



Denver Center
Theatre Company

Inside Out

A STUDY GUIDE

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TAKING LEAVE

by Nagle Jackson

What's Happening, Where It's Happening and Who It's Happening To

“You **must** bear with me,
Pray you now, forget and forgive;
I am **old** and foolish.”

—*King Lear* (IV, vii, 84-85).

The life of Dr. Eliot Pryne of Seattle, 62, Ph.D, Lit D., is disintegrating. This retired professor of literature with specialities in Shakespeare and Chaucer, is losing his facility with language. His memory of names, faces and events is confused, vague and vanishing fast. Dr. Pryne's actions are anxious but antic and his emotional swings are treacherous. He is unable to live alone and he is a trial to his caregiver, Mrs. Fleming. Only the character of his alter-ego, Eliot-Once-Removed understands Eliot and his comments on Eliot's state help us see this man's mind as he struggles with Alzheimer's disease. ■



TONY CHURCH • PHOTO BY GARY ISAACS

“There is not a sight in nature so mortifying as that of a distracted person, when his imagination is troubled, and his whole soul disordered and confused. Babylon in ruins is not so melancholy a spectacle.”

—Joseph Addison, *The Spectator*, July 3, 1712.

The Professor's Family

Eliot's beloved wife died seven years ago, but he has three daughters who convene to decide the next steps to take in his ever-worsening condition.

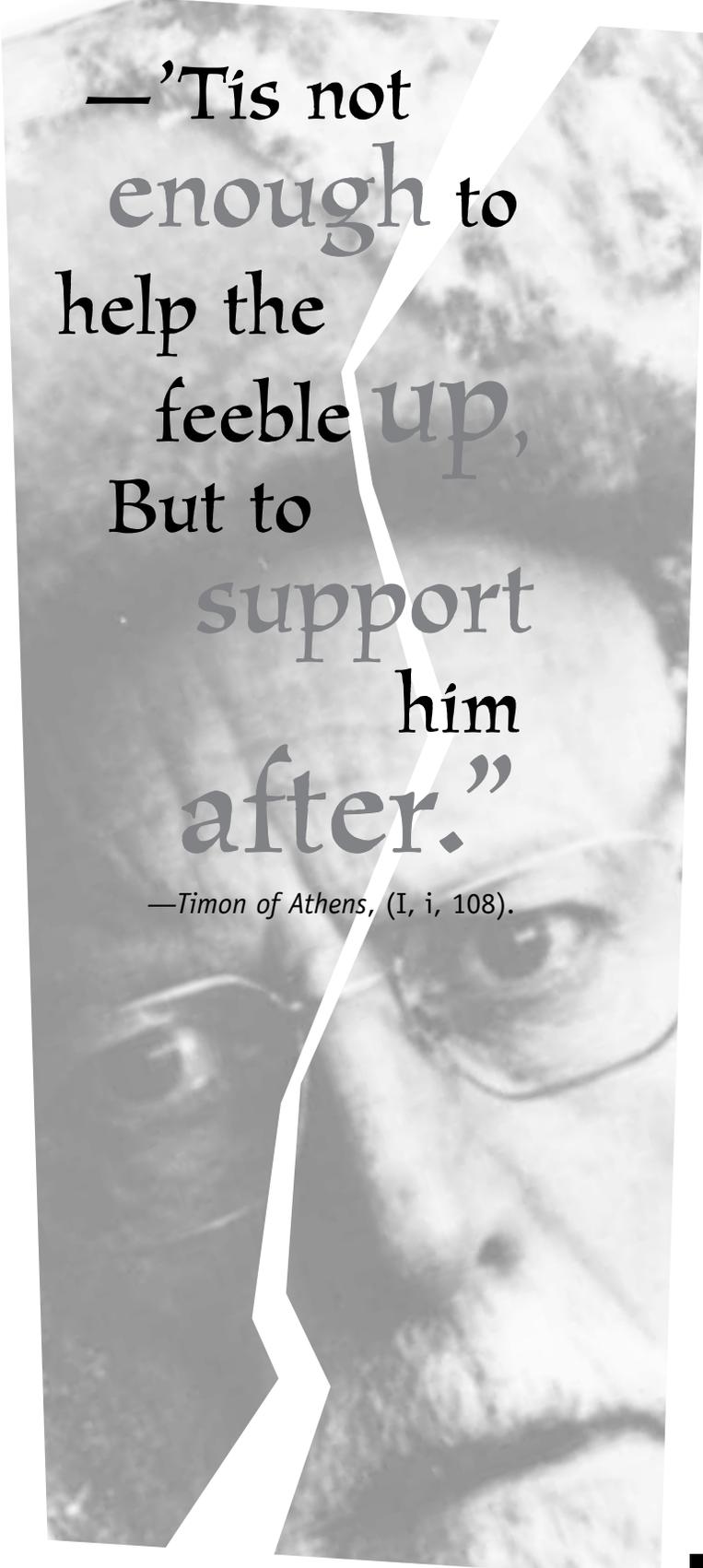
ALMA, the eldest, a school social worker, promises to "look in" every day, but she refuses to acknowledge that there is a problem. She avoids responsibility, claiming meetings and school "responsibilities," but, in truth, cannot face the future of her father's life—or her own.

LIZ, the working TV actress, is pragmatic. She will provide the monetary assistance needed to keep her father in a nursing home when his money runs out, as long as she doesn't have to stick around and help care for him.

Then, there is **CORDELIA**, the youngest. She lives strung out on drugs, alcohol and unnamed lovers moving from San Francisco to Paris. Her homecoming is a surprise to her sisters who think she is irresponsible and reckless. She does, however, like Cordelia in *King Lear* have a connection with her father.

In *King Lear*, the character of Cordelia returns with an army to restore her father to his throne; in *Taking Leave*, the character of Cordelia returns home with, perhaps, an understanding of what it is like to wake up and not know who or where you are and offers to be the caregiver for her father.

The interactions of these characters are painfully funny and poignant. In a society where the elderly and infirm are mostly ignored, we see a family come to terms with their ailing father—and with their feelings about one another. ■



—'Tis not
enough to
help the
feeble up,
But to
support
him
after.”

—*Timon of Athens*, (I, i, 108).

COMMENTARY:

Eliot and King Lear

There are many similarities between Eliot and King Lear. Both have three daughters; both have prestige: Lear as king of his country, Eliot as king of his classroom. Both characters are intelligent, honored, worldly, arrogant—and both are struck down by a kind of madness.

There are other similarities that are not so obvious but no less important. In the opening scene of *King Lear*, Lear wants declarations of love from his daughters: Regan, Goneril and Cordelia.

Regan and Goneril profess their fidelities profusely, but Cordelia's modest and honest answer disappoints her father. His reaction is violent, but why? Lear is looking for some reassurance of his identity and to find out how and why one is loved is to learn some basic, complicated and sometimes unpleasant truths about oneself. "All that Lear is seeking is what most old people need: love—the deepest and most certain evidence that they are wanted and needed."¹ In Eliot's case, he wants love from his children but can't express it in his condition. As Alma remembers, he was a demanding, unresponsive parent who was not demonstrative, at least not to her.

**"The weight of this sad time we must obey;
Speak what we feel, not what we ought to say.
The oldest hath borne most: we that are young
Shall never see so much, nor live so long."**

—*King Lear*, Act V, iii, 323-326.

"Last scene of all

**That ends this strange eventful history,
Is second childishness and mere oblivion,
Sans teeth, sans eyes, sans taste, sans everything."**

—Shakespeare, *As You Like It*, Act II, c. 1600.

It was not until Corry (Cordelia) was born that he showed honest affection. When he picks up Corry at the end of Act I, he feels something but can't remember the word for this emotion.

Regan and Goneril want Lear's property, but they also want something else. The daughters want Lear to become in senility a mild, inconspicuous little man, content with a few retainers. Instead, Lear turns out to be an annoyingly assertive senior citizen. Similarly, Eliot's daughters would prefer their father to be docile and manageable, but he becomes a roaring, rambunctious rascal who in losing his memory, is losing his grip. What to do about Dad? Alma can't face the problem; Liz is only willing to accept the financial burden for the problem, while Corry understands it—a little.

Both Lear and Eliot view their bodies and actions with a mounting panic. This anguish is rooted in a sense of displacement and alienation; neither man recognizes himself. As Lear asks: "Doth any here know me? —Who is it that can tell me who I am?" (I, iv, 246-250.) The minds of both men are in mutiny. In Lear's case, old ideas are collapsing and new ideas are struggling to be born. In Eliot's case, old ideas and memories are confused and co-mingling, and nothing can prevent the eventual collapse. "Thoughts are not connected by ordinary logic, but evolve in abrupt impulses, the very gaps between linked by a musical tinge of absence."²

As Eliot-Once-Removed remarks, Lear's language in his madness moves steadily from poetry to prose, to an obscure broken speech, to a wordless howl and finally to silence. Eliot's speech is one of word substitution (the "thing" for any word he cannot express), a kind of gibberish and then weeping. As the brain synapses break or disappear, both men experience the human condition as mean and humble, and they are helpless as babes. ■

What is Alzheimer's disease?

Alzheimer's disease (AD) is recognized as the fifth leading cause of disability and the fourth leading cause of death in the United States. ... A progressive brain disorder, Alzheimer's disease is characterized by impairments in a wide spectrum of cognitive abilities including memory, language, judgment and abstract reasoning.

Individuals may live from three to 25 years after the diagnosis of AD and they constitute a large portion of the nursing home population. It is important to identify interventions that increase the quality of life of persons with AD and that may compensate for the deterioration in functioning.

The global deterioration that occurs in persons with AD results in numerous difficulties for the AD individual and the caregiver. Communication problems have been identified as the sixth most common problem faced by AD caregivers. ... The resulting disturbed communication patterns that occur with AD have a profound effect on quality of life. ■

—Cindy C. and Dennis C. Turner, ed. *Companion Animals in Human Health*. 1998 Sage Publications, London. P. 204.

The Three Phases of Alzheimer's Disease

Alzheimer's disease is a progressive degenerative illness that results in excessive mental deterioration and diminishing control of bodily functions. It has been described as the most severe and irreversible memory disorder and is the fourth leading cause of death among adults in the United States.

THE FIRST STAGE of Alzheimer's disease is largely characterized by memory loss concerning recent circumstances or events. Patients forget the names of friends or colleagues, where they put the car keys, or their zip code. Times, dates and appointments become scrambled. Alzheimer's patients also experience language problems. Even those who in the past were fluent conversationalists often find that they can't think of the word or phrase they wish to use. Patients frequently

undergo severe mood swings, feel frustrated or depressed and may suffer from insomnia. As the stricken individual becomes more aware of his/her slipping intellectual and interpersonal skills, he or she may become increasingly withdrawn.

During the **SECOND STAGE**, the ill person may display unusual eating habits and experience restlessness, hyperactivity and general feelings of frustration. At times, they appear panicky for no apparent reason or suffer from hallucinations and/or paranoia. There is frequently a sharp decline in personal hygiene and they may require assistance with everyday activities such

as dressing, eating and bathroom activities. At this stage, few Alzheimer's disease patients are able to live alone; most need full-time supervision.

In the **FINAL PHASE**, the patient's learned abilities and memory skills are completely eroded. He or she may find it extremely difficult to articulate the simplest need or desire. During this stage of Alzheimer's disease, most individuals are unable to control bodily functions and many experience seizures. The ill person continues to decline mentally and physically until his or her body becomes susceptible to an infection or disorder that results in death.

The changes in the brain of an

“Bodily decay is gloomy in prospect, but of all human contemplations the most abhorrent is body without mind.”

—Thomas Jefferson, *Letter to John Adams*, 1816.

Alzheimer's patient are quite apparent in an autopsy. The illness causes the brain to shrink somewhat and there is a loss of nerve cells from an area considered essential to processing thoughts. Scientists have also found extensive clusters of damaged nerve endings, known as neurotic plaques and diseased neurons containing malformations called neurofibrillary tangles, which interfere with normal cell action. In addition, Alzheimer's disease alters some brain neurotransmitters, the chemical messengers through which nerve cells communicate. One of these is acetylcholine, a major neurotransmitter that is crucial to memory. ■

What About a Cause and a Cure?

At this time, the cause of Alzheimer's is not known, though there are a number of theories on its origin. Scientists have discovered an abnormal protein called Beta-amyloid present in the patient's brain. In experiments on rats, injected Beta-amyloid caused brain cell death, which could only be reversed by injecting another brain protein known as substance P. Also, scientists have identified three genes directly linked to Alzheimer's disease. One gene carries the protein known as apolipoprotein, which is found in significant amounts in Alzheimer's patients. Another gene identified as FAD3 or familial Alzheimer's disease gene number 3 seems to be responsible for the onset of the disease in those as young as 30. Other theories advanced are an accumulation of aluminum in the brain, a slow-acting virus and the cumulative stresses in aging. Whatever the cause, the dis-

time. Only in 1906 was it given its name by the German pathologist Alois Alzheimer whose discovery resulted from his work with a 51-year-old woman who experienced severe memory loss, feelings of extreme confusion and eventually complete disorientation.

While there are no known drugs to stop or reverse the disease, physicians have seen some improvements in patients who use psychotropic or "mind-affecting" drugs, which can control restlessness and hallucinations. In 1991 the Food and Drug Administration approved the experimental use of Cognex (clinically called Tacrine and Metane). The patients who took these drugs were better able to recall words, name common objects, copy figures, follow simple instructions and understand spoken language. While scientists are still a long way from devising a truly successful drug therapy, research continues. ■

ease has been with us for a long

"The ideal way to age would be to grow slowly invisible, gradually disappearing, without causing worry or discomfort to the young."

—Sharon Curtin

Notes

1. Jorgensen, p. 95.
2. Rosenberg, p. 212.

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Inside Out is intended for students and teachers but may be enjoyed by audiences of all ages.



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Donovan Marley, Artistic Director
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Sally Gass, Contributing Writer
Linda Eller, Editor

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