

Book Review

Reviewed by Cathryn Nelson

Head Cases; Stories of Brain Injury and its Aftermath. Michael Paul Mason. New York: Farrar, Straus, and Giroux, 2008.

It begins with a young paralyzed man confined to a nursing home bed with no hope of recovery. Michael Paul Mason opens his book, Head Cases; Stories of Brain Injury and its Aftermath with the story of this young man who is suffering a severe and incredibly debilitating traumatic brain injury. Mason and the young man's mother are struggling to find him appropriate medical help and hoping that maybe someday their lives will return to the normalcy experienced before the insult to the brain and very being of this young man.

Michael Paul Mason is a Traumatic Brain Injury Case manager. He travels from state to state visiting patients with brain injuries in an attempt to understand what sort of medical facility and care they need to help them thrive or at least survive with their brain injury. He visits with patients and their families, fights against state laws and insurance companies, and works alongside doctors and therapists. He has seen patients with symptoms ranging from seizures to memory loss to violence to comatose. His experiences with these people and their families motivated him to tell their stories, stories that would otherwise go sadly unnoticed.

The focus of each chapter is on a Traumatic Brain Injury patient. Similar to Oliver Sack's The Man who Mistook His wife for a Hat, the reader learns about the odd psychological symptoms suffered by patients. Although the author only meets some of his patients once or twice, their stories in Head Cases are incredibly detailed. We hear the story of a patient who can no longer hold a job or attend a school because of a snowboarding accident that left him with a TBI and fierce seizures. We hear of family plans

that are ruined when a husband and father experiences a TBI that makes him believe he is dead half of the time. The stories are as heart wrenching as they are incredibly interesting.

Going above and beyond Sack's telling of case studies, Mason shares the struggles he and the TBI patients' families face in an attempt to find them proper healthcare. One patient, Daniel, suffered a TBI while trying to commit suicide. He experienced this injury while in Nebraska, and although right across the state border in Iowa there are resources, he is stuck living in a psychiatric ward, receiving no therapy or stimulation to help his brain heal and his life find meaning. Mason shares with us that little caveats of an individual's condition get in the way of finding them correct care. Daniel was a bit too angry for the most suited facility to accept him as a patient but did not find needed treatment in the psych ward where he currently was staying. Many patients are left to live in nursing homes where their condition never improves. In this and other chapters we go through the challenging steps Mason faces on his journey to find TBI patients a home.

Some chapters hint at laws and policies that do not do enough to stop brain injuries from occurring. Mason displays his opinions on the faulty policies on vehicle safety in a unique way by taking us on a visit to the race track. He explains all of the safety features found in a racecar and the comparably incompetent restraining system found in today's vehicles. He summarizes the inefficiencies of these systems when he writes, "we must resign ourselves to flying down highways at breakneck speeds with only a strap of nylon around our chests, trusting some deployed pillow to cushion our lives" (54). This and many other statements show that Mason is frustrated with preventative and recovery care for Traumatic Brain Injuries.

While Mason urges us to see that American healthcare is not doing enough for TBI patients, he compares our healthcare system to those of other countries, showing that even our system trumps that of so many other places. One of Mason's most life changing experiences was when he visited the Air

Force Theater Hospital at Balad Air Base in Baghdad, Iraq. Writing about this special privilege allows the reader to not only see what healthcare systems in other countries look like, but also gives us a first-hand account of the perils faced by American soldiers. A Traumatic Brain Injury is the signature injury of the war in Iraq, for Iraqis and Americans alike. While in this military hospital, patients receive rapid and efficient treatment in an attempt to decrease the amount of injury to the brain. Once patients leave this hospital, however, results are mixed. He compared the treatment of an American soldier to that of a young Iraqi boy, both who were caught in the path of a bomb. The American soldier, after being stabilized, is flown in a medical plane to Germany and then on to America where he will receive many surgeries and months to years of therapy. The Iraqi boy, on the other hand, will probably end up in the corner bed of a local hospital where he will receive no therapy and possibly be abandoned to death. Countries like Iraq and Russia are highlighted as having healthcare that is so inadequate that checking in to a hospital can often times mean you are signing up for your own death.

Although Mason does not know the ending to all his patients' stories, he does provide us with a few success stories he has experienced. Many families in this book become advocates for TBI patients, starting foundations, hospitals, and schools to help out their loved ones. Most of these organizations still exist today and have made a huge impact in the way TBIs are treated. One TBI patient took a therapy that worked for her and is now conducting research and teaching this therapy technique to see if she can help fellow TBI patients succeed in their lives as well. One huge success story in this book is written about Bryan, a young boy with a seizure disorder. After his seizures, he became incredibly violent and out of control, trying to hurt himself and others while yelling loudly. During these fits, he would need to be held down on the ground in order to save himself and others from injury. He was unable to function in a normal school, but when his parents enrolled him in a school designed for students with TBIs, things began to change. During the first month of school he ran around the buildings in fits of rage, needing to be restrained by four staff members. As the months went on, the stable, consistent environment of the

school caused marked changes in his behavior. At the time of publication of Head Cases, Bryan had been rage-free for two years and was able to live more of a normal life. The addition of these success stories to his book allowed the reader to catch their breath between stories of patients still suffering from their injuries.

I was impressed at all of the scientific knowledge Mason put in this book about the brain and brain injuries. He did not just cite this needed information, but melded it into an interesting story so it became interesting to read about even for those who dislike science. Within the story of the patient who suffers seizures is a description of the many types of seizures suffered by patients. While explaining the new life of a TBI patient with Herpes Encephalitis, he explains how this virus works and negatively affects the brain. As each brain injury is revealed, the reader learns what that area of the brain is typically used for and how the brain injury will affect their functioning. Mason did an exceptional job of providing enough medical information to help the reader make sense of the conditions they were reading about.

Head Cases does not only include a wealth of knowledge about the brain, but also about a wide variety of other topics that make this an entertaining book for a wide variety of people. When a patient's TBI is the result of a train crash, Mason describes the railroad system and the magnitude of the force hitting the person's car. When contemplating reasons behind suicide in TBI patients, he discusses Dante's classic writing, *The Divine Comedy*. One of the topics he goes in-depth with is his own experience in an *inipi*, a Cherokee sweat lodge. The story of his experience with this cultural tradition is woven within the story of Pony Soldier, the victim of a TBI. The pairing of Pony Soldier's struggles and a firsthand look at the culture he comes from allows the reader to get a rounded view of this TBI sufferer.

At the end of the book, when the reader is emotionally drained yet motivated to create change for TBI patients, Mason presents the reader with extra resources on Traumatic Brain Injuries. By

including these websites in his book he is really encouraging his readers that it is not enough to just read this book; they must learn more about this terrible injury and maybe even act for change. Head Cases not only informs but also encourages action from the reader, inspiring me to send an email to President Barak Obama's administration, encouraging them to read Head Cases and work to improve care for TBI sufferers. I think he intended this book to be a plea for action, and he succeeded in his mission.

Because of Mason's work as a brain injury case manager, he has an incredible wealth of experience and knowledge about traumatic brain injuries. He is a certified brain injury specialist, meaning he not only has experience with TBI patients but also has done a great amount of academic research on the topic. Because the location and symptoms of Traumatic Brain injuries vary a great deal from person to person, it takes someone with his amount of experience to be able to explain this challenging and varying injury. Although I am sure he has left out hundreds of symptoms experienced by his TBI patients, the stories he included cover a wide variety of symptoms.

Framing this non-fiction book around individual case stories leaves the reader feeling connected with the patients on a personal level and wanting to hear more about their lives. The addition of the author's personal experiences and extra knowledge about things like the sweat lodge, railroads, religious experiences, and literature, continue to keep the reader's attention while helping them connect these brain injuries to their own lives. Describing brain mechanisms in layman's terms educates the reader to the physiological trauma that underlies the symptoms the patients are experiencing. Mason combines all the right elements to put in Head Cases to make it an educating and entertaining read for individuals with all different levels of knowledge of Traumatic Brain Injuries.