

The Man Who Fell out of Bed

(From *The Man Who Mistook His Wife for a Hat* by Oliver Sacks)

When I was a medical student many years ago, one of the nurses called me in considerable perplexity, and gave me this singular story on the phone: that they had a new patient—a young man— just admitted that morning. He had seemed very nice, very normal, all day—indeed, until a few minutes before, when he awoke from a snooze. He then seemed excited and strange—not himself in the least. He had somehow contrived to fall out of bed, and was now sitting on the floor, carrying on and vociferating, and refusing to go back to bed. Could I come, please, and sort out what was happening?

When I arrived I found the patient lying on the floor by his bed and staring at one leg. His expression contained anger, alarm, bewilderment and amusement—bewilderment most of all, with a hint of consternation. I asked him if he would go back to bed, or if he needed help, but he seemed upset by these suggestions and shook his head. I squatted down beside him, and took the history on the floor. He had come in, that morning, for some tests, he said. He had no complaints, but the neurologists, feeling that he had a ‘lazy’ left leg—that was the very word they had used— thought he should come in. He had felt fine all day, and fallen asleep towards evening. When he woke up he felt fine too, until he moved in the bed. Then he found, as he put it, ‘someone’s leg’ in the bed—a severed human leg, a horrible thing! He was stunned, at first, with amazement and disgust—he had never experienced, never imagined, such an incredible thing. He felt the leg gingerly. It seemed perfectly formed, but ‘peculiar’ and cold. At this point he had a brainwave.

He now realized what had happened: it was all a joke!

A rather monstrous and improper, but a very original, joke! It was New Year’s Eve, and everyone was celebrating. Half the staff were drunk; quips and crackers were flying; a carnival scene. Obviously one of the nurses with a macabre sense of humor had stolen into the Dissecting Room and nabbed a leg, and then slipped it under his bedclothes as a joke while he was still fast asleep. He was much relieved at the explanation; but feeling that a joke was a joke, and that this one was a bit much, he threw the damn thing out of the bed. But—and at this point his conversational manner deserted him, and he suddenly trembled and became ashen-pale—when he threw it out of bed, he somehow came after it —and now it was attached to him.

‘Look at it!’ he cried, with revulsion on his face. ‘Have you ever seen such a creepy, horrible thing? I thought a cadaver was just dead. But this is uncanny! And somehow—it’s ghastly—it seems stuck to me!’ He seized it with both hands, with extraordinary violence, and tried to tear it off his body, and, failing, punched it in an access of rage.

‘Easy!’ I said. ‘Be calm! Take it easy! I wouldn’t punch that leg like that.’

‘And why not?’ he asked, irritably, belligerently.

‘Because it’s *your* leg,’ I answered. ‘Don’t you know your own leg?’

He gazed at me with a look compounded of stupefaction, incredulity, terror and amusement, not unmixed with a jocular sort of suspicion, ‘Ah Doc!’ he said. ‘You’re fooling me! You’re in cahoots with that nurse—you shouldn’t kid patients like this!’

‘I’m not kidding,’ I said. ‘That’s your own leg.’

He saw from my face that I was perfectly serious—and a look of utter terror came over him. ‘You say it’s my leg, Doc? Wouldn’t you say that a man should know his own leg?’

‘Absolutely,’ I answered. ‘He *should* know his own leg. I can’t imagine him not knowing his own leg. Maybe *you’re* the one who’s been kidding all along?’

‘I swear to God, cross my heart, I haven’t ... A man *should* know his own body, what’s his and what’s not—but this leg, this *thing*— another shudder of distaste— ‘doesn’t feel right, doesn’t feel real—and it doesn’t *look* part of me.’

‘What *does* it look like?’ I asked in bewilderment, being, by this time, as bewildered as he was.

‘What does it look like?’ He repeated my words slowly. ‘I’ll tell you what it looks like. *It looks like nothing on earth.* How can a thing like that belong to me? I don’t know *where* a thing like that belongs ... ‘ His voice trailed off. He looked terrified and shocked.

‘Listen,’ I said. ‘I don’t think you’re well. Please allow us to return you to bed. But I want to ask you one final question. If this—this thing—is *not* your left leg’ (he had called it a ‘counterfeit’ at one point in our talk, and expressed his amazement that someone had gone to such lengths to ‘manufacture’ a ‘facsimile’) ‘then where *is* your own left leg?’

Once more he became pale—so pale that I thought he was going to faint. ‘I don’t know,’ he said. ‘I have no idea. It’s disappeared. It’s gone. It’s nowhere to be found ...

Postscript

Since this account was published (in *A Leg to Stand On*, 1984), I received a letter from the eminent neurologist Dr Michael Kremer, who wrote:

I was asked to see a puzzling patient on the cardiology ward. He had atrial fibrillation and had thrown off a large embolus giving him a left hemiplegia, and I was asked to see him because he constantly fell out of bed at night for which the cardiologists could find no reason.

When I asked him what happened at night he said quite openly that when he woke in the night he always found that there was a dead, cold, hairy leg in bed with him which he

could not understand but could not tolerate and he, therefore, with his good arm and leg pushed it out of bed and naturally, of course, the rest of him followed.

He was such an excellent example of this complete loss of awareness of his hemiplegic limb but, interestingly enough, I could not get him to tell me whether his own leg on that side was in bed with him because he was so caught up with the unpleasant foreign leg that was there.