Re: Patient 111001

November 16, 2014

Dear Dr. John,

To be blunt: being a physician, you know the extent of your wife’s ailments. We have kept her for observation for the past week and what we have found can only be described as disturbing. I know this may come as a shock to you but your wife is suffering from a severe case of both schizophrenia and postpartum depression.

As you have pointed out in your family interview, you and your wife has recently had a baby girl. First off, congratulations on adding a member to your family. Unfortunately, the birth of your newborn has both sparked your wife’s postpartum and perpetuated her schizophrenia. While I was combing through her journal entries I found some parts of her testimonial troubling. Even though she spent little time with her baby, she still refers to her as “a dear baby” (Gilman 2). This, no doubt, means that she cares for your daughter deeply. Humans – and especially mothers – have a connection and an ingrained love for our children from the moment of conception. Stripping away that bond – whether it be by isolation, kidnapping or even death – can have detrimental effects on the mother. This is on full display with your wife. She is terribly depressed and states you “don’t know how much I really suffer” (Gilman 2). This, however, is not a critique of you but simply a stance your wife believes. Placing her in a room that was “a nursery first and then a playroom” (Gilman 2) no doubt enhanced her postmortem condition. In her writings she claims that “congenial work, with excitement and change would do me good” (Gilman 1). I dare say that she is, in fact, correct in her prescription. A change in scenery and a plethora of activities would be very beneficial for your wife’s cognitive health. This is in the effort to “distract” and “ease” her mind. By no means is this a cure for her depression but rather a good first step. This and the rejoining of her and her infant is the most profound solution I have to offer toward regaining her former self and easing her mind of postmortem depression.

Now on the more serious of the diagnosis: the schizophrenia. If you do not know what schizophrenia is, it is a cognitive disease of the brain. Symptoms include delusions, hallucinations and thought disorders among other things. I believe you and I have both witnessed these from your wife. Victims of this disease often believe strange things and act irrationally. Regarding the wallpaper, I found that your wife believes that there was a “woman behind it is as plain as can be” (Gilman 6). Schizophrenics are also known to be insomniacs. As I’m sure you have noticed, your wife rationalizes that she “doesn’t sleep much at night, for it is so interesting to watch developments” (Gilman 7) so she “sleeps a good deal in the daytime” (Gilman 7). This is very troubling indeed. By the time the “incident” occurred – which you so eloquently recalled – she believed the delusion that she *was* one of “those creeping women” (Gilman 9).

With both conditions I implore you to let me keep her another 6 months. Here she can get all the care she needs. We have very nice facilities here at **The Ward**. If you have any questions, comments, or concerns, please do not hesitate to call me at 1-800-weird-guy.

Sincerely,

Kevin Howard M.D.