Where Is the Mango Princess? Study Guide

Where Is the Mango Princess? by C. E. Crimmins

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Plot Summary

Where is the Mango Princess? is humorist and author Cathy Crimmins' account of her husband Alan Forman's boating accident that left Alan with significant brain injury, and the subsequent hospital care and rehabilitation efforts the family had to endure.

Cathy, Alan, and seven-year-old daughter Kelly won a raffle for a vacation at a remote location called Bob's Lake in Kingston, Ontario. The vacation went pretty miserably, and on the last day they were ready to head home. Alan took a boat trip to take away dirty laundry and garbage from their cabin. On the way, a reckless teenager drove over Alan's boat, knocking him in the head and causing massive bleeding and bruising. Kelly was in the boat and witnessed the accident.

Alan was airlifted to Kingston General Hospital, and there were many anxious days of Alan receiving intensive care. Family and friends arrived to support Cathy. Alan was stabilized, but she was told Alan's injuries were quite severe, and that he might not be the same person. There were uncertainties as to whether Alan could walk again, or exactly what motor and cognitive activities he could perform after rehabilitation.

Since the family was from Philadelphia, Alan was airlifted to the Hospital of the University of Philadelphia, or HUP. Trouble with approving the air ambulance represented the first fight in what would be a war with the family's U.S.-based health insurance HMO. Cathy strongly comes down on the side of the national health care system of Canada versus the United States' private-based health care. The HMO limited Alan's rehabilitation time, and denied benefits in other areas.

After some time at the HUP facility, Alan was transferred to Magee Rehabilitation Center. Alan was subjected to several weeks of various kinds of therapy. He learned to walk again, but in many areas he was different and struggling. He was uninhibited, yelling and swearing and at one point masturbating in public; he had short-term memory loss, and no sense of his own injury or its severity; he got angry and threw tantrums often; he could not make normal judgment calls; he had a poor sense of place and geography; and he performed poorly in social situations.

Alan went from Magee to a day hospital to finally home, with Cathy as his caregiver. Cathy described her struggles with adjusting to the "New Alan" and also of trying to deal with her traumatized daughter Kelly, who blamed herself for Alan's injury and who was verbally abused by Alan, because he could not help it.

In the end, Alan regained most of his abilities. He returned to part-time work, he could attend plays and parties, and in most areas he was able to compensate for his disability. However, his personality had changed permanently, and Cathy experienced a great sense of loss for the man she once knew.



Chapter 1 Summary and Analysis

Author Cathy Crimmins described the incidents surrounding her husband Alan's traumatic brain injury or TBI in June 1996. The couple had won a vacation to a secluded lakeside cabin at Bob's Lake through a raffle at their child Kelly's school. Kelly was age seven at the time. They were very excited, but the trip was much harder and less relaxing than they had planned. They had to fetch water a long distance to their cabin, and a local man tried to rip them off with a boat rental.

Friends arrived at the cabin, some of whom were long-time friends dating back to Cathy and Alan's days together in graduate school. Despite days of rain, the travelers attempt to have fun - swimming, telling ghost stories. The vacation's end soon came, and Alan loaded dirty laundry and garbage on their boat rental to take back to the mainland. Kelly went with him and Cathy stayed at the cabin to read. Soon after, Cathy heard a boat motor, but the boat that arrived was not Alan's. Instead, a local couple had arrived to report that Alan had had a serious accident on his boat. Leaving Kelly with the couple, Cathy took off to find Alan.

Cathy arrived at the accident site to discover Alan laying, twitching, in the boat, comforted by their frantic friends. The boat was badly wrecked. Alan managed to say "Okay" when told an ambulance was coming, but he was in very bad shape. The boat was towed to a nearby marina where ambulance workers strapped Alan to a stretcher. The fear was that Alan was paralyzed. A teenage girl informed Cathy that she had driven over Alan's boat with her own, but Cathy was numbed and couldn't feel or respond.

A paramedic named Dave asked Cathy if Alan's eyes were normally dilated, or if he normally had a bulgy stomach. Cathy feared brain death, since she knew those were signs. A helicopter arrived to airlift Alan. Normally family members weren't allowed in helicopters, but Dave convinced the helicopter pilot to let Cathy on board. Alan had what's called a "grand mal" seizure on board, and he stopped breathing. Cathy was torn between wanting Alan to live, and wanting him to die should he be effectively brain dead.

Alan was taken to the hospital. Cathy informed her parents and Alan's parents, who prepared to travel to Kingston, where they airlifted Alan. Cathy's friends booked a room at a nearby Holiday Inn. Cathy endured endless waiting, with very few updates. The neurosurgeon working on Alan, whom Cathy called Dr. (Expletive), was rude and short with Cathy, who yearned for any tidbit of information on Alan's condition. She finally learned that Alan's brain swelling was all over the brain and not localized to one region. That meant that surgery could not be performed on him; it was a closed-head injury. A nurse then told Cathy that the CT scans of Alan's brain did not look good, and that Alan's personality and functioning might be permanently altered.



Chapter 2 Summary and Analysis

Alan was in a coma, and Cathy feared brain death and a vegetative state, but nurses assured her a coma was the brain's way of trying to heal itself, and did not always mean brain death. Alan was kept naked to keep his body temperature as low as possible, and a feeding tube was inserted. He was also put on a ventilator to keep his brain as oxygenated as possible.

Meanwhile, Cathy tried to learn everything she could about TBI. Alan's official diagnosis was DAI, or diffuse axonal injury. Cathy conferred with a graduate friend of theirs, Dr. Andy, who specialized in brain injury cases, and Dr. Andy and his wife gave Cathy additional information and sent her a book on brain injury. Cathy grew close with other TBI victim families in the waiting room, including the parents of a teenage daughter who had fallen off a ladder in their barn. Cathy had a dream that Andy would suddenly snap out of his coma, but the nurses told her that coming out from a coma is a long, slow process.

Alan's condition got worse. He started to thrash around, and he developed high fevers that could not be stopped, even with medication. Cathy talked to Alan a lot, unsure of whether or not it helped. Daughter Kelly, meanwhile, had grown up too fast during the event, and Cathy felt Kelly had been traumatized and was holding in her emotions, being too mature.

Cathy's neighbors, Honey and Sarah, had been on the boat. They traveled back to the cabin to give the police their statements and get Cathy's possessions from the cabin. Cathy decided that Kelly was better off with time away from the hospital, so Honey and Sarah took her to the States to live with them for a little bit. Kelly would attend Girl Scout Camp soon. Cathy trusted Sarah, as a lifelong friend and someone good with kids, to take care of Kelly, and Cathy gave her temporary guardianship.



Chapter 3 and Chapter 4

Chapter 3 and Chapter 4 Summary and Analysis

Chapter 3: At Cathy's insistence, Alan's neurosurgeon was switched from Dr. (Expletive) to Dr. Peter Ellis, a kind and patient man who answered all her questions. Dr. Ellis assured her Alan would wake up, and on the fifth morning after the accident, Alan opened his eyes. For the next few days, he existed in a semi-comatose state, uttering slurred words and still jerking his limbs around. He was able to recognize the family and call them by name. Alan's sister, Marcia, gave Alan a Glinda the Good Witch figurine, which Cathy and Alan gave to Marcia when Marcia was dealing with the birth of her premature child. It was a good luck charm.

Alan's first sentence was, "I love you," to Cathy. It turned out Alan was fortunate to be left-handed. Had he been right-handed, the side of the brain that was most injured would have contained his capacity to speak and read, so luckily, he did not have to relearn those things. However, Alan could not lift the right half of his body, and it was uncertain whether he would ever walk again, especially since he was middle-aged at forty-four.

One day, Alan kept asking Cathy, "Where is the Mango Princess?" (the title of the book). Cathy didn't know who that was, and Alan kept persisting, becoming irritated.

Chapter 4: Alan was moved to the neurological intensive care unit. The question became: will Alan be able to swallow food? Cathy spoon-fed him, feeling awkward and like a poor caregiver, but Alan was able to eat the liquefied food.

Alan at that point had no idea he was in a hospital; when asked, he said he was in a swim club. He would insist on sending a fax at work, or keep saying the same thing over and over again. Dr. Ellis the neurosurgeon informed Cathy that he suggested Alan be on Dilantin, which is an anti-seizure medication, for a full year to prevent further damage to the brain. This constant medication would likely slow his rehabilitation process. It could take two years for Alan to regain certain cognitive functions.

Cathy next prepared to move Alan from Kingston, Ontario, to a hospital near their home in Philadelphia. She dreaded the move to the States, since that meant dealing with their private HMO health insurance. Indeed, it became an ordeal to find a neurosurgeon Cathy liked who was approved by the HMO. Cathy next fought with the HMO over the need to have an air ambulance (versus driving Alan). Alan was obviously in no condition to be driven eight hours, and Cathy had several yelling sessions with the HMO representative on this topic.

Eventually, Cathy borrowed money from her mother to hire an air ambulance and worry about reimbursement later. On the day the air ambulance was scheduled to come, it didn't arrive, and Cathy was later informed the HMO canceled her air ambulance in



order to hire their own air ambulance service. Cathy was furious. The hospital drove Alan and Cathy to an airport landing strip to meet the air ambulance, and the HMO air ambulance was late. Cathy sneaked into the airport terminal to call the HMO. Right when Cathy was ready to drive Alan back to the hospital, she was informed the HMO air ambulance finally made it.

The HMO air ambulance was quite unimpressive and shoddy-looking. It was driven by two non-nurses, when Cathy had insisted a person on board be a nurse. The pilots seemed annoyed that Alan could not get into the ambulance by himself, and the jet was not equipped to properly receive someone on a body board, making the pilots awkwardly angle Alan into the door like he was a piece of furniture. All of this left Cathy absolutely furious with her HMO, and she blamed herself for the possibility that Alan was permanently injured because of the delays and the rickety plane ride.



Chapter 5 Summary and Analysis

Cathy and Alan made their way to the Hospital of the University of Pennsylvania, or HUP. The university afforded Cathy an opportunity to talk of how she and Alan had met, while English graduate students there. Cathy was attracted to Alan's quiet intelligence, his "wonderfully eclectic" sense of humor, and his strong practical streak. He was very good with numbers and he took care of all the finances. Cathy became strongly enamored of Alan when he helped her through her car being wrecked in a hit and run accident. The couple married, and while they had plans to leave Philadelphia, they never did, buying two houses there and having Kelly seven years into their marriage. Cathy became a freelance writer while Alan went to law school and eventually became a probate attorney.

Back in 1996, Alan had regressed during his fight and was quite incoherent. Cathy met the new neurosurgeon, Eric Zagar, and she liked him. Alan was moved to a private room, but one that was very close to the hospital's helicopter pad, meaning every so often a deafening helicopter sound would fill the room. Alan did not seem to notice, but he was very sensitive to other things in his environment.

Alan's brother, Gary, arrived, and gave Cathy some much-needed help with the care of Alan. At this point, Alan was incontinent, could not walk, would fall or try to get out of bed, and had little to no short-term memory. He also developed the unfortunate habits of swearing casually and masturbating constantly, no matter who was around, which caused no end to social embarrassment for Cathy and visitors. Brain injury sufferers often lose social inhibitions, and this was the case with Alan. Alan would also frequently go to the bathroom in his bed, since his brain had to relearn to interpret the signals of needing to go.

Kelly visited Alan, and she was frightened by his wild eyes and appearance, and by the fact that he seemed like a different person who didn't know her. Alan insisted that Cathy was not his wife, and that his wife and daughter were at home, a perception that cut Cathy deeply. Alan developed a similar conception of duplication, as when he suggested creating a second Alan to replace the current defective one.

It became time for Alan to be moved to a rehabilitation facility. He did not score well on an outgoing test given by the neurosurgeon, failing in some basic tasks. Cathy figured that getting Alan into rehab as soon as possible gave him his best chance. After touring an upscale rehabilitation center an hour away called Bryn Mawr, Cathy settled on a more modest facility much closer called Magee.



Chapter 6 Summary and Analysis

Initial days at Magee were challenging for Cathy. She had trouble navigating Alan's wheelchair. Cathy was alarmed at all the patients' horrible injuries. Also, the realization hit Cathy that Alan was not just temporarily injured but permanently disabled. Kelly, meanwhile, adjusted better, marveling at the wheelchairs and other hospital contraptions. Alan was transferred to a Vail bed, which has a tent-like mesh around it to prevent the patient from falling out of bed.

Around this time, Cathy also struggled with alienation from her daughter. Kelly refused to sleep at Cathy's house; in her trauma, Kelly was afraid that something bad would happen to Cathy before her eyes, as with Alan, and so Kelly decided it was best not to be able to see Cathy. Cathy had a very difficult night when she forced Kelly to stay home and Kelly would not go upstairs to sleep.

Magee staff believed in community outgoing, or getting patients out into the community as part of the healing process. One day Alan went to a Phillies baseball game with other patients. A traumatic brain injury victim talked to Cathy and Alan as they were waiting to board the bus to the game. This victim had been injured six years ago, but still had problems with casual swearing and limping. Cathy dreaded that she was seeing a vision of Alan's future.

Alan's acclimation was a long process. He came to hate his rehab log book, which was a daily record in which caregivers as well as Alan wrote so there would be a record of what Alan did, considering Alan's difficulty with short-term memory. Alan's case manager at Magee was a woman named Lisa Gordon, whom Cathy liked a lot. Lisa reported that Alan was improving, and that he recognized that he was in a hospital, for one. Alan also started to regain continence. Crucially, Alan also started to walk on his own, which was an astonishing and touching moment for Cathy and the family.

A little later, Alan developed the habit of confabulation, or of innocently creating lies in order to better relate to and understand the world. He began to develop cold flashes as a result of damage to the hypothalamus portion of the brain which regulates temperature. He lost significant weight since his injury.

Alan participated in a variety of therapies; the most difficult was occupational therapy, an attempt to teach patients to live independently. Alan was instructed to scramble eggs in a kitchen and do similar tasks, and he had a lot of difficulty and frustration. As Cathy prepared to take Alan from the rehab center to permanent in-home caregiving, she realized her home and home habits would need to be significantly transformed.



Chapter 7 Summary and Analysis

By the end of the second week at Magee, Alan was walking with a cane. The HMO felt that milestone was sufficient to stop benefits for Magee, and Alan ended up staying three weeks, instead of three months, at Magee because of denial of benefits. Cathy railed at the HMO for failing to recognize cognitive impairment while looking only at physical impairment when deciding benefits.

To illustrate Alan's sometimes difficult-to-detect cognitive impairments, Cathy talked about an incident five months after the accident in which Alan and Cathy attended the Philadelphia Flower Show. Cathy and Alan were avid gardeners and flower fans, and always attended this show. However, Alan could not recall any words for the flowers - daffodils, geraniums, foxglove. Alan had lost this particular category of vocabulary words in his accident.

Alan also suffered from topographical difficulties; that is, he had trouble navigating the Magee building and generally locating himself in the world and finding where to go. Brain injury sufferers are particularly susceptible to getting hit by cars because they become disoriented and do not understand the flow of traffic.

Additionally, Alan suffered from perseveration, the aimless repetition of a task or idea, another common symptom with TBI. Alan would get an idea in his head and not let it go.

Alan received a cognitive test prior to leaving Magee to establish a baseline which could be later referenced as far as Alan's progress. He did very poorly on the test. Alan excelled at tests such as the SAT and the LSAT prior to his injury, and this was another sign to Cathy for how far Alan had fallen.

In anticipation of full release, Alan was given to Cathy on a day pass to be introduced to their home. The paradigm shift of environments from Magee to home confused and angered Alan, and he became sleepy after just minutes at home, wanting to go to bed. Cathy got the idea to have sex with Alan to kind of jog his memory and snap him out of his funk by introducing him to the routine, but Alan did not respond to the event, and Cathy felt like she was sexually harassing a stranger.



Chapter 8 Summary and Analysis

Alan was released from Magee. After a week at home, Cathy brought him to an old hangout, the Lombard Swim Club. Cathy had to constantly explain what was wrong with Alan. Alan was terrified of the water and couldn't go far into the pool. Cathy also detected a large difference between how men and women reacted to Alan. Men were concerned with Alan's ability to have sex and return to work, while women were concerned with how Alan was feeling and whether he was comfortable.

On Magee's recommendation, Cathy forced Alan to attend day hospital, where he could continue to receive therapy by day and return home by night. Cathy had to deal with a regression of function on Alan's part, due to the environment shift, and also had to deal with Kelly's jealousy with respect to how much attention Cathy was giving Alan and not her.

Alan continued to improve at the day hospital. He excelled at physical therapy; before the accident, Alan played many sports and was always concerned with physical health. Alan also made strides with a recreational therapist named Asher Kemp, a young black man. Cathy figured Kemp was a welcome change from all the white women telling Alan what to do. Kemp played card and board games with Alan and other things to exercise his mind.

A major difficulty for Alan was intense fatigue, very common with cases of TBI. Fatigue would lead to the deterioration of other things like motor function and balance. He slept many hours a day and could not concentrate on tasks for more than a half hour or hour at a time before needing rest.

Alan hated the day hospital, and because of lack of self-awareness typical of TBI, thought it was completely unnecessary and that he should return to work immediately.

For Cathy's birthday, as per tradition, their friends took her to a very nice restaurant, and Cathy brought Alan along. Alan performed okay, but made inappropriate, nonsensical jokes with the waiter, and otherwise his social awareness was simply off. He felt like another person to Cathy.

After a few weeks, the HMO again refused to pay for the day hospital. Cathy considered the day hospital crucial to Alan's recovery, so she decided to pay for it out-of-pocket. Meanwhile, Cathy experienced the phenomenon of parentification, in which a spousal caregiver becomes a kind of parent to an injury victim. Alan felt more like Cathy's rambunctious toddler than her husband.

Alan experienced a phase of intense gregariousness. He would approach just about anyone at the pool or at the hospital, and talk at length with them. He would crack jokes



that didn't make sense or tell long stories with no point, making for some awkward moments.

The family took a vacation to Cape May on Labor Day, a place Cathy and Alan had visited frequently pre-accident. Alan didn't seem to register any affection or emotion for the place, disappointing Cathy, though he did react with excitement at a conch shell found on the beach, like the old Alan might have.



Chapter 9 Summary and Analysis

Cathy related the story of Phineas Gage, a famous brain injury case in American history. Gage was a construction foreman who, in 1848, had an accident in which gunpowder sent a three-foot-long, one-inch-wide shaft of iron into his eye and out the other side of his skull. Gage was a marvel to the doctors, as he rapidly regained motor and speech functions despite losing an eye and having extensive brain damage.

Gage returned to work, but was soon fired because his personality had changed. He could not concentrate; he flew into fits of rage; he swore frequently; and he was rude and bizarre. Cathy pointed out that Gage's symptoms were classic of frontal lobe brain injury, and she wondered how Gage could have been helped by modern science. As it stood, he ended his life as a vagrant.

Unlike Gage, Alan was able to benefit from sophisticated drugs. He was given seratonin in the form of antidepressants, which seemed to helped with Alan's focus and mood. He was also given Ritalin, but this made him angry and it was soon discontinued.

It came time for community reentry, during which Alan would attempt a comeback to his job or at least some form of vocation, assisted by a special reentry counselor. Alan had had two jobs, a probate attorney and a bank trust officer, and Magee was hopeful that Alan could return to his job as a bank trust officer, and perhaps even an attorney. Alan's vast education, and the fact that he retained all his memory of banking and law, were decided advantages in this process.

Alan continued to make progress at home. He started to do household chores and became aware of things like the cats needing to be fed. However, he still only had the dimmest of awareness as to his condition, and Cathy still had to set his itinerary and be the "big picture person for him. Cathy chose a state-run organization called the Office of Vocational Rehabilitation (OVR) for Alan's community reentry. For Alan's rehabilitation counselor, a young neuropsychology graduate student named Bill Gardner was chosen. Cathy was hopeful that Gardner's hip, youthful outlook would be the perfect fit for Alan, but Alan resented having any help getting back into the workplace whatsoever. Alan still did not have the capacity to understand he needed assistance to return to work.



Chapter 10 and Chapter 11

Chapter 10 and Chapter 11 Summary and Analysis

Chapter 10: Bill Gardner, the counselor, helped Alan to organize his home office. Alan was quite resentful of having a helper. Alan still did not often recall that he was injured, and he forgot many of the doctors and nurses and other people he had met since his accident, including Dr. Zagar. Alan's right leg started to bother him, and Cathy feared the worst, but MRI images showed no new brain bleeding had occurred. The right leg numbness could have been a mystery regression or could have been stress-related.

Alan was next able to pass a written as well as road driving test in order to get a license to drive again, which was a good sign for his independence. Alan began to work in a very limited capacity, about 8 hours a week in the office and an additional 4 hours at home. Bill accompanied Alan to help him organize and prioritize tasks, and also to explain Alan's injury to coworkers. Bill also helped Alan to control his temper tantrums and force him to realize when he was being socially awkward.

Chapter 11: This chapter is devoted to Kelly. Kelly was assigned a psychologist to help her cope with the trauma of Alan's accident, but Cathy found the psychologist condescending and cold. Eventually Kelly was assigned a better psychologist.

Kelly exhibited several unfortunate signs of trauma. She feared going upstairs by herself, and she was afraid to go to sleep. She blamed herself for Alan's accident, and Cathy tried to convince Kelly it was just bad luck. If Cathy had one wish, it would be to spare Kelly from the horror of Alan's accident. Alan was often terrible to Kelly, cursing and yelling at her, and Cathy had to tell her over and over again that Alan could not help it.

Kelly also was angry at Cathy for leaving her on the island after the accident and going to Alan. After Kelly's persistence, Cathy angrily responded that she left Kelly because Alan almost died, and this seemed to be a revelation for Kelly, that her father had almost died.

The worst bout of Alan's abuse of Kelly came about nine months after the accident, when Alan took Kelly and her friend Jen to the movies. Kelly got jellybeans out of a vending machine at the theater and it came out to be seven dollars. Alan flew into a rage at the outrageous price, and Kelly dropped the jellybeans on the floor. Alan kicked her in the behind as she was stooping down to pick up the candy. Livid, Cathy told Alan that if he ever hurt Kelly again, she would leave him, and he became very apologetic. Alan simply did not know any better. Bill confronted Alan and told him that he may lose his wife and child if he continued to behave the way he was behaving, and Alan cried and begged Cathy not to leave him.



Chapter 12 Summary and Analysis

Alan was prepared and very anxious to return to work in a more permanent capacity after the first of the year, and Cathy thought he needed additional relaxation time prior to that disruptive moment. So, the family went on a vacation to Mexico, which in retrospect was a terrible idea. As Cathy explained, travel for any TBI-sufferer is also a nearly traumatic experience, because it represents a change in environment which is quite taxing.

Alan became very anxious on the plane ride and in the long line at customs; he could not handle the wait and he started swearing and throwing a tantrum, embarrassing Cathy. At the resort, alcohol was handed out freely, and Alan soon became drunk. TBI-sufferers should not consume alcohol since it emphasizes their disabilities.

Alan also started to explore the ocean, and he went out extremely far into the water, apparently overcoming his fear of water. Cathy continually warned him that he was going too far out, but Alan had no concept of the danger. To try to get him away from the ocean, Cathy and Alan went on a day-long trek to a Mayan ruin in a place called Coba. However, Alan chose a place along the way to go snorkeling among coral reefs, and Cathy begrudgingly agreed.

While at the coral reef, Alan again swam way out to sea. There were dangerous undercurrents, and soon Alan became unable to swim back. He started to swallow water, and Cathy had the awful feeling that they went through this entire ordeal only to have Alan die by drowning, and that she was foolish for even taking him to a foreign country again in the first place. Cathy tried to swim out to Alan, but she was hindered by the current as well. Luckily, Alan managed to ride the current to a safer place and eventually to the shoreline many yards away.

Six months after the accident, Alan formally returned to work as a trust officer. Bill was there to accompany him, and while Bill's presence was initially uncomfortable for coworkers, they soon warmed to Bill's presence. Alan still had no idea how miraculous it was for him to be working after his injury, and he still resented Bill.

Cathy next discussed Alan's personality changes. He was not the same person, though there were occasional flashes of the old Alan. Cathy tried not to remember what she missed about the old Alan, but it was inevitable. The new Alan loved talking on the phone, while the old Alan did not. All the slightly annoying traits of the old Alan became obvious and very annoying traits in the new Alan. For example, Alan had always been short of patience and quick to become angry, but post-injury he had many extreme tantrums. Cathy missed Alan's quick wit and unusual sense of humor; new Alan was an uncomplicated, regular guy. The old Alan did not keep very good track of time, but the



new Alan was terrible with time and constantly had to be reminded of dates and appointments.

Additionally, new Alan was a very impulsive purchaser of knick-knacks, toys for Kelly, and other unnecessary things which quickly caused the family financial distress. One day, for example, Alan bid on and won six expensive things at Kelly's school auction, and Cathy had to call the school to cancel the bids.

Still, there were some good things about the new Alan. He was very affectionate and sweet. Though often angry, he would forget his anger just as quickly, and most of the time he was kind and did not have a care in the world. Cathy estimated that Alan recovered 95 percent of his functions and cognitions, but that those missing 5 percent were crucial to his personality.



Chapter 13 Summary and Analysis

Alan initially behaved quite successfully in his old position as a bank trust officer. Alan handled old skills very well, though he had trouble with newer tasks like learning a new computer program. Cathy bought a dog named Silver for Kelly, and Alan initially hated the dog, kicking it and yelling at it. After about a year, however, Alan came to dearly love the dog. Alan also developed a better sense of his own injury and limitations, and he was free with people about the nature of his injury.

Unfortunately, the powers that be at the bank kept pressuring Alan to become a full-time employee. All Alan's doctors and other professionals felt that 40 hours was simply too much for a man in his condition. Alan's bosses did not understand the injury. Cathy explained that TBI is an invisible disability since a person with TBI usually looks normal. Alan felt he was perfectly capable of working 40 hours, although every day he came home from part-time hours extremely exhausted.

The bank eventually gave Alan an ultimatum: work full time, or you'll be let go. Cathy and Bill were outraged, and Cathy considered suing the bank for discrimination against a disabled person. They considered finding Alan another job, but Cathy felt that would be too great of a change. A labor lawyer friend of the family wrote a letter to the bank stating the family's position, and the bank responded with a letter stating Alan could keep his job as a part-time employee.

The victory was short-lived, however, as in a reorganization, the company laid off Alan soon after. Cathy felt the layoff was a thinly veiled, discriminatory firing, but to legally pursue anything would have been too costly and time-consuming. Alan picked up a temporary job in a law firm.

Though Alan still yelled at Kelly, he also lavished her with gifts, and as Kelly grew Alan and Kelly connected with a common interest in sports. Alan attended all of Kelly's various sports matches and taught her athletics.

Another of Alan's traits included frequent frustration caused by physical clumsiness when doing basic things like putting on a suit jacket. He had lost his sense of smell in the accident, and that often frustrated him and depressed him. Alan also became overstimulated very quickly, and had to rest often. However, he was eventually able to do many of the things the old Alan had done, like attend a play.

All in all, Alan's recovery was somewhat of a miracle, with respect to how many functions he was able to retain. Other TBI families Cathy knew had to cope with much worse, such as victims who existed as near vegetables in bed. In all, Cathy thought they had attained a reasonable facsimile of their old life.



Characters

Cathy Crimmins

Cathy Crimmins is the author of Where is the Mango Princess? and her story as a Traumatic Brain Injury or TBI caregiver is the focus of the book. At the time of her husband's brain injury in 1996, she was 41 years old, and a freelance writer with a specialty in humor. Cathy and Alan had attended English graduate school together at the University of Philadelphia, and had fallen in love and married, having daughter Kelly seven years after their marriage.

Alan's injury sent Cathy into many months of anxiety and massive stress. She went through a gamut of emotions, blaming herself for Alan's accident, becoming furious with her HMO for denying benefits, and trying her best to deal with her traumatized daughter. She fought tirelessly for Alan, and coped as best she could with Alan's different personality and various disabilities and social awkwardness.

She learned all she could about traumatic brain injury in order to better deal with Alan and determine the best course of action for his health. She felt that few of her friends and family understood Alan's condition, and that they glossed over the fact that Alan, as he had been, was gone, replaced by a mostly different person. Cathy did not consider herself a very patient or good TBI caregiver, but it was clear her persistence and strength was crucial for Alan's recovery and continual well-being.

Alan Forman

Alan Forman was a probate attorney and bank trust officer who had met future wife Cathy as a graduate student at the University of Philadelphia. They had been married for more than a dozen years when the couple took a fateful trip to a log cabin in Kingston, Ontario. While ferrying a motor boat back to shore, Alan was run over by another boat, and his brain was severely injured.

Alan had many weeks of intensive hospital care at two different hospitals, and then further weeks at a rehabilitation center and finally a day hospital. Because of short-term memory loss, he would remember very little of his hospital ordeal, and none of the accident itself.

Alan struggled to regain basic motor and cognitive functions, such as walking and going to the bathroom. He became quite uninhibited as a result of his injury, and did not have a social filter any longer to help him navigate social situations. As such, he frequently yelled and swore at people, and in his worst moments he masturbated in front of visitors.

Alan became essentially a different person after the injury. Where before he was quite intelligent and bore a quick wit, after the injury he became silly and uncomplicated. He



became very gregarious and loved to talk on the phone. He still had bouts of anger that he learned to control better but never eliminate. He was able to return to work, but still had trouble prioritizing duties. He also needed much rest, and was quickly mentally exhausted after seemingly trivial social events and changes in environment.

Kelly

Kelly was Cathy and Alan's seven-year-old daughter at the time of Alan's accident. She was on the boat with Alan and personally witnessed his accident. Kelly became traumatized after the incident, and was afraid to return home or go to sleep. She blamed herself for Alan's injury, and was angry at her mother for leaving her to tend to Alan on the day of the accident. Kelly also had to endure Alan's yelling and swearing fits directed at her, symptoms of traumatic brain injury.

Dave

Dave was the paramedic who was among the first responders to Alan's accident. Dave was kind, and asked Cathy about Alan's health history.

Dr. Peter Ellis

Ellis was a neurosurgeon at Kingston General who eventually took on Alan's case. Cathy found him to be a kind and patient man who answered all her questions.

Dr. Andy

Dr. Andy was a neurosurgeon friend of the family who advised Cathy on several key issues relating to Alan's hospital care and later rehabilitation.

Lisa Gordon

Lisa Gordon was Alan's case manager during his stay at Magee Rehabilitation Center. She was a strong advocate for Alan, and she understood Cathy's sense of grief and loss.

Phineas Gage

Gage was a famous sufferer of brain injury when an iron shaft entered his skull in a construction accident in the mid-19th century. Gage was able to return to work, but his personality changed. He was rude and impulsive, and he was soon fired.



Asher Kemp

Kemp was a young recreational therapist at Magee Rehabilitation Center who played games with Alan in order to aid his cognitive functioning.

Bill Gardner

Bill Gardner was a rehabilitation counselor who assisted Alan in his return to work as a bank trust officer.



Objects/Places

Bob's Lake

This remote vacation spot was the site of Alan's brain injury accident in June 1996.

Kingston General Hospital

After his accident, Alan was air-transferred to Kingston General Hospital for immediate emergency care.

Hospital of the University of Philadelphia (HUP)

HUP was where Alan was transferred to for continuing hospital care after Kingston General. Eric Zagar was the neurosurgeon who cared for Alan while at HUP.

Diffuse Axonal Injury (DAI)

DAI was Alan's precise diagnosis with respect to his brain injury. Many of Alan's frontal lobe axons had been destroyed or sheared completely off.

Dilantin

Dilantin is an anti-seizure medication that was given to Alan to prevent seizures. While Alan did not continue to have seizures, Dilantin slowed his rehabilitation process.

Health Maintenance Organization (HMO)

The family HMO was the target of much of Cathy's fury and exasperation as Alan received care, because they attempted to deny benefits and pay for as little as possible of Alan's healing.

Magee Rehabilitation Center

Cathy chose Magee Rehabilitation Center for Alan's rehabilitation. Alan spent several weeks there, learning how to walk and other skills necessary for independent living.



Office of Vocational Rehabilitation (OVR)

Pennsylvania's Office of Vocational Rehabilitation (OVR) was chosen for Alan's community reentry, which is the process of reintroducing a brain injury sufferer back into the workforce in some limited capacity.

Perseveration

Perseveration is the aimless repetition of an idea or task that is common with sufferers of traumatic brain injury. Alan would frequently hold on to an idea and discuss it to exhaustion.

Silver

Silver was the name given to Kelly's dog that she received for her eighth birthday. Alan hated the dog - because it represented an exhausting change to his living environment - and he often kicked it and swore at it. After many months, however, Alan came to love the dog.



Themes

Struggles with the HMO

Though stuck in a foreign country, Cathy felt Alan was better off having his injury in Canada than in the United States, and she even considered moving the family to Canada before deciding to go back to their hometown of Philadelphia. This was because Canada had a national health care system, and the United States' health care system was comprised largely of private corporations.

Because Alan's care in Philadelphia would be provided by a private entity in the form of the Health Maintenance Organization (HMO), every aspect of Alan's hospital stay and rehabilitation was examined and questioned since the HMO attempted to pay as little as possible to get Alan healthy again. The first instance of the HMO's meddling was their canceling of an air ambulance in favor of their own air ambulance for transporting Alan from Kingston to Philadelphia. The HMO air ambulance was late and ill-equipped for Alan's condition, and Crimmins felt Alan's time spent in the rickety plane worsened his condition.

In the United States, the HMO only paid for weeks, rather than months, of Alan's rehabilitation, and Cathy had to constantly fight with HMO representatives on the phone to receive benefits. Cathy clearly came out of her ordeal with an intense dislike of the way health care is managed in the United States. Cathy felt the insurance company was only interested in money, and she felt it paid no attention to Alan's actual condition or needs.

Alan Became a Different Person

Although Cathy at one point estimates that Alan retained 95 percent of his cognitive and motor abilities, she makes it clear that the missing 5 percent represented the somewhat intangible phenomenon of a person's personality. Alan was a changed person; as one TBI sufferer described his own situation, it was as if the accident was the equivalent of a sudden divorce, and the hospital care after the accident was the equivalent of a hastily-arranged marriage.

In some ways, existing personality traits of the old Alan become exaggerated in the new Alan. Alan had always been impatient with a short temper, but post-injury, Alan became extremely impatient, often flying into rages for trivial frustrations. Alan had always had a poor sense of time, but the post-injury Alan had extremely difficult time management issues, and often had to be led around and told where to go and what deadlines he had to meet.

In other ways, new Alan was completely different from old Alan. Alan became an impulsive purchaser of unnecessary items, where before he was quite frugal. Alan became obsessed with his Jewish heritage, whereas before he was fairly indifferent to



that heritage. Alan before the injury was known and loved for his sharp intelligence and quick wit; after the injury, he did not possess nearly the same level of wit and intelligence, and became a simpler person.

Cathy noted that there were a few characteristics of new Alan that were actually positive. He was very affectionate, and would leave love notes and roses everywhere for Cathy. And, where the old Alan was fussy and high-strung, the new Alan was relatively carefree.

Misconceptions of Traumatic Brain Injury

As Cathy introduced Alan to social situations again after his illness, and just in conversations with friends and family, she perceived several misconceptions about her own emotional state and about the nature of Alan's condition that she wished to aggressively correct. One response to Alan's injury that Cathy took exception to was the notion that Alan was lucky to come out of the accident as well as he did, and that he was just fine after his hospital care.

Traumatic Brain Injury (TBI), as Cathy explains, is a kind of invisible disability. Because the TBI sufferer does not physically appear to be disabled, and does not show any signs of the injury, he or she is assumed to be just fine. As Cathy can attest first-hand, this is not the case, and Alan was in fact radically different and quite disabled compared to how he was before the accident. Men friends seemed only concerned that Alan could still have sex and work, while female friends were overly concerned with Alan's feelings. The damage was done at all levels of Alan's family and life.

On the topic of TBI being an invisible disability, Cathy stresses that it is important for people to recognize TBI sufferers as disabled people and to help them accordingly. Just as one might naturally hold open a door for a person in a wheelchair, one should just as naturally help a TBI sufferer locate himself geographically if he is confused, for one example.

Cathy also bristled at any comments that the injury was a blessing in disguise or that it happened for a reason. Friends and family wanted to deny the severity of Alan's injury, to dismiss it or downplay it. Living with the injury and its consequences every day, Cathy could not dismiss it so easily. She felt as if she had lost a husband, and there was no silver lining to the accident for Cathy. Professionals such as Lisa Gordon were able to sympathize with Cathy's situation better than nonprofessional friends and family.



Style

Perspective

Cathy Crimmins was a professional author, and she brought her professional writing experience to the book for her autobiographical narrative of Alan's injury and recovery. Because Crimmins was very close to the material, her emotions are often obvious. Crimmins seemed very sorrowful for the husband she had lost, since the new Alan post-injury seemed to be a different person than the husband she had known. She was a fierce and loyal advocate for her husband, fighting for him when he could not fight for himself.

Crimmins wrote in the present tense, which provides a sense of immediacy as well as a feeling for the reader that he or she is alongside Crimmins for all the ups and downs of Alan's recovery, and all the different revelations about what he did and did not retain in regards to his faculties. The present tense choice also makes the narrative feel like a journal that was maintained throughout the actual events of the book, though whether this is so is uncertain.

Crimmins felt that most friends, acquaintances, and even family members did not properly understand Alan's disability, and part of her task in writing the book was to help people understand Alan and to debunk some misconceptions about traumatic brain injury. Crimmins desired for TBI sufferers to be recognized for their unique disabilities, and she hoped that society would gain more compassion for these people who, on the surface, seem to have nothing wrong with them.

Tone

Crimmins' narrative displays the ambivalence the author often felt. She would be thrilled at certain moments, such as when Alan was able to walk for the first time, and then crushed in the very next passage when Alan would show additional symptoms or a regression in his recovery. She grieved for the loss of the husband she knew, but at the same time she knew Alan was quite fortunate to retain as many abilities as he did. She understood that Alan was not aware that his behavior was inappropriate, yet at the same time, like any human would do, she sometimes exploded in anger at Alan and at the situation with which she had been cursed.

Crimmins reserves her most furious anger for her Health Maintenance Organization (HMO), a company which Crimmins felt only cared about the bottom line (cost) with respect to Alan's illness. Crimmins fought with the HMO on several occasions with respect to Alan's medical benefits, and she fantasized at one point, kiddingly, about murdering the HMO executives.

As a humorist, Crimmins is able to find moments of lightness and humor in even the darkest moments of the tragedy. Her sense of humor helped her through some



incredibly tough moments, and she is usually able to maintain a somewhat wise perspective on her family's misfortune, reflecting that she had seen other traumatic brain injury sufferers who had been left in much worse shape than Alan.

Structure

The book is divided into thirteen chapters. It proceeds in approximately chronological order beginning with directly before Alan's accident in 1996 and ending a few years after when Alan is recovered and living back in society. However, there are several exceptions to the chronological sequence, as when Cathy flashes back to how Alan and she met while graduate students at the University of Pennsylvania.

Chapters deal roughly with discrete sections of Alan's recovery process. For example, Chapter 5 deals with Alan's time at the Hospital of the University of Philadelphia (HUP), while Chapter 6 deals with Alan's rehabilitation time at Magee Rehabilitation Center.

Each chapter begins with a quotation drawn from a professional journal about brain injury or from an official document from Alan's hospital records, to provide additional context and scientific information about the stages Alan is going through.

Frequently, chapters end on a kind of cliffhanger which propels the reader forward with an unanswered question and makes the reader want to learn more about the resolution to the question. For example, Chapter 1 ends with a nurse informing Cathy that Alan's injuries may make him a different person, and the reader is left to wonder whether Alan will be the same person or not.



Quotes

"I look out the window again, down at where the glaciers have dimpled the landscape and left behind dozens of blue pockets of water, and I think of how one's life is supposed to flash by while one is dying. Is that happening to Alan? Or maybe it falls to me, the conscious one, to have the flashbacks. Scenes from our life together go zipping through my mind: the years in graduate school, the travels, the parties, the birth of our daughter. Is this all ending now, in some Canadian government helicopter?" (Chapter 1, page 17)

"Alan has extensive damage in the frontal lobes of his brain. The official diagnosis is DAI - diffuse axonal injury - with subdural hematomas all over his frontal lobes. What does this mean? His brain is very messed up." (Chapter 2, page 31)

"I don't realize how accustomed I've grown to hospital life. When my mother and Al's parents first see him, the expressions on their faces jolt me back to reality. His immobility and all the tubes and the ventilator and the monitors beeping frighten them. Alan's father is too upset even to approach Al's bed." (Chapter 2, page 39)

"We're going home. Everyone at Kingston General asks if I am excited. Actually, I'm scared. Canada is a comforting cocoon, a retro-type place where people are friendly and caring. It seems twenty years behind the callous, moneygrubbing, consumer-oriented American culture." (Chapter 4, page 63)

"Distractability. So far Al's biggest symptoms have been agitation and confusion, but I am learning that he will manifest more side effects, adding them like lasagna layers to the casserole of bizarre behavior that constitutes TBI. The injured brain loses its ability, either briefly or forever, to filter out distractions and concentrate on the task or conversation at hand." (Chapter 5, page 80)

"When you see a brain injury firsthand, it plunges you into thinking about the mind/body problem. Like a lot of people, I'd never thought seriously about the brain as a physical organ that regulates the body, like the heart, lungs, or kidneys. For most of my adult life, I'd never really considered the role it plays in walking, sitting, running, and jumping." (Chapter 6, page 125)

"Perseveration - the aimless repetition of a task or an idea - is a very common sign of brain injury. Some people cannot stop washing their hair or clapping their hands. Others, once they think they have to find something or do something, cannot stop



talking or thinking about it. With Alan, mostly, it is ideas. He just won't let go of them." (Chapter 7, page 144)

"Since his injury, Alan's eyes look weird. He still looks perpetually stoned. Yet when his cognitive fatigue level reaches a dangerous point, his eyes get wild. They almost seem to change from their natural light hazel to a dark, stormy brown. I can tell just by looking at him that he will detonate at any moment." (Chapter 8, page 164)

"Community reentry can involve anything from learning how to live on one's own to actually going back to a former job. We've been told that Alan has a chance of being able to work again as an attorney and bank trust officer. Lisa Gordon at Magee said, 'I don't usually make such statements because I don't want to get hopes too high, but I do believe that Alan has the potential to do his job again." (Chapter 9, page 184)

"I would do anything—anything—to erase the accident from [Kelly's] childhood. If a genie were to appear and give me only one wish, it would be that my daughter would not have to see her father lying comatose and then later, agitated and confused, zipped into a bed, acting like a raving lunatic. I can never undo that reality, and I hate it." (Chapter 11, page 202)

"Long after a baby is born, the brain continues developing. Two of the last faculties to kick in, around age nine to twelve, are self-awareness and judgment. Last to develop, first to go—a lack of judgment is one of the most common side effects of getting knocked on the head." (Chapter 12, page 212)

"A year after Alan's injury, one of our neighbors stops me on the street. Do I feel as if we have our old life back? she asks. 'What we have,' I say, 'is a reasonable facsimile of our old life." (Chapter 13, page 248)



Topics for Discussion

List the symptoms that Alan suffered from his brain injury immediately after the accident.

List the symptoms of Alan's brain injury that lingered after his rehabilitation and reintroduction into society.

What was Cathy's opinion of her HMO, and of the U.S. health care system in general?

What is perserveration, and how did Alan exhibit this symptom?

Why was Lisa Gordon an especially refreshing presence for Cathy?

Describe how fatigue factored in to Alan's daily life, and how it affected other aspects of his behavior.

What characteristics did Kelly exhibit as a result of the trauma of Alan's accident?