

EXCERPT The Seeker by Dr. Steve Koc

The Seeker

An Unintentional Pilgrimage

Dr. Steve Koc

Prologue

The Matter of the Mind

October 30, 1931

Dr. Patel focused on his breathing and reminded himself that even if it is not apparent at any particular moment, everything is happening for a reason. And, eventually, it will become perfectly clear that all is perfect.

In the conference room of Great Lakes State Hospital, originally known as the Southeast Michigan Asylum for the Insane, a meeting of grave importance was about to commence. All the department chairmen sat at the long, rectangular table as well as the hospital's Chief of Staff, Dr. Ernest Chandler. Two muscular orderlies stood outside the room to ensure no interruptions.

At the far end of the table sat Dr. Giorgio Patel, uncertain of why he was in attendance at this gathering of eminent professionals. He suspected, even hoped, that it may have to do with a radical idea that he had recently proposed to the hospital administration. His stomach fluttered. It would not be the first time that one of his proposals to improve the hospital was rejected by the decision makers.

Although he had been practicing psychiatry at the suburban Detroit hospital for over a decade, he never moved forward in his career, was never made head of a department, was never once acknowledged for his many contributions that made the institution a better place for the patients as well as the staff. And this was not for any lack on his part. Dr. Patel was by far the

most erudite employee of the hospital. And, if nothing else, he was adept at adapting. In his childhood he had circled the globe several times over, providing him with the skills to master most any situation.

Often Dr. Patel suspected that the roadblocks he encountered to achieving prominence at the institution were due to the cultural bias he faced from being born to an Indian father and an Italian mother. He once overheard Dr. Chandler, the leader of the hospital, make reference to “that turban-wearing negro” and even though Dr. Patel did *not* wear any sort of head cover, he instantly understood that the slur referred to him.

Sometimes he felt a twinge of resentment as his colleagues were promoted, gaining more status and financial reward. Then he would remind himself of why he did the work that he did, it was a spiritual calling, and he felt better knowing that he was more effective in the wards, dealing directly with the patients, changing lives one at a time.

Dr. Chandler greeted the room, “Thank you for being present today. I know that all in attendance are very busy with important work. And we are all familiar with Dr. George Patel seated at the foot of the table. This special meeting has been called today to act on an issue that has come before us, in the form of an essay of sorts, penned by you, Dr. Patel, and addressed to the department heads and myself. Your paper has created quite the stir and has given us cause to reflect. It has stimulated much conversation amongst the leaders of this institution, and we have unanimously looked forward to meeting with you today.”

Dr. Patel sat upright. He finally had the attention of the powers-that-be and he considered this to be his most important work to date; a theory that he believed would change the practice of mental health care the world over. Still, a deep sadness dampened his pride. His handiwork, his

proposal, was actually a collaborative result of untold hours of discussions he had had with his wife. It had been only two months since her funeral.

Dr. Chandler continued, “Dr. Patel, we request that you present your paper to us here today so that we can be certain to grasp the full meaning of your—for lack of a better term—I would have to call them your revelations.”

A few snickers were heard around the table.

“Please gentlemen,” Dr. Chandler said. “We must give Dr. Patel this forum to explain himself.” He handed a copy of the document to Dr. Patel. “We would like you to read your letter aloud, in its entirety, for the record.”

“Thank you, Dr. Chandler. And my humblest gratitude to all those present here. I was not expecting this today.” Dr. Patel cleared his throat, took a drink of water and stood up confidently. “Again, thank you for this opportunity. I shall share my letter, verbatim.”

“Dear Dr. Chandler and the Distinguished Board of Great Lakes State Hospital. Mental illness was once considered to be supernatural in origin. The belief being that disorders of the psyche were due to demonic possession or other spiritual disorders. These thoughts persisted in the Western world until Hippocrates theorized that *physical* abnormalities might be the actual root of mental anomalies.”

“Thus, the search for a spiritual source of mental illness was abandoned and so began the exploration of the physical body to discover cures for the mind. We dissected and measured and analyzed the whole of the human structure looking for the source of mental dis-ease. But, alas,

we are no closer to resolving the ailments of the mind then we were during the times when superstition reigned.”

“Yet, a grain of truth exists in all aspects of man’s ideas, even those deemed over time, to be erroneous. There is an ancient German idiom, *das Kind mit dem Bade ausschütten* which essentially translates as *do not throw out your baby when you empty the bath basin*. I pose that it is time to once again look to the spiritual roots of mental dis-ease. There may be great value in exploring the worlds of the unseen and the immeasurable.”

Dr. Patel paused for another drink of water. “I know some of you have heard the rumors of my linguistic acumen. For the record, I am fluent in seventeen languages. But I digress.” He returned to his paper.

“It is my theory that the ancient constructs of a spiritual source of mental illness contain this grain of truth. These antiquated concepts may not be as far from reality as our fine institutions of higher learning have led us to believe. It is quite possible that we have dismissed valid options and ideas and have tossed the baby out *with* the dirty water, so to speak. We have denied any explanation for our patient’s maladies other than that which can be observed by our rational minds. And any and all alternatives have been ignored, or worse, dismissed as quackery. I postulate that a significant population of our hospital, upwards to thirty or forty percent, is indeed not ill at all. They instead suffer from spiritual complications.”

“I object!” shouted Dr. Jerome Blackstone, the head of pharmacology. “I will not entertain this ludicrous blather.”

Dr. Chandler rose from his chair. “Enough, Blackstone! This is not a courtroom. We must afford Patel the opportunity to present his paper in total.”

Dr. Blackstone crossed his arms and exhaled, “Humph!”

Dr. Patel was not foreign to being cast as the outsider. In fact, he would have preferred to have had all the years of ridicule towards him be as direct as this outburst. He could then be certain that his feelings of being an outcast were not just in his imagination. He continued with a newfound confidence.

“Where was I? Oh, yes—spiritual complications—but the spiritual complications that I refer to are not disorders or diseases. They are more in the realm of being in a spiritually *advanced* state of being. Many patients may actually have minds working in greater ways than the average man. It is my observation that this subset of our patient population may be, in fact, highly developed and not in need of our care. They are evolved in a way that Western medicine cannot comprehend given our current tests and tools. Our lack of understanding is the actual issue here.”

“Yes, indeed, there are the cases of true insanity, those that think they are Napoleon or a god. But I have witnessed firsthand, far too many instances where those in question appear to be attuned to information beyond our five senses, in dialog with unknown channels. Some may even be aware of past lives, or communicating with deceased ancestors, or dare I say, in touch with *the* God, Himself. Their hyper-awareness is not a condition to be alleviated but one to be studied and developed.”

“The writings of the Hebrew Bible, as well as those of most other cultures, are replete with tales of man’s connections with unseen beings in unseen worlds. If Moses, Abraham, Noah and others could hold conversations in the spiritual realms I ask, why only those men? And why only during by-gone times?”

“How would we treat these founders of modern Judeo-Christian belief in today’s world? With the respect that they have enjoyed over the millennia, or by sedating them and locking them away?”

“The mystics, seers and sages were once the healers and keepers of the knowledge until science debunked their ways as mere superstition. But our base of knowledge is growing rapidly. It is changing the foundation of many of our long-held beliefs. And these new discoveries resemble many of the oft ridiculed, ancient spiritual ideas. Science debunks and debunks until it comes full circle, eventually proving the shaman correct.”

“We view the physical body and brain as separate. But there is an overlap between those two worlds, where the psyche and physique unite. In the last decade we have seen evidence that the brain itself emits electrical impulses. German psychiatrist Dr. Hans Berger has developed the human electroencephalograph machine. It is a device that reveals the presence of electrical discharges inside the human cranium. These patterns of energy are measurable and relative to our mental processes. But, why must these impulses be limited to the skull in which they are contained? What is stopping the information of one human’s brain from traveling through the atmosphere and communicating with another’s brain, like radio waves that we have now come to accept as real?”

“Whereas, prior to the work of Guglielmo Marconi and Nikola Tesla in wireless transmission, it would be thought madness to send a voice out into the open air and receive it at another location miles away. Yet, today we do not think twice of this miraculous achievement known as ‘radio waves.’ It is easy to go one step farther and imagine thoughts, or ‘brain waves’—for lack of a better term—as passing from one human to another just as radio waves behave.”

“Our brains are able to receive signals via the senses we acknowledge such as sight and sound, so why not also via extra sensory means. It is my professional opinion that we are wrongly imprisoning a class of people; possibly superior to the average human, for no other reason than that we do not understand their advanced ability to utilize meta-sensory information.”

Dr. Blackstone interrupted, “How much longer must we listen to these incoherent ramblings?”

“Blackstone, you agreed to give him a chance. Please contain your outbursts,” said Dr. Chandler. Dr. Blackstone growled and snorted and fussed with some papers in front of him.

“Thank you, Dr. Chandler,” Dr. Patel said. “How can we respect the patients if we cannot even offer respect to our peers? May I continue?”

No one spoke.

“Then I will read on,” Dr. Patel stated boldly. “It is very easy to understand how a patient, over a lifetime of being reprimanded or condemned for their awareness of sounds and sights that others cannot perceive, will eventually believe that their perceptions are incorrect, or

worse that they may be possessed or mentally deranged. That person then becomes clinically insane as a result of the negative responses from those around them and they, in essence, are bullied into accepting the misdiagnosis that they are victims of illness and in need of a cure (of which there is none in these cases).”

“In 1924 I had a remarkable meeting with one Swami Yogananda, an East Indian mystic who was touring the United States. In his lecture, Mr. Yogananda, a proponent of yoga and meditation, deftly extolled the many benefits of those ancient practices as means to mental and physical vitality.”

“It was his premise that there exists an alter-energy that we know not of. This energy connects all living and inanimate things, all the matter of the universe, and permeates the venue of the mind (i.e. thoughts, emotions, dreams). And furthermore, this energy can transmute from the physical to the psychic and vice versa. What we refer to as miracles are normal occurrences to those who practice yoga mind exercises. He also made many references to Jesus Christ.”

“This connection between the physical and the meta-physical can also be understood in the context of the work of Dr. Albert Einstein. In his new theory of relativity, he notes that energy is equal to the factor of an object’s mass and the square of the speed of light. Yes, that is correct, equal! Energy and matter are one and the same, and interchangeable.”

“His mathematical formula explains the direct correlation between intangible energy and solid matter, hence the current understanding that both matter and energy are neither created nor destroyed, only transformed. Whereas, in the past we held that there is a distinct separation between the world of particulate matter and our thoughts. Einstein’s concept enlightens the

relationship between the two. In essence, it is the same notion posed by the aforementioned swami.”

“Also, it is paramount to reference the recent work of Danish physicist Dr. Niels Bohr in the groundbreaking science of quantum theory. Dr. Bohr puts forward the principle of complementarity, which describes the nuclear electron to be both a physical particle of matter and a wave of energy. Once again, realizing the dual nature of matter/energy is within our grasp. The facts are documented. It is not a great leap to understand that mind and matter are one.”

Dr. Patel paused for another sip from his glass and looked up.

“I wish to add that I learned of the latest developments in the science of physics while visiting my maternal grandmother at Lake Como in Italy in the autumn of 1927. A gathering of world eminent scientists, The Volta Celebration, coincided with my stay and I had the good fortune to meet the esteemed Dr. Bohr. One afternoon, by chance, we enjoyed aperitifs at a cafe and I discussed my theories with him and likewise, he shared his with me. A fascinating man, Dr. Bohr. I shall continue with my dissertation.”

“Dr. Bohr writes of his experiments where he altered the position of an electron in its atomic shell with his thoughts alone. In other words, he could actually control matter with his mind. We would like to brand this as a hoax, or at best, some sort of miracle yet it is a repeatable procedure, science at its purest.”

“The current understanding is that space, time and physical matter are interrelated. Some consider this to be mere philosophical musings but, many prominent scientists, including Belgian

physicist, Leon Rosenfeld, are describing these concepts as the bedrock of the burgeoning field of atomic science.”

“All these reputable, scientific examples of the amazing powers of the human brain only reinforce my theory that there are endless opportunities that await us as we study this area. The interrelation of the worlds of spirit and matter should inspire us to look further into the possibility that the religious myths of past times hold timeless truths that will be the foundation for our future understandings.”

“Given our paltry knowledge of the capabilities of the human mind and it’s abilities to interact with the spiritual realms I fear that if I am correct in my postulations—and we continue on our current course of evaluation and treatment in our esteemed institutions—we are doing a great disservice to those in our asylums and to the community, as well. We can ill afford, morally and financially, to house and support the numbers of people who fit into this category of misdiagnosis and unnecessary treatment. One can easily ascertain that this is an issue of utmost priority.”

“Also, I regret to state that there is a darker side to this crisis where personal gains of status, power and remuneration may be preventing some in positions of authority from looking at this with unbiased eyes. They lack objectivity as they continue to openly, or tacitly, support a corrupt system of health care, which only serves those who benefit from the misfortune of those mistakenly deemed ill. This flies in the face of our sworn, primary directive as physicians...first, do no harm.”

Dr. Patel dabbed the corner of his eye with his handkerchief.

“In the original version of this memo I recounted a recent tragedy here at our own facility, the suicide of a young, female patient whom I worked with closely. I omitted her case history from my final report as to not draw negative attention to our specific hospital. And out of respect for the patient’s privacy. Yet, I must state that from my in-depth conversations with this young lady it became abundantly clear to me that she is—pardon me—she was, the perfect example of the definition of the misdiagnosed patient that I have been describing. She possessed an advanced mind and was highly evolved in matters of spirituality, yet we could not help her due to the cultural and professional biases that misguide our work here. What a loss. Only sixteen years old. So sad.”

He scanned the room of unresponsive faces. “Sirs, I am nearly at the end of my presentation.” Dr. Patel returned to reading.

“Many great minds have noted that we are only just skimming the surface of our understanding of the human condition. For all we have accomplished there is still so much more. In closing, the great philosopher Rudolf Steiner once stated, ‘Just as man utilizes his eyes and ears as means of sensing the world, so can he harness the higher senses to bring spiritual worlds to his awareness. One who does not utilize the higher senses would believe the world of spirit to be only darkness and silence, just as the tangible world is without light or sound for men lacking eyes and ears.’”

“Let us not only take these words to heart. Let us also place them into action. I propose that an independent, blue ribbon panel be formed to explore the theories set forth in my letter so that we may emerge from the darkness and usher in an era of enlightenment in medicine. I believe, with your support, we will be able to secure funding for research and this institution will

become known as the premier leader of a new age of mental health care. A pioneering endeavor such as this will be no less than revolutionary. Sincerely, Dr. Giorgio Patel, M.D.”

Dr. Patel took his seat and again addressed the group. “Thank you for your attention, gentlemen. I am acutely aware that many of you do not agree with my views but, it is my hope that you will explore these ideas with the openness of true men of science and learning. I welcome your questions and comments.”

The doctors sat in silence.

Dr. Chandler slowly rose. “Dr. Patel do you wish to make any corrections or recant any of your words that you have presented today?”

“No. I feel confident that I have expressed my views in full.”

“Then I have no other choice but to call for a motion.”

Dr. Blackstone sprung to his feet. “I move that Dr. Giorgio Patel be immediately committed to this facility under an emergency order, for a full evaluation into his mental competency and he is to be held until deemed no longer a threat to himself or others.”

Dr. Patel stood up. “Dr. Blackstone, with all due respect to your position at this institution, I find your statement both professionally and personally demeaning. Dr. Chandler, I ask that you, as the head of this hospital, demand that his motion be withdrawn so that one of the doctors who does not harbor an obvious prejudgment towards me may move to *proceed* with the advancement of this important work.”

Dr. Chandler turned towards Dr. Blackstone and said, “I second your motion.”

Falling back into his seat, Dr. Patel stuttered, “Wha...what are you saying? You are agreeing with this nonsense and calling for *my* commitment?”

Dr. Chandler ignored him. “And how vote the rest of you?”

A unanimous response rang out. “Aye!”

“Then so ordered,” Dr. Chandler said as he opened the door to the conference room and motioned for the orderlies to enter and take hold of Dr. Patel.

“How can this be?” Dr. Patel’s thoughts spun wildly as he was lifted from his chair and escorted away.

We're in the Same Place Now

June 17, 1971

“It’s better than prison and it beats the Marines,” Jerry Elias mumbled to himself as he checked into Great Lakes State Hospital. He handed his wallet and shoelaces to the intake nurse.

The nurse looked him in the eyes. “And the last thing I need to inform you of is, there’s no sex allowed between the *patients*.” Then she winked and smiled. Jerry felt his stomach tighten as she looked him up and down, her gaze landing below his belt.

He was afraid of this nurse, he was afraid of the other medical authority figures that he would be at the mercy of, and he feared that he had made the wrong choice to spend one year as a committed inpatient at a psychiatric hospital. Jerry had been forced to face many fears recently. Like, during his recent courtroom appearance.

The judge commanded Jerry to choose where he would serve his sentence. “Prison, the Marines or the mental hospital...pick one!”

He thought that the hospital would be the best of his three options. Prison was not even a consideration. Being locked in a cell was his idea of hell on earth. And the military didn’t appeal to him, to say the least. He wanted to avoid a trip to Viet Nam at all costs and the Marines would be all too happy to deliver him there. Jerry recently witnessed the damage of war firsthand when

Tommy Burns, his next-door neighbor, his surrogate big brother, returned from Viet Nam as a mere shell of a human.

The “patriotic” adults were quick to point to Tommy’s drug use as the cause of all of his troubles but Jerry was one of the few who knew what had actually happened to Tommy: lost and separated from his platoon, encountering a squad of Viet Cong and shimmying up a tall tree to hide, stuck there for days. That trauma was at the root of Tommy’s unsuccessful reentry into the world. The enemy had made camp beneath the same tall tree that Tommy had concealed himself in. Four days and nights he sat motionless, hiding atop the fronds, hungry, thirsty and soiled, going insane from the fear of being discovered at any moment, certain that he had been spotted only to have the enemy turn their gaze away, again and again, for ninety-six long hours.

Maybe in a year, Jerry hoped, when his stretch at the mental hospital ended, the war would be over. Even though he had given up on religion he prayed daily that it would end. His prospects for being shipped off to South East Asia were high. With a draft lottery number of twenty-three he had a guaranteed ticket to the jungle once he became a legal adult, only a month away. So, Great Lakes State Hospital would have to do. And the best part about the institutional option? He could keep his shoulder-length hair.

He also appreciated that any other serial-shoplifter like himself would be sent directly to lockup, but an argument was made that he was a lost soul, still trying to find himself, and after all, according to his lawyer, he suffered from a disease, kleptomania. Wealthy parents plus a sharp attorney equal a favorable legal outcome. Being white helped, too.

So here he was, at the funny farm, on move-in day. Better than prison, beats the Marines; this was going to be Jerry’s mantra for the next 365 days.

The nurse interrupted his internal mumblings. “It’s afternoon free-time. The patients will be in their rooms or the common areas. Here’s a map of the property. Or...we can spend this time getting to know each other better, if you’d like.”

“I’ll explore the yard,” Jerry said as he swiped up the map and quickly exited.

The grounds consisted of rolling lawns and tall, leafy trees. Birds sang and a soft breeze made for idyllic comfort. *Contrived* was the word on Jerry’s mind. His gait was limited to a shuffle, unable to manage a full stride due to the lack of laces in his sneakers.

After a few minutes of ambling the walkways he was already bored. Some staff members, recognizable by their crisp, white uniforms, mingled amongst the inmates or patients or whatever you’d call his new peer group. A few of them sat around staring at nothing in particular or meandering across open spaces, again, gazing at nothing obvious.

A teenage girl threw a Frisbee straight up in the air so it would arc back to her, boomerang style. Over and over: fling, catch and repeat. How many years has she been stuck in that loop, Jerry wondered? He noted a small group of people at the far end of the lawn, sitting in a circle, holding hands. The entire scene was just what he expected: everyone doped up, lumbering along like Frankenstein’s monster or sitting in a circle, singing Kumbaya.

Jerry thought the Frisbee girl seemed normal enough; except for her clothes which reminded him of the underprivileged girls at school who sewed their own. Seeing an opportunity to get her attention, he ran over and did a little leap and snatched the disc out of the air.

“Here’s your Frisbee,” he said. “I’m Jerry. What’s your name?”

The girl gasped and froze in place like a feral animal wishing you hadn't seen it, hoping you'd just move along. After an uneasy moment of silence between them she grabbed her disc from his hand and huffed, "Annabel."

Annabel slowly walked circles around Jerry. He tightened his whole body as she eyed him from head to toe. He reminded himself to keep to himself from now on; nobody was going to be normal around here.

Jerry said, "I'm new here."

"Yep. I know. This certainly is auspicious."

"I'm not up to anything, really. I just want to meet people since I'll be here a while."

"Not suspicious, silly. Auspicious, you know; propitious, promising, fortunate."

"Whew! That's better. Sorry for startling you."

"We never get a second chance to make a first impression. Do we, Jerry?"

"I'm sorry, I was just, um...I just had a weird thing happen with the intake nurse and I just got here and I'm a kind of scared, to be honest. And you looked friendly."

"Okay, you seem decent enough. Go long!" she said and sailed the plastic disc high into the air towards the far end of the field.

Jerry ran off after it, tracking its path as it wafted upwards. His eyes were filled with a blast of sunlight and he reflexively sneezed, losing sight of the disc. He quickly glanced around and then turned back to ask Annabel if she saw where it had landed, but she was no longer there.

“Shit,” he said. “What did I do wrong this time?”

Alone at the edge of the field, along a tree line that attempted to hide the tall, barbed wire fence, he stood within earshot of a little collective of patients sitting together on the ground, the people who were all holding hands a few minutes ago. When he had noticed them earlier, he had made a mental note to avoid them. He didn't want any group therapy or any therapy for that matter. Still, it was also strangely comfortable to him. Feeling curious and with nothing else to do but to avoid the predatory intake nurse or try and look for Annabel who obviously didn't want to see him, Jerry wandered over.

As he approached, he saw an elderly, dark-skinned man with thick, silver hair sitting in the center of the group, elevated on a concrete bench. Everyone had their eyes closed, droning some sort of incantation. As odd as it seemed, he felt relaxed for the first time in his new home-away-from-home, so he sat outside the circle, at the edge of the group and observed...

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