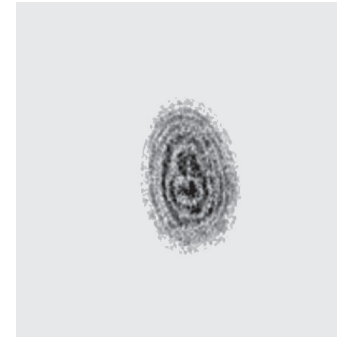
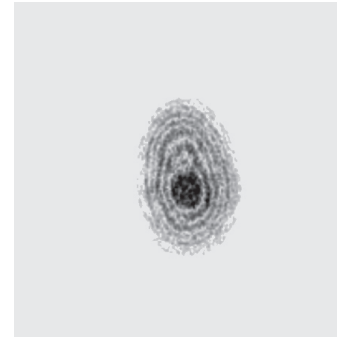
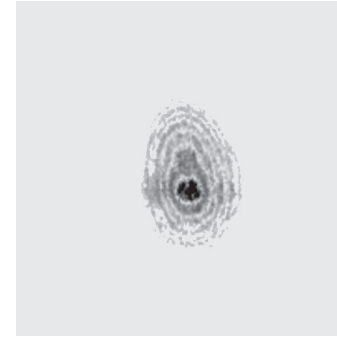
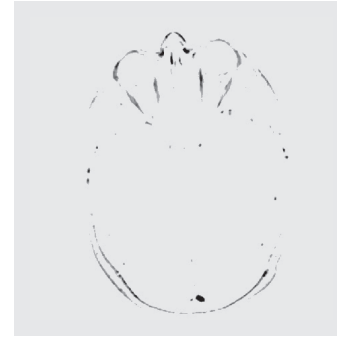
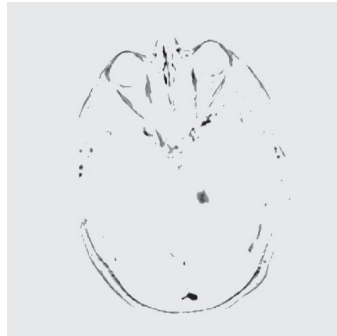
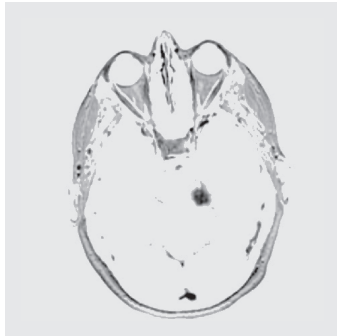
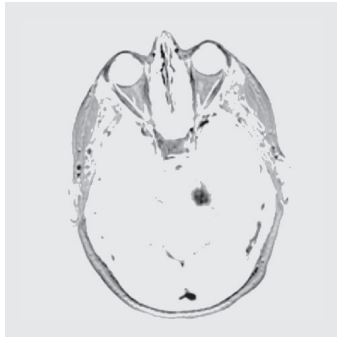
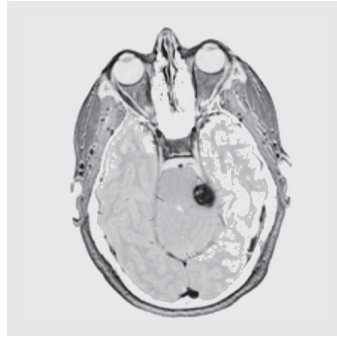
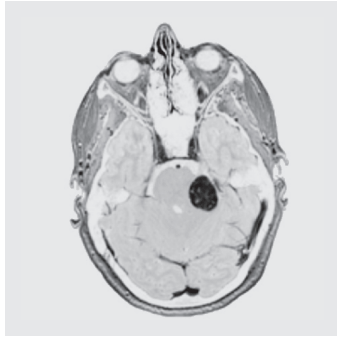
around silk and soil silk and soil silk and then soil
on top
drifting around that
and gas drifting freeeeaaaky freeeeaaaky drifting
around silk and soil silk and soil silk and then soil
on top
drifting around that
and gas soil silk and soil silk and then soil on top
drifting around that and gas drifting freeeeaaaky
freeeeaaaky drifting around silk and soil silk and soil
silk and then soil on top
drifting around that
and gas drifting freeeeaaaky freeeeaaaky drifting
around silk and soil silk and soil silk and then soil
on top
drifting around that
and gas drifting freeeeaaaky freeeeaaaky drifting
around silk and soil silk and soil silk and then soil
on top
drifting around that
and gas

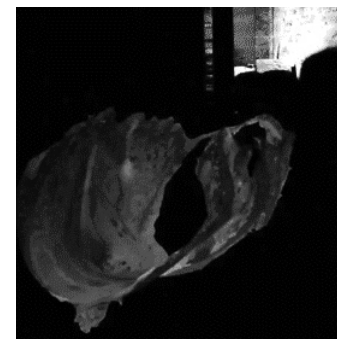
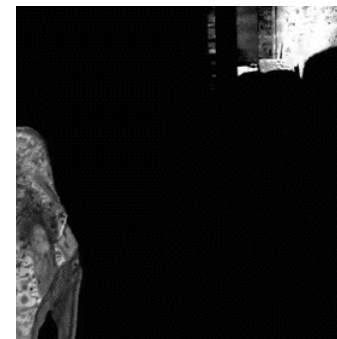
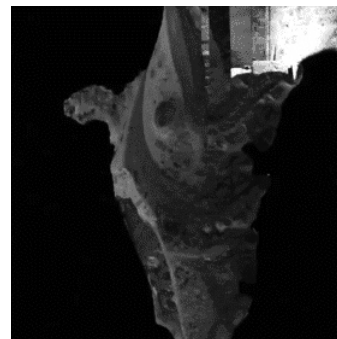
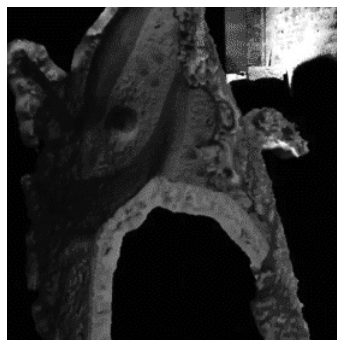
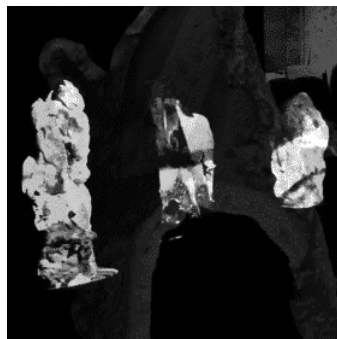
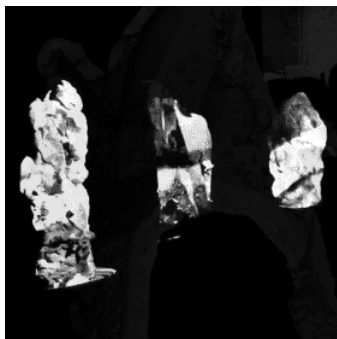
that, and gas,
drifting

drifting

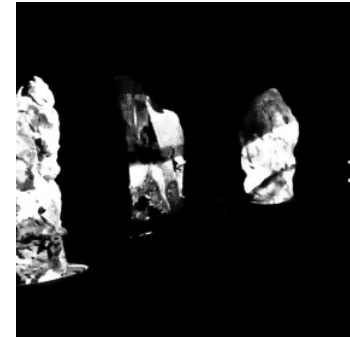
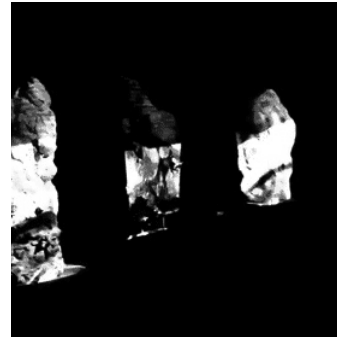
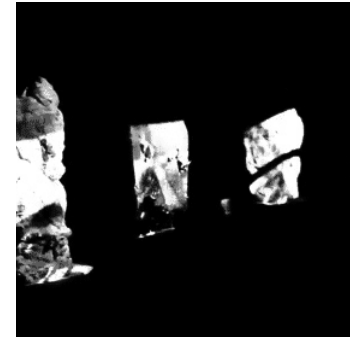
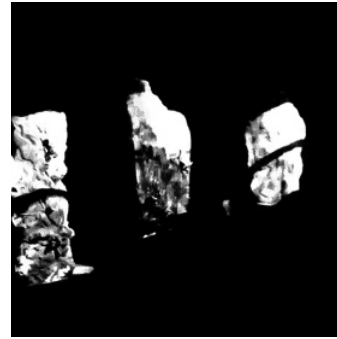
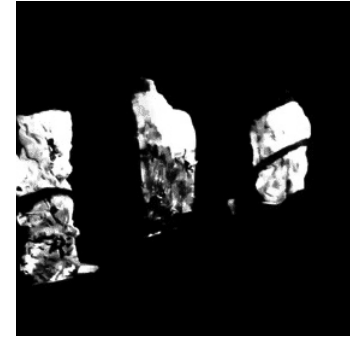
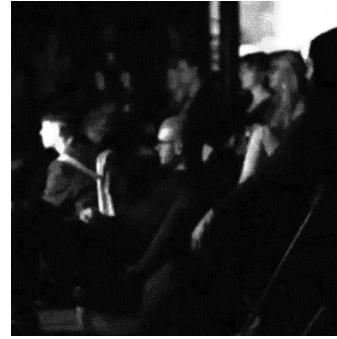
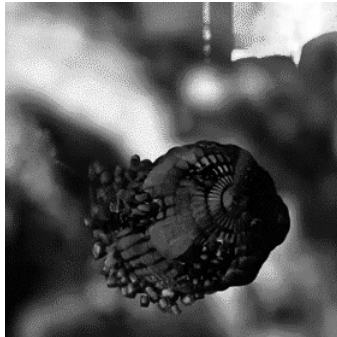
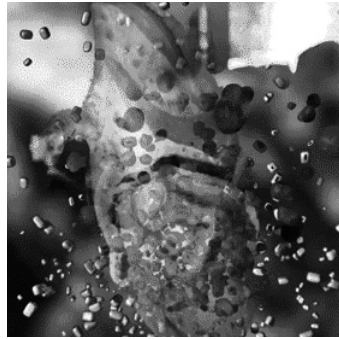
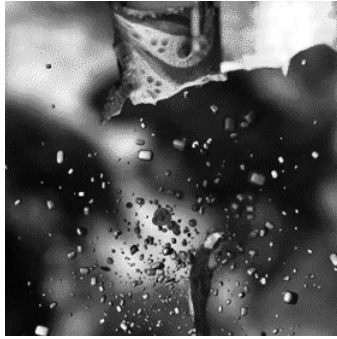


This spread and pages 74–75:
MRI scans shown with permission
of Nina Jones.





This spread and pages 78–79:
Sculpture by Madeline Hall, CGI by Chris Boyd
and projection mapping by Simon Jones.



Book Text: Nathan Jones

CD Sound: Kepla
 Script: Nathan Jones
 Voices: Nathan Jones, Nina Jones,
 Imogen Stidworthy
 Mastering: David Berger

The original version of this play was staged as part of the Syndrome arts series in 2015 in Liverpool with CGI by Chris Boyd, projection mapping by Simon Jones and sculpture by Madeline Hall. Funded by Arts Council England

Special thanks and love to Nina Jones and all staff at the NHS

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