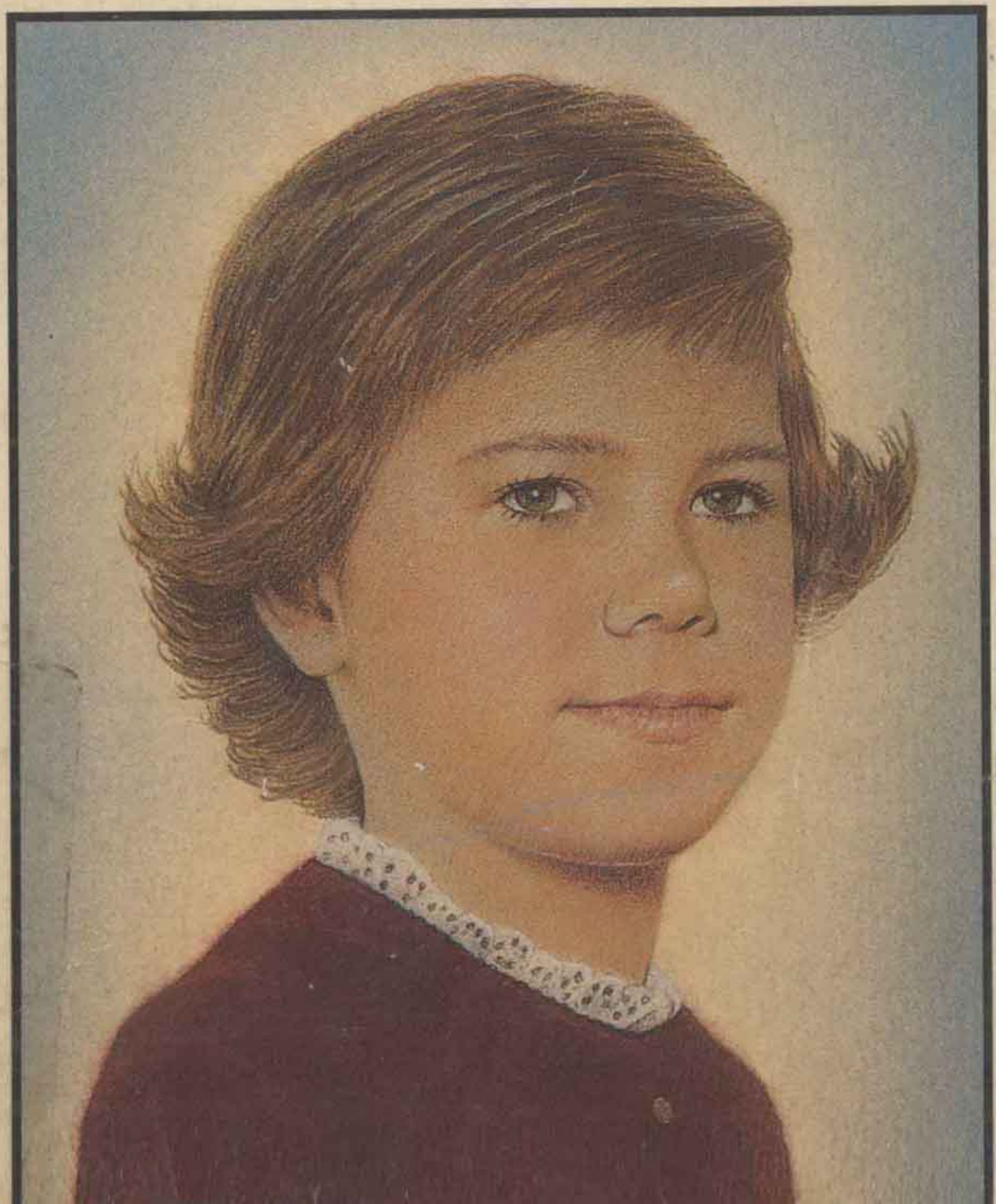
The extraordinary real-life story of a young girl's misdiagnosis and her courageous fight for health

RICKIE

Frederic Flach, M.D.

With Recollections by Rickie Flach Hartman

"A touching story."
THE NEW YORK TIMES BOOK REVIEW



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Frederic Hacker M.D.

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More praise for RICKIE

"RICKIE must be read by every thinking member of the mental health community—psychiatrists, families, doctors, nurses and all other mental health professionals."

PAUL JAY FINK, M.D.
Past President,
American Psychiatric Association

"Unbelievably true, this book is exciting and interesting. . . . Refreshing . . . it has a message that has to be heard; that cannot be lost in scientific journals."

Dr. RICHARD J. APPEL
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"Gripping . . . Has the suspense of a thriller, and its attractive characters and deep humanity will appeal to a wide audience of both professionals and lay people."

The Kirkus Reviews

"Poignant . . . Singularly devoid of self-pity and bitterness . . . Makes palpable the anguish of being torn between parental and professional concerns during his daughter's illness."

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TO THE FLACH FAMILY,
with all our love

Hold fast to dreams
For if dreams die
Life is a broken winged bird
That cannot fly.

LANGSTON HUGHES

Author's Note

It was not without some trepidation that Rickie and I decided to tell our story. The public stigma that surrounds mental illness and affects everyone involved—patients, families, even psychiatrists and other mental health professionals—may have diminished somewhat, but unfortunately a good deal of it persists. We knew there would be pain in recalling those turbulent years. However, we were strongly encouraged to proceed, not only by friends and patients and their families, but also by some of my most eminent colleagues. They felt our story would offer hope to many, help open minds toward new approaches to psychiatric care, and encourage a more informed and humane attitude toward the millions afflicted with mental illness.

Our experiences are by no means intended to detract from the great contribution mental health professionals using traditional treatment methods make to the well-being of their patients, nor are they an endorsement of new, untested forms of therapy. Rather they speak to the humility and awe we all should feel, faced with so much that we do not understand. It is a wonder that neither of us bear resentment about these experiences. Suffice it to say, we do not; where forgiveness was called for, we have forgiven, and where healing was required, we have healed.

Out of consideration for the many good people involved, we have changed many names, though not all. In some instances we have also combined characters, locales, and events in the interests of clarity.

I wish to express my deep admiration for Rickie, who

courageously compiled her recollections and selected her own letters and poems for inclusion. She and I are both sincerely grateful to Kathryn Watterson, who worked so closely with Rickie to help organize, write, and edit these. Our thanks as well to Ashton Applewhite for her superb editing contributions, and to Joelle Delbourgo for making our story's publication possible, her recognition of its importance, and her unremitting encouragement and support throughout.

Frederic Flach, M.D.

Special thanks to Kathryn Watterson
for her sensitive, skillful collaboration
in the writing and editing of
Rickie's recollections

Part One

1

New York City, March 7, 1966

When I try to recall how it all began, I have a vivid image of myself running, frightened, breathing hard, harder than a man of thirty-nine should breathe. I am going down the stairs of our apartment house, out onto deserted, early morning Fifth Avenue, bitter cold even for March, the blocks rushing under my feet, until I reach the enormous oak door of the convent school. I stand there for a minute, my chest hurting, and in the air I hear the muffled chant of Latin sung by the nuns at sunrise mass.

Where else could Rickie have gone?

Without ringing the bell, I pushed the great door open and walked to the center of the marble hall. A tiny, ancient sister sat behind a glass enclosure, attending to an equally ancient telephone switchboard. She barely looked up.

"Did Rickie come here?" I whispered.

"I think she may be with the sisters at prayer."

Two steps at a time I ran up the wide staircase to the chapel on the second floor. No Rickie.

Her classroom, I thought. Up another two flights, pain grabbing at my rib cage.

The room was empty, the desks sitting in neat rows, waiting for the children to arrive. A series of colored photographs of Australia were pinned along the edges of the blackboard: a kangaroo and a koala bear, seascapes, the modern city of Melbourne, and the sand-blown brown desert. Rickie was supposed to have prepared an essay on Aus-

tralia the previous weekend, but when I'd asked to see it, she said she couldn't concentrate well enough to start it.

I was desperately wondering where to search next when I heard a muffled cry and opened the closet door. In the darkness, my thirteen-year-old was crouched in a far corner, staring into space. She looked gaunt and frail. Her dark blue emblem jacket and white blouse appeared much too big for her, and her long, dark brown hair, usually neat, was tied carelessly behind her with a rubber band.

I knelt down next to her. "Rickie. Please, come home."

No answer. Only a small tear, poised at the edge of her eye.

"What's the matter, princess?"

"I'm scared, Daddy." She stumbled over the faint words.

"Don't be scared. We love you, Rickie."

She put her arms around me and held on tightly, her head buried in my shoulder. "I'm scared because . . . I want to die."

I felt a surge of hopelessness. Why would a child of thirteen find living so unbearable? What had we done, or not done, to rob her of laughter and the joy of being young?

I began to cry, hiding it from Rickie as best I could. The two of us huddled there for minutes, holding each other, motionless. "Let's go home," I said.

When we arrived, Hillary was sitting on the wrought-iron bench in the entry hall, her eyes red, face lined with anxiousness. Rickie hugged her mother stiffly, and the two of them went into the library while I telephoned a colleague, Dr. Muriel Sanders.

She knew why. Only a week earlier, at dinner, Hillary and I had confided our concerns about Rickie's growing moodiness to this old and trusted friend, with whom I had trained in psychiatry at the Payne Whitney Clinic ten years earlier. Muriel specialized in children, and she loved Rickie as one of her own.

"It's seven-thirty," she noted. "I'll cancel my nine o'clock appointment and be right there."

While Dr. Sanders spoke with Rickie in the privacy of the library, I sat alone in the dining room, the pages of the *Times* blurring in front of my eyes. The room seemed enormous, empty despite the dark mahogany table with its two silver candelabra and four straight-back chairs on either side. Hillary busied herself seeing John and Mary off to school; they went quietly, sensing that something awful had happened but not daring to ask about it. When Hillary joined me in her usual chair at the far end of the long table, we sat in silence.

Half an hour later Dr. Sanders came in. "Is there someone who could stay with Rickie while we talk?" she asked. Hillary called the maid.

"Let's go in the living room. It's more comfortable," I suggested.

Hillary and I sat at either end of the gray sofa facing the fireplace while Muriel perched on the edge of a small French armchair, trying to hide her discomfort behind a cultivated professional stance. "What happened?" she asked.

I deferred to Hillary, who replied, "She tried to kill herself."

"We think she did," I interrupted. "We can't be sure."

"The Miltowns are gone. She must have taken them!" Hillary insisted.

"Or thrown them away," I suggested defensively.

"Try to give me more details," Muriel urged.

"I woke up around four o'clock," Hillary went on obediently. "I could hear screaming coming from Rickie's room. It's right next to ours. I tried to open her door, but it wouldn't budge. It wasn't locked, but she'd pushed a chair against it. When I got it open, it was horrible!"

"What was horrible?" Muriel asked.

"Rickie was standing there, fully dressed in her school uniform, in the middle of the room, staring into space, her

arms stretched out in front of her. Her yelling had stopped. I called to her, but she wouldn't answer. She'd thrown everything around the room—crazily, I thought, until I saw that her toys and books and stuffed animals had actually been arranged in the shape of a crude cross. I kept calling her name and I went over and touched her, but she didn't move and she didn't reply."

"I heard the commotion," I said, "so I rushed to Rickie's room. I must have gotten there a minute or so after Hillary. I shouted Rickie's name several times, then I took her by the arm. Suddenly she broke away, ran into the bathroom and grabbed a half-full bottle of Miltown—" I hesitated "—which I sometimes use to get to sleep. She ran out the other door to the elevator lobby, and I assumed she had nowhere to go but the convent. When I found her there, she still had the bottle, but it was empty."

"I doubt that she swallowed any. She doesn't seem drugged," Muriel commented. She paused, studying us both. "She's very depressed, you know," she added. "Even if she didn't try to kill herself this morning, she might easily do so, at any time."

"My God," Hillary whispered.

"But why?" I asked. "I don't understand. Sure, we've all been upset since Grandpa died last summer. He meant a lot to us, and especially to Rickie. Hillary and I have had our problems too of late, but then, everyone has problems. Why suicide?"

"This isn't just a situational reaction, Fred, you must know that. I couldn't get much out of her, but what I did was incoherent, illogical. She's very confused."

"Just what do you mean, Muriel?" Hillary pursued, trembling.

"I don't want to make a diagnosis on so little information," Muriel went on, "but I must warn you. The early morning state you've described could easily be catatonia. And that little girl in the other room is convinced that she—"

Muriel stopped, evidently wondering how much she should say. "She thinks she's a horse."

"You don't believe that, do you?" Hillary asked. "Surely she's making that up."

"I don't know."

I felt terribly frightened. I was not in the least convinced Rickie thought she was a horse. Nor was I concerned about Muriel's careless use of the term "catatonia." Catatonic patients were completely uncommunicative. They'd assume a stance or posture and maintain it for hours, even days, like a statue. Rickie certainly wasn't catatonic in my opinion. What scared me was the fundamental diagnostic implication of Muriel's statement.

"Are you suggesting she's . . . schizophrenic?" I asked.

"It is a very real possibility," Muriel admitted.

Hillary abruptly clenched her fists tightly, as if to keep herself from coming apart.

"But that's . . . hopeless," I exclaimed. "At this age . . . schizophrenia . . . I can't believe it. I won't believe it!"

"It's only a possibility," Muriel repeated.

To me "schizophrenia" wasn't just one of the bits and pieces of jargon psychiatrists tossed around to convey a semblance of scientific respectability. I had learned about young girls and boys with schizophrenia who had terrible prognoses, and I'd watched them grow old in the back wards of institutions. I was convinced they were incurable, and there was little evidence to the contrary.

"What are we going to do?" Hillary wondered desperately.

"I think she'd be better off in a hospital for a little while," Muriel replied gently. "I know a small place, upstate. It's a good place for Rickie, as comfortable as any such institution can be. I have consulting privileges, and the director is an excellent physician. Besides, I think you would prefer to have her in a sanitarium that would . . . keep it all private. After all, mental illness in the family might affect your