

bonze blayk's Nervous System

bonze's Neurological Problems

CIDP (Chronic Immune Demyelinating Polyneurapathy): The immune system is primed by a virus whose structure resembles myelin to attack the myelin sheath which provides an electrical insulator for the nerves. My symptoms include worsening of motor control, symmetric creeping paresthesia, and weakness in the limbs proceeding from the extremities. I believe that I fall in the minority whose symptoms includes inflammation of the nerves; note my experience with having no bad ankle sprains for 20 years while using *cannabis*, and then experiencing a terrible inflammation with a minor twist of my ankle after several months not smoking (7/94), which almost immobilized me and did not return to normal for a year or so. The inflamation explains why my behavior is so dramatically affected when I suffer a CIDP outbreak.

Those with a high-set immune system will be particularly troubled by this disorder. Until extended treatment undertaken at the age of 15, I was plagued by allergies, particularly to dust, to the extent that I had a chronically drippy nose. I breathed through my mouth through almost all of these years.

My father died of a stroke caused by this disorder at the age of 60. The progress of the disease was clearly evident in his variable temper, which was increasingly unstable in his last years, the decline of his motor control, and lapses into unresponsive states of illness (and yes, his incredibly sensitive ankles). I believe that everyone in my family has it to some degree; my mother is now suffering from a problem for which Predisone was prescribed (she can't deal with the side effects and discontinued use after one week).

Progressive Supraneural Palsy: A striking symptom of PSP is the inability to direct the eyes downward, which I experienced with great irritation in dream states for a period when I was young (9?). Other symptoms related to emotional volatility, eye movement disorders, and gait disorder, also seem to apply here. Intriguingly, this disease is treated with Prozac: possibly this is related to "Hysteroid Dysphoria."

Naturally, confirmation of these self-diagnoses will require further investigation by a qualified neurologist.

bonze's Psychological Problems

Generalized Anxiety Disorder. Chewed all nails and hair chronically from age 9 to age 34.

Hysteroid Dysphoria. Acute sensitivity to rejection which can result in prompt and devastating dysphoric crashes, which also seem to trigger rage symptoms. Treated with Prozac. Cf. *Listening to Prozac* by Peter D. Kramer, M.D. Although not in the DSM it should probably be included.

Obsessive-Compulsive Disorder. The clearest demonstration of my obsessive-compulsive behavior is my programming work, on which I've tended to focus obsessional care for over 10 years. dataComet is an excellent example, because I've repeatedly avoided other work in order to focus on the one major product I've developed, even when it has impeded my career as a programmer—programmers are rewarded for conceptual design and initial implementation, not maintenance or bug-fixes, even though "God is in the details" (Mies van der Rohe). Cf. Release Notes available from <<http://www.databeast.com/>>. This document is another fine example of OCD.

Gender Identity Disorder. Onset age 10, Non-Transexual, Lesbian orientation: I've called myself a Lesbian since the age of 23 to the downright astonishment of most people. I recall wondering at the age of 12: What are people going to think when my breasts start growing? Are they going to find me *really* weird? My gender orientation has drawn comment and a fair amount of hostility since the age of 9.

Trichotillomania. Removal of *all* hair below the hairline, preferably by pulling. Related to GID. The reduction of pain by CIDP makes this fairly negligible in terms of pain.

bonze's Characterological Problems

Christianity. I was raised as a Disciple of Christ and was found to be qualified as a Protestant Christian to marry within the Catholic Church in 1986, although I did not convert and was not allowed to receive communion within the Catholic Church. The abstraction induced by my Guillain-Barre syndrome leads me to believe that an afterlife is a very real possibility; I believe in the existence of the soul, and because I dread God's judgment, I believe that I must try to act always in accordance with a Higher Law, even if this brings me to harm. The difference between myself and K. in *The Trial* is that I acknowledge my guilt, and know that I can only be redeemed by the mercy of God.

bonze's Treatment Program

GID: Change society so I can be accepted for who I am?

Tranquilizers: For GAD.

Stress Reduction: I need a lot less stress in my life. Stress boosts immune system functioning and produces the unpleasant symptoms of the disease. I associate a number occasions of my untoward behavior with times of high stress when I was not smoking *cannabis sativa*; *cannabis* use has been inadequate to control the CIDP during periods of extremely high stress.

Prednisone: Lowers the functioning of the immune system, allowing me to give up the use of marijuana. My chronic use of *cannabis sativa* has NOT been drug *abuse*, since it has been practiced only because it serves as a means of treating the unpleasant antisocial symptoms of CIDP (primarily poor self-control and mercurial temper). I prefer to be prosocial, thank you!

Anti-Psychotics: May be required on occasion if Guillain-Barre flares up. Evidently Prednisone also may induce psychosis.

Prozac: Long-term Prozac for PSP/Hysteroid Dysphoria. This improves mood in general and helps prevent attacks of Hysteroid Dysphoria. It dramatically reduces the obsessive components of my thinking, which is bad for my work as a programmer, but is good *fo me*.

Nicotine patches: Besides the powerfully addictive properties of nicotine, my tobacco use has been prompted in large part by two factors, both of which can be satisfied with nicotine polacrilex chewing gum, use of which should be tapered off:

- 1) Nicotine is a fairly powerful vasoconstrictor (accounting for its negative impact on the health of the heart). This reduces the effects of inflammation in the brain, reducing "pressure".

2) As a central nervous system stimulant to counter the attenuation of signals caused by CIDP.

Alcohol: I'm perfectly willing to limit myself to the British Government's recommendation of 1 drink per day (though I'm not drinking at all now). This is more on average than I drink in a week; I'm not alcoholic and am not dependent on alcohol either physically or psychologically.

Detox Stress Camp: Thanks, but No Thanks: Out of the question. You've obviously never seen me interact in social groups, where I function as a kind of deranged chaotic-good intellectual *provacateur-deconstructeur*, and priming me for Guillain-Barre rage attacks is not a particularly good idea unless you're prepared to pump me full of Thorazine. I played guitar with the Angry Samoans twice at Camarillo State Hospital, and was not impressed with the PCP smoking I witnessed there the time we played Ward 9 (a ward for acute psychotics); my thought was "*These bars could not hold me in this place!*"

I was clearly suffering from a paranoid delusional state caused by one of the Guillain-Barre Syndromes a couple of weeks ago, but am feeling much better now and am reasonably rational at the moment.

Sincerely,

Kevin Eric Saunders a/k/a bonze blayk
1/30/97