THERE IS A TIME

by

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ABSTRACT

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This thesis consists of a creatively constructed nonfiction memoir told in eight chapters. It begins with an introductory chapter written in the present tense, in which the narrator struggles with the notions of life and death while wandering the Pere Lachaise cemetery in Paris, France. She reflects on being among hundreds of thousands who have died knowing that, very recently, she almost died herself. The chapters that follow take the reader on a journey through the narrator’s life and what led up to her near death experience. The story culminates with a return to the present, back in the cemetery, where the narrator comes to terms with the notion that her life is a gift.

This piece is an examination of the human experience through one young woman’s eyes, a look at life and death and the events that give us the will to live. The narrator explores her own diseases and observations about her own body in the context of the human experience—how we cope with disease and attempt to move past artificial ideals set for the human body, coming to a better understanding of ourselves.

(138 pages)
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Kathryn Sirls
“Death is peaceful … easy. Life is harder.”

This was the solemn outlook that Bella, the heroine made famous in the *Twilight* book and movie series, offered as she lay dying. At one time, I felt the same way. For those who have ever suffered chronic illness, there are inevitable points throughout life in which succumbing to death seems as though it may be a serene release, a welcome alternative to the arduous, and often exhausting, task of staying alive.

During the autumn of 2009, I almost died. The doctor’s voice, aloof and yet gentle at the same time, remains with me, his words floating in the back of my head as an ever-present reminder: “You would have had less than twelve hours.” Twelve hours. Had I not gone into the emergency room, allowed modern medicine to work its magic, I would not have survived the diabetic ketoacidosis that my body had surrendered to, not even for twelve hours more. My breathing would have continued to grow short and shallow, my mind would have become fuzzier to the point of incoherence, and I would have quietly slipped away into the coma that would preclude death. I was silent as the doctor explained the situation, as the nurses hooked me up to IVs and heart monitors, as my boyfriend looked on.

Most people are surprised to learn that diabetes can be deadly—so quickly, suddenly deadly—but they are even more surprised to uncover the truth that it almost killed me because I allowed it to. I willingly skipped my necessary insulin injections, knowing that at any given time my glucose levels could be dangerously high, leading me by the hand not only towards irreversible and devastating complications, but also down the road towards death. They understand even less when I try to explain that I did it to
myself, on purpose, in a desperate attempt to lose weight. For before I was ever
diagnosed with Type 1 diabetes, I was plagued with an eating disorder that made taking
my injections—so often associated with fat storage and weight gain—torturous. For six
years I struggled with the eating disorder, and for another six faced also the wrath of the
diabetes, leading me to a choice between inevitable diabetic complications or inevitable
weight gain—inevitable loss of control over my body and myself, and what felt like my
life. Lack of control over my life had been an issue since I was very young, stemming
first from my mother and then from my ex-husband, and I believe this played a pertinent
role in the development and maintenance of my eating disorder. In an attempt at
controlling my life, I controlled my body and what I ate. The diabetes, though, took away
from me even this aspect of control, dictating what I could eat and when I could eat it,
making me feel as though any type of control was firmly out of my grasp.

Having an eating disorder during the onset of the diabetes only meant that it was
fated to spiral out of control. Managing diabetes involves an obsession with food,
knowing when to eat and when to not eat, understanding “good” foods versus “bad”
foods, and denying yourself—in other words, diabetes treatment teaches the art of
disordered eating. As author Lisa Roney explains, the “obsessive measuring and
counting, the hyperawareness the lists show of fat content of foods, and the rule-laden
way of eating that completely disallows certain ingredients are all reminiscent of the
compulsive patterns of anorexia and bulimia. None of it has anything to do with what
you’re hungry for, or, in fact, whether you’re hungry at all. … Diabetics are given an
eating disorder as part of a prescription for survival.” On their own, eating disorders are
dangerous and can be fatal, as is diabetes on its own, but together they create nothing less
than a recipe for ruin, leading sufferers to abuse and damage their own bodies, breaking their inner selves sometimes beyond repair.

Perhaps death is easier. But after my close encounter, I had a decision to make, to either embrace the end of my life and accept death as a beautiful, romanticized conclusion to my story, or to assume the challenge of trying to keep myself alive. I may have opted for the former had it not been for two deciding factors: my son and my boyfriend, both of whom, in different ways, gave me the will to live. Watching my son grow up throughout 2009 and the beginning of 2010 truly brought me to the understanding that he needed me, and I him, and that even if I could not live for myself, I must for him. Along with this understanding came the knowledge that there are parts of life that are nothing less than beautiful, and worth living for. My boyfriend, Peter George (not his real name), helped bring me to this conclusion. When Peter first came into my life, he was merely a colleague, but this relationship evolved into a good friendship, and then a romance, leading to one of the most fulfilling and enlightening times in my life. He taught me what it really means to love and be loved, and through this my will to live grew stronger. Still, this was by no means a definitive answer to my dilemma, and even though I kept myself alive during these early stages of recovery, I continued to struggle daily.

During the spring of 2010, however, a folklore project that I undertook led me to do some research on my own illness. Through academic books, articles, memoirs, and medical journals, I learned more about Type 1 diabetes than I ever thought I would. Among everything I learned, I found one fact to be most fascinating, troubling … and life-changing. Even though I had known before that diabetes was life-threatening, I had
not considered the fact that, up until insulin-therapy was discovered a century ago, Type I diabetics were universally doomed. Throughout history, those who had the disease became ill and died quickly, and there was no way around it. I read accounts of people who had the dreaded “pissing illness” from various times, cultures, and areas of the world, and, without exception, they all met the same early death. Only with the very recent discovery of how diabetes works, and subsequently how to treat it, were diabetics able to prolong their lives.

This led me to the startling realization that, had I lived only a hundred years ago, I would be dead. Insulin therapy, this recent understanding about how to trick my own body into believing I produce the necessary hormones to stay alive, has given me a second chance at life, a chance that diabetics throughout history did not have. When I traveled to Europe with Peter in May of 2010, we spent quite a bit of time roaming the famed Pere Lachaise cemetery, and I was touched by the beauty and serenity of knowing places that spoke so deeply of times long since gone, of people long since passed and stories both remembered and forgotten. The site of many a person’s final resting place for over two hundred years, I found the cemetery to be large and quite peaceful. I venture to say that what I experienced there was rather different than what the average visitor experiences—most people are there to see the many famous gravesites, or simply tour Paris’ most visited cemetery. But beyond this, I experienced more. Rather than simply hearing the leaves rustling over the ground, or the wind whistling round the corners, I envisioned I could hear the dead speaking to me, envious, perhaps, that despite the fact that I should be among them, I have cheated fate and lived beyond what nature had dictated as my natural life span. That day in the cemetery, they were calling to me, and
among them was a dark angel of death, whom I refer to as Ed, my personified eating disorder, trying to pull me every day towards a fate that I have, as of yet, evaded. That day, I learned to see Ed as a force urging me on to the other side, but the fact that I have the power to defy him and control my own destiny is empowering. Knowing that I could—and, perhaps, should—be dead now has helped me realize that everything I experience now is “extra,” a privilege that I possibly should not have.

And so the question became whether or not this “extra” life was worth it if I felt horribly fat, swollen with retained water, or constantly in fear of the highs and lows of my glucose levels. Perhaps there is no easy way to answer this, no way to know for sure what quality of life really means. What I do know, however, is that I am not alone in being very close to death, not secluded in the experience of being on the brink of losing my very existence. And when people speak of those moments that were nearly their last—right before an imminent plane crash, or while held at gunpoint, silently pleading, “Please let me live”—what comes to mind is never that they want to live so that they can finish their diet, or reflect on what size they could squeeze into, or how they looked or felt at any given time. “Please let me live,” they plead, “so that I can see my lover’s face one last time. So that I can hear the laughter of my child, feel the embrace of a close friend. So that I can see one more sunset, make love again, or simply experience the beauty of art, love, and joy.” Because I have gotten to experience all of this as “extra” life, it has come to mean so much more. Every time I hear my child laugh, it was laughter I was never supposed to hear. When I lie in my lover’s arms, it is an embrace I never should have felt. When I am around those I love, reading a good book, or feeling inspired by another’s words, I am experiencing a life that should have already ended. And I’ve
found that getting to have wonderful experiences that you never should have had in the first place is, perhaps, the greatest reason to want to live.

And now, even though my two diseases are trailing after me as I continue to elude them, I have come to see everything in life a bit differently than I ever have. Everything is just a bit sweeter, even the difficult and trying times. Why is it that, when people find out they are dying, they really begin to live? When given only months or weeks left, people will travel the world, go bungee jumping, visit all those old friends and family members that they haven’t seen in years. Suddenly, money isn’t an issue, getting time off of work isn’t an issue—nothing is an issue. Living is the only issue. Having been close to death, and only alive because of very modern medicinal developments, I know what this feels like. If the insulin injection hadn’t been developed, there is so much that I wouldn’t have experienced, wouldn’t have seen, heard, tasted, felt, done, and knowing this I want to experience it all the more, and I feel fortunate to take this view of the world at this current, rather young, point in my life.

The thesis I wrote is about life, death, and everything in between that gives us the will to live, to defeat the odds, and how we learn to appreciate life. I knew for some time that I had a story to tell about two illnesses that afflicted me and nearly took my life. I eventually realized that the insight into how my story should be told was lurking somewhere deep within me, a colorful aura of emotion and catharsis constantly seeking release … but remaining just out of reach, just beyond my grasp, until the moment when the very diseases that once nearly killed me led me to an understanding about the beauty of life and its experiences, and the reality of its brevity.
Everyone has a story to tell. For a while, I thought that I was nearing the end of mine. But I saw, through the wonder of love and an existence that I might not have had, that my story is more than what was—that it is the here and now, and also what will be.

What I have written thus far is an in-depth structure of what I hope to eventually produce into a full-length memoir. After working for over a year with my major professor, Jennifer Sinor, on this topic, I was able to use new writing abilities and an ever-expanding understanding of myself to write a 137-page beginning to what will one day be my own book. Each of the chapters I have written will be expanded to further explore my past and how I came to recover from a life-threatening condition. Future drafts of the memoir will include more about my family, particularly my parents and my sister, Lisa, as well as the men who came in and out of my life. Most importantly, though, my future drafts will contain more about my son, who played such a huge role in my recovery, but didn’t receive as much time as he deserves in this draft. As I still feel much shame in writing about my early years with him—and how I almost left him without a mother—writing about him in this context has been difficult, but his character will be on the forefront by the time I finish a full-length memoir.

One of the other challenges I faced in writing a medical memoir, which I wanted to be both beautiful and poignant, was acquiring the necessary writing skills to help me move beyond the simple act of telling my story. To help my reader truly feel my story, I had to work on the art of “showing” it through the creation of scenes, sensory detail, and in-depth description. I feel like I’ve grown in this area, in creating art out of my writing, and I plan to continue working on it through the expansion of this project. Coming to a
better understanding of my own writing, and its strengths and weaknesses, has been one of the most helpful aspects of writing this piece.

In my research for this piece, I read quite a few memoirs, particularly pathographies, for guidance in how to address my own illnesses and conceptions of my body, as well as moving ways in which to write about them.

The memoirs I read for assistance in form were *Sick Girl* by Amy Silverstein and *Sweet Invisible Body* by Lisa Roney. Both of these memoirs are pathographies—Silverstein’s centers around a heart transplant, and Roney’s around my own disease, Type 1 diabetes—and the ways in which each of these women has formatted her story gave me inspiration for my own. *Sick Girl* is entirely chronological, a form that I was tentative about at first. Silverstein manages to tell her story as it happened, and in a meaningful way, and she also incorporates discussion about her underlying themes of what it means to be a “sick girl” in contemporary society. *Sweet Invisible Body* is also, in a way, chronological, but after moving through her childhood, Roney is able to move away from this form to organize her chapters around theme. I always felt like I was moving through Roney’s life in a chronological way, but realized by the end that she had a specific focus for each of her chapters: experiencing love as a diabetic, trying to get a higher education as a diabetic, maintaining a “normal” social life as a diabetic, etc. I wanted to write my own memoir chronologically, but still tell it in complex ways and focus on underlying themes, and both Silverstein and Roney gave me great inspiration for this.

The memoirs I read for assistance in how to approach chronic illness and writing about the tough issues in my life were *Hungry* by Crystal Renn and *What Her Body Thought* by Susan Griffin. *Hungry* is a memoir about a young girl who lost 70 pounds in
order to become a model, dropping to 95 pounds in a 5’9” frame (and developing an eating disorder in the process), but was able to turn her life around and learn how to love herself and her body at whatever weight was comfortable. Now, at 160 pounds and a size 12, she’s the most successful plus-size model in America. In her memoir, Renn approaches her eating disorder bravely, writing about it openly but still with enough reservation that the reader is not overwhelmed. I struggled with writing about my own disorder (and the shame involved with its various aspects), and so Renn’s writing style helped me think about ways in which to approach my own topic, in order to present it in an honest and yet beautiful and memorable way. Another aspect that Renn inspired me in was how she approached the topic of her recovery. I was worried about how to write about recovery without seeming either preachy or creating an unrealistic, overly happy ending. Renn’s sincere account of what recovery meant to her, and how she did it, was as beautiful as her account of the eating disorder itself, and it encouraged me in writing about my own recovery story.

*What Her Body Thought* by Susan Griffin touches on a very difficult aspect of disease: how our perceptions of our diseases, and ourselves, are greatly influenced by society. Griffin writes about how others’ responses to an illness can influence the outcome to very large extents, and can either wholly aid or wholly hinder recovery. How to approach societal stigmatizations about illness in a memoir has been a difficult question for me, as others’ judgments and reactions to my own illnesses is still a sensitive subject. I worried about the ways in which I approach this issue, not wanting to create enemy characters out of people and not wanting to be overly emotional about it (as is sometimes the case when we don’t fully remove ourselves from our material). Reading
Susan Griffin’s memoir helped center me on this issue, though, and I look to her work for ways in which to approach the issue of illness and society.

And, finally, the memoir I read for assistance in genre creativity was *Lying* by Lauren Slater. *Lying* helped me understand ways in which to “bend” the genre, pushing on the definition of creative nonfiction, using fictional elements to get at a greater truth. Throughout the entirety of this memoir, Slater presents herself as an unreliable narrator—the audience is never really sure if she has epilepsy, if it’s something else entirely, or if she’s even sick at all. She leaves readers wondering if anything in the memoir is “true,” and while I never wanted to present myself as unreliable, I did want to play with the notions of “truth” and “untruth” to help my readers further understand the nature of illnesses such as anorexia and bulimia. There are parts of the memoir that aren’t based in reality (such as when the dead in the Pere Lachaise cemetery are “talking” to me), but are more metaphorical, “magical realism” if you will, and I’d like to be able to do that and still maintain credibility as a writer and a narrator. *Lying* has been a great starting point for me in realizing how this can be done.

I also incorporated academic books on diabetes and eating disorders, as a medical understanding of these diseases is crucial to understanding the experiences of them. I coupled the information I gathered from these books with my own experiences, to truly highlight what diabetes, eating disorders, and “dia-bulimia” is like.
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My steps reverberate in hollow echoes over ancient earth. The paved trails, rocky and uneven, wind like living veins around the crumbling tombs and mausoleums, jabbing my feet with every step. These paths I walk over are untended, possibly more abandoned than the gravesites that have been long since forgotten by the hands that promised to remember and care for them. Above me, algae-green leaves decorate trees large and brooding enough to tell tales of long ago. Beside me, a crow perches on top of a tall tombstone, not intimidated enough by my presence to fly away as I draw ever closer. And beneath me, the hundreds of human bodies, no longer active in the world, take part in endless slumber.

I only wanted to visit the Pere Lachaise cemetery to see Jim Morrison’s grave, but since arriving I have discovered that I’m fascinated, taken in by so many others buried here. Oscar Wilde, for instance. I am captivated by the stillness here, the ominous atmosphere that promises me the same solitude one day. I am chilled, and yet mesmerized, by the way the wind whispers in this place, how the air itself seems to speak for those who no longer can. So I can do nothing but breathe deeply, walk slowly from tomb to tomb, and focus on each faceless name my steps trod over.

My boyfriend, on the other hand, has brought with him a list longer than the lunch menu at the little Parisian café across the street from our hotel, of famous writers, philosophers, and historians that have posthumously assisted in molding him into the
studious academic he has become, people now resting eternally beneath his feet. He’s a French historian from Britain, and so a famous cemetery right in the middle of Paris is like a candy store for his inner child. While Peter saunters excitedly from tomb to tomb, I lag somewhat behind. I’m taking in the full extent of the peace, the calm that only the dead can provide.

And there are a lot of the dead here at Pere Lachaise. I’ve seen large cemeteries before, but never a cemetery quite so large as this one. Over the past few hundred years, over 800,000 people have been buried here. I had imagined a quick, leisurely stroll past some famous grave sites, but this “quick” visit has turned into hours of wandering for Peter and me. Had it not been for the list he made, and the map I bought, we would undoubtedly be lost. We’ve actually already been lost a few times, despite the map.

But I’ve come to acknowledge that maybe our approach to the place has been flawed. I find myself looking for the biggest graves, the ones that are marked up and decorated with extreme colors and adornments, thinking that these will be the ones we’re looking for. But most of the time they’re not. The extravagant tombs tend to carry names I don’t recognize, while many of the renowned people who are buried here rest beneath stones that are small, plain. Unkempt.

In this way, the dead speak to me. Don’t forget us, the unknown names say, pleading to be remembered even though I never knew their stories. Never will. I try not to sound too pitying as I do my best to pass along a mental message to these people that, despite their decorations, despite the rich and vibrant adornments draping their tombs, by and large they’ve already been long forgotten.

I tell myself to be nice, that I’m not being fair.
“No, it’s not fair,” I hear back, hazy inner thoughts taking the form of words within my mind. Somehow, these words are my own, and yet in a way they are not. These words come to me as though the wind has carried them to me from places far beyond where I stand.

I slow down. Stop.

A light breeze has picked up through the warm Parisian air, rustling blades of grass and sending leaves on a far-off journey away from their parent trees. For the first time that morning, I feel a chill standing in the middle of that cemetery.

My mind begins to form an image: a few pairs of eyes opening ever so slightly, some six feet beneath where I’m standing, in order to turn a bit in their own graves and glower up at me. “Don’t overestimate what your grave would look like,” they say. The voices of so many: Moliere, Chopin, Delacroix. Sarah Bernhardt and Gertrude Stein. “Or if you would be remembered.”

Giving in to the chill, my body shudders. Suddenly, the breeze around me seems much colder.

I look around for Peter and spot him a few yards away, up the hill a bit and winding his way through a set of crumbling tombstones so old that the inscriptions on them are no longer visible. I’m not sure if he’s looking for something in particular, or if he’s enjoying the anonymity of those graves.

I hurry to catch up.

“Don’t run too far,” the distance calls. I follow Peter’s tracks, trying to rid myself of the feeling that I’m being watched. I can’t shake the presence behind me, though, the phantom words in the back of my mind exclaiming, “You shouldn’t be up there at all.”
I stop to close my eyes, inadvertently allowing the distance between Peter and me
to grow again. I don’t know if I’ve stopped because of the unnerving call of the dead, or
because I’ve begun to feel the signs of impending hyperglycemia, which is odd because
my diabetes has been under tight control, such wonderful control, since we arrived in
France a few days ago. But I can’t mistake the dull heaviness in my head, the fatigue
beginning to set in, the way my vision has become slightly blurry. I know, without even
pulling out my glucose meter, that I probably miscalculated something over breakfast,
and my blood sugar level is now higher than it should be.

In a few minutes, once I catch up with Peter and fetch my meter from his bag, I’ll
slip a small testing strip into the machine and force a needle into one of my calloused
fingers, drawing blood that will be sucked up into the edge of the strip. Then, depending
on what the meter reads, I will reach into my purse and measure out a dose of insulin in
my medication pen and give myself a shot. Slowly, the insulin will weave through my
body, which will then be tricked into thinking that it produces the necessary hormones it
needs to survive. The amount of sugar in my blood will lower, and life will go on.

A quick test, a quick shot. Simple. Done.

But for now, right now, I watch Peter in the distance and allow my mind to
wander again. I think about what would happen if I didn’t take that shot. The thoughts
that overwhelm me every time I close my hand around my insulin pen, every time I slide
the needle beneath my skin, permeate my mind. As much as I loathe thinking about these
things so constantly, they serve as a reminder to me why I must take my shot, why I must
not give in to the pressure not to. If I didn’t, I remind myself, I would grow ill.
The heaviness in my head would develop into a murky veil over my brain, slowing my mind until I couldn’t think clearly. The following day, the fatigue would become lethargy so intense that walking would become difficult. I would be hit with unquenchable thirst, resulting in frequent urination as I tried to relieve it. As more time passed, my breathing would slow until I was desperately gasping for each lungful of air, and my heartbeat would weaken until it was merely a dull thump echoing throughout my once-cognizant brain. In a matter of days, I would be able to feel my own body dying, giving out on me, so that I would become afraid to even close my eyes and sleep, for I wouldn’t be entirely sure that I would ever wake up again.

I know about this. I’ve been there.

I unintentionally drop my hand into my purse until it closes over the insulin pen resting inside. It’s there, waiting for me whenever I need it. My magic wand, able to keep me alive and part of this world even though my body no longer can.

“Kate!” Peter’s voice calls me out of my reverie, closer than I thought he’d been.

“I think I found it.”

I look over to see that he’s discovered the grave that he, along with a few other tourists, has been searching for. He’s taking out his camera for a quick picture. I know he won’t want to be in it—he just wants a photo of the grave. With one last look at the faceless crypt to my right, I run to catch up.

The tomb that has been discovered is that of Jules Michelet. He was one of the most important French historians of the nineteenth century before he became a resident of Pere Lachaise, and Peter is in awe. He has taken some photographs of the tomb, and translates the moving inscription for me:
QUE DIEU RECOIVE MON AME
RECONNAISSANTE
DE TANT DE BIEN
ET DE TANT D’ANNEES LABORIEUSES
DE TANT D’AMITIES

“May God welcome my soul, grateful for so much happiness and so many hard-working years, for so many friendships.”

This is what Michelet speaks to Peter from beyond the grave. The defining character on this monument is a triumphant figure—a spirit, perhaps, or an angel—reaching up to heaven as it floats over the concrete corpse of Michelet. Celebrate this life well lived, it seems to say. He is at peace now. This is what I imagine Peter hears posthumously from the historian.

But for me, Michelet speaks from somewhere else, from a deeper place beneath the ground where his stone angel does not descend. “Pensez-vous que vous méritez votre vie actuelle?” he asks in a low voice. “Do you think you deserve your present life?”

I can’t decide if Michelet’s tone is inquisitive or accusing. The voice’s nature is kind and quiet, but tinged with something … cold. Suspicion, perhaps? Or is it resentment? “You should not be up there, among the living”

“Who’s next on the list?” I ask Peter, craning my head to get a better look at the map he is holding. For reasons I cannot say to Peter, I no longer wish to be in Michelet’s presence. Peter, though, is still looking at the monument, saying something about it though I confess I’m not listening. I’m sure he’ll relay his admiration for Michelet and the experience of visiting his gravesite again later, perhaps over lunch.

I point to a place on the map. “It looks like Balzac is pretty close,” I say. “Want to go see him? Then there’s Proust, too, and Oscar Wilde after that.”
“Ils vous diront la même chose. Vous savez que vous ne font pas partie.” Michelet reaches out to me again from beyond … or below … somewhere that’s not here. “They will tell you the same thing. You know you don’t belong.”

I look down at my feet. I know, uncomfortably, that there are many reasons why I don’t belong at the moment. For one, I am in Paris and I’m not French—I don’t even speak French. I have been dragging Peter through all of the old, giant cathedrals, even though I’m not Catholic and can’t begin to place why I enjoy them so much. And I’m standing in the middle of a cemetery, one of a few living people among 800,000 dead. But perhaps that is entirely the problem.

I recall a movie I watched years ago called Final Destination. In this film, a group of people step off of an airplane bound for France after one of them has a disturbing vision. The plane takes off without them but explodes shortly thereafter. The premise is that the group of people who got off were supposed to be on that plane—in the grand “plan,” the ultimate script written out by God, the universe, or who knows what else, those people were supposed to die. But they did not. And since they no longer had a real, viable place among the living, Death had to seek each of them out throughout the rest of the film, constantly on their heels, trying to move them to the place that they so cleverly avoided but must ultimately go.

As Michelet’s words repeat in my head, I realize it’s no longer just Michelet calling out to me. “You don’t belong.” I hear it from all around me. The woman to my right who died during childbirth, the old man up the hill whose mausoleum was broken into by teenagers in the 1960’s, the writer behind me whose work was brilliant but never known … they all cry out to me. “You don’t belong.”
“I do belong,” I murmur quietly. There was a time I almost died. Granted. And I know that, only a century ago, I most certainly would be dead, a doomed diabetic.

My disease is one that has been documented fearfully for over two thousand years. For ancient civilizations, it was like the plague, coming on suddenly and killing swiftly. A formidable foe, ancient physicians were powerless to stop it. In the first century C.E., the Greek physician Aretaeus wrote that, for diabetics, “life lasts only for a time, but not very long.” The symptoms were easily recognizable, and throughout time the illness came to be known as the dreaded “pissing disease.”

I recall what author Michael Bliss wrote about the final days of early diabetics. It was at time when, he said, “food and drink no longer mattered, often could not be taken. A restless drowsiness settled into semi-consciousness. As the lungs heaved desperately to expel carbonic acid, the dying diabetic took huge gasps of air to try to increase his capacity. ‘Air hunger,’ the doctors called it, and the whole process was sometimes described as ‘internal suffocation.’ … At that point the family could make arrangements with the undertaker, for within a few hours death would end the suffering.”

But modern medicine saved me, continues to save every Type 1 diabetic in the world. And modern medicine, I insist (to myself, to the dead all around me), is nothing like people getting off a plane because of a vision.

Peter and I continue on, seeking out Balzac, but the spirits around me are not convinced. As I walk, I try to convince them—and, ultimately, myself—that I do have a place and that it is not beneath the ground.
CHAPTER 2

WHAT LITTLE GIRLS ARE MADE OF

My story began with a photograph.

A quick snapshot of my day-old face, pasted unceremoniously onto the first page of my baby book, marked the beginning of my life as a day I would never remember and yet could always revisit. To return to years already spent, I’ve always turned to pictures—three-by-five inch windows into my past. They reflect good moments, and moments only disguised as good; smiles both genuine and artificial.

It’s the honestly trying and haunting times that are rarely documented in albums. The camera seldom captures warm streams running down faces, leaving it up to the observant eye to catch a glimpse of crushed souls behind masks of contentment. The most haunting aspects of my own life, though, could probably be summed up within two photographs: taken twenty years apart, both feature a young woman, very slim, white teeth showing inside a forced smile. A first, fleeting glance would reveal that the two faces, both framed by long, straight brown hair, are so similar that they might pass for the same person.

But only one of these pictures features me. The other only looks like me, very much like me. How deep that resemblance might permeate, though, troubles me. Do we only resemble each other on the surface, or does there lie a deeper likeness, down past my exterior and into my core?

During my earliest years, I knew my mom as nothing short of a kind, gentle woman who devoted her life to her family. As children do, I saw nothing but her
endearing qualities, the beauty that I never expected to fade away as quickly as it did. My mother was a gorgeous young woman—hair only a few shades lighter than my own fell down her back, over clear shoulders and slender arms. I remember protective hugs, comforting glasses of chocolate milk before bed, the sweet smell of Calvin Klein’s Obsession on her soft sweaters.

My oldest memories of her are pleasant ones … save for my earliest memory of her, that is, which may be a clearer glimpse into the tortured woman she really was. A very young child of two, maybe three, years old, I remember my mother in hysterics.

From where I stood, in the doorway between the kitchen and the living room, Mom was leaning over the kitchen sink and sobbing into the dirty plates and dishes. Every few seconds she would scream, her shrill voice ringing through the entire house, though I can’t recall what she was saying. With nothing to do with my hands, I played with my dark brown ponytails, held in place by smiley sunshine barrettes, and shuffled my feet as I watched my mom cry wildly.

My older sisters were sobbing, too. They may have been dressed alike, or perhaps similarly, with Erin in blue and Lisa in pink, blond hair in identical braids, their red eyes crying identical tears. Their nine-year-old voices, in a task far beyond their young years, spoke to Mom, begging her to stop crying.

I grew startled and started to understand, really understand, that things were not at all okay when she plucked a glass out of the sink—I remember it being a champagne glass, but it could have been an ordinary drinking glass or a coffee mug—and threw it violently against the kitchen window. She shrieked as she threw it, the sound of her high-pitched hyena cry merging with the explosion of glass on glass as the goblet met the
window head-on. The shatter was ear splitting, and the torrent of broken shards that rained onto the sink and floor life altering. My fingers remained in my hair, sticky from perhaps a sucker or a cup of juice. I cried, a red-faced child’s cry, my mouth open to emit wailing for all to hear.

Just behind me in the living room, an 80’s sitcom glowed off the TV. The echo of canned laughter made me cry harder, and I thought, how can anyone laugh right now? When I turned my attention back to the scene in the kitchen, Mom had her hands up, trying to send a mental image to Erin and Lisa to go away, leave her alone.

“I am going to go,” she said quietly, dramatically, “and talk to my mother.”

“No!” Erin and Lisa cried out in unison. They reached up to pull on her, perhaps trying to hug her, but she didn’t want to touch them back. So they screamed at, called out for, pleaded with, and reached to a statue standing in the middle of the kitchen.

I didn’t understand what this meant. It would be years before I was fully aware that my mom’s mother, my grandmother Marlene, had died years before I was born.

But, despite how this scene could have played out, Mom didn’t do anything more dramatic that afternoon than display more emotion than she could handle and shatter a glass against the kitchen window. In the end, while my sisters pleaded with her not to kill herself, Mom walked briskly over to where I stood and picked me up.

“No,” she murmured, walking with me down the hall, leaving Erin and Lisa where they stood, “I could never leave you.”

Though this incident scared me, it didn’t tarnish the mental image I held of her growing up. When I was a child I rarely saw such strong emotion from her, save for a few times when she fought with my dad, or when she was going through the arduous process
of trying to quit smoking. But even though I ignored, and often didn’t understand, the unrest happening behind her forced smiles and often lifeless eyes, I did recognize her discontent through her preoccupation with female perfection.

Even though she never explicitly told me, she often showed me that a woman’s most important attribute was physical appearance. She regularly dyed her hair long before it ever went gray, she experimented with this haircut and that perm, and at one point even began waxing invisible fur from her upper lip. Anything to be beautiful, to achieve beauty, to maintain beauty, it seemed. The most important thing about being a beautiful woman, though, above hair and makeup and hairless upper lips, was being thin.

I don’t remember a time when Mom wasn’t dieting. “I’m being so bad,” she would say while eating a piece of cheesecake, or, while raving about the merits of the Weight Watchers program, “It allows me to have a dessert if I want it—it may be all I get for that whole day, but I can have it!” She would laugh after making comments like these, often with other female relatives or girlfriends who were also on diets. They laughed and joked about the idea that food was something you deserved, or earned.

For a while, I didn’t understand what she meant. When I was “bad,” it was usually because I had failed to clean my room, used foul language, or lied about something. Why she thought she was bad for having a snack was beyond me. Would she be grounded for it, or, worse, would I ever be in trouble for having a snack?

She repeatedly made plans to swim laps in our swimming pool to help the process of sculpting her own body, and I would watch from the glass window as she slowly moved her body through the water. She never spent as much time in the pool as she planned, though, choosing instead to spend hours bronzing beneath the sun. When I
I often felt confused. Why didn’t she swim for fun, like I did, and why did she think tanning her skin was so important?

My own fair, freckled skin didn’t tan. Even as a very young child, I tried slathering on oils and creams and lying in the sun just like my mom did, but never wound up brown. I’d usually wind up tickled pink or, after long days in the sun, lobster red. When I was very young, I took this as a sign that I was beautiful, like Snow White. But the more I saw, at seven years old, my mother tirelessly work to tan herself, I second guessed those initial thoughts. Watching my older sisters grow into beautiful young women, their slender, olive-toned bodies matching nicely with their blond curls, caused me to abandon altogether the notion that dark hair and pale skin could be beautiful. In fact, I began to notice that many of the women I saw on TV and in movies, the ones who were considered pretty, tended to have blond hair and tans. All of my favorite “super girls,” such as Rainbow Brite and She-Ra, certainly seemed to.

“I’ll never be a star!” I bemoaned to my friends Shirlee and Kathy, who have recounted such moments to me. I cried, “I’ll never be a star because I don’t have blond hair!”

In childlike innocence, I perceived my dreams of stages and stardom, glitzy costumes and beauty, to be shattered early on because I was blond-deficient. I lamented the fact that I was not born into this club.

Still, even though my skin stubbornly remained white or pink and my parents refused to let me bleach my hair, I grew to learn about other ways you could manipulate your body in order to be beautiful. Makeup, for example, painted perfection, and
exercise, such as my mom’s laps across the pool, supposedly melted away unwanted fat—acquired, I assumed, through those eating moments deemed as “bad.”

When I was a bit older, about seven years old, Mom brought home her first exercise video. “I’ve heard this guy is so much better than Jane Fonda,” she announced as she popped the tape into the VCR.

I didn’t know who Jane Fonda was, but I figured Mom’s words were directed at Erin and Lisa, sitting on the couch, not me. I had been in the midst of watching Honey I Shrunk the Kids, and all I cared about was whether or not she’d be finished with the TV in time for me to finish it before bedtime.

As my mother stood in the middle of our retro, orange shag carpet, lifting her legs and swinging her arms in time with Richard Simmons’ movements, I watched in curiosity. I knew her goal: to become thinner. But would mimicking the image of a scantily-clad man bouncing across the TV to gratingly annoying oldies tunes really help her shed what she perceived to be excess weight? Through narrowed eyes, I watched suspiciously.

“How long is this?” I finally asked, lying across the living room in a half-assed attempt at getting in my mom’s way. I cupped my chin in my hand and looked up at her bouncing body expectantly.

“How?” Mom was already huffing and puffing, reaching knees up to elbows. “Would you get out of the way?”

“I don’t know.”
“It’s an entire workout,” Erin offered from where she was on the couch. “You might as well find something else to do.”

“You could … do the … workout with me,” Mom rasped out in between short breaths. “Might be … fun.”

“Fun?” I made a face even though I knew she didn’t see it since her eyes were glued to Richard.

Even though I opted out, Erin and Lisa decided that participating might be a good idea, and before I knew it my sisters’ skinny fourteen-year-old bodies had joined my mom’s in the middle of the living room. Forced from my place on the floor, I moved carefully into my dad’s easy chair.

I hadn’t minded (too much) that Mom had decided to do an exercise video, but when my sisters joined in I felt a strange dichotomy form. All of the older females in the household—Mom, Erin, and Lisa—were now working out, and that left me and my younger sister, five-year-old Holly, as the ones sitting out. I felt like I needed to join a camp: the exercise camp, or the really-really-really-little-kids-camp.

I eventually did join in, though it took me a few months. Once I started, I didn’t stop. I turned those videos on even when my mom and sisters weren’t doing them. The first time I made it all the way through by myself, at age nine, I promised myself that I’d make it worth it by consuming only water for the rest of the day. To help me keep my promise, I cut pictures of gymnasts and Tracy Gold out of magazines and taped them to the refrigerator. They acted as helpful reminders, next to the magnet that commanded, *Stop! Think of Your Waist!*
These constant reminders weren’t always necessary, though, as Mom sometimes took the initiative to put us all on diets. The first time this happened, she sent my dad out to buy candy bars for us girls. “Enjoy them,” she told us, arms crossed, that evening. “You won’t be having another one for a long time.”

I didn’t often take her seriously in her threat to eliminate junk food from my diet, and I don’t think my sisters did, either. But while Erin maintained maximum aloofness, never seeming to put too much effort into her beautiful figure, and Holly continued to eat sugary cereals and snacks as though my mom had never even threatened to take them away, Lisa started to respond a bit differently. By the time she reached her early teens, she didn’t need my mom’s orders to restrict her diet.

I watched my sister fade away.

Lisa had always been a bit smaller than Erin. Although otherwise identical, Erin always maintained a fuller figure than Lisa did (which isn’t to say that Erin was by any means fat—she, too, was on the thin side of “normal”). This subtle difference in their body types, though—thin and thinner—was accentuated when they were fourteen. At this point, Lisa went from being somewhat thinner to noticeably thinner, and, finally, excruciatingly skinny.

For my part, she was still just Lisa, my sister, who happened to be shrinking and, over the course of the next few years, having strange mood swings and even stranger eating habits. At this point, I didn’t even know what an eating disorder was, let alone how to spot one, and so I took it for granted that Lisa was just fine, save for some “normal” high school traumas and a wildly swinging temper. And super skinniness.
But if I saw that Lisa was growing very, very thin, it certainly didn’t alarm me. I remember feeling, if anything, slightly envious that she was living up to this difficult expectation while I was still dealing with childhood chubbiness, however mild it might have been, and a body that wanted to transform from “girl” to “woman” far earlier than I wanted it to.

What I did find strange, though, was Lisa’s obsession with food. She had a preoccupation with certain foods, including Diet Coke (she even labeled herself as addicted to the stuff). She liked Junior Mints candies, too, soft baked cookies, and certain soups and broths (but only if she stood over the boiling pot for long periods of time, skimming the surface with a spoon). These foods belonged to her—no one else in the house could touch them—and she, herself, wouldn’t touch anything else.

She also cooked odd, fat-free chocolate waffles quite often. To be honest, though, I liked these—I remember Erin complaining on more than one occasion about the horrible nature of these waffles, but I enjoyed them. What I don’t remember is whether or not I actually liked how they tasted, or if it was just the time with Lisa that I liked. She’d make me a special waffle, happy, it seemed, that someone else wanted to partake of them with her, and then we’d eat them together. I didn’t realize at the time just how special it was that she was willing to eat with me at all.

I wasn’t aware that she was throwing up on a regular basis, or privy to the contention this caused in the family, until I was nine. It was one of Mom’s taco salad nights, certainly not my favorite, and I entertained the idea of asking Dad to sneak out for hot dogs or happy meals once he got home.
I didn’t have a chance to do any conspiring, though. As soon as he arrived through the front door, he came face to face with my angry mother. She was in the kitchen, slamming dishes around while trying to clean up. This was the kind of thing she did to show she was angry—rarely did she come out and say she was upset. Rather, she liked to show it by being destructive in some way. I peered cautiously around the corner.

Her hard, brown eyes met my dad’s. Her voice flat and icy, she spoke a single word: “Lisa.”

The tension in the kitchen instantly went up a notch. “Is she throwing up again?”

Mom’s expression told Dad all he needed to know. Lisa obviously was throwing up, and apparently my parents weren’t too happy about it. Now that both Mom and Dad showed signs of being upset, I decided to slink back into the living room where I wouldn’t be discovered snooping.

But, like any good nine-year-old, my curiosity eventually got the better of me. Once I sensed that the kitchen was empty, I tiptoed inside. I could hear my parents’ muffled voices arguing over in the dining room, and though I moved closer to the door to try and make out their exact words, I couldn’t. The further I ventured into the kitchen, though, I sensed another sound: sniffling, perhaps, or a ragged kind of inhaling. It came from the master bedroom, also off the kitchen, and so I rounded the corner and looked inside.

Lisa was lying on the bed, her skeletal sixteen-year-old frame curled up in a fetal position, tear streaks lining her face. She didn’t notice me there—she didn’t have time, I suppose, for a moment later she was up, on her feet, making her way to the master bathroom. She didn’t even bother to close the door. I could hear the sounds of her
retching, and I wondered if I should interrupt the Mom vs. Dad quarrel happening in the other room, just in case she really was sick.

I backed up slowly into the empty kitchen. I decided that I didn’t want to be caught anywhere near the vicinity of either the dining room or the bedroom, by either my parents or by Lisa. I should have been watching cartoons or doing homework or playing with my toys. Despite this, however, I couldn’t quite bring myself to do any of those things. I stood in the middle of the kitchen, unable to fully remove myself from the various crises happening around me.

I only learned the truth behind Lisa’s ailment later that year when Mom and Dad sent her away. I don’t even remember getting to say good-bye. And I didn’t know when I would see her again.

“Lisa’s going to live with Birdie and Mama June for a while,” Mom said, trying to explain the situation to Holly and me, speaking of her aunt and grandmother. “Birdie thinks she might be able to help Lisa. And it might be a better environment over there for her to get better.”

I didn’t know what to say, other than what mattered most to me: “When is she coming home?”

“When she’s better,” Mom insisted. Then she added, as if to justify her words, “It’ll be better for everyone.”

I trusted Mom on this, and I didn’t question her. I wasn’t yet ten years old—I didn’t fully understand what was going on, what was happening.

As the years went by, though, I often asked myself who was benefiting from the situation. Lisa? Did she really have a better opportunity to get better knowing she wasn’t
wanted at home? My parents? Did they really believe that Lisa was better off eight hours away, where she would rarely see her family?

These questions haunted me throughout the years.

Shortly after Lisa left home, my childhood friend, Elaine, rolled her eyes when I told her that my sister would be coming home when she was better.

“She’s never coming back,” she informed me.

“Yes she is,” I responded defensively. Mom had promised she would, after all.

Lisa never did move back home. After she left, though, Mom attempted to keep any of us other girls from walking the same path, and the word “fat” became synonymous with swearing. Her own example, though, still included afternoons with Richard Simmons and meals prepared by Weight Watchers.

And even though Mom started telling her daughters to *not* diet, I fantasized more than ever about losing weight. I wanted to be the thinnest girl in my classrooms, the thinnest girl on the playground, the thinnest girl in my gymnastics class. I imagined winning awards for it, having a little plaque that said: KATIE BARKER: THINNEST GIRL IN ARCADIA, or, better yet, THINNEST GIRL IN CALIFORNIA.

While Mom dieted and told me not to, I tried to exercise behind her back. I tried to cut meals and throw food away when she wasn’t looking. For a while, we played a control game—for everything my mom tried to make me do or not do, I attempted to sneak around and defy.

Mom exerted control in other ways as well, beyond what I did and did not eat. One of her biggest insistences was that I stay where she could see me. If I was going to play in the backyard, I heard, “Stay where I can see you!” That meant venturing behind
the barn was not allowed, or going into the barn, up a tree, or anywhere else where she might not be able to spot me when peering out the window. If I was running ahead at the store, she called, “Come back! Stay where I can see you!” When playing at the park, she insisted, “Stay where I can see you!”

This went to such an extent that, for many years, I was not allowed to go out anywhere, with the exception of school, if she didn’t accompany me. I never went anywhere alone with my grandparents, or even my dad. Once, she made me stay home from school on a field trip day because so many mothers had already volunteered to go that she wasn’t going to be allowed to. So she turned her small nose up at the elementary school and simply kept me home. Afterwards, she never sent a sick note or an explanation to school with me, as if she knew that her message—that her absence on field trips would always mean my absence from field trips—was well understood, and needed no explanation.

Increasingly, we quarreled over similar events:

“Can I sleep over at Stacy’s?”

“No. She can come here.”

“But the party’s at her house.”

“No.”

No parties, no bike rides. Anything that involved me going “out of her sight” was an automatic “no.” The first time I went to a party without her, I was eleven years old. Even though it was for a neighbor’s birthday, and located directly across the street from our house, Mom still insisted that I wait inside the neighbor’s house for her after the party. She wanted to walk me back across the street.
These issues led to a large amount of contention between my mom and me. When I turned twelve, and had long since grown tired of having to accompany her to the store, to the post office, to the bank, and everywhere else over creation, I asked if I could stay home by myself. I’d get chores done, I said, or homework. I’d be good—she could trust me.

“No.”

“Why?” I made no attempt to hide my anger or frustration. “It’s not fair! I’m old enough to stay home by myself!” I followed her down the hall and into her bedroom, where she gathered her purse.

“It makes me anxious. Do you want to make me anxious?”

“Why does it make you anxious? Don’t you trust me?” She wasn’t looking at me as I slumped down on to her bed.

“It’s not you I don’t trust. It’s everyone else.”

“Great,” I said, rolling my eyes. “So you’re going to drag me everywhere ‘till I’m thirty ‘cause you don’t trust everyone else? That’s stupid, Mom. Stupid!”

She spun around on me unexpectedly. Her eyes wide and wild, her voice shrill, she shouted, “Stupid? Do you remember Polly Klaas? Was what happened to her stupid? She was kidnapped out of her own home and murdered. And do you think she just died peacefully? She didn’t! So maybe you think little girls getting murdered is stupid, but I don’t! Get in the car!”

This incident wasn’t the first time, nor would it be the last, that she threw Polly Klaas in my face. Mom reminded me many times that if I didn’t stay where she could see me, I’d wind up just like her.
She told me she only feared for my well being, but I never understood just what it was that caused her to fear losing me so much. I didn’t know what the odds were that I’d be kidnapped, raped or killed if I ventured out of her sight, but I never thought it very probable. What I did notice years later was that her extreme protectiveness truly began to manifest itself after Lisa got sick and, ultimately, left home. And I considered the fact that, in the battle over control between Mom and Lisa, over what would happen to her body, Lisa had won. When it came to me, what was Mom truly afraid of losing?

Regardless, I grew up with the knowledge that my life was not my own, and any control I wanted for myself needed to be taken forcefully. I usually didn’t have the will to exert myself in any way that might cause confrontation, though, other than the few times I fought with her over being somewhere on my own … and trying to control the way my body looked. Molding myself could, perhaps, be one thing she couldn’t take from me. Sometimes I got away with lying about what I’d eaten or thrown down the disposal, and other times she’d confront me about my “bullshit.”

That’s what she called it, too—“bullshit.”

My mom never had any qualms about swearing in front of us kids. In fact, she liked to get together with random friends, or maybe my aunt, on weekends and drink champagne well into the evening. During these times, foul language abounded among my mom’s giggly conversations or random, strange games—such as the time she and her friend Janine drank a bottle of champagne in the time it took Holly and I to watch one afternoon cartoon, and then each made lists of all the men they’d ever had sex with. She’d swear mildly—damn it all, perhaps, or what the hell—and then more forcefully: fuckin’ this and fuckin’ that, or for shit’s sake.
My dad, on the other hand, was not okay with swearing in front of us girls. He was more conservative in his parenting than my mom in every way, shape, and form. In fact, I often wondered as a child how they ever thought their marriage was a good idea, what with her being a full-fledged hippie and him being an upper middle class conservative. Mom was all about free love; Dad wanted us to wait until marriage before we had sex. Mom wanted to teach us about New Age principles and the goddess within; Dad wanted us to pray to Jesus. And, of course, Mom didn’t think that potty mouths were all that big a deal (in fact, a potty mouth on a cute little girl was apparently a funny thing at times), while Dad found potty mouths to be hugely offensive.

My mom usually got away with swearing in front of us, though, because my dad was usually away at work. He was one of those men that people like to refer to as “married to his job.” At the time, he coached football and baseball at Pomona-Pitzer College, and he was often gone before we got up in the morning, and only home around dinnertime. If that. Weekends often meant games or travel, and so my dad being away was something that we as a family had to get used to.

In fact, this was one issue that my mom consistently threw in his face during their many arguments. She accused him of putting his work first, the kids second, and her third. And he agreed that was probably true.

While the two of them often sent me mixed messages about life in general, their messages about physical appearance remained somewhat similar. Even though Dad decided to take an active stance against anything remotely relating to anorexia or bulimia after what had happened to Lisa, he couldn’t escape the fact that he placed huge importance on “looking good,” and part of “looking good” was being thin.
Upon finding out how much I weighed at eleven years old, he shot me a disapproving look before, I’m sure, he could stop himself. In a whisper, I asked if that number, that self-defining number, was bad. After a slight pause, brief but telling me everything I needed to know, he offered an unconvincing, “No, no, it’s fine.”

I looked down at my lap, ashamed of myself, and he added, “But you definitely don’t want to gain any more.”

Shortly after this incident, we sat in the living room together for an evening of TV. Since my dad was not often home, he set aside special nights to be with us girls, and during those times we usually watched TV together. We watched an array of game shows and sitcoms, but on this night we viewed a documentary on anorexia. It profiled a woman who ran a successful recovery program for young women with the disorder, and some of the patients currently under her care. They were all extremely underweight, a few of them bald because their hair had fallen out. Some were so weak they couldn’t even stand on their own to be weighed.

“Look how pretty she used to be,” Dad lamented as the TV screen suddenly filled with a picture of one of the anorexics before she fell ill. “Sad, isn’t it?”

I was silent, speculating as I stared at the picture of the girl in the photograph. She looked happy enough, and wasn’t bald yet—in fact, her golden hair was long and wavy—and her fancy dress made me think that she was probably getting ready to go to a school dance. She was pretty enough, I supposed. Kind of chubby, though.

I gave my dad a sidelong glance as I remembered something else he had said earlier that evening. We had been watching a game show, one that involved adolescents performing physical activities against each other to win a grand prize. One of the
contestants happened to be overweight, and as she participated in the final event, a steep climb up a man-made mountain, Dad had commented, “Put a cheeseburger on top—then she’ll win!”

He had laughed heartily at that. Apparently being fat was something that warranted being made fun of. And yet, here was a girl on TV who wasn’t fat—in fact, I’d never seen someone so thin. But Dad didn’t seem satisfied with that, either. The chunky girl needed a cheeseburger to win; the skinny girl was “sad.”

I felt confused as to what he saw as ideal.

When the show ended, we sat in silence for a few minutes. The credits rolling over the screen to the tune of a particularly emotive orchestral piece, I shifted uncomfortably. Dad looked at me, his expression equally uncomfortable.

“Promise me,” he said solemnly, “that you’ll never stop eating. Or start making yourself throw up.”

I wasn’t sure if he was serious or simply responding to the emotional documentary we’d been viewing, but I said, “Yeah, okay.” A moment later, when I realized he was still looking at me anxiously, I added a placating, “Do you really think I could ever give up candy?”

I laughed half-heartedly, and he tried to smile. “Really,” he said. “Don’t end up sick like Lisa.”

That night, before bed, I stood in front of the full-length mirror on the back of my bedroom door. I still wore my miniskirt and tank top, and I silently considered the girl who was staring back at me.

_Pudgy, I thought. Too pudgy._
I felt my stomach constrict in anxiety. That word, “pudgy,” repeated itself over and over in my head. And then my mind spoke up in a harsher tone, so harsh I was unable to recognize it as my own.

_Not pudgy_, it said. _Fat. You need to do something about it._

I took a shaky breath and thought about the girl in the documentary. Her body claimed not an ounce of extra fat. Her clothes hung like heavy drapes over her bones, sleek and beautiful. I was so chunky, though. I didn’t know if it was possible for my body to ever shrink, disappear enough so that I could rightly be called “thin.”

_You could do the exercise videos more often_, the voice in my head said. I considered this voice for a moment—not able to truly _hear_ it, it had to be me talking to myself. And yet, it spoke _to_ me. _You could eat less._

I thought about the look on my mom’s face if I was ever as skinny—or skinnier—than Lisa. Her disapproving mask would only thinly veil envy. I couldn’t help but smile at the thought.

_You can do it_, I heard softly, darkly encouraging. _You need to do it._
CHAPTER 3

SHRINK

*Five pounds.*

These two words took up most of the space in my teenage mind. They were constantly there, reminding me that I only had five pounds to lose before I was “okay.” Five pounds to lose before I was pretty, five pounds before I’d be ready for a swimming suit, five pounds before life could begin.

At fourteen, five feet and four inches tall, I weighed 125 pounds and I knew that at 120 my life would be perfect. At 120, all I wanted was to get down to 115. On my fifteenth birthday I stepped on the scale and felt my blood go bittersweet at the 118 that appeared.

*Three pounds to go,* the voice in my head told me calmly. I could do that. Three pounds wasn’t too much to lose, and then I’d have achieved 115. Still, I couldn’t ignore the anxiety that crept through me at the thought. I could get to 115 … but if I got myself down to 112 or 113, that would give me some leeway, too.

I immediately sat down with a pen and paper to work out how many calories I could take in each day in order to lose three pounds this week. Admittedly, I’d have to stay around 500 calories each day. I’d have to definitely skip breakfast or lunch. Maybe both. And only a few bites at dinner.

*Dinner.* The voice in my head usually had something to say about dinner. *Skip it.*

*Don’t eat any of it.*
There were a few problems with this idea, though, the first being that my parents would obviously notice if I wasn’t eating dinner. I tried to remedy this a few times by drinking out of a thick, plastic cup, depositing chewed up food into it while I was pretending to take a drink. I was caught doing that only one time, though, before we started drinking out of clear, glass cups. After that, finding new tricks that allowed me to get away with not eating became more difficult. The other problem, though, was that sometimes I was so hungry I really couldn’t help but eat. And sometimes it would be a few bites … other times, more than a few.

On these evenings, when my stomach felt more full than I was comfortable with, I’d disappear upstairs, into my room, and agonize. My body became so ridden with anxiety during these times that I wouldn’t be able to sit still, and so I’d pace my room while my heart pounded madly.

I knew that I was many things—stupid, weak, fat, and worthless, among others—and I told myself so. Repeatedly. And most nights, long after my parents and sister had gone to bed, I would sit in the middle of the floor after hours of self-abuse and cry.

*You can’t do that tomorrow night*, the voice in my head said, and, knowing this to be true, I would wish for time to fast-forward so that I could skip tomorrow’s dinner and right the wrong I had committed that evening.

But I also knew that this line was becoming very familiar. As horrible as I felt at that moment, I would also feel hungry tomorrow. I could always anticipate the war that would happen in my head, between my hunger and my weight-loss voice: back and forth they would go, until one of them ultimately won. For me, it didn’t matter who won, because I was sure to be in one state of distress or another.
That evening, as I sat in the middle of my room wishing I could tear open my stomach and remove its contents, the voice came up with a solution.

_You know_, it said, as if the correct answer had been obvious all along, _if you think about it … if you put something into your body, doesn’t it only stand to reason that you should be able to take it back out again?_

I ignored the patronizing tone that was, underneath it all, saying, _We both know you’re not good enough at not eating. So we have to work with that._ I stopped crying and thought about this. I knew that, in my family, there was one bigger crime in the dieting world than trying to not eat at all. I thought back to my sister and her beautiful, emaciated figure. My sister who was sent away when I was only nine.

“I can’t do that,” I murmured softly. Shaking my head ever so slightly, I stood up and moved to my bed. The following day I would simply have to do better.

The following morning I dressed myself in loose jeans and a baggy sweatshirt. I fought with myself for twenty minutes over whether or not to wear roomy clothes, as I understood that my tight, form-fitting clothes, the jeans that would lightly dig into my stomach, would remind me how fat I was. That continual reminder might actually help me stay away from food.

But I couldn’t do it. The thought of facing the world in clothes that would reveal my bulges made my fingers tingle, my heart patter, in panic. So, instead, I stood in front of the mirror and held the jeans up in front of me. They were lovely. One of my favorite pairs. My eyes filled with tears as I thought about a time when I might actually deserve to wear them, when my body would look good in them.

_Five pounds._
I folded them up, put them away, resolved to the fact that, for now, I’d have to continue hiding my large body behind even larger clothes. Once dressed, I moved to the bathroom to wash the tear-stains from my face. Afterwards, my face was pink from washing and puffy from crying. Bare, and yet full of so much I didn’t know how to communicate. With a long, shaky breath, I straightened out my large sweatshirt, and then took my foundation out of a drawer. Using one of my old sponges, small and no longer white, I painted my face, doing my best to hide the pink and disguise the puffiness.

This morning, my sister and I were to accompany my mom to the mall for a walk. She’d heard that “walking the mall” was a good source of exercise, and so decided to incorporate it into our summer mornings. Luckily for her, her two teenaged daughters didn’t put up any resistance to this: me, because I wanted to get some extra exercise as much as she did, and Holly because we’d be at the mall.

And so we walked the ground floor of the mall that morning, then the second floor, and then the ground floor again. Most of the time, Mom and I were about ten feet ahead of Holly, who walked much slower than us anyway, but stopped periodically to gaze at a jewelry display or a gorgeously dressed mannequin.

I couldn’t miss the mannequins, either. Holly and I both stared at them with obsessive eyes, though for her it was because of the clothes it was modeling. For me, it was because of the long, skinny limbs and practically nonexistent stomach. The legs that were hardly any bigger than the arms. Many of these mannequins didn’t have faces, or even heads—they were all body, and that was all they were meant to be.

I wished I looked just like them.
After the “walk” was complete—more, really, a casual saunter interrupted too often by a stop into this store or that—we went upstairs again for lunch. I found the food court at the mall to be as terrifying, and enticing, as a fully equipped bar must be for an alcoholic. There was so much that I physically salivated for—Chinese-American chicken drenched in sweet sauces, crispy French fries, slices of pizza bigger than my head—and, yet, I knew that each and every one of these items, while so satisfying during those first few bites, would also leave me shamed with weakness.

In Mom’s attempt to be “healthy,” however, she led us straight to the Subway line. At first, as usual, I tried to say I wasn’t hungry and didn’t want anything, but Mom had been privy to my attempts at self-starvation for years now, and never let me get away with it. I knew I could argue with her, and risk a full-blown screaming match at the mall, followed by hours of the cold shoulder at home. At times, my little voice was strong and passionate enough to convince me it would be worth it. Today, though, I gave in and ordered a small turkey sandwich with veggies and no mayo.

“Why no mayo?” Mom demanded.

I shrugged, glancing anxiously at the young woman making our sandwiches. “I don’t need any mayo.”

Mom pursed her lips and looked away. She lowered her head slightly as her own sandwich was slathered with three, maybe four, teaspoons of mayo.

Even though it wasn’t my sandwich, my voice started to calculate calories. There’s got to be 200 calories in each teaspoon. She might as well be eating lunch and dinner right now with all of the calories she’s adding.
One by one, our sandwiches were closed and wrapped. As Mom paid and took the bag, she turned to me and tried once more: “Your sandwich is going to be awfully dry, you know.”

Again, I shrugged. It didn’t matter—it wasn’t her sandwich, after all. She shouldn’t care. But, from the back of my mind, my voice spoke up again. She’s just jealous that you can bypass mayo and she can’t. I didn’t say the words out loud, but a corner of my mouth turned up in a small smirk. This display of willpower, however tiny it was, apparently made my mom feel inadequate about her own choices, and I suddenly felt much more comfortable about eating my own meal in front of her.

Dinner that night was a different story. Mom served pasta and a big loaf of freshly baked French bread from the store—two of my favorite foods. My own hunger and desire blinded me to the hundreds—thousands?—of calories on my plate alone, and I had consumed all of it before realizing exactly what I’d done.

Stupid. It doesn’t take a genius to know how many calories are in pasta and bread. And butter, you idiot!

I leaped from my place at the table and, without bothering to clean my plate, ran upstairs, away from the threatening food. I heard my parents calling after me, confused and concerned, but I didn’t turn around. Shaking with anxiety, I ran first to my room, and then to the bathroom.

I shut the door to the bathroom and locked it, nearly hyperventilating. I put my hands on the cold sink, wrapping my fingers around the edge, and leaned forward with my eyes closed. I couldn’t keep my eyes open, because then I’d be faced with the mirror,
the cool glass reflecting everything I didn’t want to have to face. I moved one hand over my stomach, willing the fullness to disappear.

*Make it disappear.*

I opened my eyes halfway. One tear escaped, rolling slowly down my left cheek as my gaze, carefully avoiding the mirror, moved to the toilet. But I couldn’t do *that.*

*Why not?*

I thought about my parents. Despite anything else I did to lose weight, this was the one unapproachable, forbidden tactic. Was it because of Lisa? Were they afraid of sending another daughter away forever? Is that what would happen to me?

*You know what will happen to you.* An image of Lisa at my age entered my mind. I didn’t remember the smile with no happiness behind it, her hollow eyes. I remembered her statuesque slenderness, the bones that showed even through her thickest clothes. She was 5’5”, and 85 pounds, at my age. What wouldn’t I have given to have that?

*You can have it.*

I moved to the toilet. I remembered my sandwich from earlier, my little smirk, and thought about my mom. It was possible, I thought, that the only reason she didn’t want me to do this was because she wouldn’t—or couldn’t—do it for herself. *More jealousy.* I imagined her expression when, one day soon, I was 85 pounds.

I had read about how to do this on the Internet. You could use your fingers, some people said, or even toothbrushes or pencils if that didn’t work. My sister had been able to do it without any of the above—she simply used her stomach muscles to push her food back up, a true bulimic pro. I didn’t even know where to begin trying that. So, instead, I leaned forward and pushed my index finger as far as I could down my throat.
My stomach lurched as I gagged, but no food came up. So I tried again, closing my eyes against the wetness that blurred my vision. Again, I retched, violently enough to throw my body forward. I put my free hand out to catch myself against the toilet tank and shoved my hand further into my mouth.

I choked again and again. But there was no food. Only frustration, all on its own, rose within me until it forced its way through my closed eyelashes, welling in droplets until they fell lightly into the toilet. Small raindrops into a pool of still water was all that I saw when I finally opened my eyes and pulled my hand from my mouth.

The familiar voice scoffed at me. You can’t even do it? Are you serious?

I wiped the wetness from my eyes and stepped away from the toilet. For the first time that evening, I met my own gaze in the mirror. My face was flushed, and my eyes looked tired. That wasn’t all that had changed about my eyes, though—despite the fact that I hadn’t successfully purged my dinner, I now had tiny red marks dotting the area just beneath my eyebrows as a testimony to the effort that had gone into trying. I knew what they were, as I remember Erin mentioning it once in reference to Lisa. Broken blood vessels, burst from the strain put on my face.

I attempted to empty my stomach again the following night, to no avail. I wanted to ask Lisa how she did it, get a tutorial, every time I was on the phone with her. But my sister, now in northern California with her boyfriend, had been eating disorder free for years. She had told me her story, about how she had been blessed to wake up one morning and see the skeleton in the mirror, but that’s not what I wanted to hear from her. I wanted her to help me reach 85 pounds.
But I didn’t know how to ask. During one of our phone conversations, I tried to approach the subject. “I’ve tried…” I said, speaking softly, “…but I can’t make myself throw up.”

Lisa got quiet, but then offered some advice: “You don’t want to get into that.”

But I did. After that conversation, though, I spoke to Lisa on the phone more often. I always struggled through the questions I didn’t know how to ask—just how do you make your skeleton visible?—while she listened patiently to me dancing around the subject of my struggle to lose weight, and then spoke gentle words of encouragement. These words never promoted skinniness, though. She kept talking about loving myself and learning to be healthy, words that weren’t helpful to me in my pursuits. She wasn’t going to help me reach 85 pounds—or, better, 80 pounds—so that I could claim a trophy declaring: KATE BARKER: THINNEST GIRL IN THE FAMILY.

And so everyday remained a frustrating effort. What to eat? What not to eat? Why couldn’t I throw up?

After I turned sixteen, things began to change. My parents decided, for the sake of their own health, to invest in a treadmill that would sit comfortably in our game room. If they could exercise right there in the house, on their own time, then surely they could start incorporating a healthy workout into their daily lives. What really happened, though, was that neither my mom nor my dad ever made much use of that treadmill.

I did.

I started out using it once a day for thirty minutes. But that soon expanded into twice a day, and then three times. I wrote out a schedule for myself that I stuck to rigidly: no breakfast, and a morning jaunt on the treadmill for thirty minutes. Then I could have a
small lunch, and in the afternoon I’d spend more time on the treadmill. How much time I spent exercising in the evenings depended on how much I ate at dinner. Sometimes I’d go for a half an hour, and sometimes for a full hour. Sometimes two.

I noticed no change other than my new exercise routine. But about three months into it, I walked into the kitchen after my evening workout to get myself a glass of water. My family, in the living room watching television, all turned to look at me. Usually, after finishing on the treadmill I would head straight upstairs to avoid being seen in the short shorts and tank top I worked out in. But today I hadn’t thought about it.

As soon as I saw their eyes on me, I grew uncomfortably self-conscious and silently chastised myself—how could I have come downstairs in anything but my baggy clothes? I quickly downed my water and turned to leave.

“You look different,” my dad said before I had a chance to dart from the kitchen. “Like a runner.”

What did that mean? I met his eyes, but was unable to read his expression. Finally, I shrugged. “Really?”

He nodded. “You’re looking really skinny.”

For a moment, my heart leaped. Was it possible that I was thin? But then I noticed something else in my dad’s eyes that I had never seen before, something that might have been concern. He’s lying.

I studied my dad’s face. His eyes didn’t leave mine. Next to him, my mom also glued her eyes to me, her lips pursed, her gaze almost challenging. Holly had already turned back to the TV. But my dad’s expression didn’t seem to be asking for an explanation … only to tell me that I was looking skinny.
He just doesn’t want you using the treadmill so often, and he’s trying to get you to stop. I instantly felt anger flood me at this thought. He doesn’t want you to really be thin.

I turned around and fled out of the kitchen and up the stairs to the safety of my room.

I couldn’t deny, though, that my dad’s lie agreed with the scale’s opinion. The little device that my mom kept in her master bathroom showed my weight dropping. I reached my initial goal of 115, and then the “leeway” comfort of 112. On the day the scale flashed 108 at me, I stepped back and stared at my reflection in the wide mirror covering the length of the bathroom wall.

The scale had to be broken. My eyes filled with tears and my mirror image blurred as I came to this realization. Seeing was believing—I was fatter than ever before, so I couldn’t possibly be 108. We needed a new scale.

I told my mom as much.

“We don’t need a new scale. Ours is fine,” she insisted.

“It’s not. It’s wrong,” I said, my eyes filling with tears again right there in front of my mom.

She knit her brow and turned to look at me, to let the panic in my face register. “What’s wrong?”

I broke down. I covered my face in shame as I wept, but as soon as I was able, I looked back up and said, “I just hate the way I look.”

Mom frowned. There was a long pause between us, the only audible sound being my continual crying. “You’re being ridiculous,” she said, though she said it gently and quietly. “You’re the furthest thing from fat.”
She’s lying.

I knew she was. I didn’t need my voice reaffirming it for me.

“Oh, look,” Mom said uncomfortably as I continued to cry. “We’ll get a new scale.” When I didn’t respond, she said, “Do you want to try some of my diet pills? Would that make you feel better?”

I looked up in surprise. Yes, it would make me feel better, but I couldn’t believe that she was actually offering them to me. I searched her face, looking for some explanation as to why this was happening. Her eyes maintained some level of hope, but beyond that they also sagged with weariness. Something in those eyes communicated to me: Just take the pills. Let them fix this for you, and then stop obsessing about your weight. Please, just stop obsessing about your weight.

Desperation ran through the tears on my face. Regardless of why she was going to let me take her pills, I wasn’t going to pass them up, and so I nodded quickly. “Yes.”

And so I began I daily cocktail of my mom’s diet pills. I always took more than I was supposed to, but if my mom ever noticed she didn’t say anything about it. If they kept me placated, that was enough for her. And I made sure to sheathe my body in baggy clothes any time I was in front of any of them, lest any of them try to lie to me, mock me, again. As long as I kept my fat hidden, no one could comment about how it “wasn’t” there.

That summer, shortly before my seventeenth birthday, my sister Lisa came to visit us. I was wildly excited to see her—after she moved out when I was young, I hardly had a chance to know her except through the random visits that my parents and I took.
throughout the years to see her. That she was coming to see us elated me, especially since we had been building a phone relationship over the past year.

She was not the emaciated teenager I once knew, but even as a recovered anorexic and bulimic, she remained a thin woman. She was twenty-three, living on her own and working on a writing career, gorgeous, and everything I wanted to be. She was Nefertiti walking through our halls, and I was embarrassed that I had to hide my own heaviness beneath my oversized clothes.

I pulled out the trundle bed beneath my own day bed, and she slept there during her visit. We were up late most nights, talking about everything from my life as a teenager to the possibility of her marrying her current boyfriend. We didn’t discuss dieting or losing weight, and the topic of my weight loss struggle didn’t come up until one of the last nights of her stay.

“How are you doing?” she asked tentatively as we both lay in the dark. “I mean, really—how are you doing really?”

Her tone implied that I should read between the lines. In the most casual response I could muster, I said, “Fine, I guess.”

“Don’t lie to me,” she said softly. “I know what you’re doing.”


“I know where you’re at,” she continued. “And I know it doesn’t mean anything … but … please believe me when I say that you don’t want to continue down the path you’re on.”

“I’m not on a ‘path’,” I said, sounding more defensive than I meant to. “I’m fine.”
“You’re on that treadmill quite a bit,” she pointed out. “And I hear you throwing up every night.”

“I’m not throwing up,” I answered truthfully. “And besides, I just want to get down to 100 pounds. Then I’ll stop.”

Lisa grew quiet for a few minutes. I wanted to speak, wanted to change the subject, but my mouth had gone dry. “No, you won’t.”

“Yes, I will.”

“Was 100 pounds your original goal?”

“Huh?” I turned my head to gaze at her outline, a form in the darkness. I knew what she meant, though—I thought about wanting to be 115 pounds, then 112 and then 110.

“It’s not going to stop,” Lisa said. “When you’re 100 pounds, it’s not going to be enough. 95 is going to look just a little bit better.”

“I’m fine,” I insisted. But my voice cracked.

In the dark, I felt Lisa’s hand instantly reach out and grab mine, squeeze it. “I know it’s hard,” she said quietly.

And then, before I could stop it, I felt familiar wetness sting my eyes. “I don’t know how to make it go away,” I whispered. “There’s this part of me—it tells me what to do, and gets mad at me when I don’t listen.”

“The more you listen to your E.D., the harder it will be to tune it out,” she said.

“E.D.?”

“Your eating disorder.”

“I don’t have an eating disorder.” I was too fat to have an eating disorder.
“You listen to that part of you, don’t you?”

I couldn’t deny it. “Nobody wants me to,” I said in a low voice. “How come I want to please it more than everyone else?”

She didn’t immediately respond. “How come you want to please anyone but yourself?”

I had no answer, other than the quiet crying that eventually lulled me to sleep.

I reached 100 pounds a few days before my dad’s birthday. I had turned seventeen nine days earlier, and despite the fact that I was diligently working towards a double-digit weight, I celebrated with my parents and Holly over enchiladas and chocolate cake.

When my plate held no more than crumbly brown fragments, though, the back of my mind spoke up in familiar accusation: What were you thinking? How many calories were in that piece of cake? 1000? 2000?

I brought my napkin to my mouth, seemingly wiping remnants of frosting, but really stifling a panicked yelp that immediately rose to my throat. I thought about all of the work that had gone into reaching my current weight.

You’ll be 105 by tomorrow morning. Maybe 110.

I coughed. I thought about what would happen if I stepped on the scale and it read 110. I could most likely come up with dozens of different ways to punish myself, but none of them would be sufficient.

The way you’re going, you’ll be 120 by the end of the week.

Dad and Holly were moving into the living room, laughing about something I had not heard, while Mom moved the dishes to the sink. There were stacks of birthday presents waiting for him, funny movies and new shirts we’d picked up for him earlier in
the week. I gazed at my family, smiling beneath the brightly colored crepe paper and balloons hanging from the ceiling. I remained in my seat, removed from their scene, the grays and stark whites of the kitchen surrounding me in a bubble. I struggled to catch my breath.

“Are you coming?” Mom asked, turning to me as she moved to join Dad and Holly in the living room. “We’ve got presents!”

“Yeah…” I responded, quiet and noncommittal. “In a minute. I’ll be right back.”

I threw my napkin down onto the table and launched out of my seat, running upstairs. In a scene that played itself out nearly every night, I locked myself in the bathroom and leaned over the toilet to attempt to relieve my stomach of the food I had put there. If nothing else, at least the horrible exertion put on my body through the relentless gagging and choking would be a fitting chastisement for eating enchiladas. And cake.

My fingers turned changed color. My left hand went white as it clenched the toilet tank fiercely, and my right hand, shoved down my throat, reddened as my teeth grated against my knuckles. Just like every other night, my body heaved and I felt my stomach churn in protest.

But this night, something else happened. At first, it was one tiny bit of chewed up food that made its way into the toilet bowl, and then another. At first, I stared in wide-eyed surprise, not quite able to believe what had happened, but then a wave of ecstasy rose within me and I quickly returned my fingers to my throat to finish the job.
And then my stomach was empty. Wonderfully, miraculously empty. I rinsed my mouth in what felt like slow motion, and then gazed into the mirror. My face was a strange mixture of flushed pink and ashen white.

*Good job.*

I smiled. How long had it been since I’d smiled?

*You did it. You did it!* The words of encouragement felt so different from the abrasive insults I was used to hearing, used to acknowledging. It was rare that I actually pleased the critical voice in my head, but the relief and self-satisfaction that came with it was instantly calming. I wished it would never go away.

What had Lisa called it again? E.D.?

“E.D.” I spoke softly into the mirror. I still wasn’t about to admit this was an eating disorder—it was helping me, not hindering me. “Ed.”

For the first time, this voice, the E.D., my Ed, attached itself to a face. I imagined a handsome face joined with long, ebony hair that hung in light waves to toned shoulders and over one onyx eye. Behind this face, I could see bits and pieces of black angel feathers rising up to envelop me, protect me. I visualized this face smiling at me, proud of me, his words there to guide me.

I began sneaking off to the bathroom after every meal. I was hungrier than ever before, but now I could *eat* because I had a way to get rid of it. After one week, my throat became so rough and raw that it hurt to swallow, and after two the back of my right hand looked like it had suffered an unfortunate encounter with a cheese grater. For me, these were trophies, signs that I was finally doing something right. And if anyone else noticed
these subtle signs, they said nothing. As long as the appearance of being “okay” could be maintained, wearing blinders for my family became easy, even desirable.

Others, however, noticed. As time passed and I wasted away, friends and extended family members let their surprised gazes linger on me, whispered amongst themselves about how another one of Robin’s daughters was falling prey to an eating disorder. At my cousin’s wedding, an “aunt” not related to me by blood, whom I hadn’t seen in years, looked at me sadly and shook her head. Another relative instructed her children to not jump on me: “You might break her,” she said.

During a visit to Shirlee and Kathy’s house in northern California, Shirlee casually commented, “It looks like you’ve dropped quite a bit of weight since the last time I saw you.”

As elation spread through me, I grinned. “Thanks.”

Later, she would relay to my sister, Erin, that my response had made her heart sink. “She thanked me for a compliment,” she said, “but that wasn’t what I meant.”

It was Erin, in fact, who finally said something in the midst of the rest of the family’s silence. At eighteen, my family moved to Las Vegas, and Erin moved with us. Understanding what was happening to me right from the beginning, she refused to close her eyes to what was right in front of her.

She tried calling me on being underweight, on disappearing to the bathroom after meals, on skipping meals more often than was normal. I denied everything, insisted I was fine.

“That’s what Lisa said, too,” she told me, her expression daring me to deny it.
One evening, she asked me to sit down with her at the computer. I reluctantly agreed, and then regretted that decision after she opened a website on eating disorders.

“Look,” she said, running her finger down the computer screen as if that would help me take in the words. “It says that if someone has even one of these symptoms, they might be anorexic. You have all of them.”

I read the symptoms: being drastically underweight, secretive eating, always being cold, food obsession. “I have none of those.”

“Yes, you do.” Erin’s tone was louder than it should have been, pleading for me to at least try to hear her. “Look at you!”

I glanced down at my 96-pound body. I wanted to tell her that you had to be thin in order to be anorexic, but I knew it was pointless. The last thing I wanted was a spiel about how I was thin. I had grown tired of those lies long ago.

“I think you should talk to Mom about what’s going on,” Erin suggested.

“There is nothing going on!” I exclaimed. “Please leave me alone.”

Erin looked down into her lap. “Lisa said that once, too. We were at a party, and she had eaten cake. I saw her going to the bathroom, and asked her to please not throw anything up. She told me to leave her alone. And you know what? I did.”

I sighed quietly. Maybe if I was half as thin as Lisa had been, there would be reason to worry.

“Let me try to help you,” Erin pleaded. “I wasn’t able to help Lisa. It was a miracle that saved her. You’ve got to let me try and help you.”

“And what do you want to do? You want me to talk to Mom?”
“At least try. If we all work together, there might be something we can do for you.”

*Something they can do to make you fat.* Every muscle in my body tensed.

But I agreed to talk to my mom. I was eighteen, certainly old enough to tell both her and Erin to mind their own businesses, but the truth was that I didn’t have it in me. I didn’t know how things would change once everything was put on the table, but as long as they didn’t succeed in sabotaging Ed and me, I’d be fine.

Erin arranged a serious family meeting, and I found myself sitting on the couch across from my mom, Erin next to her. I felt like I was in a hot seat, with my mom judge and jury and Erin playing mediator. I suddenly wished I could escape this situation, and hoped that Erin would just take care of the talking. My mouth had gone dry, and I didn’t know how I’d get any words out.

“Kate’s got something to say,” Erin began, her tone revealing that this was a serious situation. “Listen to her for a few minutes.”

Mom’s eyes met mine. Without waiting for me to speak, she demanded, “You’re throwing up, aren’t you?”

I stared at her in surprise. Her mouth was set in a firm, hard line. I whispered, “What?”

“I know you are,” she continued. Then, when I nodded my head slowly, she looked away and shook her head. “I knew it.”

I looked over at Erin, hoping that my eyes held enough emotion to effectively ask her, “Now what?” This was her idea, so she needed to figure out how to save the conversation.
She picked up at least part of what I put down, and took her cue to speak up:

“Mom, I think you should just listen to what Kate has to say.”

Mom turned her attention back to me. Her expression didn’t change. For a moment, I thought that she was going to let me speak and maybe even listen. But before I could get another word out, she spoke instead. “Why are you doing this to me?”

Erin sighed exasperatingly. “Mom, this isn’t about you.”

Mom shot Erin an angry look. “Maybe that’s the problem. Nothing is ever about me.”

I sunk as deeply as I could into the couch, hugging my knees to my chest. Erin and Mom began to argue loudly, but I did my best to tune them out. Why had I agreed to do this? It would have been better, for everyone it seemed, to have not said anything at all, to pretend that my façade—the act that most of my family saw in place of my disorder—was reality, that I was “fine.”

Throughout the rest of the year, though, Mom made three attempts to help her second—two of four—daughter afflicted with an eating disorder. The first attempt involved a visit to the bookstore, where she picked out a few self-help books.

“I think we should both read these,” she suggested after she’d brought the books home. “We’ll read one chapter a week, and then at the end of the week we’ll talk about them. How does that sound?”

I agreed, though I wasn’t sure what some authors who hadn’t ever experienced an eating disorder might know about the situation. Throughout that week, I read the first chapter in one of the books, took some notes, and again marveled that anyone could possibly think I had such a serious condition that needed help.
But in an effort to humor my mom, I approached her at the end of the week. “Are you busy? I’m ready to talk about chapter one.”

She looked up, her body encased in the comfortable reading chair she usually spent a good part of the day in. Her eyes registered some degree of surprise. “Okay. Well.” She glanced down at the romance novel she was just finishing, and then looked back up at me. “Do you really need me to read those books, too? You can read them on your own, can’t you?”

My own eyes widened a bit in surprise. “Okay. I guess so.”

I didn’t touch any of the books again and guessed that my mom didn’t either. But, while they collected dust on the bookshelves, Mom decided to try another tactic.

Dr. Racoma was a psychiatrist who specialized in prescribing one medication after another. He put me on anti-depressants after our first meeting, and after our second said I should be seeing a counselor, too. Our meetings usually consisted of me staring out the window while he jotted notes on a legal pad.

“What do you want?” he would always ask.

“I just want to be thin,” I would say for what always felt like the hundredth time.

“But you are thin.”

And I’d roll my eyes.

After two weeks of seeing Dr. Racoma, I came downstairs after a purging episode to find my mom sitting on the couch, waiting for me, her lips pursed in a familiar, unhappy smile. From the moment I entered the living room, her eyes never left me.

“Dr. Racoma just called,” she said.

“Really?” I asked, making no secret of the fact that I cared not.
“You can stop pretending—the game is up,” she announced. “He told me you’re still throwing up.”

I sank slowly into the chair across from her. It was uncomfortably firm. I felt confused in more than one way: had Mom actually believed I’d stopped throwing up? But beyond that, I knew a thing or two about patient privacy. “He’s not allowed to do that. What I told him was in confidence, and he breached our privacy agreement if he told you anything.”

Mom shrugged. “He says you’re out of control, and that there’s nothing more he can do for you.”

“Is there anything he did for me?”

“He said you’re going to die if we don’t do something else,” Mom continued, as if I hadn’t spoken. “So we’re going to go to Monte Vista.”

My mouth may have dropped at that point. “Are you kidding me?” Monte Vista was Las Vegas’ only inpatient mental facility.

She nodded. “That’s what he recommended.”

I shook my head. “I’m not going.”

“You have to at least try,” she said. “If you don’t, it won’t be your choice anymore.”

I didn’t know the full implications of what she meant, but didn’t want to find out, so I begrudgingly got into the car and drove with her down to Monte Vista. The entire drive, I fumed that I was being forced to go there—crazy people went there, and I was not crazy. Had I been asked to define what “crazy” meant, I’d have probably had a lack of words, but I knew I did not belong in Monte Vista. How could Mom even consider it?
We were there for hours as they interviewed me, spoke with Mom, and made notes about me. And then, as quickly as we walked in, we walked out again.

Monte Vista, apparently, didn’t have an eating disorder program, and since I hadn’t said I was planning to kill myself or anyone else anytime soon, they had no grounds on which to keep me. I couldn’t help but maintain a triumphant smirk the entire drive home. What I didn’t realize was that Mom wasn’t finished in her attempts to “cure” me.

Once we were home, she informed me that since I couldn’t be hospitalized, she was going to take it upon herself to monitor my every action. “It’ll be just like you were in the hospital,” she said.

“Do you think that’s going to help me?” I demanded angrily.

“At least it will keep you from throwing up,” she responded.

She stood outside the bathroom every time I went inside and forbade me from locking the door. She sat with me while I ate to monitor what went into my mouth. The few times she forgot to listen outside the bathroom door, she’d instantly order me to put my hands out for her to inspect, so that she could see if fresh bite marks adorned my knuckles.

She thought she was doing a great thing. She thought she had control over what went in and out of my body. She thought the situation was hers.

But what she did not know was that after meals, instead of disappearing to the bathroom, I went upstairs to my bedroom, either to “read” or “draw.” I kept a small collection of old shopping bags in my closet, and so I’d crouch on the carpet and purge
into them. Away from the eyes and ears of the rest of the household, I outsmarted my mother’s creation of an in-home hospital.

*No one will ever find out,* Ed told me confidently as I tied the bags closed and hid them behind my laundry basket, to be taken outside and thrown away later.

Throughout the following weeks, my mom couldn’t hide her confusion as to why, despite her efforts, I wasn’t gaining weight. Why my skin was still sallow, my eyes still sunken, my knuckles still chewed up. I thought she probably wondered how I was getting away with it. There appeared no reasonable explanation. To my surprise, though, she stopped questioning me—she didn’t make me explain why I was still dying in the face of her efforts to save me.

I think, at some point, she began to suspect that I didn’t want to be saved.
Matt Sirls rode into Las Vegas in a beat-up Chevrolet that he started with a screwdriver. He moved in with his aunt in order to try his luck finding employment in the big city but wound up meeting me after deciding he’d rather try to be Prince Charming.

I heard about the auditions for Sleeping Beauty in the newspaper. Someone had written a small blurb about how the Rainbow Company Children’s Theatre was seeking actors, singers, and dancers of all ages, and so I chose to spend an entire Saturday among a few other young adults, a handful of teenagers, and a great many children all trying to escape, however briefly, into a fairy tale.

When I read for Sleeping Beauty, the casting directors paired me up with an attractive young man who liked to continually run a hand through his light brown hair, iced blond at the tips, while reading a modern, carefree take on Prince Charming. He wore a turtleneck sweater too hot for the Vegas heat, leaving me wondering about the toned body beneath. Once we were paired up, he leaned down close to my ear and whispered, “I was hoping I’d get to read with you.”

I smiled in response. The audition now stood as the furthest thing from my mind, and I became entirely occupied with how fat I must have looked at that moment. I started to wish I had worn something baggier. With half my mind focused on this young man, and the other half on my body, I probably gave one of the worst auditions of my life—I stuttered and fell over the words in the script, ungraceful and, I knew, un-princesslike.
I was not surprised, then, when I wasn’t cast. My reading partner, who introduced himself as Matt, wasn’t either, though, and he shrugged it off after deciding that meeting me was better than getting to play Prince Charming.

“Someday we’ll go back to that theatre,” he told me on our first date, “and tell them that even though they didn’t give us parts in the play, they did bring us together. It’ll be a great story.”

He mentioned that possible future scenario on our second date, too, as we rode a roller coaster around the New York New York casino, on our third date as we had photographs of our faces pasted onto famous bodies, and on our fourth as we walked hand in hand down the Las Vegas strip, the glowing lights of excitement and opportunity shining over us. To me, this meant only one thing: that Matt saw a future with me. He wanted to be with me.

He presented me with little gifts every time I saw him. A glittering, red rose-shaped pin soon adorned my favorite shirts; fluffy stuffed bears adorned my bed; small chocolates adorned my tongue, silky and smooth. We exhausted hours together, spending our summer days sprawled across the grass at the park and asking questions about each other. We watched movies, went bowling, took pictures, went for long walks, and ate food.

I also made plenty of trips to the bathroom. When I was out with Matt, nobody stood outside of the bathroom listening for sounds of retching, and nobody monitored what I ate. If Matt thought that my frequent bathroom stops were suspicious in any way, he said nothing about it, and so I answered to no one.
On one of our nights out, we sat together on the edge of a large fountain at the Bellagio. Both of us, only twenty years old, were too young to be sipping wine or shooting tequila in the casinos, so instead we shared chocolate milk and listened to the sound of the water trickling through the fountain.

“Let’s make a wish,” he suggested, pulling two pennies from his wallet and handing me one.

“Okay,” I said, laughing lightly. “What should I wish for?”

“Whatever you want. But you can’t tell me, or it won’t come true!”

So I held my penny, contemplating, and watched while he closed his eyes and then tossed his over his shoulder. I’d never seen a man look so serious about wishing. I continued to clench mine between my thumb and forefinger, not sure if I wanted to wish to be twenty pounds lighter or to never crave fatty foods again.

Before I could decide, Matt turned to me with gentle eyes. “You know what I wished for?”

“I thought you weren’t—“

“I wished to be with you forever.”

My eyebrows shot up, and I was suddenly at a loss for words. It didn’t matter, though. Matt leaned close to me and kissed me softly, wrapping one hand around my waist and running the other slowly through my hair. As I sank into his embrace, his copper penny sank slowly into the fountain’s water, drowning beneath the surface, and mine slipped from my fingers, clattering to the tiled floor.

Our relationship moved quickly, more quickly than what most people even consider to be “quick.” If others throughout history have simply “moved quickly,” then
Matt and I were Princess Leia and Han Solo, blasting through the universe at light-speed, lucky that neither of us fell out during the ride. Simply put—we lived together after two weeks, and after three months we purchased Robin Hood and Maid Marian costumes and walked down the aisle together at the Excalibur’s medieval-themed wedding chapel.

We exchanged pre-written vows in pre-made Halloween costumes. I considered it to be the best day of my life—or that it, at least, should have been. In my mind, it didn’t fit that after we shared a piece of chocolate cake at Carrow’s, just down the street from the Excalibur, Matt and I had our first real fight as a couple. Locked into a new life as his wife, I argued with him about something that I admittedly can’t remember anymore, but I do remember that we quarreled well into the night.

When we finally returned to our apartment, I sank onto the bed and started crying, the flower wreath I’d worn as a veil falling from my hair onto the floor.

“What’s wrong now?” Matt demanded.

“It’s my wedding day,” I sobbed, as if that should have been self-explanatory. I had no family, no friends there celebrating with me, no party and no fulfilling sentiments filling me. What I had that night was a new husband, dressed as Robin Hood, raising his voice at me too often during our first fight.

“Yeah, well.” Matt rubbed his eyes, obviously tired. “Are we going to consummate this marriage, or not?”

I shrugged. I’d had sex with Matt before marrying him, but for some reason I expected this night to be different—special, somehow. There should have been a tickling within me, a rousing of desire that built up as we progressed. I should have felt some sort
of enthusiasm, if not excited zeal then at least soft, gentle love. A flowing of affection that would surge from me to him and then back again, something we could share.

But after a rushed wedding and a day full of fighting, I was indifferent towards sex. I removed myself mentally, deciding if Matt wanted my body, it was his to take. Our love making that night, though, was no act of love. I lay there while he performed. There was nothing shared between us at all: it was an act, a duty, pure and simple.

Subtle things changed after that day. I was a married woman—or, in the words I came to resent from my dad, a kid playing house with her boyfriend. Matt began giving me his two cents about random things I’d taken for granted: for example, he put an end to one of my favorite activities, sitting up on a dimly lit, quiet couch well into the night and reading a book. Matt told me he didn’t like it when I stayed up after he’d gone to bed, and now that I was his wife, I owed it to him to go to bed when he did. Resentful but silent, I obeyed.

After we’d been married for a few weeks, Matt wanted to sit down with me and have a discussion. Perched on the edge of our small sofa in our small apartment, the conversation started out very much like many we’d had at the park while we were still dating: “Tell me something about yourself you’d never tell anyone else.”

I raised my eyebrows. “Don’t you know everything about me?”

He shrugged, not meeting my gaze. “There has to be something. Can’t you think of anything?”

I tilted my head back, gazing at the ceiling. I considered bringing up Ed. Matt didn’t know, and up to this point I’d had no intentions of telling him. Don’t, Ed warned
as I mulled the thought over. *He’ll start watching you, just like everyone else.* “If I tell you, will you promise to leave me alone about it?”

His eyes looked honestly surprised, and then shifted in suspicion. “That depends.”

“Okay, forget it,” I said, shaking my head. “Why don’t you go first? What’s something you’ve never told me?”

“You can’t do that—you’ve got to tell me now,” Matt insisted. “I swear, if you cheated on me—“

“I’ve never cheated on you!” I exclaimed, resisting the urge to roll my eyes.

He didn’t look convinced. “What else would you insist I ‘leave you alone’ about?”

“It’s no big deal,” I said quietly. I suddenly noticed how dark the room was, how confining. I wished we’d opened the blinds before talking. “I just have this … eating thing, okay?” I still couldn’t quite bring myself to say “eating disorder.”

“‘Eating thing’?” Matt repeated, and I couldn’t tell if he wanted to know more or was genuinely surprised that I considered an ‘eating thing’ to be worthy of serious discussion.

“I told you, it’s no big deal. Sometimes I throw food away when you’re not looking and make myself throw up. To get thin.”

Matt looked honestly relieved. “That’s it? Fine, well … don’t throw food away anymore, okay? We’re not made of money.” He paused and then took a breath. “Okay, my turn. There’s something I’ve never told you.”

I didn’t know what to say. I *had* told him I’d wanted him to leave me alone. But his reaction left me feeling empty, and although I didn’t want him nagging me, I did want
something more than a slight chastisement for wasting food. I didn’t know what I wanted, and I didn’t know why, but I felt instantly numb. “Okay,” I finally said, my voice dull. “What do you have to tell me?”

He took a deep breath. “I’m bisexual.”

I raised my eyebrows. “Oh. Really?”

He nodded, and went on to explain that he’d been dating both men and women for the past few years of his life. I did feel surprised but wasn’t quite sure why he felt it necessary for me to know. I only understood when he brought it to my attention that, as he put it, women didn’t always “do it” for him. This was the justification he used when he started buying pornographic magazines, all of them featuring men, for him to masturbate to.

I couldn’t comprehend what justification existed for the fact that he eventually started buying such magazines featuring young women, too. He liked to look at them while he masturbated but wanted me nearby so he could ejaculate on my body. When this happened, Matt wasn’t the only one looking at the pictures in the magazines—I looked, too, from my place on the floor, and took in every single tiny waist, bony arm, and slender leg.

*If your body looked like that, he’d want to be having sex with you,* Ed said. When tears started prickling my eyes, he added, *He’d be wanting to look at you.*

I made an effort to not eat in front of Matt. I wanted my body to shrivel before his eyes, maybe so that he’d find me attractive, or maybe so that he could see the pain that I felt buried, invisible, inside of me. He never said anything about what I was eating or not,
what I might be doing in the bathroom, or even if he saw me disappearing. I started to wonder if my body was changing at all, if my efforts produced anything.

Whether or not I was losing weight, our early marriage became defined by two other changes to my body, changes not marked by my own control or Matt’s. In a foreign country and a foreign house, my life changed forever.

After my dad was hired as the head coach for the Calgary Stampeders, the professional football team in Calgary, Alberta, up north in Canada, Matt and I took a road trip to visit him, along with my mom and Holly. We expected this visit to be light-hearted and fun, filled with football games and nights at the pubs, but something else happened that we hadn’t been anticipating.

While shaving during a hot shower one morning, I noticed that the lower half of my left leg had lost feeling. I dragged my razor very slowly over my leg three times, watching with interest as it cleared away remnants of soap and shaving gel, leaving it shiny and beautifully sparkling with droplets of beading water on my skin. My eyes took all of this in, but I could not feel it.

After I turned the shower off, I leaned over and slowly ran my hand over my lower left leg. My hand felt skin on skin, but my leg offered nothing. I didn’t know whether to be interested or alarmed. My imagination has always been overactive, though, and this day it worked overtime with images of amputations, small bugs that might be living in my leg, and other terrifying possibilities. So I went straight to my parents.

“My leg is numb,” I told them. “I can still walk on it—and no other body part is numb, but I can’t feel this part of my leg!” I did my best not to sound frantic, but for the
life of me I couldn’t come up with a logical, reasonable explanation as to why I’d lost feeling in part of my leg.

My dad took me to see the team doctor. This doctor told me, my parents, and my husband that my leg could have become numb for any number of reasons. A nerve disorder, perhaps. Multiple sclerosis. Possibly diabetes. My optimistic dad thought it might be a random, passing event (I think he balked at the idea of a serious illness in one of his children), while my mom thought maybe I was having panic attacks (and if I was put on a daily cocktail of Xanax and Prozac, too, then maybe she’d be more justified in her own). Matt immediately assumed the worst, and began preparing me for a horrible diagnosis (mostly, though, because he found few other ways to make himself feel useful in our relationship other than to take care of me when I was ill).

My mind, though, was running at a million miles a minute. I thought it was likely that there wasn’t really anything wrong with me. And, as the doctor performed tests on me to rule out some of the more life-altering illnesses, that possibility came closer and closer to reality. But, still, I obsessed about the other diseases that the doctor wasn’t able to test me for on that day.

What if I had one of them?

What if it was not curable?

What if I was forced to take medication for the rest of my life?

_Worse, _Ed spoke up, sending my mind reeling at the most terrifying possibility, _what if a disease or medication make you gain weight?_

The doctor told me that I would need to be tested for diabetes, and to do this I would have to go down to the laboratory to get my blood drawn.
“On the day that you go,” he said to me, slowly as if to make sure I really understood him, “make sure that you eat as you normally would. We want to test your blood glucose level against an average intake of carbohydrates and sugars.”

At the time, these words meant little to me. The only words I heard specifically were “eat,” “carbohydrates,” and “sugars.” I didn’t mention to him that, for me, eating “normally” consisted of either eating very little, or throwing up what I did eat. My parents had convinced themselves that these were behaviors I had left behind during my teenage years—that my 5’4”, 95 pound frame occurred naturally—and there was no way I was going to open that can of worms again.

We made an appointment at the laboratory the following day, and Mom brought home “pinwheels” for breakfast. She loved those stale little cinnamon roles you buy in the bakery section of the supermarket, and I did, too. As I contemplated eating one, though (or two, or three) I thought about two things: first, of course, that they would have to be thrown up in order to avoid weight gain, and second, that putting anything into my body that day may result in a diabetes diagnosis. Eat normally, the doctor had said.

With these thoughts in mind, I declined to eat pinwheels that morning. Mom asked if I wanted anything else—a bagel, perhaps, or some cereal—but I told her I wasn’t feeling well. Careful to avoid food at all that day, my stomach was empty and lightly rumbling by the time we left for the laboratory.

I knew on some level that not eating that day, that manipulating the test, would mean that it wouldn’t be accurate. No one would know the real result. Still, I allowed myself to fast and walked into the lab that day with an empty stomach.
My test came back “slightly high.” The doctor assured me it was nothing to worry about. “You’ll probably have to watch what you eat, especially as you get older, but for now it looks like you’re fine.”

Had I known then that the number that came back, paired with the fact I had been fasting, was, indeed, something to be alarmed about, it may have been more difficult to ignore my symptoms.

But over the course of the next few weeks, I attributed my extreme fatigue, dizziness, thirst, and excessive urination to something else: the fact that, only a month after that test was performed, I became pregnant.

In the earliest stages of my pregnancy, Matt and I dropped everything we knew—our jobs, our apartment, our lives—and moved to Washington state to be near his parents. Despite my protestations, my in-laws knew from the beginning that something was wrong. The fact that I spent so much time in bed, and that my extreme hunger and thirst—and pregnancy—did not result in weight gain, they said, was not normal.

“Even when I was pregnant,” my mother-in-law said, “I was never that tired.”

“Are you eating okay?” my father-in-law chimed in.

Yes, I insisted. I was eating okay. I was fine. The fact that I was extremely pale, that I wasn’t gaining weight like I should have been, was fine.

But a routine blood test in my third month of pregnancy confirmed otherwise.

“Your blood glucose levels came back very, very high,” the doctor told me. “It looks like you could have gestational diabetes. I want to do a few more tests, one fasting and one after you’ve eaten.”
The next morning, Matt took me first thing in the morning to have a fasting test done. After my glucose level, which should have been around 70 mg, read at over 300 mg, I was told that the second test wouldn’t be necessary. I was diagnosed with diabetes right then and there.

I should actually be more specific in saying that I was diagnosed with gestational diabetes—I was told that, after I delivered my baby, the disease would go away. Pregnancy, they told me, had triggered the condition and my body would return to normal after I was no longer carrying a child.

My case was an acute one, and although my new doctor, skilled at handling diabetic pregnancies, attempted to control my condition through diet and exercise, it appeared the only way I could manage to do so would be to completely eliminate carbohydrates in any form. I discovered this when my mother-in-law, experimenting with diet and exercise theories, fed me a dinner of plain grilled chicken and cooked cabbage and then took me for a long walk in the cool October air. Afterwards, we tested my glucose and found it to be at an acceptable level.

I reported this to my doctor. At first, he gave me a confused look. “You can’t survive on grilled chicken and cabbage. Especially because you’re pregnant.” Then, he laughed, as if he thought the suggestion might have been a joke to begin with.

I didn’t share in his laughter, particularly when he told me what would have to be done about the fact that I couldn’t control my glucose and maintain a balanced diet. Reluctance in his eyes, he explained, “There are oral medications we could try … but not until after you give birth. Those medications can cross the placenta and be harmful to the baby.”
“Okay,” I said, my tone urging him to be direct. “So what do we do?”

“I’m going to put you on insulin.”

I blinked. I’d read stories about people with diabetes who took insulin. In every case, they’d given themselves injections. “Are you serious? Insulin, like, insulin shots?”

“Yes.” I could tell he was trying to keep his voice casual, as if this was no big deal. “Like I said, after your pregnancy we can try the oral medications until, of course, the condition fully disappears again.”

I learned, however, that taking insulin was a bit more complicated than simply giving myself a shot or two everyday. I’d be injecting myself with two types of insulin—a “long acting” and a “short acting.” The long acting had to be injected twice a day, once in the morning and once at bedtime. It worked to keep my insulin steady all day, which meant that I had to eat at certain, specific times in order to keep my glucose levels from either spiking sharply or dipping dramatically. The short acting was to be taken with meals, so that whatever extra carbohydrates were eaten could be taken care of immediately. But however much I took needed to be closely matched with what I planned on eating so that, again, my glucose levels didn’t rise or fall too far.

I discovered that controlling diabetes with insulin is a balancing act. It’s kind of like being a tightrope walker in the circus, focusing on that straight, narrow line, careful not to lean too far in either direction for fear of getting hurt. Generally, there is a small numerical range that blood sugar tests are supposed to stay within: 70 mg to 140 mg. Or so. Go too far under 70 mg, and you risk falling into a diabetic coma. Go too far over 140 mg, and you risk falling into a diabetic coma.
I did not find it easy achieving balance. Early on, I began to recognize that a heavy head and slow, lethargic body meant my glucose was most likely soaring. Through heavy-lidded eyes, I would use my glucose monitor to prick my finger, and the number—200, 300, even 400—meant that an injection of short acting insulin was necessary to bring it down. Other times, my body would grow shaky and sweaty, and the mere act of walking across the room became too heavy an endeavor to complete. Dizzy and faint, my skin cold to the touch, my glucose level might read 60, 50, even 40, and I would need to quickly devour a candy bar or down a cup of juice to bring it up again.

I was a human yo-yo. More often than not, my glucose level either skyrocketed or plummeted, and I found myself in a constant state of correction. Take a shot eat some chocolate—fix it, try to make it right.

Through it all, I found it even more difficult to control my pregnancy weight. I went from underweight, people shocked to find out I was pregnant, to decidedly overweight, the scale number climbing faster than I could control it. To stay on the eating schedule required of my insulin meant consuming food even when I wasn’t hungry—breakfast at 7:00, before I was ready to get out of bed, and a snack before bed that I knew my body wasn’t asking for. That didn’t even include the extra sugar I dumped into my body every time my glucose plunged.

Every time I went to the doctor, I watched in dismay as the scale number slowly crept up. 130. 140. 150.

_You are hopeless_, Ed reminded me every time. _Fat, disgusting, and hopeless._

With every increasing number on the scale, a small inner part of me died. I saw those pieces of me fly away, and I desperately tried to clutch at them, grab them back.
Throwing up my meals affected my insulin, and I’d usually wind up having to eat again anyway to correct it. I tried exercising more, but the numbers still went up. I spent a lot of time crying over the fact that I couldn’t claim being the thinnest pregnant woman that ever lived. I dreamed about this, about having other women tell me how thin I was even though I was pregnant, about them knowing that I was to be the thinnest woman at the hospital birthing center. But I had to abandon that idea after the first ten pounds appeared on my body, and then twenty. After thirty I began telling my body every morning that I hated it and what it was doing to me.

By the time I was ready to give birth, I weighed 190 pounds, and didn’t know whether to be overjoyed about my baby being ready to come into the world, or to be devastated about the toll the entire pregnancy had taken on my body.

I gave birth on April 27, 2004. My infant son, sleeping in my arms and only hours old, was perfect—beautiful, an ideal size, and nothing wrong. I assumed there to be nothing wrong, that is. Looking down into his face, I couldn’t see the turmoil happening inside his body. When, that evening, nurses whisked him away to the intensive care unit for babies, I couldn’t even imagine a reason why.

“His glucose has dropped,” they explained to me. He would need to be put on an insulin drip through an IV to be stabilized.

It took the remainder of the night before I fully comprehended the situation. My own glucose levels, I found out, had been so high so often during my pregnancy that my baby’s insulin had begun overworking to compensate for it. After being born, and no longer exposed to my uncontrolled condition, his insulin production didn’t slow down on
its own, causing his glucose levels to drop into dangerous levels. The insulin drip, the nurses told me, would regulate him until his body regulated itself.

And so my baby spent two days in intensive care, hooked up to an IV. And it’s your fault, Ed reminded me.

My son, Brendan, otherwise healthy, came home only days after being born, but I couldn’t stop thinking about what my own negligence had done to him. I also couldn’t stop thinking about the fact that I still looked six months pregnant, still had to wear my maternity clothes.

At least, I assured myself, I wouldn’t have to worry about injecting insulin or keeping up an eating schedule while I worked on shedding the extra weight. I quietly waited for my glucose levels to return to normal on their own, for the diabetes referred to as “gestational” to remove itself from my body.

I waited days. And then I waited weeks. And then, during a frustrated visit to the doctor, I received the news that would start to define me: “You need to be prepared for the possibility that this disease isn’t going away.”

In the midst of a shaky breath I tried hard to keep steady, I reminded him, “You told me it was gestational. Gestational diabetes goes away.”

“We’ll have to do some blood tests to find out what’s going on,” the doctor said, trying to hide his obvious confusion. “Hang in there—we’ll figure it out.”

The blood tests that I submitted to revealed that my pancreas had stopped making insulin. What I’d been dealing with wasn’t gestational, or even, as my doctor suspected at first, Type II diabetes. The doctor diagnosed me with Type I or, as it’s also called, insulin
dependent diabetes. Only one part of this diagnosis stood out to me: the fact that I would need to keep taking insulin.

Before I knew it, I had appointments with endocrinologists and dieticians who were supposedly going to teach me new ways in which to live my life. Diabetes is serious, they cautioned—I would need to abide by certain rules.

I learned that the two different types of diabetes, Type I and Type II, are fundamentally different diseases. The condition afflicting my body, Type I diabetes, is an autoimmune response that causes the pancreas to stop producing life-sustaining insulin, leaving the body with no way to metabolize calories. In contrast, Type II diabetes happens when a person’s cells can simply no longer respond to the insulin they do produce. This type of diabetes, largely a contemporary cultural phenomenon, is related to unhealthy lifestyle habits and can sometimes be reversed if patients begin taking care of themselves. The diabetes epidemic that the developed world is experiencing today is a Type II diabetes epidemic—95% of documented cases are Type II. The remaining 5%, of course, are Type I.

Type I diabetes is still a relatively rare and unfortunate disease that strikes mostly children and young adults, despite whether they live healthy lifestyles or not. Doctors and medical researchers have linked its onset to a combination of factors: environmental and genetic dynamics, as well as a possible viral connection.

Beyond that, Type II diabetes damages the body and kills the sufferer slowly, while Type I can result in sudden death. Without insulin injections, a person with Type I diabetes can experience extreme hyperglycemia, accompanied by lethargy and breathing difficulties, within hours, and diabetic ketoacidosis—the final, dreaded step before death.
occurs, in which the person’s blood becomes acidic—within days. I read a book by Michael Bliss, who referred to a dying diabetic’s inability to gather oxygen through breathing as “air hunger.”

What I found to be particularly interesting was that, before insulin therapy was discovered in 1921, an early form of treatment for diabetes was starvation. Once doctors understood the relation between severe diabetic episodes and food intake, they found that they could preserve a patient’s life by starving them, putting them on diets of less than 500 calories a day.

Upon learning this, I silently cursed the man who had discovered insulin therapy. It may have solved all of my problems to be prescribed starvation, but instead I was told that I would be required to eat. Specific foods on a specific schedule, these professionals said, would be required in order to maintain my health. Doctors and dieticians instructed me about “good” foods and “bad” foods, and the control that Ed had over my perception of food instantly began to grow tighter. Managing diabetes, I found out, requires an obsession with food and fat and sugar contents.

My entire life became a condensed version of Eat This, Not That. Proteins were “good,” while fats were “sometimes good” in moderation. Carbohydrates were “bad,” but could be “sometimes good” if they were complex. Simple carbohydrates—usually white foods such as bread, rice, potatoes, or anything made with refined sugar—could always be considered as “bad,” and I learned I should avoid them like the plague. My prescription for health required a constant fixation on food and what to eat, and this only exacerbated the obsession I already dealt with.
I tried to obtain more control over the situation than I was told I could have. At first, I was under the false impression that not eating would control my glucose levels. It seemed logical: eat carbohydrates and sugars, and your glucose goes up—don’t eat carbohydrates and sugars, and your glucose stays down. What can only be understood through being a diabetic, though, is that there are other factors, such as stress and illness, which cause glucose levels to fluctuate.

Whatever the case happened to be, there were times when my sugar levels skyrocketed up past 200 mg, the “danger zone,” into the 300 mg and 400 mg, sometimes even 500 mg and 600 mg, range. At times, my glucose was so high that my meter couldn’t even read it: it would say, simply, HI, another way of communicating, GET OFF YOUR ASS AND TAKE SOME INSULIN BEFORE YOU FALL INTO A COMA. On the opposite end of the spectrum, there were still times, if I accidentally took too much insulin, when I fell far below where I was supposed to be, dropping out below 70 mg, which also put me at risk for falling into a coma.

Even though I ran a desperate race to lose weight as soon as possible, I didn’t enjoy being told that I must refrain from consuming refined sugars, though. I found that if I intentionally took too much insulin before a meal, I would inevitably drop out below normal levels. At these times, I could justify eating whatever sugary foods I wanted, and no one said anything about it—not even Matt, who thought it his personal responsibility to control my glucose levels for me.

Throughout the next few years, Matt insisted that everything I ate was sugar-free. Always. Desserts had to be made with Splenda or another sugar substitute, and anything else was off limits.
Sometimes the wait staff of a restaurant would offer me dessert, *real* dessert, and I would imagine what these desserts tasted and looked like … cloudlike whipped cream, perhaps, blueberries the color of a twilight sky draped over creamy cheesecake, or Tiramisu damp with saccharine syrup. I never had a chance to say yes or no. Matt said it for me, made my decision for me. He would often smile and say, “No thanks. She’s diabetic, and I’m sympathetic.”

During these times, I would often clench a hand around some unfortunate inanimate object on the table. Usually it was my water glass, the liquid swishing slightly in its container when I grabbed it. Sometimes it was a piece of cutlery. A fork or a knife, gleaming slightly under the low lights of the restaurant. I hoped the waiter wasn’t foolish enough to actually be ensnared by that stupid phrase, blind to the fence Matt had created between the world and the reality behind his sympathy. But this was not something that I ever asked or addressed. I didn’t allow myself to. I was restrained in my silence. Contained, controlled.

The only times he ever dropped the sympathy act and the catchphrase was when we were *not* in public. Family reunions, birthday parties, or baby showers were the few times he felt it was appropriate to indulge in front of others while in the midst of making sure I never tasted real sugar. During one of these times, his grandmother made a German chocolate cake—my favorite—for a birthday party, and although Matt was very vocal about me not being “allowed” to have any, he helped himself to two pieces.

“I want to try some,” I said said, knowing that the cake would leave my stomach before I’d ever digested it, but wanting it anyway.

Matt laughed. “You can’t have that.”
My mother-in-law must have seen the look on my face, so full of the anger and resentment I dared not express vocally, for she turned uncomfortably to Matt and said, “Maybe you should just let it be her decision.”

Matt had laughed again. “She can’t have it. It’s as simple as that.” Then, when his mother’s expression did not waver, he added, “She’s diabetic, Mom.” He shook his head, as if she might have been the stupidest person he’d met in a while.

This was his choice to make, not mine, and no one—myself included—was brave enough to really challenge him on that notion. Inside, though, I seethed.

I was still thinking about that German chocolate cake the following day when I went grocery shopping with my two-year-old son sitting in the front of the cart. Besides the fury I still felt at the situation in general, I couldn’t ignore that I was also experiencing longing—hunger and craving like I’d never felt in my life, not even when I was starving myself.

As I passed the doughnut case in the bakery section, this desire hit the center of my stomach with furor.

Matt’s voice echoed in my head, snickering, as if he were there with me: “You can’t have that.”

I didn’t continue on through the store, though. I stayed, paused in front of that doughnut case, considering the fact that Matt was not there in the store with me. Did I really have to allow his pestering voice into my head?

Again, I heard his fervent words. “You can’t have that.

In response, Ed answered, Yes, you can.
Before I really knew what I was doing, I moved over to the doughnut case and opened it. I couldn’t decide which one looked most desirable, so I filled a bakery bag with as many as I could fit—glazed cinnamon buns, raised doughnuts sprinkled with coconut or granulated sugar, cake doughnuts frosted with thick maple flavoring. I placed this bag in my shopping cart along with my other groceries and continued on.

Later, when I was on my way home, I pulled into an empty parking lot and planted my car at the very back. Nobody around to watch, save for my toddler in the backseat, I took out my doughnut bag.

The first bite, from a glazed cinnamon twist, was like heaven. The sweet, soft treat practically melted in my mouth, and I closed my eyes as I chewed and swallowed. As soon as it was gone, I started on the second—not as decadent as the first but still wonderful. My stomach started feeling full after the second, but I continued on nevertheless. As I ate—third doughnut, fourth, fifth—I stopped tasting them, but somehow still reveled in the methodical activity of “bite, chew, swallow,” again, again, again. When there were no more doughnuts left in the bag, my stomach felt ready to explode, but I was strangely content.

I let myself out of the car and put my fingers down my throat, vomiting as much as I could right onto the pavement. I threw the doughnut bag on top of the mess, abandoning it, and carefully cleaned my mouth with napkins from the glove compartment before driving off. Matt wouldn’t know.

Binging began as a random event that only occurred once in a while, but gradually developed into an activity that happened weekly, then daily. Soon, everything
else I did revolved around when I could sneak food, and how I’d manage to isolate myself so that I could throw up.

This habit was often shrouded with shame, and I dreaded anyone finding out about it. Still, though, it was mine—my own secret that no one could take away from me. Nobody could stop me. No one had control over my binges except for me … or so I thought. I didn’t stop to consider, once the habit became a possessed necessity, that perhaps I had lost control over it as well.
I almost left Matt in 2006. I thought I knew what I wanted: to not be with him anymore. The only problem was that I also didn’t know where I’d go or what I’d do afterwards. I hadn’t finished college, and I now had a very young child and very little else in my life. Stepping out of my three-year marriage sounded liberating, but it scared me.

I had grown weary of Matt’s short temper, as he had very nasty habits he took to whenever we argued. It became second nature to flinch as a remote control or telephone receiver flew just past my head to smash against the wall behind me. I became creative with my alibis when it came time to tell people why we had holes and dents in our walls, and why doors were often broken. One time he even lost his temper in the car and used his feet to crack our windshield into one large, splintered spider web.

I had become numb to the numerous terms he labeled me with. The first time he called me a whore, it hurt. The first time he called me a cunt, it infuriated me. But these names, along with such terms as bitch and slut, came to mean nothing more than an odd part of my identity Matt used against me. What difference did it make? There wasn’t anything I could do about being a fat bitch or a chubby cunt or an overweight slut if these labels were based in fact.

Our neighbors called the police to our home three times. I thought about leaving Matt for the first time when he yelled insults at me for an hour and then, when I tried to call my sister, held the phone over my head and taunted me with it. I only really
considered leaving Matt after a similar incident, which left me sobbing on the couch with Brendan in my arms. He pulled my child away, insisting I was too crazy to care for him.

And so I almost left him.

The day after I made the decision to leave, though, something happened that made me think twice. After realizing that I was over a week late, I secretly bought a pregnancy test and used it right then and there in the drug store bathroom. My heart sank incredulously as I stared down at the little blue + sign that confirmed I was pregnant. In denial, I visited a Planned Parenthood clinic to have another test performed. When they returned the same verdict, I decided to give my relationship with Matt one more try.

My body reacted poorly to this pregnancy from the beginning. I often woke up to nausea and lived in fatigue. My glucose levels rose and dropped with seemingly no rhyme or reason. There were still, however, aspects of my life that I held as inner secrets.

At nights when everything darkened and everyone slept, I sneaked cookies, little cakes, doughnuts—whatever I could get my hands on. Sometimes I would make excuses to go out to the store by myself so I could binge on multiple bags of fast food—stacks of sandwiches and piles of fries. And then I would keep myself in isolation until I’d finished purging. This release offered such relief, and the moments directly afterward felt like a drug, taking my mind high into the clouds. The process of stuffing as much food as I could into my body, feeling the constriction of it, and then letting it go freed me for a few minutes … but those few minutes were what I lived for.

Still, it shamed me to know that the overeating and self-induced vomiting could be hurting the pregnancy. Whatever relief the destruction of my body gave me, I knew well enough it couldn’t be good for a growing baby and so I’d always promise myself
that whatever binging and purging episode I happened to be partaking of would be the last.

“Tomorrow,” I’d whisper out loud, feeling self-assured. “I’ll stop doing this tomorrow.”

The next night, I inevitably promised myself the same thing. Tomorrow would always be the magical day when I would give up my bulimic behaviors. I always felt anxious for tomorrow to arrive. The quiet logic that existed somewhere inside my head always nagged at me when I was getting ready to purge, telling me that it wasn’t good for the baby.

You know the baby will be fine, Ed insisted, his voice soothing. You can’t let yourself get fat again. My mind would then be inundated with images of my 190-pound self at the end of my first pregnancy. It was all it took to reinforce that, even if I wasn’t doing the “right” thing, I was taking the only acceptable course of action.

In spite of the purging, however, I watched my body expand. It didn’t swell slowly, gradually, in tandem with the baby. It enlarged by the day, leaving me unable to zip my jeans after only a week. I tried adding more exercise to my daily routine, as much as my tired body could manage. It didn’t stop my body going from 120 pounds to 140 pounds after only six weeks of pregnancy.

I stayed up at nights, fearfully considering what I was bound to look like after nine months.

At eight weeks along, though, something happened that changed the course of events. In the middle of an otherwise peaceful night, it came to my attention that I was
bleeding, and I instinctively knew something was wrong. Matt drove me to the hospital, where I was informed that I was in the midst of losing my pregnancy.

“There’s nothing that can be done,” the doctor told me gently, the nurse at his side. “There’s no stopping it at this point.”

I stared at him blankly, not sure I understood what he was saying. I whispered, “What do you mean?”

“You’re miscarrying,” he said again. “It will take a few days to complete. You’ll know it’s finished when you pass the yolk sack—it’s about the size of your fist.”

The nurse looked into my wide eyes, the emptiness that resided there. “It’s okay to cry,” she told me, searching my expression for emotion, perhaps devastation or anything beyond the cold numbness now resting over me.

“These things just happen sometimes,” the doctor continued, trying to comfort me with his words. “Miscarriages are more common than you think.”

The following day, I passed a yolk sack and thought my pregnancy was officially over. Still bleeding heavily, however, I returned to the hospital, worried that something else was wrong. A day later, I passed a second yolk sack.

Twins.

“There was most likely little you could have done,” the doctor told me again. But thoughts about my nightly purges haunted me.

I felt loss. It’s not easy to understand how someone can mourn the loss of an eight-week pregnancy, but it was a loss I experienced as a very real passing. My 145-pound body transformed into a shell as I came to terms with the fact that I’d lost two
babies, and Ed’s words, normally so comforting, only pained me: *At least you can get to work losing all that extra weight now.*

Shortly after the miscarriage, Matt took a job in St. George, Utah. In a way, it felt nice to have a new beginning—a new city, a new apartment, a new start. Perhaps I could create a new me. Though I wasn’t sure what a “new” me might look like, I knew that a positive change needed to start with weight loss. So as soon as we got to town I found myself a new doctor and unloaded all of my weight woes onto him.

I fought tears as I explained, “Ever since I gained weight with my first pregnancy, it’s been so hard to lose weight. It comes on so quickly, and just sticks.”

My new doctor’s eyes almost seemed bored. “Well, okay. You are a diabetic, don’t forget.”

“атьknow, but…” I thought about other diabetics I knew about: former Miss America Nicole Johnson Baker, Halle Berry, Mary Tyler Moore, and Sharon Stone—none of them seemed to have to accept the notion that diabetes was equivalent to fat. I implored, “There has to be something I can do.”

The doctor’s eyes looked thoughtful. “Well, there are some diabetes medications that assist some people with weight loss,” he mused. “Of course, none of them would do you any good, being Type I and all.”

*Then why bring them up,* I thought with narrowed eyes.

“Look,” he said, holding his hands up, “insulin is a hormone, and it’s inevitably going to cause some weight gain. But you need it to survive, so there’s not much you can do about it. I really don’t know what to tell you.”
Angry, I spat out facetiously, “Well, maybe I should just stop taking my insulin, then.”

His expression didn’t waver. “You’d lose weight,” he assured me. “But you’d also die. I wouldn’t say it’s worth it.”

Even though I made a mental note that night to find myself a new doctor, one who at least pretended to be actually engaged with my disease, I could help but think about what he’d told me that day.

I remember Ed’s voice, dark and shadowy, popping up quietly and subtly. *Maybe you can use this to your advantage. Think about it. If taking insulin makes you gain weight...*

It seemed logical. I perched on the edge of my tan couch, the room lit only by a dim lamp to my right. With my son sleeping down the hall and Matt on the computer in the bedroom, I sat alone and thought about the possibility of *not* taking my insulin. The voices of the many dieticians I’d seen throughout the last few years entered my head, reminding me about the irreversible damage that would happen to my body if I didn’t take it. But I also remembered something else they’d said: my body couldn’t metabolize carbohydrates without insulin.

My heart sped up as I realized what this meant.

*See?* Ed said triumphantly. *You don’t have to gain weight from this disease. In fact, you can probably lose even more weight than you did before you had it.*

I smiled a bit, remembering that one of the symptoms of undiagnosed Type I diabetes is extreme, unexplained weight loss.
I couldn’t completely ignore, though, the risks involved with intentionally letting my glucose levels soar: blindness, kidney failure, loss of limbs, dialysis, coma. Death.

Ed assured me, *That won’t happen right now. You can lose weight and worry about those other things later.*

So before I went to bed that night, I intentionally skipped my nightly dose of long acting insulin. I had no idea how I’d feel the following morning, but that wasn’t bothering me—I only wanted to know how quickly the weight would come off.

I developed a new routine. I starved myself all day and then ate what I wanted for dinner—sometimes I binged. Then I headed down to our apartment’s exercise room, where I’d purge in the public bathroom and then work out for at least thirty minutes. And through it all, I didn’t give myself a single shot.

I ignored the thick haze that settled over my mind, the way I could make it through a day only by dragging my body, zombie-like, through the motions. I weighed myself every day and delighted in seeing the numbers descend.

In January of 2007, I weighed 145 pounds. By February of 2007, I had dropped to 110 pounds. And everyone who noticed showed nothing but confusion.

After a brief visit with my in-laws, my father-in-law commented on how quickly I’d become so thin. “You seem to be eating okay,” he said. “So I’m not sure what’s going on, but maybe you should see a doctor.”

He must have noticed how serious I was when it came to eating, even at normal mealtimes. Two to three helpings of meat was usually my norm, accompanied by piles of pasta or potatoes, and a stack of rolls that could easily be identified as the Leaning Tower of Bread. These times, however, were very uncomfortable, because I knew that everyone
else at the table could see what I was eating. They watched. Stared. Their eyes narrowed and expressions gawking, they all focused their attention on me. They tried not to be obvious—they talked amongst themselves and laughed lightly at each others’ jokes—but I knew. Out of the corners of their eyes, they were watching me.

They were watching me for two reasons. First, they were thinking, “Kate, you’re a diabetic—why are you eating all of those carbohydrates and sugars?” And then, they were also thinking, “Kate, how do you eat all of those carbohydrates and sugars and remain so thin?”

I don’t think people honestly didn’t know that the bathroom had become my unloading dock immediately after meals. What they didn’t know, of course, was that I was skipping insulin injections, and so the sugar I ate floated around in my body, unprocessed, and that was why the weight literally melted away—my body fed off of what it could, the muscle and the tissue, off of itself.

By March, I had reached 100 pounds. And even though everyone around me—my husband, my in-laws, my friends—seemed to remain clueless, my doctor knew well enough what was going on. The same doctor I had vowed to rid myself of called me on my unhealthy habits after I’d lost nearly fifty pounds in less than two months.

To my surprise, they actually had a name for it: “diabulimia,” or, as it’s generally known throughout the medical community, “diabetic bulimia.” It’s pretty self-explanatory, this generalized term used to describe diabetic people who binged ‘till their stomachs hurt on the most fattening, forbidden foods in the world, and then proceeded to make themselves throw it up. Diabetic people who also refused to take their insulin, allowing any sugar and carbohydrate that didn’t manage to make a reverse trip up the
esophagus to eat away at their bodies, their lives, all because, in the end, it would make
them skinny. People who ate too much and weighed too little, people who were allowing
their bodies to continually drift towards the impending reality of death.

People like me.

“This is serious,” he told me, not quite able to remove the bored expression from
his eyes. “If you continue on this way, you will kill yourself.”

But not now! Ed insisted. You have time—you just need to figure out how to stay
thin while on your insulin before you go back on it.

And although my mind wandered back and forth between the doctor’s logic and
Ed’s reasoning, all I had to do was remember what it felt like to be 145 pounds and I was
always convinced that going back on my insulin was a bad idea.

“You have a son, don’t you?” the doctor tried. “Do you think he wants to lose his
mom to diabetic complications?” He paused and then added, “Don’t you want to be there
to see him graduate high school, to see him get married?”

I stared down at my hands.

Do you want to watch him do any of that if you’re fat? Ed countered.

Tears stung my eyes, but the truth was that I couldn’t imagine doing anything in
my life if I gained back the weight I had recently lost.

At home, Brendan’s three-year-old eyes gazed brightly at me, unaware of what
was happening inside my body. As I watched him play with toys or climb at the park, I
wished I had enough energy to play with him, but assured myself that losing more weight
would make it all worthwhile. When I was unable to read to him in words more than
droning monotones I barely comprehended, I longed for him to know how books could
be bright and full of life, but told myself that would come.

And each and every time he ran to me and threw his small arms around me in his
strong child’s embrace, I cried. When I matched his, “I love you, Mommy,” with my
own, “I love you, too,” I always had to ask myself—Do you really?

But Ed was always there to assure me, *You’re fine. You’re not dying. Don’t be
ridiculous.*

Every day, I half agreed with him. I conceded that I still needed to lose weight,
and that I would do what I needed to for the rest of the day, but that the following day I’d
need to start eating healthy and taking my insulin—try to maintain a thin body *and* a
healthy body. I needed to try, at least.

And I would try. Tomorrow.

Living in St. George, only two hours away from where my sister, Lisa, now lived
in Las Vegas, I decided that March to visit her. Since being married to Matt, I only saw
my family during rare, brief visits, and so the thought of taking a break from my life to go
see her and my new brother-in-law, Tommy, was a brief respite.

So I drove through the desert, Brendan in the backseat, intending to have a
relaxing weekend and then return to life as I knew it. What began as a momentary escape,
though, slowly transformed into a cry for help.

“How are things?” Lisa asked one evening as we sat on the bed and watched TV.
By the way her eyes quickly, yet critically, examined my body, I knew what she was
thinking. I knew that she “knew” things were far from all right.
“It’s strange,” I told her, moving my fork through the plate of macaroni and cheese she’d made, the macaroni and cheese we both knew I’d swallow and then bring up again. “I know I’m thin now. But it still isn’t enough.”

She looked at me. Her eyes were a mix of so many messages—I told you this would happen, they said. Her gaze sympathized, but also pitied. When she finally spoke, her voice sounded almost dejected. “What can I do?”

I shrugged, not sure. I wanted to cry, but was somehow unable, as I said, “I know I need to stop what I’m doing. But I don’t know how anymore.” I wanted her to tell me how to stop, how to regain control of my life.

“How are things with Matt?” she wanted to know.

I sighed. Lisa, of all people, understood bad relationships, having escaped one herself only a few years ago. My words, “All right, I guess,” spoke to her much differently than they would most people.

Her voice grew quiet as she asked, “Does he hurt you?” I could tell she suspected that he did.

I shook my head. “No,” I responded through a cracked voice. It was only then that tears finally escaped my eyes. “Not really.”

Not through his fists, I explained, in words I’d never spoken to anyone else. Not with bruises readily visible to anyone else. “He calls me names,” I told her, my eyes blurry. “He tells me I’m not worth much.”

*Because you’re not,* Ed interrupted.

“He breaks things, and blames me for it. He sleeps with other men. And it all hurts, just not on the outside.” I cried, and asked, “But isn’t that all normal?”
“No,” Tommy offered, always the candid voice of logic. “He sleeps with other men?”

I nodded, explaining that Matt had a boyfriend on the side named Sam. “But he’s bisexual. Shouldn’t I be understanding about that?”

Tommy laughed, though I’m sure he didn’t mean it cruelly. “He chose to marry you. How would he feel if you said you had a thing for black men, and that he needed to be understanding about the fact that you needed to sleep around and get your fix once in a while?”

I remained silent. Matt would never, not ever, agree to me sleeping with anyone else.

“Is this why you’re hurting yourself?” Lisa asked. When I didn’t respond, she added, “You really need to get help.”

“What kind of help?” I demanded. “Nothing’s going to help.” I honestly believed that. “I can’t stop. If I do, I could wind up at 145 pounds again. I need to be below 100.”

Lisa gazed at me sadly. “It’s only a number, Kate.”

Only a number? Numbers ruled my life. The number on the scale had to be low or I would launch into panic mode. The number on my glucose meter, which was always inevitably high, reminded me that I was poisoning myself with the sweet decadence that I couldn’t stay away from. The numbers on the food packages—calories, carbohydrates, sugars, fat—were an inevitable part of my life, as I was told I had to count them, calculate them, in order to control my disease. Numbers were everywhere. How could any number be only a number?
As the number on my glucose meter went up, the scale numbers went down. 300 mg, 400 mg, 500 mg inevitably meant 110 lbs, 100 lbs, 90 lbs. The soaring numbers on my meter represented all of the sugar that wasn’t being processed, and I relished in it, for I knew that if they were absorbed into my body, the 90 on the scale would rise to 95, maybe even 100.

How many days did I have left in my life? Five thousand? Five hundred? Fifty? How many days of my life were being cut off on a daily basis, like branches sliced from a tree, never to grow back again? How many binges would I perform today, and how many times would I attempt to bring them back up? How many times would I tell myself that it was the last binge before I got myself on the right track again? Guesses, numbers, floated through my head.

Lisa knew this well, able to recall her own bulimic years as a scary time when she, too, had been lost in the number game. What she didn’t know was how to help me see things the way she had, how to wake up one day and realize that the world was beautiful even outside of Ed’s numbers.

I learned later that Lisa began preparing herself for my death after that visit. Once I’d gone home, she wandered her house, sobbing and picking up the handfuls of hair I’d shed in the few days I’d been there, knowing that every day thereafter could be the day she’d receive the phone call.

It was only with her help, though, that I finally left my husband. After numerous visits in which I vented my frustrations about Matt and Ed, I finally sat in the middle of their living room floor, their telephone receiver in my hand.
“I’m going to stay here for an extra day,” I told Matt over the phone. “I won’t be home when I said I was going to be—I’ll be a day later.”

I never knew what to expect from Matt—whether he’d casually acknowledge that I’d changed my plans, or start arguing with me about it. On this day, he began berating me for being a liar, for never keeping my word, telling me that he’d never allow me to take Brendan to Las Vegas again if I wasn’t going to be home when I said I would.

My eyes stung as he yelled at me through the receiver. Familiar names launched directly into my ear: stupid bitch, he said, fucking little liar. I looked over to where Lisa stood in the kitchen, preparing a pot of coffee. She tried to carry on as though she wasn’t privy as to what was happening, but I could see it in her face: she heard everything.

I could almost feel her anger as I sat in her living room and merely listened to my husband’s verbal assault. So then, with a strength that I never had when I was by myself, I spoke up, interrupting his tirade. “You’re wrong.”

He paused. “What?”

“Everything you’re saying about me—it’s not true.” My words were brave, but my voice remained small.

He snickered. “You’d like that, wouldn’t you?”

I squeezed back tears. With a deep breath, I spoke the words that Lisa and Tommy had been telling me for months now, words I wasn’t sure I fully believed. “I deserve better than you.”

Again, he paused. “Excuse me?”

I repeated my words, louder. “I deserve better than you.”

“Wow,” he said, his voice low. “Ouch.”
“Yeah,” I agreed, growing louder still. “Ouch. It hurts doesn’t it? Do you know how many times you’ve said that to me?”

In the kitchen, Lisa finally turned to look at me, to watch what would happen. I barely noticed, as involved as I was with my phone conversation. Once I was off, once my lack of confidence was buried beneath my own yelling, I let everything I was feeling out—including the fact that I no longer wanted to be married to Matt.

I called our relationship off for good that day, over the phone. And Matt didn’t take me seriously until I drove back to St. George earlier than I said I would, when I knew he’d still be at work, and spent the afternoon packing my car with everything that would fit—clothing, Brendan’s toys, my favorite paintings and decorations, books, music, as much of my life that could be squeezed into the back of a Pontiac. I then drove myself and my son to a hotel, where we’d live for the next few weeks.

Lisa and Tommy’s support made it possible for me to serve Matt with divorce papers and then pick myself up and start my own life, a life in which I finished college as a single parent, and even began applying for graduate school. Although these acts made me seem like a strong, durable woman on the outside, I remained broken on the inside, spending each night with Ed.

Living on my own, my binging habit only got worse. Once Brendan was in bed each night, Ed came knocking on the door, smiling handsomely and holding out boxes of candy, packages of doughnuts, and entire cakes. Each night, I convinced myself that this would be my last date with Ed, that I would break up him for good the next day. But my binges and purges remained the only parts of the day I looked forward to.
The first bite was always decadent. It was usually a doughnut, soft and chewy, sweet and smooth over my tongue. From there it would be chocolate and fruit-flavored treats, saccharine and wonderful. Delicious, sticky, and slowly filling me up. Chew, chew, swallow. Myriad sugar crystals would move through me like poison, and then my stomach was a balloon and ready to burst. Still, chew . . . chew . . . and then swallow. Cough . . . choke . . . gag. The release, so relieving, would free me. Choke . . . gag . . . retch. Gag . . . retch . . . gasp. The frosting at the corners of my mouth would be replaced by spots of newly regurgitated food, until I washed them away, cleansing myself.

And my body would scream for insulin.

I offered my body up to Ed to shape and form. I offered it up to other men—real, attractive men—to use: Jared, working with me at Starbucks, used my body and then shunned me for another co-worker; Ryan used my body first beneath a canopy of stars by the river, and then with his best friend, Jake, in a threesome I thought nothing of. The various men who stared, gawked, at my body as I stripped it of clothes on the stage before them, were all nameless and faceless. But I danced for them, spun for them around a cold, metal pole that offered me no more balance or grounding than any other aspect of my life.

My first real wake-up call came when I passed out while visiting my younger sister in Canada and was rushed to the hospital. My blood sugar was so high at that point that, had I been living in the medieval era, I probably would have fallen into a full-blown coma and died. But, as I was born into the modern era of technology, I was given another chance—they were able to hook me up to an insulin dispenser and slowly bring me back to the world of the living.
That experience in the hospital got me thinking about all of the things that I wanted to do and see, all of the things I needed to do before embracing the possibility of nothing. Like I did every day, I decided that I was going to turn my life around, and I assured the doctors that I would leave the hospital and begin taking my insulin regularly, start eating like a normal person.

I stuck to my plan.

For one week. And then my jeans started feeling tight.

I knew that I needed to gain weight, that to be healthy I couldn’t let the initial “re-feeding” process get to me.

But it did.

And then I decided to go off of my insulin again . . . just for a little while, until I could get my weight under control again. That night, because I was feeling so down on myself, I let myself have a binge. For the first time in a week, I gorged myself on thirty dollars worth of junk food and then threw up what I could. But it was only a one-time thing—I told myself that over and over again.

I would get back on my healthy eating plan tomorrow.

My second wake up call happened right after I found out that I had been accepted to study as a graduate student at Utah State University in 2009. That night, when I explained to Brendan that we would be moving north, he climbed into my lap. Snuggling against me, he commented, “But Mommy, are you too sick to move?”

At first, I couldn’t say anything. Where had this come from? Who had he been talking to? Or was he simply more aware of the situation than I ever gave him credit for? Those simple words that he spoke that night, though, made me wonder: was I too sick to
move? And what would happen to my son if I died? It was a question I had been
avoiding, but was becoming frighteningly real.

I knew that he needed me. And I knew I needed to live—if not for myself, then
definitely for him. I wanted to be there for him throughout his life. I didn’t want to
abandon him here, not for the sake of two stupid diseases that had taken over my life. I
was strong, wasn’t I? Stronger than those diseases? The thought of dying senselessly and
leaving my son behind brought tears to my eyes, and I finally answered him: “No. I’m
fine, sweetie. I’m going to be just fine.”

I promised myself. I promised him.

After I put him to bed, I got a huge trash bag out of the pantry and pulled out all
of the binge food I had hidden around the house. I set it out on the table—candy, cookies,
doughnuts, potato chips, muffins, and frozen pies—and opened the garbage bag, ready to
make a ritual sacrifice of the poison I had been living off of for too long.

I dropped a box of cookies into the bag. It was painful. All of those delicious
cookies, gone, wasted. I dropped some chocolate doughnuts in the bag. My movements
were stiff, mechanical. But I had to do it.

Or did I? I bit my lower lip, staring at the sea of junk food before me. So much
food . . . did it have to go to waste? Perhaps just one more binge would be better.

Yes. I would begin making good on my promise tomorrow.

Tomorrow.
CHAPTER 6

ANGEL

The only thing I could think was, *Am I the thinnest one here?*

The thinnest girl in the new group of graduate students at Utah State University’s English department. The thinnest new graduate instructor. I would have given anything to claim those titles. The first person to show up for training in August, the week before we would begin classes, I sat quietly in my seat and carefully surveyed each girl that walked into the room. Was this one thinner than me? Did that one see how thin I was? I felt my heart speed up in anxious pitter-patter when I did spot one girl, tall and statuesque and more slender than myself. She entered the room poised, russet curls falling down her back, ignoring my presence as she spotted another friend. Five minutes later, a different girl who claimed more skinniness than either the tall girl or I sauntered in, causing me to shift uncomfortably in my seat.

Of all the graduate students excited to embark on the journey of becoming introductory English instructors on that day, I could certainly not profess rights to the title of “thinnest” and felt I may as well die right then and there. The classroom walls, minimally decorated, closed in just a bit, and I looked intently toward the windows in hopes of alleviating my anxiety. The week of training ahead was going to be a long one.

I was sure, in fact, that everyone else focused intently on my weight every time I spoke. They probably registered that I was not the thinnest, wondered why I was so fat, and judged me accordingly. Why hadn’t I chosen a baggier outfit that day, something that would have hidden the shape of my body better than the brown sweater and jeans that
adorned me? As I met people—the man sitting next to me called Andrew, the thin girl on the other side of me, Becky, the folklore student from England named Peter—the knowledge that they could see I wasn’t a skinny-mini overshadowed the entire week with a preoccupation I could not cast aside.

What I couldn’t make up for with my physical appearance, though, I compensated with my actions. While eating lunch with my fellow graduate students, I made sure to eat very little or nothing at all, as if that would show them I was at least trying to achieve an ideal look. My occasional meal usually consisted of a Lean Pocket I brought from home (less than 300 calories, each and every one of them).

“Is that all you’re having?” someone would ask, and I would lightly smile, insisting I wasn’t hungry for anything else.

While I obsessed about others’ perceptions of my body, the reality about my concerns and my lack of self-esteem was meticulously hidden behind a veil of confidence. I put forth an air of security but didn’t recognize how successful it was until the graceful girl with the curly hair approached me on the second day of graduate instructor training.

Her approach surprised me, though her words surprised me more: “I love some of the things you say in class. You’re such a strong, self-assured woman—I admire that.”

“Thanks,” I replied, uncertainty carefully concealed within my voice. “I appreciate you saying so.”

She smiled. “I’m Simone.”

This conversation began the first of many between me and the girl I noticed previously for her small frame. For the rest of our training week, we sat beside each other
and shared stories about our lives, though I never dared mention my deep, intimate relationship with Ed.

However strong and confident I appeared on the outside, Ed dominated my personal life. Behind the closed doors of my lonely apartment I often sat up, long after Brendan had gone to bed, anxiously huddled in a nightly rendezvous. *Don’t eat that*, Ed would command, giving me two choices during dinnertime: either obey or be burdened with tremendous guilt for hours, possibly even days. During that first week in Logan, Ed kept me up at night, arguing with other parts of my mind about whether to get up and ease my hunger, whether to throw up something I’d already eaten, or whether to give in to an urge to binge eat.

On these nights, my eyes stared desperately out my bedroom window and up at the stars, like a child making a bedtime wish. Only my longings had nothing to do with new toys or trips to Disney World—as I lay beneath damp sheets, sweating and shivering at the same time, I prayed to no one in particular that my hunger pangs would dissipate, or that Ed would allow my body to digest food in peace. I wished that my body would at least drift off into sleep, allowing me a few hours of silence and rest before facing a new day through dark-circled eyes, from behind a shroud of contentment and normalcy. And then, when no force in the universe ever saw fit to answer these prayers, the dampness on my pillow sham would become a mixture of perspiration and tears.

I imagined Ed hovering over me on these nights, watching me closely, keeping me enclosed within his black angel wings.

In early September, I’d met many people in my new program, but didn’t really know anybody. This changed when the tall, graceful girl I’d met during my training
week—Simone—thought it a fine idea to throw a party for all of the new graduate instructors in the English department. She and her husband invited all of us to their cozy house for homemade pizzas and a variety of mixed drinks.

I mingled with plenty of people throughout the evening, but, aside from Simone, Peter Pooley intrigued me from the beginning. I had spoken to him only a few times since we graduate instructors had met as a group but knew from those discussions that he was from Norwich, in southeastern England, and had received prestigious bachelor’s and master’s degrees from Oxford University. He carried himself with an air of aloof, yet kind, astuteness, and I think I could have listened to him talk all night just for the sake of his accent. As soon as I arrived at the party, I planted myself next to him on the couch and struck up conversation, during which, above all else, I learned about the various interesting people in his life: his sister, Emma, who was a medal-winning Olympic cyclist; his friend, Leon, who had information on the medieval literature program I was interested in at Oxford; his girlfriend, Jane, whom he described as “mad,” a loose term roughly meant to translate as “endearingly bat-shit crazy.”

“Oh. You have a girlfriend?” My voice, asking this question, was carefully casual, feigning extreme interest to disguise the mild disappointment I felt. “Did she go to Oxford, too?”

“Yes,” Peter answered, his tone as casual as my own. “She’s in law school now. I was too, for a while.”

Peter wasn’t yet twenty-four when he discovered, halfway to a law degree, that he’d rather pursue a second master’s degree and a PhD. Go figure.
I spoke to Simone, however, more than anyone else that evening. After everyone else had gone home, I sat with her in her office and talked into the early hours of the morning. Her husband, Kevin, made us margaritas and cherry-flavored screwdrivers, and I reasoned to myself that I was too drunk to drive home, and therefore justified in a four-hour-long, late night conversation about religion and feminism.

It still interests me that Simone and I originally bonded over these issues—overcoming sexism in an overly patriarchal society—and that she saw in me a strong, self-assured woman who was the epitome of feminine strength when, in reality, I was killing myself for the sake of being thin. With every sip of my drinks, as the sugar from the orange juice and the alcohol weaved its way through my system, I knew it was tantamount to poison.

But that poison wove through my blood day in, day out, like a snake leaving behind venom in its wake. I felt that venom take control of my body each time I moved: when I stood up my legs burned with the effort, and when I walked my ankles felt pulled down as though strapped with ten pound weights. Most days I wished I didn’t have to get out of bed. As my weight fluctuated, from 100 pounds to 120 pounds, back and forth, I felt weaker, more drained than ever before. There were mornings I needed to sit down in the shower, the hot water splashing down over my head and the steam a thin mist before my eyes as I tried to gather the strength to stand again. Sugar weighed me down in ways the scale had no ability to read.

I dragged myself to the university every day, usually through the large cemetery, where I felt oddly connected to the hundreds of other people there who were no longer people. By the time I reached campus, I’d always be gasping for air. I tried to remember
what it was I’d learned years ago about diabetic complications. What was it that
happened when diabetics were dying—what did they call it?

*Air hunger.* I wheezed, gasping in whatever air I could. I was, indeed, hungry for
air. I hungered for so much.

I stopped cutting through the cemetery when I began walking with Peter in the
mornings. He became my walking partner and, as we met halfway between our nearby
apartments, we skirted around the cemetery. Some days I would arrive on the corner first
and wait, and other days he’d be there waiting for me. Either way, we walked the rest of
the way together, to the building that housed the English department and up the four
flights of stairs to our offices.

He did notice that I had trouble breathing, especially after we’d been walking, and
after a few days I mentioned it myself. As I struggled to gather air, I could barely get the
words out to express my difficulties.

With a furrowed brow, Peter finally asked, “Do you think you should see a
doctor?” The look in his eyes suggested he couldn’t understand why I hadn’t arrived at
that conclusion on my own.

I nodded. “Yeah. Maybe.” I had no intention of visiting the doctor, and such a
suggestion was not what I’d been seeking from anyone. All I wanted was to simply stop
and rest for a bit on the way to campus, or maybe even take the elevator to the fourth
floor instead of the stairs.

That night, after I had said I might see a doctor knowing I wouldn’t, I sat up on
the couch once Brendan had fallen asleep. Still gasping for air, I thought about taking a
shot of insulin. It rested in the fridge, mere steps away—it would be easy. I could do it.
Don’t, Ed said, before I had even stood up.

It would just be one shot, I reasoned. Maybe it would help me start breathing right. I didn’t have to take any tomorrow.

Don’t! Ed repeated, more urgent. I suddenly thought about all of the excess fat already on my body, and how much more would appear overnight if I took that shot. I knew I should, and yet I couldn’t.

So instead, I fell onto my side, my head hitting the soft cushions of the couch, and I sobbed. Already not able to catch my breath made crying an exhausting task.

Fear consumed me. It wracked my body from the inside out. I feared gaining weight, panicked about not losing it. I feared food and the ways it controlled me, how it had become my only escape. I feared my own body and what was happening to it—I feared closing my eyes and not waking up again. I feared the entire war I had been fighting for well over a decade: me against myself.

Alone, I curled up on the couch and cried, my fatigued eyes closing on their own.

The next morning, when my eyes did open again, I managed to make my way to the scale. Two pounds lighter than the morning before, I gave myself permission to take just a small amount of insulin—just enough so that, maybe, I could get through work that day without collapsing.

As the needle disappeared into my skin, Ed berated me. Better collapsed than fat.

I heard Brendan waking up down the hall. In a moment he’d be in the kitchen with me, asking me what we had for breakfast, giving me good morning hugs and kisses. I squeezed my eyes shut against more tears as Ed persisted: You are better dead than fat.
The truth was that I didn’t know what options I had. I wanted to leave my Ed behind, be “better,” but I couldn’t eat like a normal person, couldn’t take care of myself. I’d proven that to myself already. What were my other options?

In late September, Simone threw another party and I didn’t go. Almost everyone I knew in Logan went, but it felt safer to spend another night alone with Ed. The following weekend, however, she invited me to yet another gathering and convinced me to attend this one. I brought Ed with me, though, and left my insulin at home.

This particular party was “wild” in every sense of the word. The few of us who were there all drank too much, ate too much, and participated in more ridiculous drinking games than I ever thought existed. Two people were even physically injured that night, though I was admittedly too drunk to remember what happened to them (they say that Simone’s husband got a little wild and physical).

I remember that I ate—pizza, candy, chips—and I drank everything from beer and cocktails to juice and soda. I know that sometime in the early morning hours I passed out, probably from a combination of drunkenness and high blood sugar, but most of the people at the party that night also passed out at Simone’s house, either on the couch, on the floor, on a guest bed, or wherever they happened to be at the time.

I do know that I happened to be on the guestroom bed that night, because I offered my body there. After Simone and had I helped Peter, drunk and stumbling, to that bed, I didn’t resist him pulling me down to lie with him. I also didn’t protest when he put his arms around me, bringing my body close to his. Nor did I leave the room when everyone else did, to pass out inebriated and exhausted on whatever couch or bed or piece of floor was available. No—I willingly stayed in that room, in that bed, with Peter, and of
my own accord returned his kisses and pressed myself close to him. Whatever was to blame for that night—too much alcohol, fatigued minds, or a simple lack of self-control—neither of us objected to sleeping together, to the love that we made.

And so, in the span of one night, I became massed into that generalized sphere of immoral depravity commonly known as “the other woman.” Though I liked Peter plenty and felt connected to him as a friend, I did not fall in love with him over pink sunsets and glasses of red wine. I gave myself without a second thought. Also likely, I was a source of inner conflict for him, and I saw myself as the one thing that all women despise and dread.

This, understandably, resulted in a brief period of tension and awkwardness between the two of us. Neither of us knew how to handle the situation, other than carry on as if nothing had happened—and, of course, that would only carry us so far.

Peter finally broke the silence on the matter a few days later by suggesting that we go out for coffee. “We should talk about what happened,” he said quietly, reluctantly. And I agreed.

“Look,” he said, once we were sitting at the Quad Side Café, each with a steaming cup of coffee, “I don’t want you to think that I regret what we did … or … that I didn’t enjoy it … it’s just …” he didn’t look at me as he stumbled over his words. He couldn’t seem to decide if he did regret what had happened, or what he really wanted to say to me about it. It took a few full minutes for him to get to the heart of the matter. He did meet my gaze, finally, and a subtle hint of apology rested within his eyes. He blurted, “I have a girlfriend. What we did … it can never happen again.”
I nodded. “I know.” With a sigh, I added, “We were drunk. There’s no reason to think it would happen again.”

Turning his gaze back to his coffee, he nodded, solemn. “Yeah.”

Even though I’d known at the time that our encounter had been nothing more than a one night stand, something that Peter and I would both come to regret, the sense of rejection I felt was deep. I’d been aware in Simone’s bed that I was submitting my body for a one-time use, but faced with the reality that a one-time use was exactly what it had been shrouded me with shame that I didn’t quite understand.

*It’s just your body,* Ed assured me. *Get it thinner.*

And I tried, but only days after Simone’s party I grew so afraid of the thick fog over my mind, the unbearable weakness, that I drove myself to the emergency room. I handed my body over to the ER nurses and doctors, allowing them to hook me up to multiple IVs and monitors while my son watched Disney films on a wheel-in television on the other side of my room.

During the two days I stayed in the hospital, the doctor gave me a lecture about maintaining control over my glucose levels.

“You do know what will happen if you continue on this way, don’t you?”

“Yes,” I said, looking down at the pink blanket covering me so that I wouldn’t have to meet his eyes. “I know about the complications.” I really didn’t want him to reiterate the terrifying truths that I couldn’t escape, and yet somehow ignored.

His eyes softened as he said, “I think you should consider seeing a few people once you get out of here. You should be seeing a regular doctor for the diabetes, a therapist for the eating disorder, and a dietician to learn how to manage the two together.”
“It doesn’t work,” I responded quietly.

“What?” He raised his eyebrows in surprise.

“Therapists and dieticians don’t work,” I said, louder. “I’ve seen therapists before. I’ve seen dieticians before. It doesn’t work—nothing works.”

He stared at me for what seemed like an hour. “What are you going to do, then?”

“I don’t know.”

Ed had presented me with the possibility of simply carrying on until I died, or, if other unpleasant diabetic complications kicked in before that, I could take my own life. Most days, that felt like the only plausible possibility I had. I refrained from vocalizing this to the doctor, though. “I don’t know” left some room for hope.

When I emerged from the hospital, I worked as hard as I could to keep my blood sugar at a normal level, to eat normally, and to take normal amounts of insulin. I did well for a single day, and then fell back to the same place I’d been before my hospital stay. Ed’s winds spread over me again.

In October, I planned a trip to Las Vegas with Simone, Peter, and another close friend of ours, Andrew. My mom agreed to come down from Canada and spend a weekend with Brendan, and so the four of us piled into my Honda and drove the eight hours down into the desert, to the hotel suite we’d booked online. We brought plenty of food with us and bought plenty of alcohol once down there, but my insulin remained safely tucked inside my refrigerator in Logan.

On the surface, this was simply a fun trip among four friends. Simone and I helped each other with hair and makeup in our hotel, and Andrew and Peter cooked us dinner in the small kitchen we’d been equipped with. Andrew drove us all over the strip,
and, as the only one not drinking, chased us down when one of us got too rowdy and took off. We walked through the gardens at the Bellagio, looked at the water show, and spent hours gambling at penny slots, scoring free drinks and cheering whenever one of us managed to gain a dollar.

Beneath the surface, my body cried at me for help. If I possessed an inner self, lost somewhere throughout the years, she called to me that night, begging for a little less food, a little more insulin. And I hid behind the truth that I’d left it in Logan.

On that trip, Simone and Andrew somehow wound up sharing the king sized bed in the room, while Peter and I claimed the foldout couch bed in the living area. Behind closed doors, we fell into each other’s embraces; for a second time, our bodies and lips met. Even though I was running on alcohol and too much blood glucose again, I managed to pull away just long enough to lay reasonable question to what we were about to do.

“Wait. You said we shouldn’t do this again.” As much as I deeply wanted to do it again at that moment, I knew one of us had to put the brakes on an act that we said we’d never participate in again. A moment of silence passed between us, and then I added, “You have a girlfriend. Remember?”

He rolled onto his back and sighed, staring up at the ceiling. “I know.” His tone was almost regretful.

We held a short conversation about the matter, he lying on his back and me on my side, propped up on one elbow. Two people in bed together, discussing whether or not to have sex in light of the fact that one was promised to another. I do not remember the specifics of this exchange, other than Peter telling me that he did not want to be with
Jane, that he didn’t know *why* he was with her … and that he did not feel guilty in his attraction to me.

“I should feel bad about it,” he said quietly, “but I don’t. That bothers me. It’s what bothers me the most about this whole situation.”

My response may have been anything—I have no recollection of it—and, while his words shouldn’t have been enough for me to agree that sex was a good idea, they were, and we shared another night together. And, in the morning, I was still the other woman, still torn between my affection for Peter and my loathing for my lack of self-control, both emotions equally strong.

In a repeat occurrence, we barely spoke on the drive back to Logan, and then met for coffee to promise, again, that we would never be physical with each other again—that I would remain a good friend, and he would be faithful to Cat.

Something begins to happen, though, within a person when you’ve slept with someone more than once. My feelings for Peter were beginning to grow into more than what I could offer as a mere friend. I imagined us together again, and I longed for it—as wicked as it made me feel, I daydreamed about Peter deciding that he’d rather be with me than with Jane. I beat my inner self up over these feelings more than once, suspecting that karma would have its way with me somewhere down the road. How could I do this to another woman? But my feelings for Peter did not diminish nevertheless.

Still, our friendship remained platonic for the rest of the following month. I believe he knew how I felt about him, and also that he felt the same towards me, but we did nothing about those feelings … until, that is, the night before Thanksgiving.
Peter came over to my apartment that night to watch movies. My son was visiting his father for the Thanksgiving holiday, and so we had all night to do anything we so desired. Despite the fact that my on-campus apartment prohibited the consumption of alcohol, I made us blended margaritas to consume while we watched movies.

As we sat on the couch together, my blood glucose dangerously high, I grew drowsy. Peter noticed this, and asked me if I wanted to lie down. “Do you want to put your head in my lap?”

This could have been completely innocent, but even in my less-than-cognizant state I knew where it would eventually lead. I cannot say, though, that I didn’t want it to happen, so I happily agreed and lay my head on Peter’s lap, allowing him to stroke my hair. We were touching again, and I had longed for this the entire month.

After our last movie had ended, it was very late and we were very drunk, and so I invited him to spend the night. We had only just arrived in my bedroom when he told me that he very much wanted to sleep with me again.

I only half-heartedly commented, “But we said we wouldn’t again.”

He was half-hearted, too, as he shrugged his shoulders. “I suppose we can go for coffee again tomorrow and talk about it.”

I shook my head, though I was smiling. “Peter…”

I suppose I deluded myself into believing, every time we had sex, that Peter was making a decision to be with me instead of Jane. It was a hope, however a distant one it might have been, that I clung to, forced myself to believe. I desperately wished our encounters to be more than a heated affair—wished myself to be more to this man than the “other woman.”
But the following day, Thanksgiving, the awkward distance between me and Peter returned. We barely spoke that day. Both of us had been invited to Andrew’s parents house for Thanksgiving, and it turned out to be a lovely affair despite the tension between me and Peter and a hike that we all took after dinner. This hike would be better phrased as a “climb,” up a steeper-than-steep mountain, that I knew to be a bad idea for me before I even went. Andrew’s parents insisted that I didn’t have to go if I didn’t want to, but, as tired as I felt, I also didn’t want to be left out, and so I went.

With each step, though, I wished I hadn’t. The mountain was beautiful, dotted with the first snows of the season, and the crisp air was clear within a blue sky. But I had little in me to enjoy any of it. Only about halfway up, I could barely breathe. And my body wasn’t going to be of any help to me. Perceiving itself to be under physical stress, it began releasing a fair amount of sugar into my bloodstream to help get me through. In doing this, my body meant well, but ultimately made me wonder if I was going to survive that climb at all.

“Are you doing all right, Kate?” Candy, Andrew’s mother, asked tentatively as I struggled to keep up with everyone.

“I’m fine. Just a little tired,” I gasped, trying to force a smile.

Candy stopped where she was to wait for me. Up ahead, Andrew and Peter, along with Andrew’s dad, Fred, pushed on without so much as a glance behind them. I pushed myself, told myself I could do this. One foot in front of the other.

Embarrassment hung over me. Despite the fact that the mountain was steep enough that I dropped to my hands and knees at times in order to keep my balance, this
should not have been this hard. No one else struggled like I did. I feared everyone else wondered why I was so apparently out of shape.

*Another failure.* I gasped for a breath, determined to not let Ed get to me until this ordeal was behind me. But even as I tried to ignore him, I knew he was right.

“Come on, let me help you.” Candy held her hand out for me, and I gratefully took it. From that point on, we climbed together, she allowing me to lean my weight on her when necessary. If she became impatient, she never showed it.

After a few minutes, the men stopped up ahead. I presume they suddenly realized that the women in their group were lagging behind, and decided to be kind enough to wait for them. I hated being one of the only girls in a group, and then being the one to fail, proving a stereotype. So much for the strong, self-sufficient woman I had somehow led Simone to believe I was.

I was semi-conscious by the time Candy and I reached the men. I saw only through blurred vision and occasionally saw double. My muscles were so weak that they almost refused to move for me. I felt like twenty-pound weights adorned each of my limbs. I wanted to lie down.

“I was thinking,” Fred announced, pointing further up the mountain, “of continuing on up there. Then maybe we can cross over to the other side.” Another huge excursion. I fought tears.

I looked up at Candy with fearful, tired eyes. I wanted her to understand that I couldn’t go on, that I really needed to stop. She, in response, gave me an encouraging smile. “We can make it just a bit farther, don’t you think?”
I wanted to cry, wanted to tell everyone that my body felt like it had been hit by an eighteen-wheeler and then crushed by a steamroller. How could I make it up another step, let alone as far as Fred wanted me to go?

With a look of disgust at my own body, I forced myself up on my feet again. I hated this—hated my situation, my body and its lack of cooperation. In a sudden burst of determination, I decided to push on with everyone else, if only to punish my body for trying to give out on me. I gave a tight smile and said, “Yeah. Okay. Let’s go.”

We climbed, and then climbed further. My breath came in audible gasps, as I had to work to actually get air into my lungs. By the time we began our descent, it took both Peter and Andrew, on either side of me, to help me down, as I couldn’t even walk downhill on my own. I somehow made it back to the house and promptly fell asleep.

Peter drove me home that night. We sat silently, and I thought about the fact that, even as he helped me down the mountain, he’d only gingerly gripped my arm. His distancing from me affected me more this time than any other time it had happened. It felt like a real, tangible rejection this time. I thought of the night before. For what seemed like the first time, I knew there had been more than my body I’d offered up in bed. I felt a heavy weight descend on me as I realized I would most likely regret that.

As he drove me home, he didn’t look at me, didn’t speak to me. Finally, when we pulled into my parking lot, I asked, very quietly, “Do you hate me?”

He sighed, slowly and thickly. “I don’t hate you, Kate.” An uncomfortable silence filled the car, and then he added, “I kind of hate myself right now.”

“Heigho,” I said, “Just so you remember, I reminded you about Jane before we did anything.” It was my way of saying that the situation wasn’t my fault, not entirely.
“I know,” he said, sounding somewhat defensive. “Look—what’s been happening between us—it’s just can’t happen again. Really, it can’t.”

All of the hurt I was feeling, the anger, rose to the surface at that point, and I turned to him. “It won’t. I can promise you that.” My voice grew quiet and gentle again as I continued: “Before, I told you I wouldn’t let it happen again for your sake, and for Jane’s. But now I’m saying it for my sake. Every time we sleep together, I get more and more attached to you, and so now this isn’t fair to me as well as to you and Jane. So if you want to be with her, then be with her—but, believe me, nothing is happening between us again.”

He turned his gaze out the front windshield, his eyes refusing to meet mine. He briefly nodded his head. We parted ways that night with me expecting our friendship to wane, as things had become too complicated to continue on otherwise.

The following evening, however, he invited me over to his apartment to watch movies. I inwardly wondered if that was a good idea. I did hope that we’d be able to salvage some remnant of friendship that we might be able to build on outside of the sexual relationship we’d carried on, though, so I agreed.

He was mostly quiet as we watched Bedknobs and Broomsticks, only commenting on various childhood memories the film brought to mind. As the movie ended, though, he said, very quietly, “I broke up with Jane today.”

I turned to him, eyebrows up and eyes wide, not sure what to say or how to react. I didn’t want to jump to conclusions about what this meant. “You did?”

He nodded. “She didn’t take it very well.”
I wondered how honest he’d been with her about everything that had happened, or if she knew that I was looming somewhere in the background of her failed relationship. I didn’t ask, though—I knew it was none of my business, and a part of me didn’t even want to know. I didn’t even know what to say to him at that point, so instead I let out a breath that I felt like I’d been holding for the past few months and put my head on his shoulder.

That was, I suppose, the beginning of mine and Peter’s relationship. However complicated things were at first, it marked a turning point in the course of my life.

Only days later, I felt familiar fear creep up on me as my inability to breathe, combined with exhaustion, became unbearable. Peter and I lunched over shrimp tacos and chicken tamales at Bajio’s that afternoon, and he asked me tentatively beneath the restaurant’s dim lighting, “Are you okay?”

He suspected I wasn’t, having taken note of the fact that I could not breathe. Even though he knew little about diabetes, he did know I was diabetic, and remembered the last time he watched me deteriorate into the body-dragging, constantly urinating, inarticulate existence that was ketoacidosis. Thanks to my first hospital stay, all of my friends in Logan knew I was diabetic, though not a single one knew about Ed.

I tried my best to perform a casual shrug and keep my voice calm as I replied, “I don’t feel well. I think there might be something wrong with my insulin. Maybe I should go see my doctor and get it replaced.” I took a deep, gasping breath as I finished my sentence, and then set my fork down in frustration. My slow, labored wheezing made it difficult to even chew my food.

“I’ll take you,” Peter said immediately.
The food on the table was almost gone. Had Peter known that consuming the sugary-sweet mango and shrimp in the tacos and the carb-filled corn masala in the tamales only made my glucose rise faster, he may have skipped lunch altogether and rushed me straight to the hospital. Without a full understanding of my disease, it was difficult for him to imagine that someone in my fatigued, withered state wouldn’t benefit from something to eat.

“Where’s your doctor’s office?” he asked as he pulled out of his parking space faster than was probably safe.

I took a few steadying gasps of air. “The ER. Just take me to the ER.”

He didn’t know, as I’d never told him, that I didn’t regularly see a doctor for my diabetes, and thus didn’t have an office to go to. Much about my condition he had yet to learn, things I didn’t know I’d ever be ready to admit to him. Not seeing a doctor regularly was one of them, of course, but the fact that my insulin worked just fine, and I knew it, was another.

When we reached the hospital, and I was rushed immediately into an ER room, I told Peter he could leave if he wanted. He chose to stay anyway, which I was silently grateful for.

Despite the fact that we both knew my situation was becoming dire, neither of us was prepared to hear just how much so.

“You may have lived about twelve more hours,” the doctor said once my test results had come back, and I asked how poor my condition was. “Your blood has become acidic. Your sodium and potassium levels are dangerously low. Your electrolytes are also low, and you’re dehydrated. You’ve developed ketones.”
I couldn’t move past the part where he said I would have lived for only twelve hours more. I repeated: “Twelve hours?”

He nodded. “Most likely. Give or take a few.” This is serious, his eyes told me. “So we really think you should stay in the hospital and get treated.”

I couldn’t look the doctor in the eye—as Peter would later point out, when I was that sick, I couldn’t, and wouldn’t, look anyone in the eye—and so instead I focused on the blank white walls around me, on the beeping heart monitor. I tried unsuccessfully to keep myself warm beneath the thin sheets on the emergency room bed and also to ignore the dull throb coming from the IV needles in both forearms. I didn’t know how much longer I could continue this cycle, and, apparently, neither did my body. According to the doctor, it had been about ready to give up, ready to fall into nonexistence.

*But you knew that,* Ed reminded me.

I turned to Peter, sitting by my narrow emergency room bed, patiently waiting through all of this. “What do you think?” I asked him. “Should I stay?”

He blinked, and though his face remained calm there was a quiet sense of alarm behind his eyes. “I think we should stay,” he said gently, and then, again, “Why don’t we stay.” It wasn’t a question so much as a statement.

I listened, and did stay, and thus found myself up in the ICU once again. Peter stayed by my side, and, after a few hours, Andrew joined us. The two of them playfully helped me work through a questionnaire I was supposed to fill out. After seeing it untouched on the table by my bed, Andrew had offered to do it for me.

“So you have any of the following?” he asked, going through the list of ailments I needed to check off. “Cancer?”
“No.”

“Epilepsy?”

“No.”

“Heart problems?”

“No. No, no, no, no.” I laughed, trying to signal to him that he should just skip that part—I was diabetic, and that was it.

“Respiratory problems?”

I sighed. “No.”

“Eating disorders?”

I paused, but only briefly, my heart speeding up. “No.” I tried to keep my voice bored, casual.

At that point, the doctor who had treated me that last time I’d been hospitalized entered the room. Glancing at me, he shook his head and sighed. “Well, here we are again.”

I nodded, not saying anything.

“You know this can’t keep happening,” he went on. “After a while, your body isn’t going to hold out like it has been.” He glanced down at my chart, not waiting for a response from me. “I take it that your other problem is still a huge factor here.”

I glanced quickly at Peter and Andrew, my heart speeding up again. Looking back at the doctor, I pleaded with my eyes for him to drop any mention of my eating disorder. He, too, looked over at my friends, and then nodded his understanding that this was something we needed to talk about when we were alone.

Relieved, I sat back in the bed.
I think, though, that Peter and Andrew knew something was up, regardless. They had to have heard the doctor mentioning my “other problem,” and, that aside, what kind of diabetic lands themselves in the hospital twice in a two month period without there being another underlying factor? Like the doctor, though, they didn’t put me on the spot.

As soon as she was able, Simone joined the three of us, and we had a small party in my hospital room that night. Simone brought a DVD and her laptop, and the boys bought bread and cheese and fruit from Lee’s market across the street. They were all there with me late into the night.

And then, after Andrew and Simone went home, Peter climbed into my hospital bed, holding me close to him. I rested my head on his chest, trying to maneuver the mess of wires I was attached to around his body.

“My beautiful girl,” he whispered, kissing my forehead. “You have to promise me something.”

I knew what was coming. But, still, I said, “What?”

“You can’t ever get sick enough to come back here again. Whatever’s going on—promise me you’ll take care of it from now on.”

I didn’t know if it was a promise I could keep. But I did know that I’d never made a promise I wanted to keep more than that one. “Okay. I promise.”

And then I closed my eyes, only hoping he’d stay there with me long enough so that I could fall asleep in his arms.
CHAPTER 7
BUTTERFLY

January was white with ice and snow, winter’s frigid arms lowering over my little northern town in a frosty embrace that would last for months. I allowed those arms to cloak me, their chill giving me an excuse to curl up and hibernate within myself. Hidden behind baggy jeans and sweaters two sizes too big, I marked each morning with a desperate hope that wintry shrouds, baggy clothes, could truly hide my ever-expanding girth from the world’s critical gaze.

Peter’s consistent presence in my life assured that I regularly took my insulin shots whether I wanted to or not, and I could sense my body growing in response. Despite the fact that my hands often shook in anxiety, nails bitten to the quick, too many others found reason to pass compliments I wasn’t quite ready to receive. “You look so much better,” I heard time and again. “You’re not so pale. Your eyes are so bright!”

I thought this had to mean that my eyes simply looked normal instead of glazed over and zombie-like, because I knew they weren’t quite bright. The place I was at, my toes curled over the edge of a cliff overlooking depression and breakdown, didn’t permit truly bright eyes. I imagined they probably lacked as much expression and life as they did a month ago, only now they were alive. Not thriving and vivacious—just alive.

But I could handle people saying my eyes looked bright, or that my skin tone no longer resembled the undead. What caused my heart to sink was when people said I looked healthy. When that happened—and it often did—I would turn away from those well-meaning people with tears in my eyes, as my mind translated “healthy” as “fat.”
See? Ed would assert, seizing every opportunity he could. *You’re fat. You can’t do this. You’re fat.*

And I would dodge into the nearest bathroom and hide in a stall until the room was empty. Once the sounds of footsteps and running water had disappeared, I’d creep out and stand in front of the largest mirror, looking over every inch of myself and trying to find some evidence that Ed was wrong.

Unfortunately, this was never an easy task, and most of the time Ed was only reaffirmed. *Fat legs,* he’d tick off. *Fat stomach. Fat arms.*

*Anywhere else you’d like to look?*

Most days I wound up making a deal with Ed before the afternoon had ended: I would start purging most of my food again, I promised, and I wouldn’t even look at my insulin pens. *Just until you’ve lost some weight,* Ed soothed, very approving of these decisions. *Twenty pounds. Then you can try to get back on your insulin if you need to.*

One aspect that began to change things, though, was that, the longer we dated, the more I started feeling that I owed Peter more of an explanation as to the nature of my illness and why I was so sick all of the time. I wished I could leave it a secret, and feared he might leave me once he knew, but thought it better to be open and honest lest he find out inadvertently.

So we sat down one evening across from each other on my sofas so that I could talk to him. I wasn’t quite sure how to bring the subject up, so I started the only place I could. “Remember when you took me in to the hospital, and I told you my insulin wasn’t working properly?” I waited for him to nod, acknowledge what I was saying. “Well, that wasn’t entirely true. Actually, it wasn’t true at all.”
“What do you mean?”

“My insulin works fine. My sugar level was so out of control because…” My voice trailed off for a minute before I was able to finish my sentence. “Because I intentionally didn’t take it.”

He frowned. “Why would you do that?”

“If I don’t take insulin, I can lose weight,” I explained. “I have this eating disorder. And…” Again, I let my voice trail off, hoping that he got the message and that I wouldn’t have to say any more about it.

We were both quiet for longer than I would have liked, and his face did register a fair amount of surprise. But when he spoke, the only thing he said was, “What can I do?”

I breathed a sigh of relief and shrugged. “I’m not sure. Just … be here for me, I guess. I don’t know what else I can ask of you.”

Once he understood the dynamics behind my illness, Peter spent more time with me than not. He spent almost every evening at my house, spending time with me as my boyfriend and looking over me as the guardian angel persona I had inwardly prescribed to him. He liked to cook for me—spinach salads, grilled fish, risotto, huge Portobello mushrooms decorated with cheese and tomatoes—and made it a point to create healthy meals out of ingredients that he knew I liked.

“There are hardly any calories in this,” he’d point out, or sometimes he’d say, “There are so few carbs here that you won’t have to take very much insulin at all.” He talked me through each meal in a quiet voice, the familiarity of his tone and accent caressing its way through my head until I felt settled enough to force down food. And on the days when that wasn’t enough, and I stubbornly pushed aside what he’d made for me,
he would eat his food alone as though he wasn’t bothered, every once in a while offering a casual, “I wish you’d eat that.” But if I still said no, he didn’t push it.

Peter’s own weakness, though, was alcohol. In England, beer and wine are a culture unto themselves, and for him, a meal just wasn’t a meal without one or the other. When I also began participating in near-nightly dinner drinks, there were more opportunities for my buzzed and happy mind to excuse—and even enjoy—Peter’s culinary creations. Indulgences, however, did not come without consequences: I was usually very consistent about skipping my insulin shots when I partook of a full meal, and then, despite the alcohol’s influence, I would spend the next few hours stressing about how I was going to sneak away and throw up.

Engaging in such behavior in my own bathroom was out of the question. With Peter in the next room, it would be too easy to get caught. So, while I carried on a conversation with Peter or pretended to be engrossed in a movie, I inwardly obsessed about coming up with an excuse to go out somewhere, anywhere, and use a public toilet. The laundry room where I dried my clothes had a bathroom, too, or I could use a plastic bag and throw it away if I could only come up with a reason why I needed to be outside. But going on a walk, going to the laundry, going to the store and telling Peter I did not want him to come was just as good as saying, “I’m going to go throw up now. Be right back.”

I was usually still stressing over how I could get away to purge when Peter started to notice the onset of extreme fatigue and shallow breathing. Sometimes there were other things that tipped him off to the fact that my blood sugar levels were soaring. I began to suspect that he could detect hyperglycemia better than any doctor could.
When this happened, he rested his hand on my shoulder and squeezed it, his grip tense. In this way, he communicated to me that he could hear my wheezing, and knew what it meant.

“Kate…” he’d ask quietly. “When is the last time you took some insulin?”

I usually mumbled an incoherent answer, knowing it could mean anything: “an hour ago” … “this morning” … “yesterday.” Incoherent mumbles didn’t commit me to either the truth that would make Peter upset, or the lie I promised I’d never make.

Peter never ignored my inarticulate words as I’d hoped, though. “Let’s make sure you’re all right. I’ll get your monitor. Where is it?”

Even though I’d only answer with more mumbling, Peter was always able to find the glucose meter, usually on the kitchen counter. And then he’d hand me the small black case, assuring me that if I couldn’t test myself, he’d do it for me.

You can’t fake a blood test. Or, if you can, I’ve never been privy as to how. There isn’t, and never has been, a way to prevent my meter from giving an accurate reading—no way to stop the callous, high numbers from appearing on the screen. One evening, when 580 glowed from the screen at us, even I was surprised.

Don’t go to sleep, I reminded myself then. The fear of not waking up once again took hold of me.

I felt the intensity of Peter’s gaze before I saw it. Shame and anxiety filled me at the same time. Not wanting to deal with his reaction, I leaned in to kiss him, hoping to distract him. I smiled as sweetly as I could and lifted my hand to run my fingers through his hair.
His gaze didn’t falter. He caught my hand in midair, and my smile faded as the two of us were suddenly locked in a staring match.

“What?” I demanded, suddenly feeling quite sober.

I tried to make my gaze as severe as his, but failed. Instead, my face crumpled, and I squeezed my eyes shut as I felt the sting of tears. I was nothing but vulnerable as I lowered my head and allowed myself to sob.

Immediately, Peter let go of my wrist and put his arms around me, murmuring a calming, “Come here.”

The days and evenings Peter wasn’t there involved me staring into my long, thin mirror, crying out at the revolting image in front of me. It ate me alive—every piece of tight, restricting clothing appalled me.

*Just don’t take your shots today*, Ed would speak to me. *Just stop for as long as you need to until you drop twenty pounds.*

But what to do? Maintain a fat figure or break my promise to Peter?

*What’s it going to be?* Ed would pester. *Thin or healthy? You can’t have both.*

And every day, upon realizing this awful dilemma, I would start to cry. “Health” was beginning to imprison me.

One day, during the midst of this, Ed was silenced not by my own willpower, but by my cell phone. The familiar, yet wholly annoying, jingle that signified a text message startled my attention away from the darkest corners of my mind. I numbly moved to the nightstand to see who it was and was not surprised to see that Simone was inquiring about my morning.
I didn’t know what to tell her. I could have lied and said I was great, or I could have been truthful about the fact I was in turmoil. In the end, I decided to cop out with the non-committal, I’M FINE. YOU?

Simone, for her part, wasn’t fooled—she’s always had a great sixth sense about when I was doing all right and when I was not. On that day, she was somehow able to pick up on the fact that I was less than “fine,” even though I only spoke two words to her, and over a text message, no less. She responded with, ARE YOU OKAY?

It’s possible I knew all along that she wouldn’t believe my lie, or maybe I was simply hoping she wouldn’t. Regardless, there was a part of me that wanted to open up to her. So I texted back, NO, I’M ACTUALLY HAVING A BIT OF A CRISIS. I’LL BE FINE, THOUGH.

It took about ten seconds for the phone to ring. “What’s going on?”

I tried to keep my voice steady and calm as I explained that I wasn’t handling my weight gain well. What I didn’t mention was that I was just about ready to let go, give up on the “progress” I’d made and go off my medication again, but she might have known this was what I had in mind.

“I think you should call Peter,” she suggested. “Ask him to come over.”

I wanted to. I wanted nothing more than for Peter to be there with me in the confines of the cinder-block walls of my apartment, to be near him. But I knew he was busy with work, and I honestly wasn’t ready to open up to him about how I was thinking about breaking our promise.

“No,” I told Simone. “I don’t want to bother him.”

“You wouldn’t be bothering him,” she insisted. “I think he’d want to know you’re feeling this way.”
It was possible she was right, but in my stubbornness I insisted that I would be fine, and there was nothing to worry about. Seconds later I was off the phone, alone again and listening to the war inside my head. I curled up on my bed and closed my eyes, doing my best to calm myself, but feeling utterly helpless in this endeavor.

I must have laid there for twenty minutes or so, getting absolutely nowhere in feeling better about the situation. I opened my eyes only when I heard the back door open and quickly wiped the wetness from my eyes. As I got up to see who it was, I hoped that Alex, the kid a few doors down who had a habit of walking into my house without knocking, wouldn’t be standing in my living room to again inquire about whether Brendan, still in southern Utah with his dad, could play.

My face was still red and my eyes still puffy as I rounded the corner. I stopped in my tracks and let out a breath, perhaps a breath of relief, when I saw that it was Peter, not Alex, in my living room. He was holding a bouquet of flowers, and gazing at me with warm eyes, he held them out to me.

I couldn’t help but smile just a bit. “Simone called you, didn’t she?”

“No,” he said, but he was smiling in that cat-that-ate-the-canary way, so I knew that she had.

“I told her not to,” I assured him.

“I know,” he said, his eyes shifting with what might have been concern. He paused a moment, then said, “You know, if you’re ever having a hard time and I’m not here, you should let me know. Call me.”
I nodded my head wearily as I moved forward to take the flowers. Once they rested in a vase filled with water, I walked slowly back to Peter. He enveloped me in his arms, and again I breathed a sigh of relief. Despite myself, I began to cry.

“It’s okay,” he murmured into my hair.

I think we both knew that day that things weren’t okay—and, in fact, they weren’t even close to okay for quite some time. This scene, with Peter comforting me while I tried to battle my inner demons, became a common one in my little apartment. On any given night, as he sat with me watching movies or playing games, I fought the urge to binge eat. And, as he taught me each evening how to respond to hunger signals again and how to eat normal portions, I fought the urge to skip my insulin shot. The difference, though, was Peter’s presence—he was there with me, to give me that little extra push. Sometimes, I despised him for it, just wanting him to leave so that I could have my binge, or wanting to scream at him to mind his own business as he gently reminded me to take my insulin.

The extra “push” from other people to take my insulin was something I was very familiar with. Countless people throughout my life had been there to offer such pushing, but it felt different with Peter. There was nothing beyond his encouragement other than the fact that he didn’t want me to get sick. The only message that came to me through his urging me to stay healthy was a simple one: “I care about you. You matter.”

Sometimes I felt like I couldn’t control myself, despite his presence. One such day happened in early February, and Peter’s insistence about my insulin turned into a three-way showdown.
“I can’t do it,” I said, Peter’s image only a blurry rainbow of color behind the wetness that covered my eyes. I tried to back my tone up with finality: I could not take my shot, and that was that.

“You can do it,” he insisted. “You need to.” There was enough desperation behind his voice that I wondered if this was going to come down to who was more frantic. He hesitated, and then added, “If you don’t take your shot, I’m leaving.” His eyes spoke to me: “Don’t call me on that, Kate,” they said.

I stood uncomfortably in the center of the kitchen, unable to speak. A part of me felt like I was about to break down, but another part wanted to simply acquiesce and take the shot. Neither seemed like a good idea at the moment. My heart, however, beat incessantly, worried that at any moment Peter would lose patience and saunter out the back door.

He’s not going anywhere, Ed told me calmly. He knows that if he leaves, you’ll be in a worse state than you’re already in. He won’t do it.

“Kate,” Peter pleaded. Quiet desperation clawed at me. “Please.”

I looked at the refrigerator, and then back at Peter. “Just five pounds,” I whispered, staring down at the kitchen floor. “Five pounds, and then I’ll start taking my shots.” I almost said, I promise, but quickly clamped my mouth shut.

Peter’s tone became sharp. “Who cares if you lose five pounds? Who cares if you gain five pounds?”

I instantly imagined myself five pounds heavier and felt familiar anxiety scratch its way through my skin, sharp and destructive as knives. The suggestion alone nearly made my heart stop—how could he even imply it?
See? Ed piped up. *He doesn’t care about you.*

“I can’t gain five pounds,” I said, forceful.

Before I could stop my face from crumbling, it fell into a mess of weakness I wished I could disguise. I turned away and tried to hide my wet eyes. But in the time it took two tears to escape, roll down my cheeks, Peter was at my side. At first I didn’t see him, but I felt his arms pressed around me. Warm breath danced through my hair, whispered in my ear. Though Peter’s voice found no words for me, his touch spoke clearly: “I’m here.”

I reached up, slowly closing my hands around his arms, pulling his body in closer protection against the coldness outside of him. I smelled the rosemary and mint scent of his hair when he leaned his head down next to mine.

“You can do this,” I heard him murmur. “I know you can.”

You can’t, Ed immediately countered.

I thought about the few others in the world I was close with. Who else had ever believed that I was going to beat Ed? As my mind flashed with images, messages I had received from others throughout the years, I unconsciously squeezed my hands tightly over Peter’s arms.

“You don’t really believe that,” I told him.

*Of course he doesn’t,* Ed assured me.

“I do,” Peter insisted, his patience a gentle blanket beginning to cover me. “I believe in you.”

I wanted more than anything to believe him. I wanted to believe he wasn’t simply frustrated that I couldn’t push Ed aside with a snap of my fingers, that he wasn’t waiting
for me to die. That he saw my survival as more than a lifetime of being forced to eat, coerced into taking my medication. I stared down at his arms, wrapped so tightly around me. For years, I had considered recovery to be nothing more than a lifetime struggle, always having to be pushed to take care of myself. But maybe real recovery meant learning how to want it for myself.

_No._ Recovery means getting fat. Ed’s voice was quick, but laced with something unfamiliar, something I couldn’t readily place.

I pushed Ed’s words to the side of my mind, though, for the moment, and addressed Peter. “You believe in me?”

“I do,” he said again. “Look at everything you’ve already done in your life. This is nothing. I know you’re strong enough to beat this.” I heard him grow more animated the more he spoke.

I took a breath as I considered whether he thought I was strong, strong enough to overcome Ed. Over in the corner where I had pushed him, Ed tried to laugh at the idea. I murmured, “Maybe I am,” not sure if I was speaking to Ed or Peter.

I felt one of Peter’s arms leave me as he reached over to open the refrigerator door. A moment later, my insulin pen was in his hand, and he held it out in front of me. “You are.”

I looked down at the pen for a short moment that felt like an hour. The thought of taking a shot hurt so much that I wanted to cry, but another part of me also wanted to show Peter just how strong I was. He believed in me. I wasn’t prepared to feel internal pain stem from a new source, but the thought of letting him down now, of that faith in me fizzling out, made my heart ache.
I reached out and let my fingers close around the pen.

“You can do this,” Peter said again.

I closed my eyes. “Tell me.” My voice wavered as a deep breath caught in my throat. “Please just tell me that this isn’t going to kill me.”

“Of course it isn’t,” he said, his words assuring me that there was at least one person who wasn’t expecting me to die. He kissed the top of my head and I heard him sigh. “You’re beautiful. You don’t need to lose any weight. Someday you’re going to see that for yourself.”

_He’s lying_, Ed spoke up immediately. _He knows you’d be more attractive twenty pounds lighter, but he won’t admit it because he doesn’t think you can do it without killing yourself._

Ed’s words stung, but I silently contemplated their reliability. His tone demanded that I trust him, but Peter’s embrace, his own declarations, settled over me in such comfort that I wasn’t read to let them go. I wasn’t ready to deny them.

_But he’s lying. You know he is._

_Maybe he’s not_, I responded inwardly.

_He’s lying._

I let my mind wander to the corner I had pushed Ed into and nudged him back, pushed him away, a bit more. I clung to the love I felt emanating from Peter and used it as a cloud to stifle Ed’s words. Ed continued to speak to me, warning me, desperately trying to get my attention back, but even though I could still hear his clear voice, it was somewhat quieter than I was used to.

_He’s lying_, Ed whispered, his deafening roar now no more than a soft sigh.
The word’s Peter had spoken to me filled my head, louder than Ed’s. *You can do this. I believe in you. You’re beautiful.* I turned to my boyfriend and looked up into his eyes. “How did you do that?”

“How could I explain to him the way in which his words took hold in my mind, words I had heard before in the past actually meaning something for the first time?

“Never mind,” I whispered. Then, even as Ed tried to scream at me from the darkest corners of my mind, I wiped the tears from my face and locked my gaze with Peter’s.

“I trust you.”
CHAPTER 8
THERE IS A TIME

The deeper into the cemetery Peter and I get, the more people we see wandering the grounds. Most of them are looking for Jim Morrison’s grave, and a few have asked us if we know where to look. Peter, pointing to an area on the map, directs them all to the correct area, explaining in either English or French the best way to get there.

Peter sees them all around us: young couples, groups of school children, lone history buffs who can think of nothing more exciting than wandering through Pere Lachaise. But those he cannot see still haunt me. They stand nearby, too, the wind catching their quiet whispers and delivering them to me through the rustling of fallen leaves over uneven ground.

I find the grave of a young girl, dead at only eleven years old in 1849. It is off the beaten path, behind other tombs that are larger and better kept. As I approach the stone, I begin to wonder about the child buried beneath it. Her name is not known in modern Paris, not famous enough to be listed in the map. I realize she has most likely been forgotten.

I kneel down by the crumbly tombstone, black in places and falling apart after so many untended years. The spidery words carved into it are barely legible anymore, fallen away and partially covered with moss.

“Adèle,” I say, speaking her name quietly. It rolls off my tongue, this name that used to mean something to someone, that probably caused many tears to shed when its owner simply disappeared.
I try to imagine her standing there by her grave. In my mind, she is such a small girl, so thin, with brown hair very much like my own hanging over her shoulders. This ghost, this little girl in old, ragged clothing, smiles thinly at me.

“Vous faites partie avec nous. Vous savez que vous faites.”

I return a small smile. “No. I’m not dead.”

I think about the possibility that this little girl, Adele, died because of untreated Type 1 diabetes. Paris in 1849 would have known no way of saving her. I take in her frailness, the dark circles under her eyes, and consider the fact that, at the time of her death, the world still had seventy-two years to wait before the discovery of insulin.

My mind drifts back to the day I had gone into the hospital, the day Peter and I had screeched into the parking lot and then listened as the doctor told me I was nearing death. Had this happened in 1849, we might have rode in to our physician’s office on horses or perhaps even walked. As my mind unfolds the scene, my doctor’s white coat disappears and is replaced by brown slacks and a stylish vest. The sterile, white ER room I had been in also disappears, along with the nurses, the IV bags, the heart monitor. In my mind’s eye, I see myself in long sleeves and heavy skirts, lowering myself onto the doctor’s table for some much needed rest.

He would have looked me over and may or may not have known what was happening within my body. I suspect, though, that he would have known that most people with my symptoms didn’t live through them.

Instead of asking how much longer I would have had, I may have asked, “How much longer do I have?”
The doctor would have gazed down at me sympathetically, waiting until fatigue finally forced my eyelids closed before turning to Peter. “I’d say a few days at the most.”

Peter may have wept at the diagnosis, but there would have had no choice but to take me home and make me as comfortable as possible as I grew thinner and paler, sleeping away the last moments of my life. I imagine him crawling beside me into an early twentieth-century bed, stroking my hair and whispering not that everything would be okay, but simply telling me he loved me while he still had a chance to.

As the minutes and hours slipped by, there would be no suggestion of, “Let’s get your glucose meter and test,” or, “I think you should take a shot.” No taking care of me, no bringing me back.

At some point, perhaps with my head in his lap or his arms wrapped around my sleeping form, I would have slipped into a diabetic coma. And once Peter had accepted the fact that I would never again open my eyes, he would have called the physician. The doctor may have pronounced me dead, though it would have been difficult to tell one way or the other. I may or may not have been buried before I was actually dead, or I might have been fortunate enough to wake briefly from my coma before that happened, allowing me a brief moment among the living again.

In the end, it wouldn’t have mattered if I had awakened from the coma or not. Either way, I would have died soon after. In this alternate reality, I see a mirror image of so many nights when I’d allowed myself to drift into unconsciousness, taking comfort in Peter’s presence as I waited for my insulin to work its way through my bloodstream. But in my world with no insulin, my world of the distant past, I would have taken comfort only in the fact that Peter would have been with me when I died.
My imagination returns to Adele. Her eyes shift slightly, and I can read them
easier than I’d like to: “If you’d been born only eighty, ninety years ago,” she seems to
tell me, “you would have found your way to my world.”

I turn my head slightly to make sure Peter is still close by, but when I look back to
Adele’s gravesite, her image has dissolved. I am left by myself, the cool breeze raising
the hair on my arms.

_You still can be,_ Ed tells me. Closing my eyes briefly, I imagine he is here, too,
perched atop a tall mausoleum. He’s leaning forward, his dark hair falling over one eye,
his handsome smile endearing and inviting. As his black, feathered angel wings hover
around him, he reaches a hand out to me. _Come. You’ll be thin if you do._

I stand on the dry earth, gazing around me at those no longer living. Thinking of
Adele, and all the others who possibly went before their time, before they were ready—
possibly due to a disease like mine—I feel a twinge of guilt seep through me.

Perhaps I _have_ outlived my time. But what does that mean for me, still alive, and
for those not as lucky?

My mind’s eye imagines an elderly woman, taken this century, stepping out from
behind her grave. Taking me by the arm, her French echoes in my head, translates itself
for me.

“To every thing there is a season,” she says. “A time to be born, _and_ a time to
die.”

She points further up the road, and I turn my gaze to an area slightly more open. I
imagine a large group of the dead standing there, looking at me. Some are quite solemn
but some, it seems, smile in approval.
The old woman, possibly a mother and grandmother in her time, slowly guides me towards them. “A time to weep, and a time to laugh,” she continues. “A time to mourn and a time to dance.”

We draw closer to the group, and I strain my eyes to see what they’re gathered around. I envision Oscar Wilde standing among them, a fellow writer, gazing at me curiously. Little children clap their hands excitedly as they see me approach. Dated dresses brush the ground lightly, gathering dirt, and dozens of empty eyes encourage me to come closer. The woman at my side pulls me along.

“A time to get, and a time to lose.”

From where he is on top of the mausoleum, Ed watches me walk. I know that his eyes are burning holes into my small purse, where my insulin pen rests. He pleads with me through the intensity of his gaze, using no words, to consider not taking my shot. He entices me with images of fitting in among tall, sleek Parisians.

Most of the Parisians ahead of me are not tall or sleek, or even considerably underweight. Some are on the opposite end of the spectrum, bloated and ruddy. As I grow close to them, my guide still clutching my arm, they part to allow me into their circle. And it’s only then that I see what they’ve been assemble around.

A new tombstone, small and not yet succumbed to time, leans slightly to the left. A few tufts of grass grow around it, but no flowers. Its only adornment is the rough scratching across the surface, the attempt to immortalize the deceased who would forever lie beneath.

I peer closely at the writing. KATE SIRLS: THE THINNEST GIRL IN THE CEMETERY.
The dead around me all smile, applauding in a grisly endorsement of Ed’s final promise; what, perhaps, awaits me should I choose to take his hand. I stiffen as another cool breeze rushes over my skin, and I suddenly want to be out of the cemetery. The tombstones and gravesites all around me press in, confining me, and the figures I’ve visualized unexpectedly frighten me.

I close my eyes briefly, willing them all to disappear. When I open my eyes again, some of the ghosts are gone, and so is the tombstone. I do see Ed, still watching me to my left. To my right, Peter is wandering among the tombstones, not quite as ready as I to depart the cemetery. The old woman still stands by my arm, as if inquiring what I will do next, and behind me I can feel Adele’s presence looming.

I drop my hand into my purse and remove my insulin pen. Turning my back on Ed’s image, into the empty space I wish Peter was filling right now, I measure a dose of insulin. As the needle slips into my skin, the vision of the little girl behind me begins to grow hazy, more misty than solid anymore. The old woman backs up a few steps, and her image begins to waver as well.

As the insulin slowly moves into my body, I can see that I’m being forced from my liminal space. Standing in the middle of two worlds, I watch now as one fades from my mind, leaving me alone, fixed among old stones and groups of tourists.

I force my legs to move, to catch up to Peter once again. His eyes aren’t as bright as they’d been a few hours ago when we first arrived, but he offers a small smile.

“Ready to go get something to eat?” he asks

I smile back and nod my head thankfully. “Yeah. My feet are killing me!”
As we head, hand in hand, towards the nearest cemetery exit, I’m aware of Ed watching me go. Strangely, he doesn’t follow—he remains, beautiful and poignant, perched atop the mausoleum. I imagine he’d make a wonderful painting: a dark, fallen angel hanging his head over the expanse of the cemetery, wings lowered in defeat and loneliness.

I squeeze Peter’s hand in my own and think about the fact that I’m not supposed to have this. I’m not supposed to feel his hand, his warmth, so near me right now.

I am supposed to be buried.

But there will be a time for that.

I think about Peter, about each touch I was never supposed to experience, and about Brendan, not here in Paris, but waiting for me back in Utah. I think about each laugh that I was never supposed to hear, each of my son’s accomplishments I was never supposed to see, each embrace from Peter I was never supposed to feel, and the years ahead I was never supposed to enjoy. They are mine now, stolen away from fate, precious like a white dandelion in its prime. Something I had almost thrown away.

Clutching the fragile future, I hold it as a realization that there is no greater reason to want to live.