

**Dreams from A Hospital Bed**

First Edition

C o n t e n t

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Photography by Mia Irmgard Klit.

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*To see the light felt good. I saw the light because I was not afraid to die. I just did not want to die like this. I wanted to die next to my relatives and my cat. However, I also had a desire to live and to communicate my dreams as forms of evidential knowledge sharing.*

- **Torill Marie Irmgard Klit**

**Off the Record:** This book is meant as a physical representation of a literary, visual and medical sociological project, in progress, that combines fiction based on fact with photography. The project is based on real events taken place while my sister went into a coma after an appendectomy, where dreams retrospectively, were discovered to be more fact than fiction. After the coma, my sister was consequently diagnosed with a severe form of poly-neuropathy, an untreatable neurological disease that, in extreme cases, makes the body completely paralysed and leaves it to heal by itself. Like branches on trees, the nerves must naturally grow back for the body to regain its mobility. Until then, the body is condemned to its breathing, but static and simultaneously deteriorating form of existence.

The state of dreaming complicates the assumption that sleep is the opposite of performance as it is, in fact, an internal performance. Sleep science articulates how a certain amount of revision and rehearsal occurs in the space of dreams, wherein our past experiences are assessed and an internal performance occurs to improve our future waking performance. According to scientific research, when going to sleep, the brain undergoes a process of reorganizing and storing. It breaks down the experiences of the day into discrete memories through a process of fragmentation. During dreaming, these memory-segments are then revisited, and combined with other experiences from the past in a series of absurd juxtapositions and simultaneous narratives. However, science also tells us that when the body sets the state for dreaming, it uses neurological inhibitors to isolate the head from the rest of the body. In this way, actions performed while dreaming are not physicalized in the body of the dreamer, and external sensations and stimulation are blocked out. This blocking is accom-

panied by other phenomena occurring within the brain itself. The emotion centres in the limbic lobe are hyper-activated, as areas are suppressed, such as the frontal cortex, where memory, logic, critical judgement, and directed thought is located. All this helps the dreamer to feel, see, and, most of all, believe the internal dreamscape. Seemingly, this implies that it is not possible to experience present sensory experiences while in a state of dreaming nor to implement it into the dreamscape, because the body itself is trying to accommodate an adaptive process that is, eventually, essential to our survival. Nevertheless, other scientific studies, paradoxically, suggest that audition is the only sensory faculty that never sleeps and it is the last one to deteriorate when dying. Furthermore, that dreams may be disturbances of sleep, where somatic stimulations and mental excitations come to act as instigators of dreams.

The **literary** aspect of the book project is, therefore, based on dreams, dreamt from a hospital bed, representing my sister's interpretation and experience of reality, while in coma. The dream texts are dominated by contrasts such as fact and fiction, dream and nightmare, humour and sorrow, as well as rationality and absurdity. Both relatives and medical staff appear frequently, nevertheless, irrational and absurd. The dream texts have an almost fable or fairy tale quality to them, where well-known heroic and supernatural characters appear. Humans are disguised as animals, while animals become human, which is interwoven with past and present personal experiences, as well as hopes, dreams and fears for the future. Furthermore, there is an abandonment of gender definitions and dimensions, as well as time, place and space, which creates an enchanting universe which the reader is,

then, invited into. Likewise, several challenges appear where the author, and reader, will face different challenges, situations and relations that involve memories from the past, interpretations of the present and notions on the future.

Nevertheless, the texts do not only intend to depict the extreme contrasts and fantastic characteristic of dreaming, but also their level of details and the complexity, which invites the reader into a somewhat impulsive and chaotic dreamscape, where everything and nothing has a significance. So, even though it seems as if some details do not hold any deeper meaning, they provide the reader with personal details to give an as authentic experience as possible. Therefore, the texts are written with a strong visual and emotional linguistic approach and, although, some dream texts are relatively short, they have a long course of action, nevertheless, like dreams, the texts do not follow a narrative chronology or linearity, and can be read independent from each other. Finally, it is important to mention, that this book is not a fairy tale collection nor is it a book about dream interpretation. Therefore, it is not the intention to account for any symbolic nor philosophical theories or meanings, instead, the dreams are intended to maintain open to interpretation and do not require any particular set of skills to read or understand them.

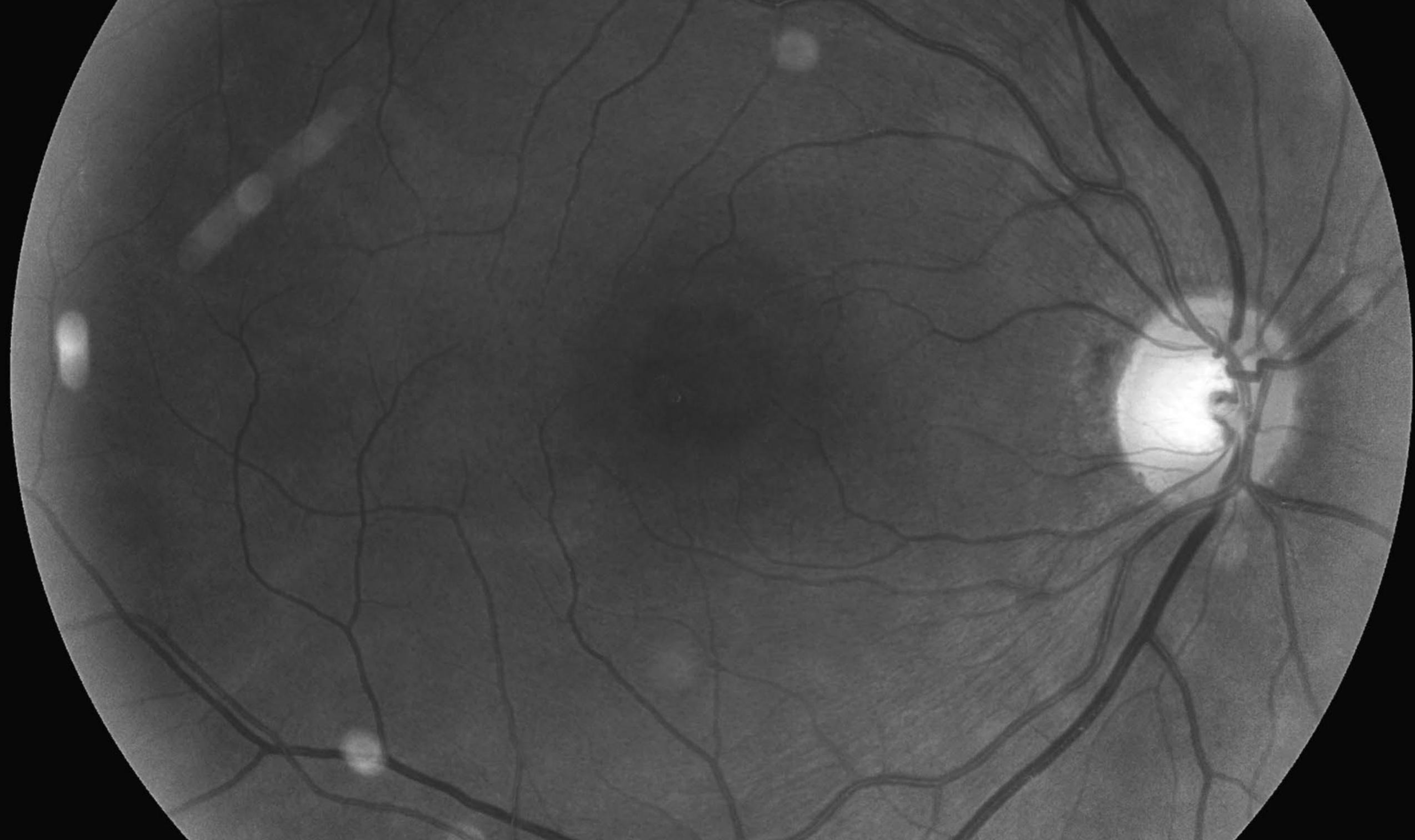
The **visual** aspect of the project, consists of black and white photographs, creating a somewhat visual archive of multiple photographic genres such as domestic, snapshot, reportage, x-ray and art photography. Some are collected from family albums and my sister's medical records, while others are produced and collec-

ted by relatives. This is all photographic imagery taken before and during the incident. This is, then, juxtaposed with imagery produced after the incident and consists of somewhat micro-photographed body parts and natural phenomena; nature resembling human forms and organs, and, in reverse, the body adopting the static (de)formation of nature. These images, like the texts, are also dominated by contrasts such as objectivity and subjectivity, as well as light and darkness. The sublime body landscape is both compelling, sensuous and magical, but also deserted and morbid. This bodyscape, represents the human evolutionary and extraordinary, yet paradoxically, ability to physically reconstruct while, simultaneously, destructing itself. Unlike the dream texts, these images are relatively simplistic, focusing on one or few details. It is this omission and microscopic exclusion that gives the images a sense of intimacy and invites the viewer into a bodily universe, where the juxtaposition of bodyscape and naturesscape images, then, likewise become interpretations of reality. Despite the realism associated with photography, in so that photographs must depict something real, they are meant to be open to endless interpretations and visual connotations. Not to say, that these photographs are illustrations of dreams, more to say, that they are a sequence of real and imaginary images like those seen in a dream, a phantasmagoria.

## 1.

**The Red Bullet in the Stomach**

As I am standing in my kitchen, looking down, I see that my stomach is open. And inside it, I see a red bullet. I feel distressed, as I need and have promised to be somewhere else. I cannot understand why there is no faeces in the stoma. So, I put pieces of glass, from a broken bottle, into an empty box for chips and carefully attempt to pore it into my stomach. Then, I put on my coat, which anonymises me, and go down on the street. It is dark outside. Here, I meet my mother. We go down some stairs to a little shop in the basement. I am thinking I might be hungry. So, my mother leaves to get me a falafel wrap at the take away place opposite the Indian restaurant, which has the old Carlsberg brewery on the right-hand side and Inghavevej, the red-light district of Copenhagen, on the left-hand side. I am wondering what takes her so long and the female shop owner from Nepal bites me in the arm while I am waiting. The husband shouts at his wife. My legs cannot stand anymore so he wraps me in fabric and lifts me up. My mother comes in. I can hear the rusty bell when she opens the door. I am so terribly hungry and my mother has filmed herself eating my falafel wrap.





2.

### Apple Juice

I am sitting in Buddha Bar on Vesterbro Square. Someone has recently opened a new bar underneath Elijah's Church, which is centrally situated on the square. I decide to go there. The floors are made of soil. I need to repair their internet connection but I cannot. There is a rat on the bar counter. I tell the Thai woman behind the bar that she can get the Vesterbro Council to help her with getting rid of the rat. She humbly thanks me, as she must do everything on her own, and gives me a glass of cold apple juice to express her appreciation. I ask her to give me the apple juice in a red Margrethe Bowl which I, then, put on my head, upside down like a helmet, and the apple juice gets into my hair. My tongue can just about reach the juice and I drink like I have never done before. The Thai woman also gives me a form of dessert in a little cup and after drinking it I feel so high. My mother and her childhood friend, enter the bar and immediately call the police. I turn around, with a foolish look on my face, thinking that they too ought to have a bowl on their head. So, while having a bowl of apple juice on her head, my mother carries in a bike. Someone has carved the word "love" on it. However, I am thinking to myself that she ought to calm down. Therefore, I pick up my mobile phone to call my college friend, and we go to another bar nearby. Here, we meet a tall man who wants to talk. However, he is so awfully busy so we decide to join the rush. We leave the bar with the tall man and walk down Vesterbrogade. I am now in a wheelchair. We go to the Church of Scientology close to the City Hall Square. The tall man's younger sister lives inside the church with two other girls. They are pregnant. He tells me that I must force them into labour to save their children. If not, a repulsive form of God, who looks like a homeless man, will put his face into their vagina. Therefore, I help them to give birth without really knowing how to get away, as I am sitting in a wheelchair.





D r e a m

3.

**The Red Wellington Boots**

When I put on the red wellington boots and I am perfectly able to walk but, for some reason, I am unable to talk.

## 4.

**The Airport**

On my way to Denmark from Peru, I check in at the airport, however, through security, they discover the red bullet in my stomach. Suddenly, someone shouts that I have a red bullet in my stomach but I still refuse to take off my winter coat to put it on the conveyer belt. Therefore, they drag me to other side of security, into Denmark, and I lie down flat on top of a box that is marked "reflex". I need to bring this box to Denmark. Security opens my coat, above my buttocks, and give me an injection in my bottom. I get up. The air is hot and moist and it is busy around me, like in a hospital. Someone tells me to go lie down in a bag. I am reluctant to do so but I feel myself getting heavier and heavier. In the bag, there is also a psychologist. The bag is a dark blue colour, and made from faded fabric. The psychologist is lying in there, in the darkness, assumingly forced to do so too. He closes the bag behind me by zipping a metallic gold zipper from the inside of the bag. I cannot feel my legs and I cannot speak nor can I breathe. I know I want to escape, however, if the psychologist opens the bag, there will be so much light and so many people and somehow this seems even worse.

## 5.

**To Church**

In a car. On my left-hand side, there is a forest of trees so big that one can only see the roots and the road is uneven and bumpy because of these roots. On my right-hand side, the trees have been harvested, however, in between the trunks there I see a church made of red bricks. Inside it lives a man who owns a lab. My mother leaves and tells me to stay. The man proudly tells that he can provide natural spring water, in a bottle, which has been nominated for being the best water in the world and, so, I drink it. The church is built in such a way that there are no windows. However, one can still see the forest on one side through tiny peepholes or openings in the cement walls. A wolf, as big as the mythological wolf, Fenrir, looks in through a peephole by standing on his two back legs. I am thinking to myself that it seems normal that it would do so. After all, the church is in the forest. Nevertheless, I close the window but the wolf keeps looking in, by finding another peephole. The man returns with his girlfriend. Suddenly, my cat comes in, standing on his two legs, dancing salsa with a little boy. Meanwhile, the man and his girlfriend are sitting in a loft arguing.



## 6.

**Iceland**

I am in Iceland with some work colleagues and they lead me down, into a plastic bag, where they want me to demonstrate how to fold a tent of fabric. Furthermore, a tent, in which one can die. However, a woman with blond hair, who has produced a pink fabric, does not want to die. Instead, she wants to come with me to my island. I live on an island next to Iceland and when we arrive, we are greeted by a man with three ducklings inside his trouser leg. He wants to save them because his ship had sunken. He is from Iceland, therefore, he likes a box of wine every now and then. I tell him to sit on a rock while I will get him a box of wine. The girl with blond hair and I, then, take a ferry to the nursing home. I live there, however, the moment I enter, I realise that the male nurse has killed both the professor and the mayor of the nursing home. So, the first thing I do, is to give all the residents advice on their health, however, shortly after, I discover that I am the one, who is ill and should be in bed. Then, suddenly, my old colleague enters the room. She is really a female nurse, nevertheless, she looks like my old colleague so I decide to call her by the same name. So, she comes in and gets into my bed, even though, I am the one that is ill. I, then, crawl into a bathroom with my mother, and, then, into another room where I go to sleep. In fact, I had slept in this room many times before. The next day, a coffee table enters the room. It is somewhat like a fun house. You know, those houses in amusement parks that turn reality upside down with obscured mirrors, moving floors and slides. The table comes up, as if it comes from underneath the floor and, next to it, an immigrant couple is boiling a substance in a pot. Their son is dead and they want a new child. Therefore, they added a special powder to the boiling substance, which turned it into a child. Then, suddenly, they turned into werewolves, so I return to Iceland to meet up with my

work colleagues. They tell me stories about Iceland and show me photographs of it. Furthermore, they let me ride my horse, the horse, I was given for my work on the Icelandic farm when I was younger, even though it died many years ago. I am also given a job by the male nurse's brother. He needs a messenger but the boy who, among other things, can turn himself into a cat of steel, and despite his unpredictability, is charming everybody, turns himself into a cyclist. A cyclist, that can ride up and down the mountains, at a very high speed. Therefore, I give him the job, thinking that I am then at least rid of him. I am, then, riding down the mountain, back towards the nursing home, when I see a strange creation that I have never seen before. It has a coppery reddish coloured fur and looks like an Irish Setter, which has been heavily squeezed from above and, therefore, also looks like a low chest of drawers. The father stands proudly next to the strange and tells me that it is his son. The father has injected his veins with cow blood to turn his son into a creation on which his daughter could ride. I tell him to stop this madness and he promise to do so. I, then, continue my journey towards the nursing home. It gets colder and colder as I get nearer and nearer, but I know it is warm inside it. It is built of rusty red bricks and lit by the most peculiar light, as if it is cloudy but over-exposed by light, like seen in old black and white films. I am warmly welcomed at the nursing home and lead up some stairs. It is old fashioned, as if I have gone back in time. People are kissing and there is a burning stove. I am put in a three-doubled bed, in the only room there is. They, then, tell me to get up but cannot. I am so tired and my body does not want to. So, they take me, in the bed, into a small room. Someone else is in the room, who needs help too, but then I realise that it is me.



D r e a m

7.

#### **The Mother Test**

Laying in a line, amongst three other people, and on a living room floor. One gets up to get a litre of milk while the others follow. Now, I am lying on the floor alone. I am being fastened to a sort of brace or hanger, like those used for sit-ups, and I know that I will become a good mother if I am able sit up, but I am unable to do so.

## 8.

**My Sister's Door**

I am in my allotment and my sister, who is now in a relationship with the male nurse, is visiting me before she goes to the hospital. She is hollow as she has no spine, and when you look inside her from behind, you can see her skeleton. The male nurse has done this to her. She used to be happy and I am very angry with him. I go outside my allotment hut and my father is sitting on the porch. Someone has called an ambulance but before it takes me away, I get into a fight with my father because I am unable to save my sister. A strong male doctor appears from the ambulance. My mother kisses him and my sister too. Later my mother starts crying because I do not want to kiss the doctor. I am thinking to myself that I am not like her. The ambulance takes me away. It takes me to the church, where I have been so many times before. Suddenly, I feel pain and I call the man in the church to me. He is dying of cancer. He comes from the forest of pine trees, dressed as a sheik or totem pole. The forest is somewhat elflike and the roots of the trees are gigantic. The man has a son and he lives in a room upstairs, where his father then goes and dies. Now, the son is in control of the church and my mother likes him. I do not. I cannot figure him out or see what his role is nor do I know what he will do or what will happen to me. Next, I am being driven to Asminderødgade, the street where my sister used to live. I am standing in her kitchen. She has a new door installed to the back staircase of her flat. I think it is so amazing and want a smaller one for myself. The carpenter tells me that he will give me some soothing drops if only I will buy a door from him. His doors are made by the leader of the gang from Peru, and they are very beautiful. My father thinks so too. However, now, I am in debt to both the carpenter as well as the gang from Peru, as once I have had a few of those soothing drops, in exchange for buying a door, I keep wanting more, as I am in so much pain. The drops are on a

shelf in a little rusty elflike neckless, which I break into two pieces and drink from. My father pays off my debt to the carpenter and the gang from Peru but I tell him that I have tried to leave the gang many times before and it is no use giving them money.

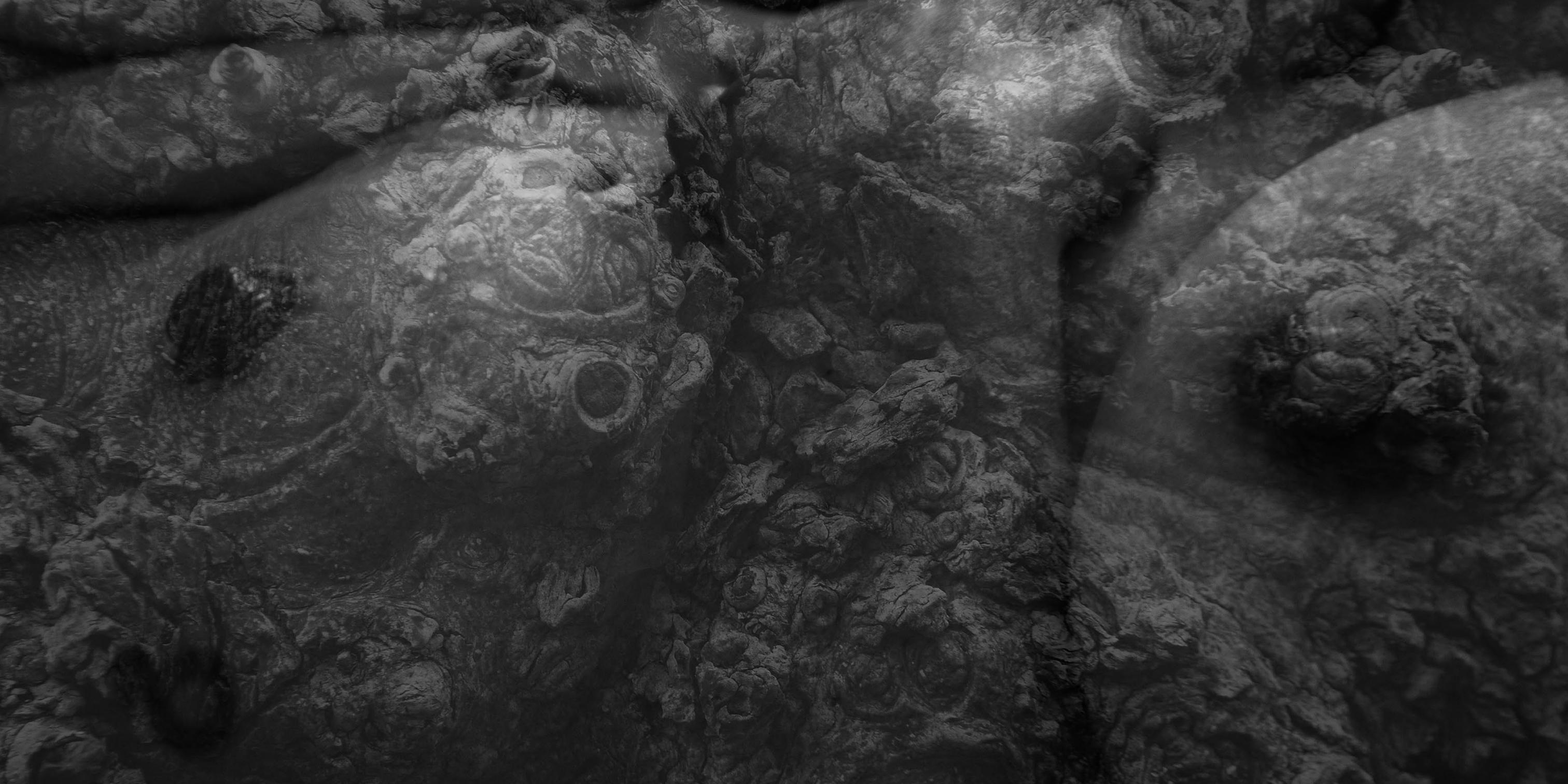
## 9.

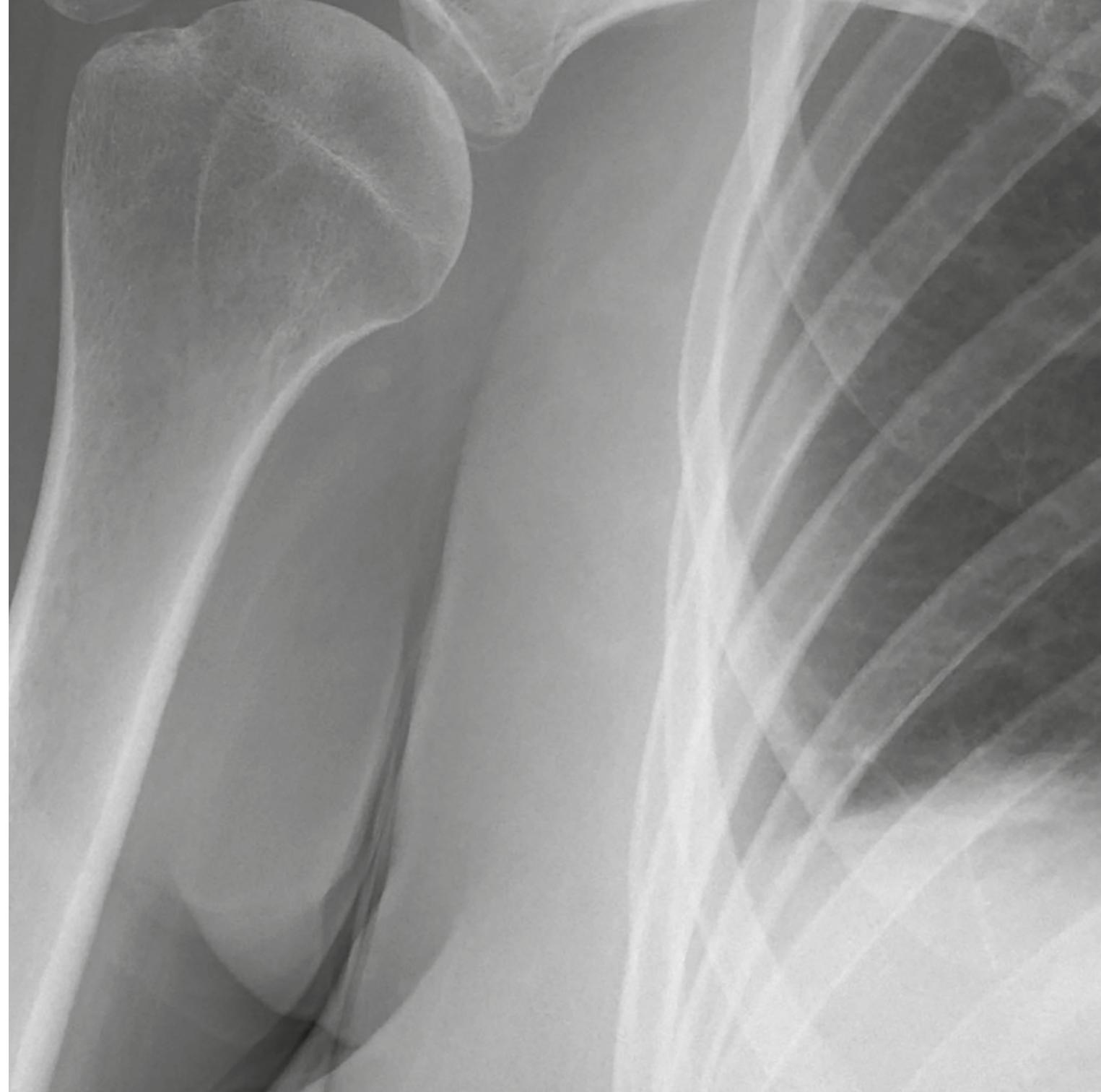
**Japan and the Gang from Peru**

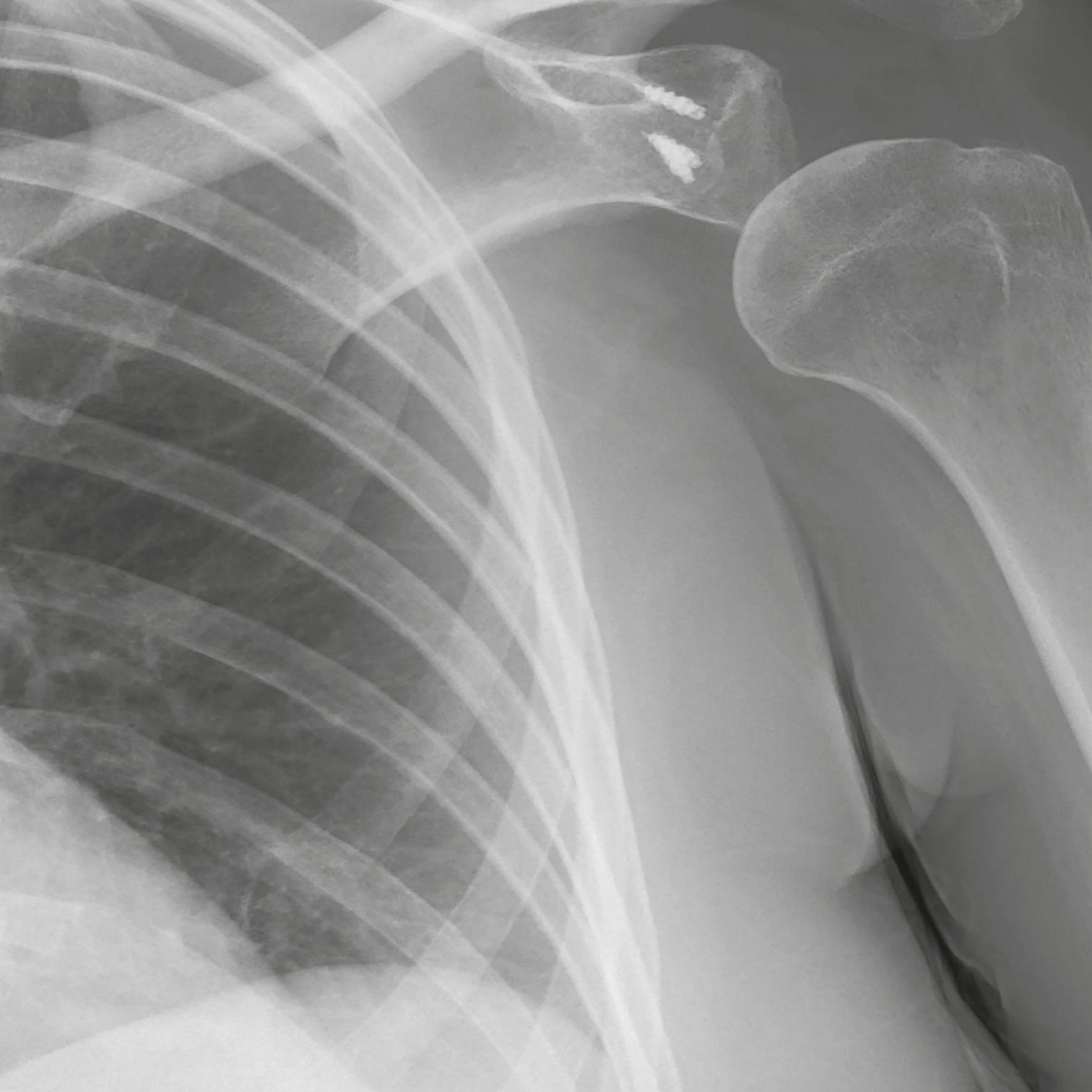
In a deserted place, and in an old barn, a group of Japanese people have settled down. They have invited me to spend the night. Every morning, the mother makes a smoothie made from whale meat, which makes them all very physically and mentally strong. I am thinking to myself that I would like to be as strong as them. So, they let me have a taste but, still, I cannot get my body up. The school bag on my back is way too heavy and it pulls me down. So, I lie down on a sofa, looking up at the ceiling, where the Japanese are keeping a grey coloured horse walking in sand. I want to have a ride it. Finally, by extricating myself from the heavy school bag, I manage to get my body up. Up on the horse, which turns out to me mechanical. I feel so disappointed and deceived. Suddenly, the phone rings, as I am just about to

leave. It is the gang from Peru. They want to threaten and bully me on my way to school. Then, my father opens a red door made of oblique boards. He tells me that my cat is outside and that he wants to see to me. I decide to rip him into two parts, as I need one part to guard the house and the another to take me to a boat, which has been reported for animal cruelty. I start running, carrying the one part of my cat. I am in a hurry, as I want to get back to the barn so I put can him back together. I run through rose hip bushes. It is warm and I am sweating around my wrists. It feels as if something is being tightened around them. I jump on the boat and save a deer, which otherwise would have been eaten, and run as fast as I can. Again, I see the rose hip bushes. I am running barefooted, alongside the deer. When I return to the barn, I cheerfully shout to my cat that we made. The other half of him hangs on the red door with the oblique boards and I put him back together. However, the Japanese tell me that I can only stay for one night, as I have not been a good mother.













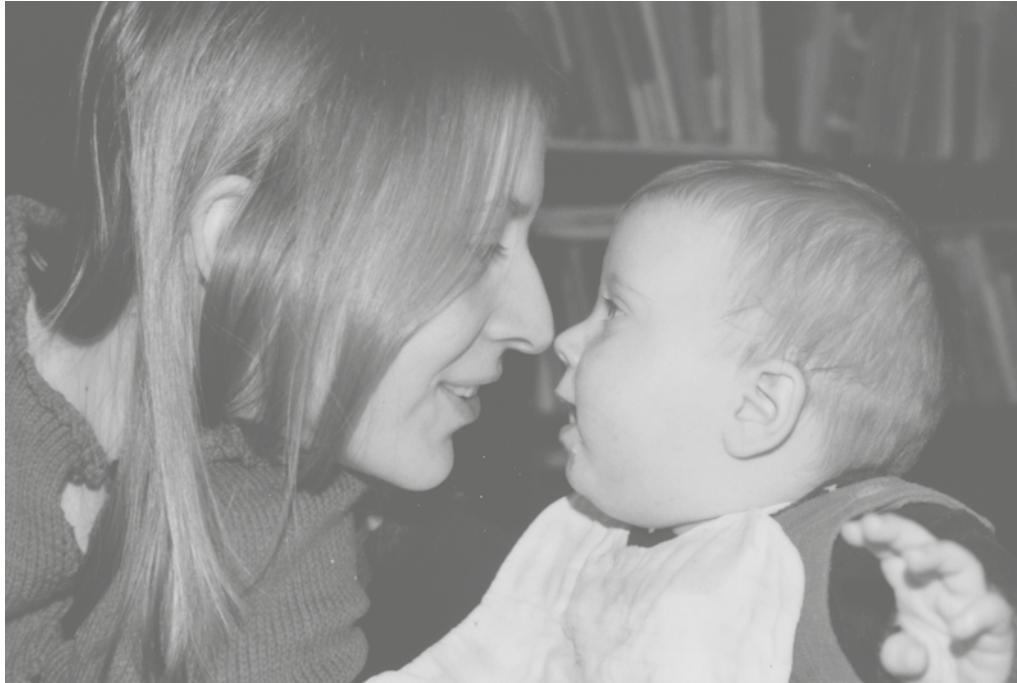
D r e a m

10.

### Dinner with the Male Nurse

It is New Year Eve and I am visiting the male nurse and his boyfriend. We are about to have dinner but it is yet another mother test. The male nurse pulls out some fish in vacuum sealer bag and asks me what I will do with them. I tell him that I will obviously put them on my chest to keep them warm. However, shortly after, I remember that they are fish and therefore I should probably put them in water but by then I have failed the test. As punishment, I must, then, kiss a Norwegian man but I do not want to because he smells too much of human. Suddenly, with the cat made of steel that is also a boy, my cat comes dancing in through the door. He blinks at me, while I am thinking to myself that he really should put some clothes on. The male nurse asks me if I would like to hear how fish can scream. He takes me to his kitchen and I put the fish, from the vacuum sealer bag, into tepid water in a blue Margrethe Bowl. They become alive. The male nurse, then, takes a tablespoon and scratches the fish inside their mouth till they scream. My heart is bleeding for them. Afterwards, he sprinkles water into my mouth in so that I am forced to drink. I happily call my mother to come and see my ability to drink. The male nurse jumps on the kitchen table and out of the window. It is dark outside.







The intention with the final book of this project is to combine literary and visual material with personal medical records and statements from relatives to make a somewhat complete medical record. Not only by including the perspectives of persons (the patient and the relatives) that would otherwise not appear in hospital records, but also by including imagery of the patient before, during and after the incident. With this literary and visual approach to medical sociology it is the intention to acknowledge the unconscious body as an all-perceivable and holistic organism, physical as well as psychological. This is based on holistic scientific and therapeutic theory on, as well as approach to the fact that the body and mind are inseparable, which has already gained acknowledgement within the psychological field but not yet found its feet within the somatic field. According to this approach, human beings consist of four dimensions; **Firstly**, the physical, which concerns the acknowledgement of the anatomical elements that constitute the bodily construction. **Secondly**, the physiological, which concerns the functionality of this bodily construction, provided by the physical and chemical processes and systems that makes the body alive. **Thirdly**, the psychological, which concerns the emotional impact on the above-mentioned dimensions. **Fourthly**, the existential dimension, which concerns the conditions for human existence, the meaning and absurdity of values, as well as choice to, for example, choose life over death and reversely.

It is argued that these dimensions are connected and has a mutual impact on each other. For example, tears are not simply salty fluids that are secreted by the lachrymal gland of the eye to lubricate the surface between the eyeball and eyelid to wash away irritants or to moisten the conjunctiva when a strong wind cau-

ses the eye to dry out. Tears can also be produced in response to strong emotional experiences. In short, this is when emotional stimulation trigger the neurological system of the brain, and activates the tear-producing process, assumingly, as a form of complex primal non-verbal communication to elicit assistance. However, even though, tears shed in response to an emotional state, is very different from those caused by non-emotional lacrimation, the physical and physiological process is the same. Accordingly, my sister argues, that coma patients are not simply bodily machines to be kept alive, at all cost, through wires and tubes, controlled by buttons. They are simultaneously psychological and existential human beings, having both physical reactions to emotional stimulation and emotional reactions to physical stimulation. Several dream texts, for example, thematically involve thirst and they do not speak of a physical dehydration but a mechanical and sensory desire to drink and moisten the mouth. Herefore, the sensory satisfaction and motive in stimulation and pleasure is often forgotten in the in-betweenness of life and death.

Therefore, this juxtaposition, of dreams and medical records somehow actualizes the dreams as both forms of escapism as well as survival strategies, and makes reality somewhat bearable. Based on this holistic approach, and with phenomenological, empirical and somewhat medical argumentation, this project proposes that dreams may have a significant impact on physical survival, as the dreams in this book, ultimately and evidentially, report medical decisions and actions that were made and executed during the unconsciousness which, then, had a physical and physiological impact on the body, as they were interpreted and made sense of through dreaming. In addition to the somewhat medical motive, it

is not the purpose of the project to make any concrete professional or medical assessments, theories or conclusions, but instead to take on an artistic approach to provide empirical, inductive and qualitative knowledge that may contribute to knowledge sharing within several subject areas such as medicine, sociology, politics but also literature, photography and art.

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**22.02.2016 08:53 B Notat**      Læge    ZIT    Intensiv terapi      1309

Patientens tilstand forværres markant i løbet af natten. Bliver iltkrævende med behov for 100% ilt. Kræver fuld sedering samt relaxering for at bedre iltningen. Sedering skiftes fra Propofol, Ultiva til Fentanyl, Midazolam. Relaxeres med Esmeron 50 mg. Cirkulatorisk kollaps med markant stigende vasopressor behov samt stigende frekvens op mod 170. Test med Adenocor, der giver puls samt BT-fald, men kun meget kortvarigt. EKG viser en supraventrikulær takycardi. Patienten er vendt med kardiologisk vagthavende, der ikke har andre forslag aktuelt.

**Pumpefunktion:**  
Det har endnu ikke været muligt at anlægge PICCO, men dette bør gøres i dagtid.

**Renalt:** findes vigende diureser og begyndende metabolisk acidose. Der anlægges dialysekateter i v. jugularis int. dx. ul-vejledt. Først forsøgt skiftet over guidewire, dette ikke muligt. Derfor anlagt på vanlig vis a.m. Seldinger ukompliceret. Abdominalt med aspirater, stadig vital stomi og sivning fra cikatricen. CVK anlægges i venstre v. jugularis int. ul-vejledt 5-lumet CVK. Anlægges glat, frit frem- og tilbageløb i alle 5 ben. Både dialysekateter samt CVK kontrolleres med rtg. thorax. Ud på morgenen let bedring i respiratoriske samt cirkulatorisk status. Kan reduceres til FiO2 65%, Noradrenalin kan ligeledes reduceres. Fortsætter understøttende behandling med væsketerapi, vasopressor, respiratorbehandling samt CRRT.

ITAs speciallæge

**22.02.2016 06:54 B Notat**      Læge    ZIT    Intensiv terapi      1309

**Objektivt**  
**Cirkulatorisk:** pt. udvikler takykardi op til 160 til 170 slag/min og forsøger at konvertere med Adenosin i 6,9, 12, 15, 18 mg og falder i puls kortvarigt og slår om igen. Dog falder også markant på BT samtidig med puls fald. Derfor afstås fra flere forsøg. Ifølge kardiologen kunne man overveje Cordarone bolus, men vi afventer med det, da vi er lidt bekymret for komplikationer af bradykardien som kan føre til hypotension.

ITAs speciallæge

**21.02.2016 15:42 B Samtale**      Læge    ZIT    Intensiv terapi      1309

**Samtale**  
Pt.s mor og stedfar informeres kort om tilstanden. Pt. holdes sederet indtil tilstanden er stabil. Pt. har PTSD og angst, og familien er bekymret for hvordan pt. reagerer når hun vågner. Det er lige nu

(fortsættes)

Udskrift fra OPUS Notatvisning	Udskrivet den 05.10.2016	Udskrivet af LSOE0346	Side 121
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*The condition of the patient deteriorates severely during the night. Requiring a hundred percent oxygen and full sedation as well as relaxation to better the oxidation. Sedation is changed from Propofol and Ultiva to Fentanyl and Midazolam. The patient is relaxed with Esmeron, 50mg. Circulatory collapse with an increasing need for vasopressor, and increasing frequency towards 170. Testing with Adenocor, which gives pulse and a BT drop, however, only temporarily. EKG shows supraventricular tachycardia. The patient has been turned over by a cardiological nurse and there are currently no other medical suggestions.*

- **Medical Consultant**

*The carpenter tells me that he will give me some soothing drops if only I buy the door from him. The door is made from the leader of the street gang from Peru and it is so beautiful. My father thinks so too. However, now I am in debt to the gang from Peru because once I had the drops I kept wanting more, as I am in so much pain.*

- **Torill Marie Irmgard Klit**



With special thanks to photographers; **Paul Halliday**, **Mette Juul**, **Becky Morris Knight** and **Katarina Strasser** for advising on the visual and literary aspects of the project. To the book bindery, **Klara K**, for their advisement on materials, as well as their contribution of three additional handmade hardcover copies, simply due to their emotional investment and confidence in the project. Finally, to the printer's, **Eks-Skolens Grafisk Design & Tryk**, for not only printing the book, but also advising on the graphical, textual and material aspects of it.

