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## In Transit

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# In Transit

## **Abstract**

There is the birthplace and there is the deathplace. We are in the deathplace. The deathplace is Bad Aibling, in southern Germany, just north of the Austrian border. To get here, we have driven through the Tyrol, the Italian-Austrian-German alpine region in which gingerbread houses stack up on the green slopes of valleys.

Bad Aibling sounds fitting for a deathplace, a bad place, though in fact “bad” means “bath.” As we drive on a two-lane road, we see cars parked in bunches on the grassy shoulder, and it seems people might be bathing, dipping their feet in the country creeks the way it’s done in Tuscany, where each creek is known for its particular qualities of minerals and temperature. I might bother to find out about creek-bathing if I were a tourist, but I am not. We simply glide in suspension, the place of death acquiring properties as we approach. Bad Aibling is a spa town and, seemingly as an extension of the warm baths, clinics have arisen here. We are looking for the Schloss-Prantseck Klinik, at which patients receive hyperthermia, a superheating of the waters. [excerpt]

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## **Disciplines**

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**KATHRYN RHETT**

*In Transit*

THERE IS THE BIRTHPLACE AND there is the deathplace. We are in the deathplace. The deathplace is Bad Aibling, in southern Germany, just north of the Austrian border. To get here, we have driven through the Tyrol, the Italian-Austrian-German alpine region in which gingerbread houses stack up on the green slopes of valleys.

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Schloss-Prantseck is hardly the only clinic, which becomes clear as each turnoff sprouts signs and arrows. My husband speaks German, so

he asks directions at a gas station convenience store. His “Guten Abend,” or “Good evening,” is met with “Grüss Gott,” or “Greet God,” the phrase of greeting, we learn, for everyone at all times of day and night in Bad Aibling. The townspeople here expect that the international clientele of the local clinics will acquire this basic civility and say “Grüss Gott” when entering a shop or restaurant. The greeting of one’s supposed maker strikes me as a chilling custom for a place where the gravely ill converge, seeking a reprieve.

We follow the map but miss one turn, and my husband pulls over to ask a man walking a dog outside a housing development. The man smiles, gestures, and speaks at length while his golden dog bounds over the grass. He praises my husband’s proficiency in German. It is good for this conversational moment to last because we are still in suspension, whereas soon we will arrive. Though we have been driving fast—so fast that the Italian police pulled us over for speeding and we had to beg them not to confiscate my husband’s license—my husband and I have always appreciated being in transit, driving in a car or stuck in a motel room between points A and B, between departure and arrival.

In the clinic parking lot we do not see our brother-in-law’s car. We do not see the main entrance to the group of pink buildings. The sign over one door reads “Bad Haus” so we choose a different, larger building and walk in. We see no reception desk and find ourselves in a library. *Chicken Soup for the Christian Soul* sits on a coffee table. When we had called the other night we couldn’t talk to my husband’s sister because she was “downstairs watching a movie.” She must have been here, in the velour chair. I stare at it. I wonder what she watched, *Uncorked* or *The Other Sister*, or one of the other unremarkable American comedies lined up next to the television. She wasn’t even watching anything good, her last movie. My husband uses a telephone in the library, which rings reception, and we learn that Mr. Smyth, our brother-in-law, is upstairs in Room 121.

We find stairs under a sign marked “Ausgang.” My husband and I do not like Germany. Exclamation points proliferate on road signs, and this characteristic, combined with the German words, makes everything sound like a concentration camp command. *Ausgang!* My husband is Jewish. I was an early reader of Anne Frank. We go up the German stairs.

Upstairs the place reveals itself as a hospital, with IV poles and a wheelchair in the hallway. The door to Room 121 is closed. A label in an acrylic holder outside the door reads “Mrs. Smyth.” I wonder suddenly whether she will be in the room, lying on a bed. But of course she is not. Both single beds in the room are empty of her. The bed on the right is a work surface, covered with books, papers, and a telephone. Our brother-in-law opens his arm to the other bed. That is the one. He has pulled the white comforter up to two pillows. He has laid a purple knit cap on the pillow where her head was. Along the comforter he has laid in a row two small paintings. The painting on the left, called “Heart Swinging,” is of a strong red heart rising out of dirt, a heart with black-and-white wings. Our six-year-old son painted this on Sunday. The thick paint took two days to dry. I mailed it on Tuesday. The painting on the right by our nine-year-old daughter is called “Lavender Drying,” showing three bunches of lavender hanging from a beam. It is a death image. But our brother-in-law, Tim, has turned the painting upside down so the lavender sprouts straight up from the earth. Today is Thursday. My husband’s sister did not see the paintings because they arrived this morning, and she died last night, June 5th, at ten o’clock.

There is certain information that is difficult to live with. Last night my husband and I decided to drive to the clinic, from southern France where we are living this year. Tim was sitting here, on the bed with the telephone. Kathryn lay in the other bed. Tim left the room to get us driving directions. He was gone for about five minutes. She died, alone, while he was out of the room.

Turns out we didn't need directions. We have found this place with a map and three conversations.

Later my husband will say he wanted to hug the bed. He wants to cross the room and open his arms to the bed where his sister died, but he does not. The three of us stand in the room looking at the bed. It is easier for one person to maintain control if the others do. Later we will sit on the floor with our backs resting against the bed, and later still we will sit on the bed that seems to thrum below our threshold of knowing. Now we look at this bed, at what it has all come down to, this single bed in the corner of a clinic room in Bad Aibling, Germany. I am endlessly self-consciously literarily historically philosophically aware that people die all the time, and many in worse circumstances than this. (We are in Germany after all.) I do not care. That quilt was rumpled by her, and she put that book on the bedside shelf, the novel she said was trashy but held her attention, at a time when few things could. She was here.

The birthplace will always be Philadelphia, and the deathplace will always be Bad Aibling. The mortuary wants to see her birth certificate to establish that Philadelphia was her actual birthplace, because her passport indicates only the state of Pennsylvania. Tim doesn't know where her birth certificate is, back at their house in London, so the mortuary agrees to go ahead and prepare the certificate. They will give Tim fifteen copies. Most people only need a few, but the Americans, they say, always want fifteen copies.

The mortuary still wants to see her birth certificate, as soon as possible, "for the file." My husband and I feel a Nazi chill at this meticulous posthumous file keeping. They also need a marriage certificate, in order, after the cremation, to release the ashes to Tim. He doesn't know where it is, but my husband's mother finds a copy in Philadelphia, where they were married, and faxes it over.

The accuracy of the death certificate is essential, as is the telephone call to the United States Embassy in Berlin and subsequent cancelation of her passport, because this is a moment when someone could assume her identity. Her official identity is in transit until the proper authorities are notified. Some other tall American woman in her mid-forties could become Kathryn Leebron Smyth.

This is also a moment of transit for the soul. Tim introduces us to Dorothy, who teaches Qi Gong at the clinic, does Reikki treatments, and is known as a psychic. (A skeptic, I have to say “is known as.”) Dorothy says Kathryn’s “luminous body” remains in her body for three days, which is why cremation should occur only after that time. The night Kathryn died, Dorothy sat with her after and “saw” a small ginger and white animal, she says. What is it, she asked Tim then, did Kathryn have a cat? She didn’t. At that time, while Dorothy and Tim sat with Kathryn, my husband and I were on our porch in France, with our arms around each other. Our daughter’s rabbit, named Ginger Blaze for his orange and white fur, hopped around and around us. He does this sometimes, the compulsive circles. Did Dorothy “see” the rabbit while sitting with Kathryn? Was Kathryn somehow seeing us? Was she with us there, was she thinking of our daughter?

There is certain information that is difficult to live with. At dinner Tim tells us that Kathryn wanted to see our daughter before she died. We are sitting outside at an Italian restaurant, with a view of blue mountains and an onion-domed bell tower. Bad Aibling is a picturesque town, with a butter-yellow church and decorative painting on the shop façades. My husband had talked to Tim at five o’clock the afternoon before, and said that we were driving up, and bringing the kids. After he hung up, he said that Tim had hesitated when he heard the kids would be coming. Why? Maybe it would be too overwhelming for her, the four of us coming? Maybe she would worry about the children seeing her so ill? They had just had a pleasant visit together. Maybe it would

seem that she was going to die, if we all rushed up there for a deathbed scene? So my husband emailed and said we wouldn't bring them. Now, in the mild June air at the restaurant, we listen to Tim say that when Kathryn heard our daughter was coming, she perked up, she roused herself. The technical term for her situation then was "liver coma," or an almost complete failure of the liver. Her liver couldn't withstand the toxicity of the chemotherapy, which she was receiving along with hyperthermia. Still, there was a slight chance of reversal. Hearing that Cade was coming, she was happy. When Tim received our email and told her that Cade was not coming after all, he says, she sank back down. My husband says nothing, tears in his eyes. We have seen the bed. I can imagine her pulling herself up higher on the pillows, then sinking back down into them.

"It was a mercy she died last night anyway," Tim says. "I couldn't have stood another night like the one before. No sleep, and her breathing was so labored."

We should have brought our daughter, I think. We should have at least said we were—anything to have kept Kathryn going. There was always a chance. I think of the last printout on our desk at home, about apheresis, another treatment, "the next step," the doctor called it. I will hate that printout, I will crumple it up when I see it. The last treatment: expensive, experimental, and never to be.

There was always another plan, another medicine or poison or procedure or clinic or healing session. How many pages had we printed out, about Zoladex, Tamoxifen, Quadramet, pamidronate drips, Didronel IV infusions, Xeloda, Herceptin, Taxol, Arimidex? Or about alternative treatments—mistletoe, milk thistle, Chinese mushrooms, shark and bovine cartilage, and any number of teas, elixirs, and capsules. There were healing treatments, such as colonic irrigation, aromatherapy, iridology (mapping body function through study of the eyes), and there were clinics everywhere: for emotional/spiritual work in the Netherlands, say,

or for deep purification in Wales. Then there were the printouts about experimental doctors: a Dr. Burzynski of Houston pushed neoplastins, biochemical microswitches that “turn off” genes that cause cancer and “turn on” tumor suppressor genes; Dr. Simone of Lawrenceville, New Jersey, had appeared on *60 Minutes* and *The Today Show* to talk up ONCOR and CALCOR, his miraculous nutrient supplements; Dr. Moss of Brooklyn, upon perusing a patient’s complete file, provided a personalized “Healing Choices” report; and Dr. Wolfgang Scheef of the Robert Janker Klinik, featured in *Esquire* and *Family Circle*, gave Interleukin-2 injections in Bonn.

Had I once, in the 1980s, shaken my head at newspaper stories of cancer patients traveling to Mexico for Laetrile? How pathetic they were. Laetrile was quackery. But I had changed. No plan was pathetic. A plan was a way to keep moving, maybe even forward. Interleukin-2 was Laetrile, with the innovation that Scheef injected it directly at the tumor sites. So one summer we met Kathryn and Tim in Bonn, where she received injections, and it did not feel crazy at all. We stayed at a Holiday Inn, where the children swam in the indoor pool, and we found a good Thai restaurant across the street, and we walked in the gray cold along the gray river where boats plowed relentlessly ahead and in a beer garden golden ale bubbled in tall glasses. At a playground Cade found a porcelain star mounted on a stick, just lying there in wet sand, a magic wand. Maybe Interleukin-2 would be just the thing.

There was always another plan, we kept making plans, stretching a string out into the future and pinning it down on a date. But now we would not be together for a week in a rental house in July. And my daughter would not spend her tenth birthday with her Aunt Kathryn in London before we flew home to the States.

When she was first diagnosed in December 1997, the family mood was one of emergency. We spent Christmas arranging a second opinion at Memorial Sloan-Kettering. They told her the initial diagnosis in London

had been correct, that they had done a “good job” in London. She could live anywhere, they said, and pursue any treatment she wished—because nothing would work. She and Tim flew home to London. Her family mobilized. She had two parents, four married siblings. In our household, I weaned my son so my husband and I could fly to London in January. She lay on the couch, surrounded by stacks of cancer books. “My new library,” she said ruefully. We considered moving to London. I had lived there twice before. But economics confounded us: quit our new jobs, sell our new house? Instead we were on the phone, the Internet, the airplane—my stepmother the pilot gave us her companion passes so we could fly free, at the last minute, whenever we wanted.

Four and a half years is a long emergency. How much time passed until my attention wavered? I would get sick of the constant test results, the dread, the keeping track of clinics in the Canary Islands or China. China was the fourth summer. This would have been the fifth. I knew my attention wavered and judged myself weak on fortitude, mercy, and concentration. I let my husband carry the thinking for a week at a time. When did we stop toasting her every time we had a glass of wine? After the third year?

Now there would be no more parceling out of time and attention. No more checking the calendar to work around children’s piano recitals or soccer games, or professional conferences and deadlines. Now suddenly everyone can get on an airplane, everyone can take off time from work, everyone can fly in to this little deathplace of Bad Aibling, even in the midst of business trips to Japan or Los Angeles.

“I told her, last night, that everyone was coming,” my husband says, having wanted to assure her that her parents, her brothers and sisters would all be by her side.

Tim laughs. “That’s probably what did her in. I think she wanted to die alone.”

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In the morning, in the room, Tim is fumbling with a gray jewelry pouch, and then he has some of her jewelry in his hand. He says, "She wanted Cade to have this." I sit down in a chair beside him. He holds up the ring, her wedding ring, and I can picture it on her hand, the large rectangular diamond flanked by sapphires. My four sisters-in-law all have large diamond rings. He kisses the ring, and swiftly presses it into my palm. I want to ask, Are you sure, but he has already made the hard gesture. Then he says, "Oh, you need something to put it in," and he comes up with a Ziploc bag. They used to be so precious, the Ziploc bags, you couldn't get them in London and whoever was flying over brought Ziplocs, to store medicines in the freezer. But there it is, a Ziploc bag, no need to hoard them anymore. I hate the sight of it. I drop the ring in, roll up the bag, and stuff it in my purse.

At first when my husband and I arrived, Tim asked us to help pack up the room but today at breakfast he didn't feel like it. In the room he has lit votive candles, three on the shelf alongside the bed. A low shelf between the two beds serves as a night table. Nearest her side are a collection of medicines and new photos of her brother and his children from New York. (Ping took the pictures. She was like me: sister-in-law, wife of a brother whose sister was dying, maker of phone calls, sender of packages.) In the middle of the shelf Tim has constructed a shrine: a photograph of Gurumayi, their yoga guru, more candles, a Chinese silk snap pouch, a statuette of an elephant god or goddess, an incense holder. The room smells of incense. Chanting music uncoils out of the CD player. Tim is keeping the room going. He slept the night before in the bed where she died, I realize with a start, because the other bed hasn't been slept in. The trash cans are overflowing. Roses in a vase curl and brown. He wants nothing touched.

Tim says we can put something in the coffin when she is cremated. We will put in the photo of our two children, the one I carry everywhere in my wallet, the one that's good luck when I travel, the one I can whip

out for the police officer when the children go missing, I can say: There they are, they look like that. My daughter with her long Botticelli hair wears a yellow T-shirt with a glittery star on the front. She is looking down because my son, with a mischievous smile, is elbowing her in the ribs. They are standing in front of our brick house, the very symbol of security. "We'll put in that photo," I tell Tim. "Cade and Jacob will be good company in the universe." But I am disturbed to think of burning, even burning that little rumpled photograph.

How unacceptable it is to conceive of my children's spirits accompanying their aunt on her disembodied journey. Just three weeks before, she had visited us, the first time in a year her vital signs were strong enough for airplane travel. It had been grimly dark and raining in Tourrettes sur Loup, weather that I usually like as it evokes the Middle Ages in the medieval town. The rain washes down the sides of the narrow stone street and empties in the ravine, just as it did five hundred years ago. But Kathryn had come from London to the south of France for sun, and the slick street was difficult to negotiate. I held her arm as we walked slowly up to the square. She was frail now. She used to be solid; she had been the first woman basketball scholar at Georgetown University. In her old apartment in New York City, she had kept Rollerblades and a bicycle stuffed in a closet, ready to be pulled out every weekend. When she visited us in San Francisco, she thought nothing of going out by herself to rent a mountain bike and ride over the Golden Gate Bridge. This impressed me, being the sort of person who reads a book for three hours and then takes a walk. On my honeymoon, I stared at the ocean a lot. On her honeymoon, she got helicoptered out to a glacier and skied down.

In Tourrettes sur Loup on the stone street, I held her arm especially tightly on the uphill part. Her eyesight wasn't good anymore, for depth, or the subtle gradations of concrete and cobblestone. She kept her head bowed. The stalls in the market had mostly closed early because of the

rain. We looked at clothes. She bought cotton pants, good for the clinic, she said, because you have to go out for treatment, so you need to be dressed to receive the local and whole-body hyperthermia that supposedly shrank tumors. The treatment was painful, like being burned. I bought her a bright pink T-shirt to match the pants, with three-quarter sleeves and maroon piping. That is what the nurse dressed her in after she died. We went to the next stall. She bought me a jacquard dishcloth in orange and yellow. She admired the matching tablecloth, which would go well in her kitchen. She had no cash left. I had just enough. I didn't buy it for her. That is what I mean by the parceling out, the rationing, the stinginess. Two weeks later I bought it for her. I sent it to the clinic. My packages to her felt like good luck charms flung at the void. I kept busy, wrapping up olive oil soaps and paperback books, carrying them to the post office.

During her visit to us my husband drove her down to the coast for lunch in Cannes, and to see the fancy hotels where the celebrities would stay later in the month for the film festival. The marble floors of the Carlton Hotel lobby, she told me later, were so incredible, the wheelchair just glided. Smooth, she concluded appreciatively, the former basketball star praising the quality of a wheelchair ride.

When she died (why insist on such harshness, why not just say "passed away" as other people do, instead of thinking such clarity is superior), I stayed composed, for my husband. He had just talked to her an hour before. Our suitcases were packed to leave for Germany the next day, leaving at five a.m., so we wouldn't be driving the tunnels and mountains in the dark. My mother, visiting us for a month and renting a separate house, was sleeping over, to take care of the kids and put them on the school bus. The kids were in bed, and my mother, husband, and I had just finished writing postcards at the table when the call came. Our daughter would be going on a school trip to the mountains the next week, and we were supposed to send cards for her to receive there.

You're always doing something when the call comes, of course. When the diagnosis call had come four and a half years before, I'd been on campus grading papers. It was a Saturday morning, but my husband had been away for a week and I was behind at work. He said to come home. I said why. He said, Just come home. Kathryn's mystifying back pain had been identified as metastasized cancer of unknown origin. It was December 20, 1997. Our son was one and a half, our daughter was five. It felt as if everything vertical and sturdy and upright in our lives—our first house, our new job, our sense of intactness—had been smashed flat. Our children must have wondered at their parents clinging to each other and crying, or maybe they just stared at their television show. Four and a half years later, when the call came, I stayed composed. It was ten o'clock. My husband made and received a number of telephone calls. The family was traveling to see her, his parents having cancelled their fiftieth anniversary Caribbean cruise, one sister flying in from a conference in Los Angeles to travel with the other sister from Virginia, his brother en route from Tokyo to New York (his home, where Ping also stayed composed) to Munich. No one would see her now, sit at her bedside, hold her hands, say they loved her. They were all still coming anyway, converging on Bad Aibling like pilgrims.

I stayed composed until, dressing for bed, I saw our digital clock turn to 0:00. That is how the European clocks are, like military time, so that midnight is not twelve o'clock but the zero hour. It seemed cruel that the day was over, that it wasn't the day she had died anymore, the day when she was alive and might have kept on living. It was June 6th, the day after, and people were already talking about the memorial service.

There are several things I want to say to her. I rehearse the main points silently as we walk up the mortuary driveway. "I didn't think it would come to this," is one point, the pure and main point. There is a difference

between hope and denial. She didn't want to be thought of as ill. A few days after diagnosis, she wrote to us, "I am scared and apprehensive, but my courage and conviction must let me rise above whatever comes my way." A day after that she stopped taking painkillers and reported that she and Tim had gleaned what good news they could from a depressing doctor's appointment, and were elated to meet the challenges ahead. "If any of you," she wrote to the whole family, "think we're out in the clouds, keep it to yourself. I do not mean that to be harsh, but I cannot afford to have anyone near me who expresses doubt." Weeks later she had fixed on the philosophy that would carry her forward: "Bottom line I am not interested in hearing negative doom and gloom feedback." She wouldn't say she had a disease, except in deconstructed form: she had a dis-ease, she would say, an unease in her body. She mentioned her legal will several times over the years, but she wouldn't have wanted me to bring it up in conversation. We focused on the future—the next treatment plan, the next time we would see each other. We talked about books, and we liked to read the same ones together, but they couldn't include any characters having cancer. Characters with cancer are surprisingly prevalent in contemporary American fiction. The final two books we read together were historical novels about a British royal gardener. We talked about her family—her two parents, four siblings, four in-laws, three nieces and five nephews, as well as a number of cousins and their families—the psychodynamics and history of all of these living relatives as well as various dead ones. I saved up funny stories about my children to tell her. Always I had to have them, so when something funny happened—like Jacob tackling our mother cat to try to breast-feed, or Jacob swallowing my silver teardrop earring, or Cade spying on the neighbor boy with binoculars—I was instantly storing it to tell her, like money tucked in a wallet. I played the foolish sister-in-law, always ready to gossip, sending the latest celebrity magazines over to London with my husband. She told me medical things when my husband wasn't

home and she was too tired to call back later. I wrote down the particulars, to tell my husband, to email the family, and for research, and we put these notes and our research printouts in a brown expandable file, leaned casually against our printer table. The file will get no thicker.

From the beginning she did not want to hear prognosis. Diagnosis, okay, but no prognosis. My husband and I researched prognosis and despaired, the median survival rate for metastasized breast cancer (her eventual diagnosis) being two years. She was forty. She didn't want to hear prognosis, she wanted to strategize and move forward. The doctor in London said, "Put your affairs in order." The doctor in New York said, "Start morphine." She regarded taking morphine as succumbing to death. She took it rarely. On the last day of her life she refused to take it. My daughter had morphine as an infant, she flew through the death-night and came out. Even when Kathryn was well, she had loved my daughter for her life force.

I am walking up the gravel mortuary driveway with her husband and brother. I didn't think it would come to this. Tim has asked the undertaker to bring Kathryn outside, in the cloisters. The morning is rainy and the cloisters provide shelter. Tim says she was feeling "cooped up" inside, and needed fresh air. Also, he says, she didn't like the hum of a large appliance that could be heard in the inside viewing room.

She is in a wooden box, lying down of course. The box has no lid. Two mortuary guys in suits are standing with their hands clasped in front of them, some distance from the box out in the courtyard. They nod and bow slightly. We nod and bow slightly back. It is stark to see her in the box. This is the only way she will look when she's dead, there are no other possibilities or contexts but these pale yellow arches and a gray light and her lying dead in our sight.

Tim takes off his jacket and camera and puts them on the ground. He kisses her forehead, her collarbone, her hands. I stay back. He visits her, then my husband does. I'm the outlaw here (a family nickname for

the five of us who married in), so I stand back. I take two objects from my purse: her wedding ring, and the photo of my children. I want her to see them, or them to see her, or all of them to be present together—I don't know which. If ever I had a chance of being a rationalist, it was lost when my daughter survived. When she was born, her respiratory system failed, and the numbers were against her, both the medical statistics and the numbers on the monitoring machines. Several things might account for her living, and when I was told afterwards that an African prayer circle had been praying for her, I couldn't discount it. Now nearly ten years later I can listen to Tim say "she needs fresh air" about his dead wife and conclude that she must need fresh air. The more we researched cancer over these years, the more the unknown outweighed the known, the mystery acquiring vastness and weight. If we were to conceive of it in the German philosopher Kant's terms, the noumena, or the unknown, came to overwhelm the phenomena in our experience of the world.

She is wearing the pink knit cap I bought her in Saint-Paul-de-Vence (deathplace of James Baldwin). She is wearing a white linen blouse she wore all the time. (She was wearing it one day in Perigeux, sitting on the grass with my husband, watching our children play in a fountain. She was smiling then, her teeth white, her brown wavy hair cut in a short bob.) Around her neck as a shawl is a hot pink pashmina. She believed in the warm colors, the healing colors. She is holding a pink peony in her lovely bony hands, clasped on her stomach. Below that she is covered by a white satin quilt, which must belong to the mortuary because it is coldly white and artificial. Red roses are laid here and there around her. This is all peripheral: I am looking at her face. Her mouth is open, there are her front teeth, and her bottom lip seems bitten and chapped. I didn't expect her mouth to be open. In the room, Tim had showed us a video he took after her death, in which she is lying flat on her back holding a flower, her mouth closed. I can't speak. If I had a chair I could

sit down and chat, about how I didn't think it would come to this, and how she dignified me as a person by thinking well of me, and how generous she was, but I can't speak. I am clutching the ring, and showing her the photograph, and weeping. I can't hold all of this sadness, what do people do with it? Stupid people have surmised that it is bearable for her parents to lose a child because they have five, or that it is expected and acceptable for her to die because she had cancer, and to them I want to say, why is it acceptable that she had cancer? Why is it acceptable that a forty-five-year-old woman dies? Why is it acceptable that her back hurt and she started missing work, and at Thanksgiving they said, "Maybe lupus," and two weeks later they said, "You have forty tumors on your spine, you have spots on your liver." "Spots," they always said, as if they were harmless dots or stains or the whirling glitter-dust you see when you're dizzy. She was forty years old then.

I am forty years old now. People have asked me in hushed voices whether she had children. They always ask this if they do not know, and they nod, satisfied, to hear she did not. But she wanted children, wanted them fiercely and could not conceive, and why is it better that she could not have them? Better that her wish was not granted? Better that there are no little Kathryns running around? They might have cleverly ditched out of household chores, as she did as a child, they might be physically fearless, they might play the flute and speak five languages, they might be a continuation of her here on earth.

I want to lay my hand on her head, on the pink cap. During the second summer, during a family reunion in the Dordogne, she let me soak clean cloths with heated olive oil and lay them on her back. Two or three times I did that, when her husband and mine were out late together. I want to touch her hands. I am afraid to disturb her body. With a touch, she might fall out of her fixed position. I just stand there, not touching her and not speaking. I'm not prepared. She never wanted to be thought of as terminally ill. She didn't aspire to be the dying sage, the family wise

woman, and yet she became that, feeble and knowing, graceful with pain. We knew, and we also very deliberately did not know, because together, with her will and all of ours, we held her with us among the living, who are not to be pitied, who will survive.

I leave Bad Aibling in the late afternoon, alone, to get back to my children. I ride in a white van, in the rain, winding through small towns where the shops glow with golden light—full of pastries and fresh bread and chocolate, wooden toys, and expensive shoes—to the Munich airport. The finality of leaving makes me slump against the seat. At the airport, my e-ticket works, I buy a magazine in English, and the airline dispenses free copies of *USA Today* in the boarding area. Once again I am in transit, and the plane lifts me out of Germany, terrible country of death. I hope never to come back. After Kathryn is cremated, Fred will say darkly, “Germany got another Jew.” On the plane I sit next to a young Brit who thumbs through a modular shelving catalog, shopping for the perfect unit. He shares an apartment in Sophia Antipolis, the mini-Silicon Valley of the south of France, where computer executives work in office parks surrounded by golf courses. What an idiot this guy seems, as he natters about “maximizing space.” It’s Friday night, he’s been working in Munich all week, and he hopes his roommates have stocked up on beer. He is a stolid mass of bubbling triviality, and when he asks me my business in Germany, I say only that I’ve been visiting family. Yet he is a relief to me, as we rise together over the dark soaked forests, lifting and turning toward the south.

Bad Aibling is in us now, the place we can’t leave behind. How absurd, really, that the Munich airport will always sound unattractive, or that I will always resent the cheerfulness of an oompah band in lederhosen that plays at night in a museum courtyard there. Every place in Germany exists in relation to it, the little town with too many pharmacies. This paralysis is, to me, the official flip side of the beer commercial

moments Kathryn always chased—the moments when time stops in a golden intimate perfection, moments we were lucky to share with her, like drinking New Year’s champagne on the roof of a Manhattan apartment building while the fireworks blossomed above, or watching her marry Tim in a dress she designed herself under the huppah in Philadelphia’s oldest synagogue during the minute of the stars’ most propitious alignment, or having a picnic on Hampstead Heath on a soft summer day. The flip side is that time stopped for us in Bad Aibling. A way of being stopped there, a conversation, a tension. We stretched out the string and thumbtacked it down on Bad Aibling.

We keep moving all summer, following all of our plans as if following them will keep us in Kathryn’s company. We travel to rented houses around France with Tim and assorted relatives, and we keep jumping in cars to convoy to noteworthy towns, chateaus, wineries, markets, restaurants, swimming lakes and fêtes, moving swiftly along the country roads. Guidebooks in hand, we drive to coastal Arcachon for a shellfish lunch and sandcastle building, zip off to the Bordeaux airport to pick up a new arrival, sidetrack to Saint-Emilion to buy tablecloths, go back to the house to whip up a fantastic curry dinner. This racing around—and the hours spent relaxing in the upholstered dining rooms and dappled terraces of Michelin-starred restaurants, eating pâté while pacifying the younger children with crayons and baguettes and pasta, and twirling on the lawn and standing on benches to wave at boats ruffling down the adjacent river—somehow invokes the spirit of Kathryn.

So we keep to her plans, returning to London before we fly home to the States, until finally we arrive at the last plan, our daughter’s tenth birthday at the Rainforest Café at Piccadilly Circus. That night as the neon of Piccadilly bathes us and we buzz in and out of record shops, we imagine Kathryn conceiving of the plan. At the restaurant we order good wine for the grownups, and buy souvenirs for the kids, just as if she is with us there and we feel festive and generous. The restaurant staff

has Cade stand on a chair and hold her birthday cake as they sing to her. “Maximum humiliation,” she says later, but it is a Kathryn moment, the candle glow illuminating Cade’s shining face.

And then we go home, all the way back to Pennsylvania. No reason to keep moving now. We had been running on last plans, on vapors. We let our son’s passport expire. Our passports once seemed almost animate, glowing with readiness in my top dresser drawer. We had passports, flight passes, cash, credit cards, we could be out the door in an hour. Now in the early evening between work and dinner my husband will jump up and pace restlessly—it’s the perfect time to call Kathryn in London. I will hate to say my name on the phone when I call the family because it might give them a jolt. I was always the second Kathryn, and to my nieces and nephews Aunt Kathryn Two—now I am just the wrong one. Sometimes we will come upon an object we have forgotten—a piece of silk she brought from China, a bracelet from a healing ceremony—and then it is as if she is with us still, bestowing gifts. But mostly our transit is over, and we sit in chairs as if thrown there, heavy with inertia. This is the deathplace, the place we are, where the potentialities are shutting down and we drift through the house, going nowhere, watching the dust of what was catch the light. We remember the Italian police stopping us for speeding in the Alps, and laughing at us as we tried to explain in mashed bits of French-German-English that my husband’s sister had died in the night, the night before, she was dead of cancer, and we were driving straight through to Bad Aibling, we were driving fast, we were racing as fast as we could to get there.