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THE REFERRAL

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CASE FILE #00367

Session Transcript #1: Friday, July 29, 1994,
3:00 p.m.

Dr. A: Please have a seat.
Mr. S: Thank you.
Dr. A: Now, I understand that you have come to see me on the suggestion of Dr. Kaufman, is that correct?
Mr. S: Yes. Correct.
Dr. A: Why do you think he suggested you see me?
Mr. S: [No answer.]
Dr. A: Do you know why he referred you to me? Mr. Schlossberg?
Mr. S: I think...think [inaudible].
Dr. A: Excuse me. I didn't quite hear.
Mr. S: I think...Dr. Kaufman, he is worried.
Dr. A: Worried? What is he worried about?
Mr. S: He is worrying for nothing. I tell you, this I would never do.
Dr. A: What is he worried about, Mr. Schlossberg? You may speak freely. Nothing you say will be repeated to anyone.
Mr. S: Yes, of course. I understand.
Dr. A: Let me ask you again: what is it that Dr. Kaufman is worried you might do?
Mr. S: Dr. Kaufman...I will tell you something. He's a nervous man. How a man so nervous becomes a doctor, I don't know. But he's a good man. A *mensch*. You know what this means, to be a *mensch*?

Dr. A: Yes.

Mr. S: It means he is a good man. A man to respect.

Dr. A: Yes, he's a good man.

Mr. S: No, no—the way you say it, it's like the boss patting the worker on the back, saying “good man.” I mean he is a *good* man, he is good. The reverse of evil. He is a doctor because it is pain he hates, people in pain, he takes it on himself and it is his pain. You see the difference?

Dr. A: Are you in pain, Mr. Schlossberg?

Mr. S: [Inaudible.]

Dr. A: Mr. Schlossberg?

Mr. S: Of course.

Dr. A: What do you mean? How are you in pain?

Mr. S: I'm seventy-eight years old, of course I have pain. My bones ache—hands, feet, knees, hips. Everything. My liver, my belly, my heart—everything hurts. I think in my blood something is wrong, wrong. But Dr. Kaufman—

Dr. A: Please go on.

Mr. S: He is my doctor for almost thirty years, I don't wish to say something bad.

Dr. A: Again, I will not repeat anything you say to me to anyone else. Everything you say is confidential.

Mr. S: Well, I think maybe he should find out what is wrong with me.

Dr. A: Perhaps he thinks that there's nothing organically wrong with you. Perhaps that's why he suggested that you come to talk to me.

Mr. S: “Organically”? What is “organically”?

Dr. A: It means that you're healthy. That there's nothing wrong with your body.

Mr. S: What is this you're saying? Are you saying I'm crazy?

Dr. A: No, Mr. Schlossberg, not at all. But sometimes when people have problems that are too overwhelming to cope with they try to ignore them, thinking they'll just disappear.

Unfortunately, they don't—they don't. And this pain in the mind manifests as a series of otherwise inexplicable physical symptoms. Is this the case with you? Is it possible?

Mr. S: I don't think so.

Dr. A: I see.

Mr. S: [Inaudible] think so. No.

Dr. A: All right, then. But perhaps you'd like to take this opportunity to talk to me about any problems you might have. Is there something troubling you? Is there a problem that you'd—

Mr. S: Everyone has problems. There's a saying in Jewish: *yeder morgen brengt zich zorgen*. You know what this means?

Dr. A: No, I don't.

Mr. S: "Every day, a new sorrow." Yes. This is what living is.

Dr. A: How long have you felt this way?

Mr. S: Always. No, I'm sorry. There was a time...before...but now it's gone, dead. So more than fifty years, maybe. And now that Sadie—

Dr. A: Go on. You said, "Sadie—"

Mr. S: Nothing.

Dr. A: Mr. Schlossberg, who is Sadie?

Mr. S: Sadie...Sadie was my wife.

Dr. A: Was?

Mr. S: [No answer.]

Dr. A: Mr. Schlossberg, Dr. Kaufman told me that you lost your wife recently. Three months ago. I'm very sorry for your loss.

Mr. S: He said that?

Dr. A: Said...I'm sorry?

Mr. S: He said that I lost her?

Dr. A: Why, yes.

Mr. S: [Laughter.] Well, maybe I will be finding her in the cupboard, like when I lost my glasses.

Dr. A: Mr. Schlossberg, I certainly didn't mean to imply—

Mr. S: Did he tell you everything?

Dr. A: I don't know what you mean.

Mr. S: Did he tell you the way she died?

Dr. A: Why don't you tell me?

Mr. S: She didn't *die*—she was killed. Murdered. Coming out from the subway, at the top of the steps, three boys, her wallet they took. Then they beat her and punched and kicked and then

threw her down the steps. Threw her down the steps. It was in the middle of the day, people saw, they didn't do anything. And she was lying there on the floor, dying, and somebody called finally the ambulance.

Dr. A: Were you there when it happened?

Mr. S: No. I was working—I work one day, two days by 30th Street, at a furrier's. So no, I wasn't there. Until I got home I didn't know she was dead. The hospital, they didn't know how to find me.

Dr. A: Did the police ever catch the boys who did it?

Mr. S: She was crying for me, they said at the hospital. As she was dying, she was crying for me. Oh, my God. Oh, my God.

Dr. A: How do you—

Mr. S: No! The police—no. They didn't catch them. I called every day, asking, and now the detective, he doesn't even get on the phone. Why does he care? An old Jewish lady, no money, not important. What does it matter? Who does it matter to?

Dr. A: I would say that it matters to you.

Mr. S: Yes, of course. But who am I?

Dr. A: Do you feel responsible in some way because you weren't there to help your wife?

Mr. S: I hear her crying my name. I hear her always. I see her, dying, in the hospital, scared, crying, "Abe! Abe! Where are you?" Down the street I am walking, just walking, and I hear her crying and I turn, like that, to see her, to help her. But she isn't there. I can't sleep at night because of the crying. I wake up to the crying, sometimes, and it's me, it's me crying too.

Dr. A: What would you have done if you had seen these boys attacking your wife?

Mr. S: Shoot them.

Dr. A: Pardon me?

Mr. S: I would shoot them. One, two, three. Dead.

Dr. A: I see. Do you own a gun?

Mr. S: A gun? Yes.

Dr. A: Do you have a license for it?

Mr. S: [Laughter.] A license, no. No.

Dr. A: How did you obtain it?

Mr. S: I know someone who knows someone who knows someone. To get a gun, it's not so hard.

Dr. A: Why did you obtain a gun?

Mr. S: Why else? To defend myself.

Dr. A: Against what?

Mr. S: My enemies.

Dr. A: Who are your enemies, Mr. Schlossberg?

Mr. S: Anyone. Everyone. You don't know. The streets—too dangerous. Everyone now in New York hates someone. *Nu*, don't you see it, walking down the street? The whites hate the *shvartzes*, the *shvartzes* hate the whites, the Koreans—you know, with the groceries hate the *shvartzes*, they hate them back, everybody hates the Jew. Everybody just hates, no reason. Everybody looks for an excuse to hate, to kill, to destroy. We are idiots, all of us. We never learned. Never learn.

Dr. A: Do you ever think about using the gun to kill yourself?

Mr. S: It was different, almost fifty years ago. Sadie and me, we came here after the war—it was so different! People in the streets—happy! Celebrating! The war over, food on the table, jobs. Not like now. No. Now I walk in the streets and sometimes the lights, I see those tall lights in the street, and they have—

Dr. A: What do they have? What do you see?

Mr. S: I see—

Dr. A: Yes?

Mr. S: [Inaudible.]

Dr. A: Pardon?

Mr. S: I said, bodies. Bodies. Hanging from them.

Dr. A: You see bodies hanging from the streetlights?

Mr. S: Sometimes, yes. For an instant only. Then they are lights again. A trick of the eye.

Dr. A: Mr. Schlossberg, I must ask you again—

Mr. S: Yes?

Dr. A: Do you ever think about using the gun to kill yourself? Do you ever have thoughts of suicide?

Mr. S: [Laughter.] No.

Dr. A: Why do you laugh?

Mr. S: [No answer.]

Dr. A: Why did you laugh?

Mr. S: Because if to kill myself was what I wanted, this I would do a long time ago.

Dr. A: And why is that?

Mr. S: [No answer.]

Dr. A: Why is that, Mr. Schlossberg?

Mr. S: It's a very long story. This is something—You can't understand.

Dr. A: I can try. I assure you that I will try.

Mr. S: No, I'm sorry.

Dr. A: You may feel better if you tell me what's troubling you.

Mr. S: I never told...only Sadie knew. Sadie, she knew. But she I didn't have to tell.

Dr. A: I believe I know what you are trying to say. You were in a concentration camp during the war, is that right?

Mr. S: Dr. Kaufman, did he tell you this?

Dr. A: Yes, he did. But only insofar as it related to your case. You must believe me—we are both trying to help you.

Mr. S: [Laughter.] So my life, it's an open book. All of the New York doctors, they're talking about it.

Dr. A: Not at all, Mr. Schlossberg. Dr. Kaufman only told me because he thought it was relevant to your case.

Mr. S: Yes, yes, all right, so you know. Auschwitz. Me and Sadie, we were in Auschwitz.

Dr. A: Auschwitz, I see.

Mr. S: Everybody died. Our children—three children—parents, brothers, sisters, grandparents, aunts, uncles, cousins. All dead. Except Sadie and me, and one sister of Sadie, and my second cousin, now in Israel. And now Sadie is dead, too.

Dr. A: I'm very sorry. It must make you feel very—alone.

Mr. S: Oh, no. I used to feel bad because they are all dead and I didn't know why, from all of them, it was me who was alive. But then I started to hear them, my family, speaking to me like they are alive—and I am for a little time happy. But then I am sad again, because I think that if I can hear them, and they are dead, then I must be dead, too.

Dr. A: I don't understand.

Mr. S: If they are speaking to me, I must be dead—this is what I was thinking, and I was sad again. But now I realize—if I'm alive, dead—what do I care? So I am dead. We are together. My family is together again.

Dr. A: Do you—

Mr. S: Being in Auschwitz, that was a time when—

Dr. A: Mr. Schlossberg, do you really believe that you are dead? That the person who is sitting here and talking to me now is dead?

Mr. S: Of course.

Dr. A: What do you mean by "of course"?

Mr. S: I mean, yes I am dead. Is this something you can fix?

Dr. A: What do you mean?

Mr. S: Can you fix this, doctor? Can you make me undead? No. This is not possible. So this is nice of you to talk to me but is just wasting time.

Dr. A: I see. Well. Let me ask you this, then—do you have something better to do?

Mr. S: [Laughter.] Two points for you! As Greenwald at the shop says—"Two points for you!" [Laughter.]

Dr. A: I'm glad you enjoyed my little joke. I must tell you, Mr. Schlossberg—and I want you to listen carefully—the mind is a marvelous thing. It can cripple itself and it can heal itself. It can be healed. Some of the stories I hear from my patients—physical abuse, sexual abuse—you wouldn't believe that these people can be helped, can live normal lives. But they can. And so can you.

Mr. S: [Inaudible.]

Dr. A: Excuse me?

Mr. S: I said pardon me, but this I cannot agree with.

Dr. A: You can't?

Mr. S: The things—I have done things no one should do to another person. I have seen—no. No. These things, no one should ever have to see.

Dr. A: It is understandable that we do things in extraordinary circumstances that we would never otherwise do. Such behavior is a rational response to irrationality. After the traumatic event, of course, one must then examine one's behavior,

explain it to oneself, integrate it into one's experience, and go forward with one's life. It's a question of—

Mr. S: You don't see! It's like—it's not like—listen to what I am saying to you: after this being in the camp, I cannot go back.

Dr. A: What do you mean?

Mr. S: I mean—I have lost myself. Sadie, she lost herself, too. Yes, I go to the supermarket, the barber, the laundromat, I talk to people, they ask me, they ask, "How are you today, Mr. Schlossberg?" and to them I say, "fine, fine," and we talk—the weather, maybe, or the cinema or our aches and pains—and they think they are talking to a living person, but inside I am—not living. I cannot live again.

Dr. A: Mr. Schlossberg, we all have, if you will, a social self and a—

Mr. S: Tell me something.

Dr. A:—self we keep hidden from the world. In your case—

Mr. S: Tell me something, please.

Dr. A: All right.

Mr. S: Do you believe in evil?

Dr. A: In the philosophical sense?

Mr. S: [Laughter.] "In the philosophical sense?" he asks. In any sense.

Dr. A: Mr. Schlossberg, I am a physician. I believe only in illness—and its obverse, health.

Mr. S: So the answer is no.

Dr. A: How does one define evil? I have counseled people with psychopathies, with sociopathies, with borderline personality disorders, who have committed acts of violence that can be considered evil—do we consider such persons evil? Or ill? I believe that they have disorders of the mind, in many cases due to imbalances in the chemistry of the brain. Mr. Schlossberg, I must say that we have embarked on something of a tangent—

Mr. S: And so these people, you try to cure them. Of evil.

Dr. A: Not exactly. I try to help them overcome their disease. As I said, I am a physician.

Mr. S: Yes. I see.

Dr. A: Now, if we may return to what we were discussing: do you ever—

Mr. S: Pardon me, but I am feeling very tired. I would like to go home.

Dr. A: You still have almost twenty minutes—

Mr. S: I want to go home.

Dr. A: Mr. Schlossberg, what is it that you are afraid of?

Mr. S: Afraid? Nothing. I am afraid of nothing.

Dr. A: Everyone is afraid of something.

Mr. S: I think what everyone is afraid of is dying. But I am dead, you see, so dying, it does not bother me.

Dr. A: I see.

Mr. S: I want now to go home.

Dr. A: Mr. Schlossberg, I—Yes, of course. I do hope, however, that you will come back to see me again. I look forward to continuing our conversation. It was most stimulating, and I believe that I can help you come to terms with some of the problems that are distressing you.

Mr. S: [Inaudible.]

Dr. A: Would you like my secretary to make an appointment for you? Unfortunately, I am leaving tomorrow for a few weeks—I have several conferences to attend—but I have a few appointments open the week I return. If in the meantime you wish to talk with someone, you can call my colleague, Dr. Brand, in the office next door. Here's his card.

Mr. S: [Inaudible.]

Dr. A: Well, please see Vanessa on the way out if you change your mind.

Mr. S: Goodbye, doctor. You did your best. You're a good man.

Dr. A: [Laughter.] Are you calling me a *mensch*?

Mr. S: [Inaudible.]

Dr. A: A *mensch*, Mr. Schlossberg?

Mr. S: Thank you, doctor. Goodbye.

[End of tape]

CASE FILE #00367

Session Notes (Friday, July 29, 1994)

The patient is a mild-mannered, 78-year-old Jewish man referred by Bernie Kaufman, who has

been seeing the patient almost every week for some time for a number of complaints: arthralgia, dizziness, fatigue, headaches. The patient's history reveals no evidence of cardiovascular disease or carcinoma. He is allergic to penicillin and is currently taking no medications.

Numerous physical examinations and a complete workup, all performed by Dr. Kaufman, reveal normal BP and heart rate; normal CBC with differential; normal BUN; normal creatinine; normal bilirubin. The patient has mild arthritis of the hands and knees. He has several deep scars (one below the right knee, one over the left eye, one under the fifth lumbar vertebra) and two healed fractures (left wrist and left tibia) from injuries he sustained as an inmate of a concentration camp during World War II. He lost his wife approximately three months ago when she was robbed and beaten in the subway.

On presentation, the patient appears somewhat defensive and tense, seems to be under considerable strain, and laughs at inappropriate points during the session. He does not volunteer the information that his wife has died or that she and he both were inmates of a concentration camp. He has an extremely negative worldview, with tendencies to paranoia (he asserts that he has enemies everywhere) and depression (he asserts that every day is filled with sorrow). He states that he hears the voices of his dead relatives and confesses that he feels guilty for being one of the few in his family to survive the Holocaust. He occasionally sees things (bodies hanging from streetlights) that seem to be memories of his concentration camp experience. He states that he is "dead" and cannot be brought back to life.

Diagnosis is difficult. Despite the presence of voices and visions, the patient does not seem to be delusional; he is aware that these phenomena are not real. He is not disoriented. Despite having a depressive outlook, the patient is well able to function and thus does not meet the criteria for major depression. He denies engaging in suicidal ideation, although he admits to owning a gun (for "protection").

The patient's tendency to paranoia may have been exacerbated by the circumstances of his wife's death; indeed, the patient seems to demand, and then despair of, help of any kind—he complains that Dr. Kaufman has not cured his physical symptoms, he suspects the police of anti-Semitism because they have not caught his wife's killers, he challenges the analyst to make him “undead”—all of which may also contribute to his paranoia.

The patient seems unwilling to admit the possibility of cure but does not seem to pose a threat to himself or to others. Whether he schedules another appointment remains to be seen. However, he was referred to Dr. Brand should he feel the need to seek help during this analyst's (well-deserved!) vacation.

Vanessa, type up the session tape and these notes and open a file for this patient, a Mr. Abraham Schlossberg, case #00367. All of my usual appointments, except for Mrs. Atkinson, have been rescheduled; see if you can reach her first thing on Monday. In my absence, new patients or problems you can't handle should be referred to Jeff Brand. Don't forget the plants. I'll be back on the 23rd. Aloha!

[End of tape]

SUBWAY GUNMAN KILLS THREE, SELF

By George Fredericks

On a downtown No. 6 train yesterday afternoon, a 78-year-old gunman killed three passengers and wounded two others before turning the gun on himself.

In what appears to be a case of self-defense gone horribly wrong, the gunman, Abraham Schlossberg of the Lower East Side, was approached somewhere between 42nd and 33rd Streets by two youths, ages 14 and 15, who demanded that he give them his wallet, his watch, and his wedding ring. According to eyewitnesses, Mr. Schlossberg refused to surrender the articles, and the youths proceeded to threaten him with knives. Mr. Schlossberg began to shout for help from his fellow passengers; when none was

forthcoming, he drew a .32 caliber Beretta semiautomatic pistol from his jacket pocket and told the youths to drop their weapons.

The would-be muggers complied, and the gunman motioned them toward the subway doors. In a bizarre twist, the gunman began shouting about personal responsibility and human compassion and then demanded that the Jewish people among his fellow passengers identify themselves. When no one raised a hand, Mr. Schlossberg assured the passengers that the Jews would not be hurt. All but five of the passengers subsequently identified themselves as members of the Jewish faith, including the two muggers. Mr. Schlossberg proceeded to herd the five remaining passengers to the rear of the car and shot each one once before placing the pistol in his mouth and pulling the trigger.

“It was the most horrible experience of my life,” said Maureen Farley, 28, of Metuchen, New Jersey. “This man was waving a gun and screaming things like, ‘Why didn't you help?’ and ‘You are all responsible’ and stuff like that. I didn't know what to do when he told the Jews to raise their hands, but when I saw other people doing it, I guess I figured that he couldn't shoot all of us, so I raised my hand. I guess it was the right thing to do.”

Although no one knows why Mr. Schlossberg committed these atrocities, the police have discovered that Mr. Schlossberg was under the care of a psychiatrist and had in fact been returning from a session just prior to the massacre. Mr. Schlossberg's psychiatrist, Dr. Michael Abramson, is vacationing in Hawaii and could not be reached for comment.

The names of the dead and wounded are being withheld until their families have been notified. The names of the two youths who attempted to rob Mr. Schlossberg are also being withheld because of their ages. Because of the gunman's insistence on identifying the Jewish people in the car, the police are considering the incident the latest in the rash of bias crimes that have besieged the city this summer.

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Mark Best is a mystery lover who lives in Pittsburgh, PA. His stories have appeared in *Hardboiled Naked Kiss*, and he was second-place winner in the 1994 International Imitation Raymond Chandler Writing Competition. He is currently working on a Dan Brogan novel.

Richard W. Browne lives in Midlothian, VA. A hiker who decided that staying indoors was preferable to stumbling down old mine shafts, Browne now devotes his time to writing mysteries and science fiction rather than to bass fishing, which he loathes.

Brad Crowther lives in Marragansett, Rhode Island, with his wife and teenage son. Although he is busy directing his own consulting firm, which provides strategic planning and management studies, Crowther's work has appeared in *Pulphouse: A Fiction Magazine* and *P.I. Magazine*.

Gloria Ericson lives in a suburb of Washington, D.C. Her work has appeared in *McCall's*, *Yankee*, and *Alfred Hitchcock's Mystery Magazine*. She has also written a novel.

John M. Floyd is a marketing specialist for IBM. He lives in Brandon, MS. His work has appeared in *Byline* and *Mystery Time*, and his story "War Day" won first place in the Fall 1994 issue of *Anterior Fiction Quarterly*.

Jacqueline Freimor is a medical editor who lives in New York City. Her story "Strangle, Strangle" won first place in the unpublished authors category of the 1994 Mystery Writers of America competition. Freimor is currently finishing her first novel.

Gregory Fitz Gerald, lives in Brockport, New York. His work has appeared in the *Cimarron Review* and *Bellingham Review*. He received his Ph.D. from the University of Iowa, where he studied with Paul Engle and Donald Justice. His books include *The Hidden Quantum* and *Neutron Stars*.

Teresa Keene is a master gardener who lives in Port Orchard, WA. Her work has appeared in *Affaire de Coeur Magazine*, and she is author of the weekly gardening columns "The Doctor Is In" and "The Happy

Gardener," both of which are featured in the *Sabinal-Utopia News* in Sabinal, Texas.

Juliet Kincaid has a Ph.D. from Ohio State University, the site of a library much like that in "The James Thurlow Memorial Mystery." Kincaid lives in Overland Park, Kansas, and teaches creative and mystery writing. She is an editor for *Red Herring Mystery Magazine*.

Kitty Mendenhall, an editor for *Red Herring*, has published poetry and two mystery novels. Her articles have appeared in the *Kansas City Star*. Her poem, "Scarlett O'Herring's Birthday," appears in this issue.

Tim Myers lives in Hickory, North Carolina. His work has appeared in *Alfred Hitchcock's Mystery Magazine*, *Woman's World*, and *Mystery Time*. Myers has also written a novel.

Wm. Ellis Oglesby is a freelance writer at work on his third espionage novel. His articles and short stories have appeared in *Backpacker*, *Scouting*, and *Terror Time Again*. In addition to his professional endeavors, he is a charter member of the Atlanta chapter of Sisters in Crime and an adult leader of an inner-city Boy Scout troop. Mr. Oglesby lives in Atlanta with an electronic parrot named Shakespeare.

Beth Abts Patton lives in Ridgecrest, CA. Her work has appeared in *The Advocate* and *Writer's Journal*. Patton writes children's plays and also teaches a summer writing class for young people.

Al Ronowski lives in Belgium, WI. His work has appeared in *Ellery Queen Mystery Magazine* and *Poetry Forum Short Stories*. He has placed two novels with a literary agent.

Elizabeth Ruhlen lives in a country home in Valley Falls, KS. She writes a column for the Valley Falls *Vindicator*, and her short story "Killing the Rattlesnake" will soon appear in *Mystery Forum*.

Charles Shade lives in Durham, NC, with his wife and three cats. He is a consultant for CID Intelligence and is working on his second novel.