

Mr. R. A. Osborne's Mental and Physical Condition in October 1968

My wife and I visited my father in Tiruvannamalai, Madras State, South India, in October, 1967. This was the first time my wife had met my parents, and I had not seen them since the summer of 1955.

At the time of our visit, my father was recovering from his first stroke, and his condition was as follows:

Mental Agility

His mental agility was essentially unimpaired. He was able to undertake intricate philosophical discussions, giving his viewpoint succinctly.

Mental Concentration

His mental concentration was markedly hampered. After about ten minutes, thought processes became an effort, and within half an hour, he had to take a complete rest.

Memory

In general his memory was not affected. He was, however, frequently unable to recall a word he wished to use in the course of conversation.

Emotions

This subject I will deal with separately.

Physical

Physically he did not seem to have been affected by the stroke, but to gauge accurately on this is hard, owing to the negative effects of the very hot climate. He was bothered by the heat much more than he had been, and was very keen on an air conditioner being installed in the house. (This was not possible on account of the fluctuating electric current in the area.) He never walked more than about a mile, no longer attended to the condition of the garden, and took no unnecessary exercise. In years past he had been an enthusiastic gardener, and had walked a great deal. It would be impossible, however, to attribute this change to any one cause.

He was noticeably averse to meeting visitors he did not know well, and he found it very tiring undertaking the usual social politenesses. He no longer wrote any letters that were not directly related to his work as editor of the magazine "The Mountain Path".

His appetite was good, though restricted, but the restrictions were philosophical and geographical of nature.

Alertness

I will discuss this more fully in connection with

my father's emotions, but suffice it to say that despite appearances to the contrary, he was very alert. For example, one evening he had seen and killed a scorpion before I had even noticed it was there.

Psychological Background

It is of the utmost importance that anyone looking into my father's health, should have some knowledge of his most unusual recent history. There is in the Western world at the present time a 'vogueish' interest in Indian spiritual teaching, as has been exploited by such men as Maharishi Mahesh Yogi. The antics of this man are, of course, not representative of the Hindu path of self knowledge, and the casual observer should understand that this religious philosophy is very real, and very extraordinary. There have, recently, been only two Maharishis, as understood by the Indian religious community. One of them was The Bhagavan, who lived in Tiruvannamalai, and who died in 1950, at which time I was eleven years old, and quite capable of understanding what I saw. My parents are attempting to emulate the life of the Bhagavan.

Briefly stated, the Bhagavan had reached the state of neavhana, which, theoretically all Indians seek. I might venture to suggest that a man in this state has, actually, gained complete control of his autonomous nervous system. For example it is a well attested fact that the Bhagavan died of sarcoma of the bone, yet he received no sedatives till the day he died, and yet he never showed that he was experiencing discomfort. At all times his state of neavhana manifest itself with occasional slight displays of humour or joy, but never the slightest show of any other single emotion.

My father has taken a significant step towards the goal of neavhana. He is unlikely to progress any further along this road, since it requires an enormous concentration, and a strong mind. (I do not venture to discuss the value of the end result.) It has been brought to my attention that some medical opinion is that my father is suffering from severe depression. Events to support such an opinion last year were:

- 1) My father frequently discussed possible wrong decisions he might have made during his life, but always concluded that in the end the decisions had been right.
- 2) On one occasion he explained in some detail his very outstanding academic success upon completing grammar school.
- 3) The way he drove himself to work on his magazine suggested a consuming desire to achieve something before he died, and while time was slipping between his fingers.

I must, however, caution against magnifying the importance, or the depth of any depression my father may have. Many of the symptoms a Western doctor will see in my father, and ascribe to depression, are, in fact, the consciously sought characteristics of the spiritual path my father has sought. His lack of reaction to external stimuli, the fact that he never appears to be happy, angry, annoyed, etc., these are typical characteristics of the person who is successfully completing the road of Hindu spiritualism, and my father would simply be indulgent towards anyone who tried to counsel him on these matters. It is my personal belief that psychiatric care would be most unwise for my father. The gulf between my father and any psychiatrist is probably too wide for the psychiatrist to ever win my father's confidence, and further, I cannot see what anyone could hope to gain at this stage by persuading him that his life's work amounted to an emotional problem.

It will be impossible for anyone to help my father's health without understanding the considerable obstacle faced in my mother. While my mother has sought the same goals as my father, and with more drama over a longer period of time, she has, in fact, achieved nothing spiritually. She is an extremely vain and conceited woman, growing more intolerable by the day, since she has an overpowering character, and she now has her religion as her cure-all, allow-all and justify-all. Her personality has deteriorated to the point where she seeks emotional gratification by assuming the role of a Messiah. In India she nurtures about her a circle of people seeking her constant help, medical, emotional, and financial, and she is sure that she is one of the chosen individuals of all history. We have, on numerous occasions, had gross demonstrations from her that she no longer knows any such thing as human love, tenderness, or any of the qualities associated with a kindly person; rather, her only interest is to prove herself right in whatever bizarre notion she may have at any given time, and the lengths to which she will go in these attempts at self vindication are quite breath taking.

While in this report I have tried to be as objective as I am able, the reader will probably be interested in the following facts:

- 1) I have seen my parents only twice since I was eleven years old in 1950; I saw them for three months in the summer of 1955, and for two weeks in October of 1967.
- 2) I do not share the religious or philosophical beliefs of my parents.
- 3) Up till 1950, my mother did not dominate my father, and even in 1955, my father had not progressed at all along the road to neavhana.

Adam Osborne Ph.D.

Doctor's Report on Arthur Osborne

1. Arthur came into hospital in a state of extreme exhaustion in consequence of a fast diet for the previous three weeks and they had to build him up physically for some time before anything could be done. He has rather high blood pressure but this is nothing abnormal and is not the cause of his trouble. The diet was not helpful in reducing the blood pressure.

2. The source of the trouble is physical. There is an interference with the functioning of the fore part of the brain - the part which controls higher intellectual activities. This is manifested in his inability to concentrate and coordinate his thinking, in his difficulties of memory and his partial aphasia. The parts of the brain which control motor and sensory functions are in very good condition and show no deterioration. (I am putting all this in layman's language because I don't have medical knowledge and I made the doctor explain it as for a layman).

My brother is in charge of the Neurological Department, who are at present trying to discover the nature and cause of the physical trouble. (This hospital has the best equipped neurological department in the United Kingdom and perhaps one of the best in the world).

There are three possible alternatives.

(i) The cause may be deterioration of the brain tissue in the fore brain, with partial destruction of the cells. This in very loose language is premature senescence. It is a condition well known to the doctors but its causes are not known. There is no cure for this since brain cells once destroyed cannot be renewed and are not self-renewing.

Statistically some 70 percent of the cases which the hospital see are due to this cause. They nevertheless think that there is a reasonable possibility that my brother's state may be due to one or the other of the two following alternatives, both of which can be cured by a relatively simple operation. Examinations are being conducted in order to find out.

(ii) The trouble may be due to a small tumour pressing on the brain. If it is so, the doctors are almost certain the tumour will prove to be benign, in which case it can be removed easily and my brother will be restored to his former capacities. Earlier this week a dye was injected into an artery carrying blood to the brain. An X-ray photograph was taken in the hope of discovering whether there ~~was~~ such a tumour. The X-ray showed no signs of a tumour. The doctors do not, however, as yet regard this negative result as conclusive.

(iii) The third alternative is the following (again in simple layman's language; I can't manage any other). There are certain cisterns in the brain which contain fluid from the spinal cord. This fluid normally seeps out and bathes the surface of the brain structure. If a stoppage occurs so that the fluid cannot seep out, it still continues to enter and the compartments swell up and press on the brain cells, causing damage to function. Such a stoppage may be caused among other things by scar tissue resulting from an earlier disease (for example encephalitis) which has been not well treated. It is possible that my brother has suffered from such an illness in India and that this may be the origin of his present trouble. If this is so, the condition can be cured. Within the last few years a quite simple operation has been practised which removes the stoppage and restores circulation of the fluid, restoring the patient to normal brain functioning.

3. The next step is to try to find out conclusively whether my brother is suffering from either condition (ii) or condition (iii). On Monday they are going to do an aroencephalogram. This consists in injecting air into the spinal fluid under an anaesthetic. They hope that this will produce conclusive evidence whether (a) there is a small tumour or (b) whether there is a stoppage of the circulation of the fluid in the brain.

If either of these conditions maintains, my brother can almost certainly be cured. It is therefore quite necessary to make this test.

I have arranged to have a further talk with the doctor next week after the aroencephalogram has been done and studied.

4. The doctors have found Ludka a very great trial and handicap. She was responsible for his coming into hospital in a state of exhaustion. She is interfering and incapable of understanding medical matters. She has to be treated with the utmost tact and the doctors realise that she is capable of removing my brother at any moment and interrupting the treatment. It is a symptom of my brother's condition that he does not exercise judgement on his own but acts solely on her decisions.
5. My brother does not help things by his attitude. He shows no appreciation of his undoubted good fortune in being in this hospital, particularly as he is being treated free although he is not entitled to free treatment under the National Health Service. His attitude varies from apathy to querulousness and he is inclined to treat the doctors as a lot of incompetents and ignoramuses because they have not diagnosed and cured him immediately.

CHAIRMAN: H. N. SPORBORG, C.M.G.

HOUSE GOVERNOR: ALAN POWDITCH, M.C.

TELEPHONE: 01-262 1280 EXT.

ST. MARY'S HOSPITAL,

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690602

19th December, 1968

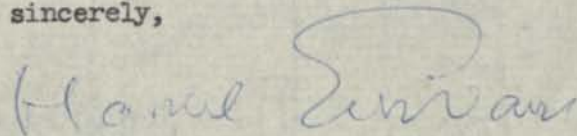
Mr, Harold Osborne,
90a, St. John's Wood High St.,
London, N.W.8.

Dear Mr. Osborne,

Many thanks for your letter of 10th December enclosing Mr. Adam Osborne's signed statement.

I have now heard from the House Governor here, whose advice I asked for, that he feels that there is little likelihood that I, or indeed the Hospital could take any action to insure that your brother continues to receive treatment from us. He suggests that a possible course of action for you to take, might be for the relatives to attempt to obtain some sort of injunction restraining Mrs. Osborne from withholding medical care from her husband; in making this suggestion the House Governor stresses that this is a point on which you should obviously take legal advice.

Yours sincerely,



C.H. EDWARDS, F.R.C.P.
Consultant Neurologist.

Copy to: Mr. A. Powditch,
House Governor.

Messrs. Ambrose Appelbe,
7 New Square,
Lincolns Inn.
London, W.C.2.

90A St. John's Wood High Street, London, NW8

2 January 1969

Dear Adam,

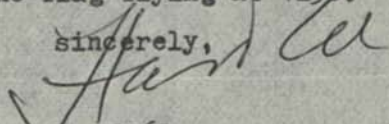
I am enclosing a letter received only today from your father's doctor.

I had already considered trying for an injunction at an earlier stage and had decided against it. It would be Frania and I (with you in the background) against your mother and Katya. I doubt if it would succeed. It would create a great deal of family acrimony and if it did - beyond expectations - come off, your father would be an unwilling and uncooperative patient.

I am still thinking it over but that is how I feel about it now. I think you should know how things stand and let me have your views if you feel inclined. I would much rather know what you yourself feel about it.

Best wishes to you all. My love to Cynthia and Rachel. Keep the flag flying at 1258.

sincerely,



Best wishes for 1969



By museum