

MICHAEL

BLOOD OF THE REVENANTS

Michael (Book 0.5)

The Gloaming (Book 1)

The Vânător (Book 2) – Coming 2026

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Michael

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CONTENT WARNING

This novella contains themes and scenes that may be distressing for some readers, including:

Psychiatric hospitalisation and mental health treatment

Medical procedures and blood

Memory loss/amnesia

Violence and physical harm

Psychological manipulation

Obsessive behaviour

Suicide

Terminal illness/cancer

Death

Medication/substance use references

Medical/healthcare settings

Power imbalances (doctor-patient)

Supernatural/horror elements

Institutional confinement

Identity confusion/dissociation

To anyone who's ever felt misunderstood... this one's
for you.

Whoever fights monsters should see to it that in the process he does not become a monster. And if you gaze long enough into an abyss, the abyss will gaze back into you.

Friedrich Nietzsche, *Beyond Good and Evil*

EDITOR'S NOTE

All official files pertaining to the patient known as 'Michael' were lost due to the circumstances detailed within these pages.

The following account has been reconstructed from memory.

Some dates and names have been redacted or changed to protect the privacy of the individuals concerned.

I

SESSION ONE

Patient Notes: Michael [REDACTED]

Date: [REDACTED]/[REDACTED]/2015

Time: 10:00 AM

I APPROACHED OUR FIRST session following standard procedure, though I soon discovered nothing about Michael was all that standard. We began with polite conversation: my attempt to get to know him. I'd learned fast that developing a rapport was vital if I expected any degree of honesty from my patients. However, it didn't take long for me to realise Michael was... different.

My office – not much more than a glorified storage room – was unusually bright that day. At the time, it was

painted a light taupe with green accents that some board member had considered soothing, but the aged paint was beginning to peel around the ceiling where damp had crept in.

“Good morning, Michael. Please sit down.” I gestured to the worn grey sofa across from me, loosening my tie. Autumn sunlight poured between the slats of dusty Venetian blinds, warming the air to the point of stuffiness – but Michael sat as far from the window as he could manage. Entombed there in the shade, his fair skin seemed to glow, emitting a light all its own.

He thanked me as he sat, but there was a detachment in his voice. It had an unusual quality to it – not quite an accent, but enough for me to conclude English wasn’t his first language. I made a note of it, since it could be a clue to his identity.

The file on my lap wasn’t particularly thick or heavy. I should have read up on my patient before the session began, but back then, I was less interested in protocol. I was young – I knew the benefits of ensuring I was up to date, but the less clinical part of my mind preferred to make my own judgements. Too often, I’d seen the initial diagnosis of one colleague affecting the outlook of another – whether they’d taken the time to get to know

the patient or not. I refused to be that person.

Unfortunately, there wasn't much I could do to avoid hearing bits of gossip from the staff. Michael's reputation already preceded him: haunted eyes, dark ponytail, and penchant for confusing the orderlies.

"We don't seem to have a surname listed," I began. "Why might that be?"

From across the room, he watched me as closely as I was watching him, interest dancing in his shadowed eyes. At my question, he lifted his chin and crossed his legs. I wasn't used to patients being so... relaxed. Unafraid. From the whispers I'd heard, his behaviour was the opposite of my expectations in every way. I'd thought to see visible signs of neuroses, but the young man – for he could only have been in his early twenties – merely nestled himself more deeply into the shabby sofa. There was a tightness to his shoulders, though – exasperation, maybe. He didn't want to be here.

"You must forgive me, Dr Sutherland. I'm having some trouble with my memory." His smile was indulgent and apologetic at the same time. "I'm sure it will come back to me, but for now I am only Michael."

I nodded and made a note to ask again at our next session. "Do you have any idea what might have caused

your memory loss?”

“Perhaps a blow to the head. Or... the staff here believe me to be delusional, yes?” He shrugged. “If they are correct, that may have something to do with it.”

I tried to arrange my expression into something neutral, but I imagine my surprise was hard to miss. He was astute; I’d give him that. “Fortunately for you, your final diagnosis is *my* decision.” I paused, glancing at his file again. “How old are you, Michael? There’s no date of birth listed either.”

He didn’t immediately answer, and the silence stretched between us, drawing the walls closer until the small room became stifling. There was a stillness to him that suggested he was used to being studied – arms loose, his spine straight against the cushions. An open book, according to his body language. But there was something unsettling about his lack of movement that made me restless. A desire to fill the void he made, and I found myself turning over his file, picking up my pen and twirling it before placing it back down. The wall clock’s ticking became unnaturally loud, marking each second as though it were much longer.

Maintaining eye contact became difficult, and when I tried, I soon noted that despite his youthful, clean-

shaven face, he carried himself with the assurance of someone much older. And that was more intriguing than anything I'd heard in the staff room.

All this he allowed, observing me all the while – taking in each intake of breath, each shift in my position. Eventually satisfied, he deigned to respond: “Would you believe me if I said I did not know?”

“Yes,” I drew the word out, though I wasn't being completely truthful. There was too much calculation here for my suspicions to remain unaroused.

“Then I do not know.”

Steepling his fingers together, Michael edged forward, resting his elbows on his knees and taking a deep breath. “It is strange. I remember very little. I do not feel any... *ties* within myself. No heartfelt tug toward a family or a lover.” He gave me that strange smile again. “I would lament this, were it not at least a plausible explanation for how I ended up here.” He waited, but I didn't react. “Alone.”

His detachment was a curious thing. Michael's presentation was already troubling at that point: grandiose delusions typically involved self-aggrandising narratives. Patients were usually eager to share their supposed abilities, and yet Michael showed a reluctance

to do anything of the sort. He almost seemed annoyed at the idea that he had to explain himself to me. I scribbled a quick note to review the literature on atypical presentations, with the intention of returning to it later. In the moment, my curiosity was too dominant. I wanted to dig into what he *did* remember.

“I can see you were found behind a meat-packing warehouse, unconscious.” I hoped that sharing a few details might help jog his memory, though it rarely worked in cases like his. “Refuse collectors found you covered in blood and assumed you were injured, due to the amount on your clothing. On your hands and face.” He didn’t so much as blink, and I continued: “You were asleep in the infirmary for two days.” A sleep like the dead – that was how the leading physician had described it. Nothing had kept him unconscious, but it seemed he hadn’t been ready to wake up.

“So I am told. Yet no one seems to be able to tell me how I ended up there, or whose blood I was wearing.”

Michael’s lips twitched with something like amusement – though I struggled to see what was funny. By any normal standard, I’d expect to see symptoms of emotional trauma, at least. Instead, his calm outlook only confirmed the rumours of his... delusions.

“No,” I agreed. “I have to tell you, given the amount of blood, the police had to be informed. I’m told they haven’t identified who it belongs to yet, but it *is* being investigated. Do you have any thoughts about whose it might have been?” His choice of words implied he didn’t think it was his – and he was physically unharmed. But it would be silly not to ask.

He leaned back, apparently losing interest. “I do not seem to be injured, do I?”

“No. Where do you think it came from?” I repeated.

“Good sense would have it come from another, would it not? Perhaps I caused some mischief before my memories left me.”

I remember it was at this point in the conversation that I began to feel on edge. Our first session, my head buzzing with the stories I’d heard despite my attempts to remain neutral, and something about his demeanour was just... unnerving. And he was avoiding answering what should have been a simple question.

Nothing in his voice or body language revealed any concern whatsoever – for either the person he might have harmed, or at his capability of causing such harm. Though he couldn’t have known, the volume of blood on him at the time he was found was... extensive. Likely

fatal. But to him, it was only *'mischief.'*

"Could you have been helping someone who was injured?"

Michael gave a delicate snort. "As I say, Doctor – I cannot recall. I don't imagine so."

There was already more animation to him than I'd seen when he'd walked through the door. His eyes, almost black and circled with shadows, had an unsettling intensity to them. The sharp planes of his cheekbones and square jawline gave him a gaunt, predatory look. Hollow. Empty or waiting to be filled? I made a note of this, though I wasn't sure what use a comment like that might have.

"What makes you say that?" I asked. "Do you consider yourself to be a violent person, Michael?"

"Such an odd question," he chuckled. "No, I do not. Though neither would I call myself a pacifist." He skimmed a thoughtful hand along the arm of the sofa. "There is a great divide between one who lives by violence, and one who can call upon it when need demands."

I resisted raising my eyebrows. "How do you mean?"

He took a deep breath. "Only that one can be driven to violence; forced to respond in a certain manner... and

yet not be a violent person at heart. Fate often chooses for us.”

I didn’t know it at the time, but this would be the first of many conversations with Michael that followed this pattern. We’d start out well enough, covering topics like his health and how his week had gone, and somehow always end up discussing philosophy and his observations about society. It made him an unusually tricky patient – not that I had any idea *how* thorny he could be at the time. His attempts to redirect our chats away from himself wasn’t unusual, but he was the only patient I’d met who managed it so successfully – and subtly, too. Once I realised what he was doing, it made him an interesting specimen to deal with.

My notes from our sessions grew steadily more chaotic – my observations, his peculiar remarks, and even verbatim quotes I had to research later. I didn’t share any of it with my colleagues. It would have been unprofessional, and I’d only held my position a few months – the last thing I needed was other doctors questioning my capabilities. But from that first session, I could already tell he was a new breed of patient. One that unsettled and disturbed me whilst piquing my interest more than I wanted to admit.

My job wasn't secured by expertise so much as luck and more than a small amount of pity for my circumstances – which left me unsure of how to handle Michael's manipulations. And so, I did the only thing I could. I changed the subject, forcing us back to more familiar, manageable territory.

"How are you feeling about your accommodation? Have you settled in?" I asked.

Michael drew his hands together again in what would become a familiar gesture. Loose strands of straight, black hair fell across his face as he shifted. "The room itself is satisfactory – it fulfils its purpose, more or less. I am less pleased with my observations of the others' treatment."

"The other patients?"

"Yes and no. I don't believe *I* should be considered a patient, though I see why you might find my case interesting—" He waved his hand vaguely in a gesture that included myself and, presumably, the other staff. "And so I stay."

I made a note, frowning down at the faint blue lines on the page without really seeing them. Michael continued, his words slow and contemplative.

"My greater concern lies with those patients, as you

call them, who do not require help of the nature on offer here. From what I can tell, many in the facility are merely... *misunderstood*.”

He was now angled so far forward that his face was almost in the light, and he quickly pulled back. What I saw in that moment of illumination wasn't something I've ever been able to explain – but there was something *odd* there. Eyes too intense, mouth twisting into something close to a snarl, fading so quickly that I barely recognised it before the expression disappeared.

He was doing an excellent job of keeping me distracted, whether it was intentional or not. And I was losing control of the session. I tried to take back the reins – though I was beginning to question how much authority I'd had to start with.

“That's interesting,” I murmured, making the effort to meet his gaze despite the strangeness. “You don't think you should be here? That we might be of help to you?”

His mouth twitched. “No.”

“Why do you think that?”

“This is a facility for the care of those with mental health concerns. For those who require an additional level of aid to manage their minds.” He shifted a little in his seat. “My thoughts are mine to command – and even

were they not, that which plagues me could never be treated by someone such as yourself.”

There was something so... matter of fact about the way he said it. I made a note of the tone – the disconnected way in which he picked at a thread in his trousers before looking up, his expression one of wide-eyes innocence I didn’t believe. I had the sense he was concealing a smirk, that this whole conversation was a charade... though to what end, I had no idea.

“Of course, you have far more important concerns of your own, hiding up there.” He tapped a fingertip against his temple. “Wouldn’t you say?”

I remember so clearly, my shock. His astuteness was startling, and even then, I wondered... *how* he could know. Admittedly, I shook it off as a clever manipulation in the moment – he could have picked up on behavioural ticks, or even overheard staff sharing details of my private affairs.

The goal must have been to convince me there was more to it, that he could skim thoughts from the surface of my mind – or at least that’s what I told myself. It was all part of his delusion, despite how hard it was to remember that when sitting across from him.

I had to reassure myself what I was dealing with. My

experience with grandiose delusions was purely academic – I’d never encountered a case in practice. The textbook definition came back to me: *‘A delusion in which a person becomes convinced of their own superiority – that they are more powerful or intelligent than the average human.’* Patients might claim special abilities or god-like powers, alongside the inherent narcissism. And from what I’d seen of Michael so far, maybe he *was* a textbook case after all.

Later that evening, when I had time to go through his file, I found that my colleagues agreed. Despite his intelligence and philosophical outlook, Michael remained wholly convinced that he was above the rules of the establishment. He acknowledged the possibility of a violent past and showed no remorse.

Yet during the session, I was determined to substantiate my preliminary diagnosis. Something about him suggested he thought he was more than human – or less than human. *Unburdened* by humanity. It was what had kept him confined to the facility – but I was sure there must be more to it. I’d never studied a case like it, so I had to ask:

“Do you consider yourself human, Michael?”

He tilted his head, taking me in. “No, Doctor. I do not.”

It was the answer I'd expected. Delusions like his meant he'd consider it pointless to be inhuman and keep it to himself – the validation and intrigue of others was all part of the appeal. But his frankness was still troubling. It suggested we had a long way to go, and from his words, I already felt strongly that Michael had no intention of cooperating.

"You think I'm out of my mind," he grinned, the skin pulled tautly across his youthful face, giving him an odd, malnourished look.

"You look human to me," I kept my voice light. "You—" I broke off. I'd like to have said he'd *seemed* human, but that would have stretched the truth.

He raised an eyebrow and spread himself back against the threadbare cushions. One hand rested on the arm of his chair, his long fingers absently stroking the suede, tiptoeing along to the bar of sunlight that cut across the fabric – reaching it, but never breaching the line.

"How do you know that humans do not look like *me*?"

I scribbled a note down, glancing back at him. "For the sake of argument, let's agree you appear human." I swallowed down all that I wanted to ask. "How do you

differ from one?”

“That’s quite the question. I assume I was born – I grew from a child, as humans are wont to. I believe I recall fragments of youth. A village by the water... the smell of smoke and salt. But now... I am different.”

We both knew that wasn’t really what I’d asked, but I got the impression he considered explaining himself to be tedious. I had to earn the right to the truth, though his phrasing almost made him sound wistful. Even sympathetic.

Sympathy wasn’t something I had time for. I might feel it, but I couldn’t indulge it beyond the bounds of professionalism, so I pushed it down. My job meant holding myself apart. I would not allow myself to fall under his spell.

I took a deep breath. “Michael, would you consent to undergo some regulated tests? It might help us learn more about your memory loss. Maybe help you recover some of your past.”

Truthfully, his amnesia was the least of my concerns. But there were other curiosities a few simple tests could shed some light on.

The sun went behind a cloud, casting the office into sudden darkness. Michael nodded. “I suspected you’d

ask as much. I have prepared myself.”

“What do you mean?”

He flashed another quick grin at me, but despite my prompting, would say no more.

SESSION TWO

Patient Notes: Michael [REDACTED]

Date: [REDACTED]/[REDACTED]/2015

Time: 11:45 AM

MY HEALTH ISSUES kept me out of work for a fortnight after our first session. Two weeks passed, and my curiosity grew stronger by the day. For most of that time I was torn between apprehension and excitement about our next session. So eager, I actually asked for Michael's test results to be forwarded on to me at home. I wouldn't say it became an obsession, exactly, but there were some fascinating abnormalities – though nothing to convince me he was anything other than deluded. Intriguing? Absolutely. But not worrying.

My migraines had started around a month before, accompanied by a bone-deep exhaustion that no amount of sleep could cure. My GP insisted I was overworking myself and making the underlying condition worse. But lying in my darkened bedroom, instead of resting, my thoughts dwelled on Michael.

I kept journals back then. Without even looking at them, I could recite what they said: over and over I told myself the interest was professional curiosity, nothing more. Hindsight tells me otherwise: scrolling through missing person reports at four in the morning, cross-referencing police and historical databases... it wasn't clinical, it was compulsive. And as my searches yielded nothing, it became something sinister.

"Would you care to take a seat, Michael?"

"Yes, Doctor. Thank you."

There was something different about him that day, I remember. His long hair was worn loose this time, and the dark t-shirt and jogging bottoms of before had been replaced with grey. It was a sort of softness – or maybe my memory had painted him more harshly than in truth. It was probably just that we knew each other this time, and that he was beginning to let down his guard. Which meant I needed to be on alert not to let my *own*

guard down.

“How are you feeling today?”

He smiled at that, and I shivered. No, not softness at all. “Quite well. I’m enjoying the change in the weather.”

I glanced beyond the blinds to the grounds outside. It was dark, though it was nearly midday. Rolling rain clouds obscured the sky, heavy droplets hammering at the windows.

“You like the rain?” I asked.

“Yes. It’s gentler on my eyes.”

I nodded. Michael had told the nurses he had an acute sensitivity to light that, in all honestly, I think they initially dismissed. But his tests had confirmed it to be true – an expert physician had noted in his file that Michael’s skin and eyes were particularly sensitive to ultraviolet light – though his vision was flawless. Blackout blinds were fitted in his room the next day, and he’d never mentioned it since.

That hadn’t been the only surprise the test results revealed, though. His blood work was mostly normal, aside from a single unusual protein marker no one at the lab had encountered before – something Dr Harrison had dismissed as a lab error. The second draw showed

the same results, but none of the data had been very revealing.

Then there'd been the sleep study c Michael's REM patterns just... made no sense. His brain activity would shut down for hours at a time, then spike to levels that were unheard of outside of extreme stress responses. When I'd called the technician to double-check the equipment was working, he'd sworn the machines had been tested the previous week. It was no wonder Michael looked so tired all the time.

"Last time we talked about how you were feeling here, in the facility. How do you think you're getting on?"

He leaned forward, long fingers woven together, and stared, unseeing, at the low table that separated us. "I remain wary of the nurses. They persist in trying to convince me to take their chemicals. I do not wish to pollute my body further."

"I see." I murmured, jotting this down. "Well, it's important that you cooperate with our staff, Michael. It's a vital part of your recovery. And we'd never give you anything harmful."

It was mostly true – the side effects of modern medicine were usually deemed acceptable, though I'd

had my doubts about certain prescriptions in the past. In Michael's case, we'd only tried one: Risperdal. An atypical antipsychotic designed to block the dopamine receptors in his brain and hopefully cut off his delusions on a chemical level. The problem was this wariness he mentioned – he wasn't taking it most of the time, despite our best efforts. And on the rare occasion he did... it had absolutely no effect. I had a meeting about alternative options for him booked for that afternoon.

"You mean a vital part of *curing* me?" Michael fell back into his seat, pushing his hair behind his ears. He looked thinner than before. It could have been a trick of the light, but the circles under his eyes seemed more pronounced, his cheekbones sharper.

"You could look at it like that, yes," I replied. "Are you eating well?"

He shot me a sharp glare – accusing. "I eat all that is put in front of me."

An interesting choice of words. "Is there something else you'd prefer?"

"No." There was a note of finality to the word that made me wonder if I'd upset him. Something deep within, nameless, sang out a warning – even as his psychiatrist, I understood when to back off and find safer ground.

“Dr Johnson tells me you’ve been remembering things. I’d love to hear about it.” I watched him carefully.

He sat up straighter and unzipped the ill-fitting hoodie he was wearing, folding it neatly and placing it on the empty seat next to him. When he was done, he leaned back once more and met my gaze at last.

“I recall only pieces. Most clearly, a memory of walking by a river. There is a man with me who feels like he is my father. He resembles me somewhat – though he has lighter hair, and his face is hidden by a long beard. In the memory, I am wary of him. Respect and fear, mingled, I think. He carries a bow, and we enter a forest.” He paused and closed his eyes. “It isn’t dark there, as it looks from the outside, but it is quiet. We pass a lake. We may be in Europe. The landscape does not look English, though it is cool. I am perhaps sixteen.”

“Sixteen?” I wrote this down. “Does that mean you’ve remembered how old you are?”

One of the ways I’d passed the last few weeks was searching for information on Michael’s past. I knew it was out of line, that it was beyond what was expected of me and would probably earn me plenty of disapproving glances in the staff room. But the circumstances of his

arrival here had been too interesting to ignore. I'd spent hours scouring the internet and local records, but with no surname and only a guess for a year of birth... even image searches were useless – they just matched his face to historical portraits of no note.

“I'd say early twenties, from my appearance. Although that's never a clear indicator, is it? How old are *you*, Doctor?” he asked.

“That's not really relevant, Michael—”

“Ah yes, personal questions are frowned upon.” He gave an exaggerated sigh, glancing at the ceiling before closing his eyes.

“Yes, well...” I cleared my throat. Why was a session with Michael always so... disorienting? He was just another patient. Confused, and in need of my help. But I never felt prepared to deal with him. Not once, so far, had he responded as expected – he didn't fit the profile for his diagnosis in any of the usual ways, aside from the delusional part. I had to wonder what it was that separated him from the others.

“Tell me more about this man you think was your father,” I prompted, leaning forward myself now.

Michael's eyes remained closed, voice low and distant. “He says something to me in a language I

understand but cannot name. Not English. Something older. We are on a hunt, though he does not say what we are hunting.” His brow furrowed. “I was proud to be at his side. That he chose me to join him.”

“Did you succeed? In your hunt?” I asked.

“No.” Michael’s eyes snapped open, the magic broken. “I think I would not be here if we had.”

He stared out of the window at the storm, brow still creased. “What do you mean? Here in the facility?”

“The forest was bright, but there was something in the darkness. Beyond the light.”

It was my turn to frown. “I’m not sure I understand, Michael. Were you hurt? Was your father hurt by the thing you were hunting?”

Michael twitched. “I do not wish to discuss it further.”

My notepad was rapidly becoming a mass of scrawls as I hurried to write all this down. His file had grown considerably chunkier since our last encounter, and I had a feeling it would continue to expand.

“That’s okay. We can talk about something else if you prefer?”

He settled back, the awkwardness of the last few minutes already dissipating like smoke on a breeze. “You

know,” he began. “I’ve been thinking about the nature of institutions like this. How they’re built on the assumption that deviation from the norm requires correction.” He drew a finger along the seam of the upholstery, glancing up at me. “It seems to me that the norm itself is in fact, the aberration. That humanity, as it stands, is actually the deviation from something... else.”

Once again, Michael was determined to discuss anything so long as it wasn’t himself. Not an unusual tactic, but not a productive one, either. I tried to redirect. “That’s a fascinating idea, but—”

“I have been reading. Did you know that all cultures across the world have stories of beings that exist outside of human understanding? The Norse had their *draugr*; the ancient Mesopotamians spoke of the *lamashtu*. There are hundreds of examples. Why would distant peoples, with no contact, create such similar stories unless they were based on truth?” His eyes glittered with an inner light. “Maybe that which you call delusion is not delusion at all. Perhaps it is tied to my loss of memories — that I will come to remember that which others have... chosen to forget.”

The rain grew heavier outside, wind battering the

glass of the window so that it shook in its frame.
“Michael, they’re just stories—”

“Are they?” He tilted his head, his eyes narrowed.
“How are we to know? Once we thought the earth to be flat, did we not? We laughed at the idea of vast reptilian creatures walking the planet. A story is only a story until it is proven not to be.” He paused. “A delusion is only a delusion until it is proven not to be.”

I said nothing to this. Michael was too intelligent for his own good – and I couldn’t prove anything to him. But neither could he.

“Your diagnosis—” I started, swallowing. The look he gave me was cold. Knowing. “The only way to prove a delusion is not a delusion is with evidence, Michael. I’m open to hearing your proof.”

He just smiled. “I think our time is up for today, don’t you?”

The session wasn’t scheduled to end for another twenty minutes, but something in his tone made me nod. At the door, Michael paused.

“Sweet dreams, Doctor. Try not to worry about it too much. It cannot be good for your health.”

I sat alone in my office long after he’d gone, watching the shadows lengthen as the storm blackened

the sky. For the first time since I'd started working here, I found myself grateful for the locked doors between his ward and mine.

SESSION THREE

Patient Notes: Michael [REDACTED]

Date: [REDACTED]/[REDACTED]/2015

Time: 2:00 PM

THE THIRD TIME I met with Michael, I was running well behind schedule. My earlier appointment had been cancelled, as the patient in question had been released the previous day.

Since the weather was warmer, I'd decided to get out of the hospital and visit an outpatient who'd recently regained mobility below the waist. Though I'd only known him a few months, he'd been unable to walk for the last six years – past trauma had somehow created a mental block for him, although there was no physical reason for his paralysis.

It had been a bad week. I'd had some health news I was struggling to accept, and the second there was an opportunity to get out of the office, I took it. Yes, it was a visit to a patient I'd got on particularly well with, and yes, I was showing favouritism – but I also needed the damn win. And I got it. Watching him walk across his garden was proof that my work could have real, tangible benefits. Though not every patient was as promising.

By the time I arrived back at my office, sweating and out of breath, Michael was already waiting. The bright afternoon light streaming through the windows should have made everything feel ordinary. Instead, it only highlighted how wrong something was. It took me a moment to register what was wrong: Michael sat in a wheelchair, speaking in a low voice to a male nurse whose name I could never remember.

I pushed open the door, ushering them inside with an apology.

“Would you like to take a seat, Michael, or—” I glanced at the nurse, who'd manoeuvred the wheelchair over to the sofa. As usual, the side furthest from the window.

“I'll remain here if you don't mind, Doctor.”

I nodded, and the nurse left with a perfunctory

“David,” and a quick nod.

The air in the office had grown stale in my absence, and I threw open the nearest window in a futile attempt to dispel the pervasive, metallic hospital taste that clung to the back of my throat. Beneath the window, the ancient radiator clanked and wheezed, struggling to heat the chilly room despite the sun outside.

Michael’s file had sat untouched on my desk since the previous morning. My migraines had been getting worse: a constant building pressure in my skull that made the world seem slightly unreal. Colours seemed washed out, my hearing muffled one minute and unbearably loud the next. I knew the handwriting in those notes would be cramped, blotted, and difficult to read at the best of times. Spending an hour trying to decipher it over the driving beat of my pulse behind my eyes was the last thing I’d wanted to do.

“How are you, Michael?” I asked.

He barked a humourless laugh. “Weak, Doctor. But in body only. I will recover.”

I took the seat across from him, massaging my temples with my thumb and forefinger. A quick scan of his paperwork revealed nothing about why he was in a chair today – it didn’t look as though anyone had been

able to work out where this sudden weakness had come from. His test results were normal – for Michael, anyway – and he ate well, even took his medication now and then. But the side effects of Risperdal were weight gain and restlessness. The opposite of the lean, still man that sat before me.

It was a mystery. I scrawled a quick note that a change to his medication should be prioritised – I wasn't entirely sure why it hadn't been done already, though in fairness, the handwriting in the file was *very* poor.

“Do you know what might have happened to cause this weakness?” I asked, using his own word. Nothing he'd said or done had indicated we should worry about him hurting himself, but Michael hadn't exactly been a predictable patient. I needed to safely rule out that he wasn't the cause of... well, whatever this was.

He yawned, covering his mouth with one hand and resting his elbow on the arm of the wheelchair. “Yes. But there is no need for concern. As I said, I will recover.”

That was exactly the sort of answer I both didn't want to hear and had begun to expect. I'd spent a week now struggling to think of ways to navigate his riddles and puzzles, and still I couldn't find a way in. I remember so clearly, my desperation. The complete conviction that

something important hung in the balance and would be lost if I couldn't make Michael open up.

"It's my job to be concerned, Michael—" I faltered. I didn't want to indulge his delusions, but it seemed like the only way forward. "Do you think your illness is a human illness?"

Michael laughed. It was a deep, charming laugh that invited me in to chuckle along with him.

"Of course it is, Doctor," he answered when he had regained himself. "The most human of illnesses. A direct result of my being here; in such an environment."

"The hospital?"

He shook his head, rubbing at his shoulder and looking away. "It does not matter."

As usual, he was right. His physical illness was peculiar, but it wasn't the reason he'd been admitted or held here.

Silence blanketed the room until even the steady beat of my heart seemed too loud. Above us, ageing fluorescent lights buzzed faintly, one tube darker than the others and casting everything into a gloomy, flickering glow.

While I waited for him to speak again, I squinted down at my personal notes – the ones I kept only for

myself. I'd carried them home with me each night, persuading myself it was only to catch up on my paperwork. But the truth was I'd read back through our sessions at all hours, searching for patterns or clues that I knew weren't really there, replaying our conversations until I had them all but memorised.

"I have remembered some names, Doctor," he said eventually.

I glanced up, my vision blurring a little until I blinked it back into clarity. "That's wonderful, Michael. So, tell me, who are you?"

"The name that came to me first is Swynford." He closed his eyes slowly, long eyelashes creating fantastical fanned shadows. The day outside had grown dimmer, grey clouds swallowing the afternoon sun. In the muted light those same shadows pooled and gathered into the hollows of his cheeks, making his face almost skull-like. When he opened his eyes again, something dark lingered there – not just a lack of light, but something... else. "A surname I believe may be one of many. I suspect I have no family left that might share it, though I recall now, a sister. Isabel. I do not believe her to be a Swynford."

The space between us – only a metre or so – seemed to shrink and disappear beneath the force of his gaze as

it bored into mine. His mouth twitched at one corner, waiting for me to grasp some deeper meaning from his words. It was an odd feeling, to be under such scrutiny from a person such as Michael. My heart expanded within my chest, climbing up my throat and settling there until it was difficult to get my question out.

“Is there anything else?”

He gave a brief nod. “Other names. Miklós. Mikjáll. Variants of my current name, I think. And I have remembered the events preceding my... incarceration. I was incorrect before, you see. The blood on my clothes and skin... it was mine. I had hurt only myself.”

From his expression, I'd have said he was deadly serious, but it just wasn't possible. The police had struggled to find a match for the blood on him, but we were all certain it couldn't have belonged to Michael. There'd been too much. He wouldn't have survived without a transfusion, but there hadn't been a scratch on him when he'd arrived.

All this I knew. I'd built a career out of science, methodology, and fact. I accepted only evidence, not speculation or belief. But Michael's sincerity was plain to see. And though I couldn't explain it, I *believed* him.

No. Belief was not enough to go on when it came to

this man. What I needed to know was *why* he believed it.

“There was a lot of blood, Michael. You said yourself – you’re not injured.”

“That means nothing!” He snapped. “I keep telling you, I am not like the others. There is nothing wrong with my mind, Doctor. It is my body that confounds me.”

He tried to push himself up from his chair, and I watched without a word as his arms shook, unable to lift him. The effort drained what colour there had been in his face. For a moment, his features were almost translucent under the harsh lighting, a spiderweb of blue veins visible beneath pale skin. His legs collapsed under his weight, and he fell back into the seat with a thud that belied his lean form.

Situations like this were where I struggled most. My instinct was to help, but I could tell he was driven by frustration and confusion, and to try would only make it worse.

A tight grimace twisted his face as he glared, nostrils flaring. Something in the recesses of my mind recoiled at the return of his interest, to be subjected to his black stare without restraint. I felt as if he saw through me,

and within me – to everything that I was and wanted to be. My pulse quickened.

When I thought back on it in later years, I realised it was the same feeling I'd had as a small child, convinced something was waiting for me in the darkest corners of my bedroom. Except I'd been twenty-six years old, sitting in my own office in broad daylight, and the *thing* watching me was... just a man.

It was an insane notion – and I was more familiar with insanity than most. But I wasn't the only person so oddly affected by him. He'd been here a matter of weeks, and yet I'd noticed an extraordinary change in behaviour when it came to the staff that worked with him most often.

When we discussed Michael directly, the staff would tell me how charming and normal he was, how helpful, how much they enjoyed their shifts when he was around. Some of the nurses spoke of him with sincere warmth, and even the orderlies – usually cynical about difficult patients – would light up when his name came up.

Conversations like that had my intuition singing. I'd begun observing more closely. Soon, I noticed that chatter would die off when Michael entered a room, only to resume with exaggerated life a moment later. Where

I'd expect a wary patient to avoid eye contact at any cost, instead I'd seen their stares following as he left, drawn to him much as I found myself pulled in. For some, there was a compulsion to seek him out, and many patients reported feeling lighter after speaking with him – though none had been willing to share what was discussed. After a while the staff's attitudes changed too – despite reporting general cooperation, I'd spot them lingering in the hallway outside of his room, checking on him more often than some of our most delicate and dangerous.

All this flashed through my thoughts while he regained his composure.

“You believe me.”

I nodded: a short, edgy sort of nod.

There was a coldness to his expression, now. “But you still think me delusional. Not quite in my right mind; missing a few key parts in my concept of reality?”

His phrasing was... off. The words were familiar, but they weren't Michael's – he usually chose his words with precision, and this lacked it. I remember pondering who he was quoting for much of the remainder of the session, though I didn't bring it up.

“I don't think you're in a healthy place, Michael. I worry that you're not seeing things clearly. But that's why

you're here with us." I gave him a tight, forced smile.

He lifted his chin slightly, considering me with that unsettling intensity. "You believe that, also."

"Michael, come now." I put my head in my hand for a moment, dizziness washing over me out of nowhere. "I might be crossing a line here, but there's just no evidence to corroborate your story. I understand that it's... frustrating, but the facts are all we have." I couldn't see the harm in trying to explain my reasoning. "You arrived here with no name, covered in blood and with a stubborn streak that's making our job here very difficult. The police couldn't identify the blood, and I think you know that. But they're certain it wasn't yours."

I waited for a reaction, but he only drew in a slow breath through his nose. "I appreciate that you've been more cooperative recently, but you still won't take your medication consistently. Half of the time the nurses tell me you're pleasant and engaging, the other half they're saying you've got the other patients talking about things that... honestly? They worry me. Now what am I supposed to make of all that?" I rubbed my temples again. "I want to believe you, Michael, I really do. But right now, all the evidence points to you being a young man who's suffered through something traumatic and

needs help to process it. It's not a failing on your part – it's just what trauma does to people sometimes.”

I'd said too much. I knew it as soon as the words left my mouth. Bit by bit, my investment in this single patient had grown and spread until it was hard to differentiate between professionalism and curiosity. There was no excuse for the vulnerability I'd confessed to. No excuse for the pleading... but I didn't regret it. In fact, hope flared – that he might see my openness and respond in kind.

I should have known better.

He didn't even react, staring out of the window. The afternoon breeze had died completely, and the office remained as stagnant and close as ever. Everything about him was utterly still. Other patients shifted, tapped fingers, crossed and uncrossed their legs. Michael had too – at first. Now, he remained motionless for minutes at a time, breathing so quietly I had to check to see if his chest was still rising and falling.

“I would like to go into the garden. I have seen it, through the window in the common area. The others are allowed out. I wish to visit it, too.”

“I—” I'd expected some reaction to my speech. Not this. “Michael, you know we can't let you do that.”

He laughed again, though there was none of the carelessness of before. For the first time in a while, I thought I detected that unusual accent in his words.

“I am dangerous, yes? This is to do with the blood?”

“I’m afraid so.”

“It was my blood.” He shrugged. “I may heal too quickly for proof to remain, but it was my blood.”

“We don’t think so, Michael.”

He shook his head. “No. You would not.”

THAT EVENING, I TOOK THE TIME to read through the other staff’s notes on Michael from across the week. His illness had come on out of the blue, and his legs had given out on the way to lunch the previous day. No one could agree on where he’d been in the hours preceding the incident – though he was considered a dangerous patient, apparently the entire staff had become surprisingly lenient. Some said he was in the day room, others that he’d been with another patient in a private room. One of the nurses thought he might have been playing chess.

The on-call physician had examined him for every possibility and could find no fault with him – which

suggested it was self-induced; some sort of mental conflict that had manifested physically.

The rest of the staff had little to add beyond a shrug. He'd behaved well enough both before and after the incident, though there was something unknowable about him that had one or two of our more sensitive patients on edge, avoiding him at any cost.

I was about to close the flimsy cardboard folder when I saw it, at the bottom of the notes: my own handwriting, scrawled in red:

'Not quite in his right mind.

Missing a few key parts in his concept of reality.'

4

SESSION FOUR

Patient Notes: Michael Elias Swynford

Date: ■/■/2015

Time: 6:00 PM

AFTER THAT MEETING, I COULDN'T get Michael's words out of my head. My career had been built around science and logic, and the things he claimed were impossible – but I had to wonder...

It was the second time he'd shown an aptitude for insight into my mind. And I couldn't argue it was smart interpretation of body language or good guesswork anymore. *In theory*, I was content to accept there were mysteries left for medical science to unravel about the human brain, but to sit across from Michael and

seriously consider if I was in the presence of one of those mysteries... was something else entirely.

The distraction – in hindsight, my obsession – quickly snowballed. My health issues escalated while I tried to pretend they weren't a concern, and my devotion to unravelling Michael meant I began to behave irrationally at work. I grew forgetful, was late to regular appointments, and worse, inattentive with my other patients. Every task felt like a diversion from the real goal: to see Michael again. To learn all I could from him and about him.

I presented the board with a proposal for an in-depth, one-on-one case study, but they wouldn't hear of it. Maybe my colleagues had noticed my fixation, or maybe it was just bad timing, but one cool Tuesday morning, an orderly dropped by to let me know Michael wouldn't make the session that day. He'd been moved to a solitary observation unit. Though his physical strength had returned – the wheelchair was gone in a matter of days – nine further days in isolation took a different toll. Other staff characterised it as his first manic period, though I wasn't sure I agreed.

Our unit might not have been a state-of-the-art hospital, but we weren't so far behind the times that

solitary time was a standard approach for patients. However, in Michael's case the idea was that he'd calm himself – since medicating him hadn't. Though I'd never have admitted it at the time, I was thrilled to be able to observe his behaviour around the clock – not just when he deigned to show himself.

What none of us had prepared for was Michael's reaction to forced isolation. Neither the nurses nor the orderlies could control him. A quick look at the video footage showed as much.

Getting a copy of the surveillance recording was easy. Like most similar facilities, our security system was worryingly outdated – mostly because the board repeatedly refused funding for digital upgrades. All it took was careful observation. An opportune moment when the security guard on duty in the CCTV room was distracted by conversation with a young night nurse. In less than a minute, the discs were in my briefcase.

I never returned them – I just took them home and kept them there. Professional analysis, I called it. Each night after work, I would sit in my darkened apartment until the sky outside grew light, curtains drawn against the dawn as I rewound and replayed, watching him move around the room, frame by frame.

My reasons were less reasons than they were lies I told to comfort myself. Michael paced the small space like a caged animal, muttering in what sounded like multiple languages – some I recognised, and some that seemed older. He would stop only occasionally, usually to stare directly into the camera for hours at a time. In the day, he lay, lethargic and unmoving on his cot while the sunlight shone through the high window above his bed. But when the sun set, despite the grainy quality and ghostly green tint of the camera's night vision... that was something to watch.

I would find myself squinting at the screen, desperate for some small clue as to what was going on. There was a bizarre, hypnotic quality to his movement – fast and bird-like in its precision as he traced words and designs onto the walls with his fingertips. Symbols that blazed behind my closed eyelids long after I looked away, like staring too long at the sun. It was behaviour beyond any textbook I'd studied, and I watched, enraptured in the patterns he sketched until my eyes burned and my head pounded with a building intensity that was becoming far too familiar.

Despite all that, there were no answers to be found in the footage. Only the weight of failure, heavy in my

heart. A sadness that someone so remarkable as Michael was moving backwards rather than forwards in our care. And when he finally returned to my office, he was... changed.

“HELLO, MICHAEL. WOULD YOU *care* to take a seat?” Wariness about how he might react bled into my voice, hushed as though speaking to one on their deathbed rather than a troubled young man. In the few steps he’d taken into the room – edging around the stripes of evening sunlight on the carpet – I could already tell he was agitated, despite his return to the main facility. Each movement was jittery and precise as he straightened the shirt he wore, which was far too large for his frame.

“Care? Would I *care* to take a seat?” His muttering was so quiet it was as though he were talking to himself. The words hung, suspended between us, and the usual sounds of the hospital seemed to pause too, the building holding its breath.

Tugging at the knees of his trousers as he sat – a gesture that reminded me inexplicably of my great grandfather – his eyes wandered, unable to settle on any one thing. Avoiding my gaze perhaps. I made a hasty note.

We were silent for a minute or two while I observed him. Michael seemed powerless to stop himself shuddering, as though the office was cold rather than hot and stuffy. Fingers splayed across his thighs, he twitched at my every movement, though he sat upright as a soldier. His gaze roved from the window to the door, to the desk to the coffee table and back again.

Hours of watching surveillance footage hadn't prepared me for the difference – by far the worst I'd ever seen him. An outsider might say he looked starved; the skin of his face stretched tightly over his high cheekbones. But the nurses and orderlies insisted he was eating well. Either way, Michael's striking features were barely identifiable. And the composure I'd come to associate with him was gone.

"How has your week been, Michael? It's a while since we spoke. I'm told you've had some problems, if you'd like to talk about them?"

His dark eyes flicked to my face for the briefest of moments, and away again.

"*People are best punished for their virtues.*" He laughed quietly, hands twisting together in his lap. "I behaved. For *weeks*, I behaved. Resisted what came naturally. Now—" With each word, Michael's voice

grew louder until his usual rasp was almost shrill. “Look upon me, Doctor. Do I deserve this? For what I have done?”

I resisted the urge to push back in my chair and put some distance between us. “Do you think you’re being punished, Michael?”

“Clearly! Haven’t you been listening? It was not supposed to happen like this.”

“You know I’m here to listen to you,” I spoke slowly. “Why do you think you’re being punished? Who is punishing you?”

Every twitch, every shudder, disappeared. He froze, statuesque, long fingers gripping the chair so tightly that his knuckles turned white. The look he gave me was somehow both pitying and disparaging at the same time, and I immediately felt like a fool – though I had no inkling why.

“I punish myself, Doctor,” he enunciated each word carefully. “Who else could?”

Though there’s nothing about it in my session notes, I still remember how his words and tone disarmed me. The doubt that clouded my already aching head. I didn’t understand what he was telling me, unless he meant he was behaving this way *intentionally*. And true, he seemed

able to turn it on and off if this reprieve of stillness was anything to go by... It almost sounded possible, though unless it was some unusual demonstration of narcissism, it didn't fit his diagnosis in the slightest.

"You're punishing yourself." When I finally spoke, it was as much to myself as to Michael. "Why?"

"Because... because I cannot help it, Doctor. Are you able to stop yourself when you feel guilt? Feel terror?" He clamped his hands firmly down between his thighs as though they, too, were out of his control. "When your body is flooded with sweet adrenaline," his voice dropped to a whisper, eyes half-closing. "Your heart hammers against your ribs like a wild animal yearning for release. Your pulse throbs, building in your throat until you struggle to breathe, your blood so hot and fast you can taste the tang of salt, nerves singing discordant harmonies—"

He cut himself off, eyes snapping open to find mine. I swallowed, the bite of copper filling my mouth. "What do you feel guilty about, Michael?"

Here, in his current state of mind, I felt with sudden and absolutely certainty that I was about to learn something crucial. That if Michael were ever to reveal himself to me... it would be now.

My heart raced, pulse pounding in my ears as the heat of anticipation flooded through my body. I was desperate for him to speak. So, of course, he remained silent.

“I would like to understand.” My confession was barely a murmur.

If it was possible, Michael grew even stiller as he looked up. Eyes wide, his expression was that of an animal being led to the slaughter.

“I am *alone*, Doctor. I desire to tell you innumerable things, but there are such truths that I can never share, much as I might wish to divulge them.” He leaned forward and lay the very tips of his fingers on the dark glass of the coffee table that separated us. Pressing until the safety glass creaked beneath his touch, a sharp creak split the air. Irrationally, I worried it might shatter. “*If you gaze long enough into an abyss, the abyss gazes back into you.*” He retreated in a movement I barely saw, fingers twining together again. “That is the truth of it. I wouldn’t wish to bring that upon you.”

The quote was vaguely familiar – something from a philosophy course I’d briefly taken at university. I shook my head, trying to place it so that I could play along with this game – this charade – whatever it was. It was

the only way I could hope to get the answers I wanted from Michael, even as he sat there and boldly told me he would never share his secrets. But I wasn't so fresh that I didn't yet have a way to wheedle things from him. It was part of my job, after all.

"Is that your decision to make? Shouldn't it be up to me?"

"Do not be ridiculous, Doctor," he snapped. "None can choose well for themselves."

Michael stood and crossed to the window. As we'd spoken, the light had faded, filling the room with a dusky pink glow that gave his skin a warmth I'd never yet seen. Without a word, he began to pace back and forth between the door and my chair, his footsteps unnaturally quiet on the carpet.

"What you must realise, Doctor, is that humanity does not understand what is best for it. One might decide one thing, but because a human is incapable of perceiving the world both clearly and objectively... that decision is bound to fail."

"So..." I paused, gathering my thoughts. "You're saying that, because I'm not able to be objective about my choices, you can't confide in me?" It was true. I'd long since stopped treating Michael like my other patients –

he was too intriguing.

“Yes.” He sank back onto the dingy grey sofa, growing still again, before bursting out: “I *tried* to fix it, you know.”

I waited, wondering what he meant. “Fix what?”

“Myself. I am... broken.” He grinned, the skin around his mouth stretching grotesquely. “I have been for years. Of course, I sympathise with you the most. You’re trying to fix me too.” The smile faded. “But if I could not manage it, why should you be able to?”

The hair on the back of my neck stood up, a prickling, creeping sensation that quickly spread through my limbs and pinned me to my chair like a weight from above. Above, the fluorescent lights flickered, casting a brief, dancing shadow across his face that did nothing to ease my apprehension.

“What did you do, Michael?”

His voice was low, broken glass on icy tarmac. “I bled. Do you not remember, Doctor?” He watched me closely, fingers arched. “I tried to cut it out. To get rid of it. It poured from me, at first. Thick and fast. I thought it must be working. But... I healed, as I always do. And now we are here again, the old routine. The lie.”

The temperature in the room seemed to drop several

degrees, and I fought the urge to shiver.

“You’ve been here before?” If he had, we had no record of it. His file was created new when he was brought in.

He shook his head, dropping his gaze. “Similar places. Many times. I... always try to rid myself of it. I cannot help but try. It will likely be the ruin of me.”

This was new information. When a patient arrived, our policy was to investigate their background, their family life, medical history and the like – to see if there were any previous problems. Michael had been without a name for weeks, so this procedure was overlooked except for the pitiful amount of research I’d managed in my own time. We’d had no luck tracking down the sister he’d mentioned.

“What were you trying to get rid of, Michael?”

He looked up from his lap, the intensity in his face burning hot across the room. The last traces of daylight vanished, and the harsh glare of the overhead lights somehow made the shadows around his eyes appear deeper still. “My conscience, of course.”

SESSION FIVE

Patient Notes: Michael Elias Swynford

Date: ■/■/2015

Time: 8:15 AM

A WEEK WAS TOO LONG. The official schedule that dictated how often I met with patients meant nothing when Michael's words kept circling through my mind in an unnerving, menacing mantra.

'My conscience, of course.' What had he meant by that? That he believed his conscience was a physical thing, to be removed? Why? What for? The questions never stopped drumming around in my skull, worsening every headache to the point that I regularly had to sit

down, close my eyes and try to calm myself down. And still, I found myself making excuses to walk past his room, hoping for a glimpse of him through the door.

Of course, it didn't take long to come up with a loophole. On Sunday morning, a few days after our last session, it occurred to me he'd been denied the chance to visit the gardens. That was something I could use. I've never dressed so fast, skipping breakfast to arrive just before the night shift left at eight, and the day staff came in. Sundays were often quiet, and that would be to my advantage, too.

I found Michael in a communal area, reading what looked like a book of Italian poetry with a title I couldn't decipher. He turned to smile at me while I was still several metres away, somehow sensing I was there from afar. It was the first time I'd visited him directly outside of our office hours.

"Hello, Doctor," his smile was welcoming. Amused. "Would you care to take a seat?"

The role reversal wasn't lost on me, and I smiled back politely and took the chair across from him. "I was wondering if you still wanted to visit the gardens, Michael? The weather isn't particularly bright, but I'm sure we can find something to keep you warm if you feel

up to it?” It wasn’t much, but compared to the dullness of indoors, the sparse greenery and frozen bird fountains would probably be a pleasant change. And we were less likely to be overheard, since no one would be outside on a day like today.

His face lit up, more youthful than I’d ever seen him. “Certainly, Doctor, but why the change of heart?”

“Well, now I’m available to accompany you, Michael.” I stood, and he narrowed his eyes at me. He’d have been allowed out before – he’d met the criteria, by now. But no one had been willing to accompany him.

The shift in the staff’s attitude toward Michael had been swift. Where once they’d spoken of him as a friendly, charming young man, they now avoided him. When I’d challenged Nurse Green about it, she went quiet – which given she was one of the friendliest staff on the rota, was unusual. She busied herself with a spreadsheet on the computer and made some vague comment about how he knew too much. I wondered how many of them had seen the footage from his time in isolation, and what effect that might have had on their attitudes.

Michael’s response drew my attention back to the present. “Perhaps that is a part of it. But you also wish

to speak with me, yes?”

His perceptiveness was expected at this point. “Yes.”

Outside, the grass was hidden under a blanket of silvery snow, though thankfully the caretaker had cleared the path. Beneath its disguise, the garden looked more beautiful than it really was; weeds and untidy flowerbeds buried, years of wear and graffiti hidden from sight. Sunlight bounced across fragments of ice on the ground, creating tiny, sparkling shafts that illuminated the route we walked despite the leaden skies above.

What little clothing Michael had was confiscated for investigation when he arrived, and across our sessions he’d turned up in a variety of odd and incorrectly sized bits and pieces, scrounged from lost property. Now, he wore a coat taken from the charity box. Swathed in black wool, he looked impeccably smart but vividly pale.

“You seem happier today, Michael.”

“Yes. When was it I last saw you, Doctor? My timekeeping has been... hazy, of late.”

“Four days ago. I wanted to meet with you sooner, but it took a while to find an acceptable excuse. I’m only supposed to see you during our sessions, but I assume you already knew that?” I didn’t make a habit of sharing so much, but then Michael was not the usual patient.

“What is it you want to talk about, Doctor?”

Stopping just ahead on the path, I turned back to face him. He stood arms loose at his sides, his face lifted to the murky clouds above, eyes closed. I’d have expected to see some pinkness in his cheeks, but the cold didn’t seem to have an effect on his complexion. If anything, he was revelling in the frosty, harsh surroundings.

“You gave me a lot to think about, last time. If I’m honest, I’ve struggled to concentrate on much else. But I’m concerned you’re worried on my behalf. Which worries me.” A touch of laughter bled into my voice, and I waited for his reaction. Opening his eyes, the only expression I could discern was that of an adult listening to a small child. “You don’t want to share too much with me. But if I knew more, maybe I could help?”

I thrust my hands into my pockets, stretching my fingers to work the cold and stiffness out. It was my job to help him, but when I offered it this time, I knew it had nothing to do with psychiatry. Laying it out like that – exposing my desire to understand – felt vulnerable in a way I hadn’t experienced in years.

When he didn’t respond, I continued along the icy path. I heard only my own footsteps but caught glimpses of Michael in my peripheral vision. Salt crunched under

my boots, but his footsteps made no sound at all.

“You are right, Doctor. I *am* concerned for your welfare, and that of everyone here – patients and staff. But should I explain my reasoning, you would not believe it. And it may well change you in ways I do not think can be reversed.” Though his rasping voice was calm, there was an undercurrent to it that put me on edge. A threat, though he hadn’t really said anything at all.

“Did you know I’m reconsidering your diagnosis?” Admitting I was wrong wasn’t exactly my strong suit, but it was an ideal way to test how much he knew. My diagnosis was solid as far as the other staff were concerned – I hadn’t shared my change of heart with anyone.

“Yes, Doctor, I know. I am glad.”

“But you still don’t think I’ll believe you...”

“I do not know if you have the capacity for such belief.” He drew a pale hand along his jaw, and it struck me that there weren’t so many years between us, really. It was easy to forget, when his expressions were often thoughtful: worldly and ancient in a way I’d never had to try to describe before.

“We haven’t talked about your memory for a while.

Have you remembered anything more?" We sat on a bench, brushing away the snow.

"Many parts are coming together in my mind. While I feel there are still some key details I'm missing, I also feel a surety that I will find it, and soon. When I do, I will understand everything that has happened, as I have understood it before."

"Before?"

"I am repeating myself. I told you I had been in other places like this; other hospitals, did I not?"

I nodded.

His voice grew distant, as though he were speaking from memory. "It is a cycle... I wake with no knowledge of myself beyond a name. No understanding of what I am... my life and story is lost to me. Gradually, pieces return – fragments of faces, places I've lived, deeds and misdeeds... For a while I am whole again." He pressed a palm to his forehead, eyes squeezed shut. "The memories are heavy. A burden that grows harder and harder to bear. I break beneath them, unable to deny who and what I am, and the terrible things I have done and will forever continue to do." Opening his eyes, he dropped his hand. "But my mind protects me from the madness. I forget once more. I have peace until something – always

something – calls me back.”

I admit, I sat there, blinking, my thoughts whirring. The implications of what he'd described were... enormous. He'd named a pattern of dissociative amnesia that defied, well, everything. Every case study I'd ever encountered. I wouldn't be surprised if no other doctor had come across the like, either. Dissociative disorders could cause amnesia, absolutely, but not in the systematic, cyclical way he'd described – a complete personality dissolution followed by gradual reconstruction, repeated across what sounded like years or even *decades*.

Mentally, I catalogued the medical impossibilities: the regularity of the memory loss, the consistent pattern of recovery, the way he described '*breaking beneath*' his memories as though they were some predictable psychological threshold. It made no sense, and yet the way he explained it...

Unspeaking, we remained there as the clouds above thickened and darkened, threatening more snow. He didn't speak, waiting patiently for me to process his words with a bland smile that I'd have found infuriating under any other circumstance.

There was truth there, in his voice. Not delusion.

Not just conviction, but truth – and an age-old weariness that was undeniably as real as he was.

“Michael, what you’re describing isn’t medically documented. Not in the way you’ve presented it,” I said, though as the words left my mouth, doubt crept in. We were long past the realm of a psychiatrist analysing symptoms, instead stumbling around the dark bounds of human psychology and finding it... fragile. *Flexible*.

Michael waved a hand at the building behind us with a resigned sigh. “This isn’t really what you wanted to talk to me about. You wish to know why I attempted to get rid of my conscience.”

He was deflecting, steering me away from the deeper questions. Maybe he sensed I was reaching the limits of what I could professionally accept – as he’d predicted.

“What did you do, Michael?” I asked quietly.

He raised an eyebrow and looked away. “I have done many things. I told you once that I was not a pacifist. The truth is, sometimes I enjoy it.”

“What do you mean? Enjoy what?”

Michael just smiled. “Do not make the mistake of believing I am your friend, Doctor. It would not be in your best interests.”

That hurt, I remember. It shouldn’t have – Michael

was a patient, not a friend – but I’d thought we’d reached an understanding. I had to stop myself from making my excuses and leaving, my heart pounding painfully in my throat.

Instead, I swallowed it down and pinched the bridge of my nose. I would not to be put off. “What exactly are you warning me against?” I asked, though I wasn’t sure I wanted to hear the answer.

He tilted his head, studying me with those dark eyes that saw far more than they should. “You wish to help me, Doctor. To understand. To fix what you believe is broken.” His voice was soft. “But what you perceive as illness is in fact, exactly as it should be. The chains my mind has created to control my urges have been hard fought for. In truth, the thing you seek to cure... is the only thing standing between those around me and something far, far worse.”

A scattering of tiny snowflakes blew up from the ground around us, joining the larger, wetter ones that had begun to fall as he spoke. They muffled the world around us, creating a bubble of isolation that made Michael’s presence feel... intimate. And unsafe.

“I don’t understand,” I said, though I was beginning to suspect that I did.

“No,” he murmured, sweeping snow from his dark hair. “Neither should you wish to. Your ignorance is the best protection you have. As is that of everyone else here.” He stood, extending a pale hand toward the building. “Perhaps we should return. You must be getting cold.”

6

SESSION SIX

Patient Notes: Michael Elias Swynford

Date: ■/■/2015

Time: 1:00 PM

NOT LONG AFTER, I WAS asked to supervise a group therapy meeting when a colleague called in sick with the flu. The session followed on from an art class earlier in the day, and though it was in my contract that I had to be flexible – I'd had enough issues of my own, so I knew the process – I couldn't think of anything less enticing than sitting in a room full of patients who smelled strongly of acrylic paint.

It wasn't until I arrived that I discovered it was the

same group Michael was in. Given his recent cryptic warnings and evasiveness, the idea of observing him as he interacted with other patients was... intriguing, and my mood lifted considerably.

I arranged the chairs in what I hoped was a casual circle, though I'll admit I chose the seat that would give me the clearest view of Michael. Arranging the files on my lap, I shifted my chair with an unpleasant scraping noise, trying to make my position look natural. No, it wasn't exactly clinical anymore – I knew it. But I'd always been too curious for my own good.

It was a small group – one patient had been recently released, and we hadn't had much new intake for weeks. Including Michael, there were only five: a young woman who I'd never seen before – likely a direct patient of another doctor – who informed me quietly that her name was Janet before taking the chair beside me. A quick glance at her notes filled me in on some of the major points – she'd struggled with depression for years, and during a low point last summer, had decided to check herself in. Her progress had been slow, but she was content for now.

The seat beside Janet was taken by a man in his late fifties, heavily greying at the temples and square-jawed

in a way that gave him a stubborn edge even when he was relaxed. George had been diagnosed with Dissociative Identity Disorder decades ago and was considered a remarkable case. I hadn't worked with him myself, but according to his file, his most dominant alter was a female who preferred to be called Lillian and presented on a semi-regular basis.

On my other side, between Michael and myself, was a man around my own age – mid-twenties or thereabouts. John was someone I *had* worked with, though with limited success. He'd been mute for nearly seven years, and while he occasionally interacted non-verbally, he was still a bit of a mystery among the staff. Though a polite and well-liked mystery.

Finally, directly across from me, was a blonde woman in her early thirties who'd recently been diagnosed with Bipolar Disorder. She'd been resistant to the diagnosis, and for her own safety her family had requested she stay until she was on a regular medication schedule. It was only her ongoing refusal to cooperate that kept her with us. Sarah had a strong personality, and a deep dislike for most people – though that didn't stop her from showing an interest in Michael, who she dragged her chair closer to as she took her seat.

It was the group's first session since Benjamin – the recently released sixth patient – had left. Ben was the sort of patient most facilities had one or two of – someone who'd likely need support for life. His recent dramatic improvement had shocked us all. However, he'd made such leaps of progress over the last few months, he'd been released. Most of the staff were still in shock.

Afternoon light filtered through the high windows, casting long rectangles across the worn linoleum. One of many signs of the usual institutional damage that I'd long grown used to – scuff marks from wheelchairs, chips in the paint where furniture had been carelessly moved, and a persistent damp smell that no amount of industrial cleaner could mask.

A stranger amongst them, Michael sat in the chair he'd chosen – carefully placed directly between two bars of sunlight – magnetic in his lack of movement. It was all the more noticeable when contrasted with the constant adjusting, leg jiggling and arm crossing of the others.

I waited until the chatter came to a natural lull before bringing up the morning's art therapy class.

Sarah was the first to volunteer an answer, fiddling with her sleeve as she recalled her painting. I noticed one

of the ceiling tiles had a brown water stain spreading across its corner.

“I painted a fairground. You know, somethin’ colourful. I mean it’s dull as hell in here, there’s fuck all to do. We could do with summat to cheer the place up.” As she spoke, she glanced up from her lap at Michael beside her, gauging his reaction to her words from beneath her lashes. “It had this huge Ferris wheel, and bright tents and stuff. It was—” She swallowed. “I thought it was pretty good.”

“Looked like a kid’s finger painting.” George’s voice was a touch higher than it had been a few minutes ago, indicating Lillian was dominant. “If that thing goes on the wall in here, I’ll have something to say about it. Surely a nuthouse is supposed to be calm and soothing, not covered in childish bloody doodles?” He looked to me for agreement. Honestly, I privately agreed.

“I’m sure the painting’s lovely, Sarah.” I smiled at her and she smiled back, a nervous pressing together of her lips that told me she wanted me to like her, but she didn’t trust me yet. “We’ll be hanging them in the social area for a while. I don’t think that’s unreasonable, so long as everyone gets a fair shot to show off their work?”

“S’pose not,” George said. “Mine was alright.”

“What was it you painted, Lillian?” Michael asked before I could respond, adjusting his position – a small shift that kept him in the shadows cast by the window bars.

“Sea. Storm clouds. None of her *cheery* shit.” He jerked his head in Sarah’s direction.

“That sounds fascinating.” I tried for an appeasing expression as I turned to the other side of the circle. It was my role to prompt participation from everyone, not just the most vocal. “Janet, how did you get on?”

She didn’t say anything; only stared up at me, unblinking.

“She did trees. She was next to me. A forest with people and a ton of trees,” Sarah piped up. “It was all blurry though, you couldn’t see their faces or anything.”

A low, gravelly voice cut across the circle. “Often, I paint from memory. But our memory is not always as clear as we might like, so the faces may blur or lose detail. Is it that way for you Janet?”

Michael’s attempt at defending Janet’s artistic choices didn’t seem to be appreciated. Glaring into the centre of the circle of chairs, I wouldn’t have been surprised if the lino had burst into flames under the intensity of her stare. I couldn’t help but wonder if he

regularly got involved in the group like this, or if my presence was the catalyst.

Janet continued to ignore him, so I turned to Michael himself. "Did you paint yesterday, Michael?"

He steepled his fingers, leaning back in the folding seat as though it were a throne. "Yes, Doctor. I painted. Though I was dismayed to see the lack of darker hues among the colours. Where were the heavier blues and greens; the black? It seems a shame to leave them out when the world is an array of wonderful shades."

"They wouldn't really go with the furniture in the social room." I raised an eyebrow at him, though I hoped he wasn't serious.

Sarah laughed, too loudly, throwing another look at Michael as she did. When he didn't acknowledge it, her smile faltered for just a moment before she forced it back into place. She turned her attention back to Janet.

"Managed to make them trees look good and depressin' enough without any black, didn't you Jan, love?" There was a sharpness to her tone I didn't like the sound of.

"Leave her alone," George spoke slowly, his voice deeper again.

"I enjoyed your painting, Janet," Michael said,

angling his seat towards her. She scowled back at him, glancing first at John, who as usual, remained silent.

“Don’t. I know what you’re doing, and it won’t work.” Her voice was soft, but the disdain was clear.

“Mine had trees. Where’s my compliment?” Sarah said, though she was staring into her lap, and didn’t look at Michael.

Speaking only to Janet, he matched softness like for like, though there was a thread of agitation running through it. “Why are you so opposed to my helping you? I really cannot understand it.” His fingers tightened as he wrapped them around the arms of his chair, the metal creaking. “What do you have to lose?”

“What’s this about, Michael? Janet?” I asked quickly, shuffling my papers to draw their attention and hide the faint shaking of my hands. How was he planning on helping her?

“He *thinks* he knows what I want. That he can make it all go away, and I’ll fuck off into the sunset to live happily ever after like the rest of them.” Janet snapped, volume increasing. “And none of you idiots do anything to stop him.”

Did she mean the staff? It sounded as though whatever she was talking about wasn’t a unique case, so

who else had Michael... helped?

“Some of us know a good thing when we see it,” Sarah muttered, her head snapping up to watch Michael with something akin to calculation.

“I only wish her the best.” Michael lifted his gaze lazily to meet mine, and the stuffy room seemed to grow several degrees colder. Everything in his face was a warning to keep out of it – that he’d been working on her for a while, and he didn’t want me interfering. I had no idea how I could infer so much from a single expression.

“Oh yeah, we know you do!” Sarah got to her feet, grinning from ear to ear as she swayed in Michael’s direction, turning a lock of hair between her fingers. “She gets all the attention, she does. But I’m up for a bit of help, if you’re offering?”

This was the part where I should intervene, but I sat, frozen. I couldn’t decide if she was mocking him or misguidedly trying to appeal to his affections. She moved closer, her intent unmistakable. In seconds, my decision was made for me as she loomed over him, one hand on the back of his chair, leaning in so that her chest brushed his face.

Though it seemed impossible, Michael grew even

more still, bringing his gaze slowly up to meet Sarah's. Something in his posture shifted – not quite tension, but the absence of his usual calm. For a split second, his eyes looked completely black in the dingy light.

Beside me, John rose hesitantly from his chair, and I couldn't help but agree that this entire situation felt suddenly... unsafe.

"Sarah, sit down." Standing, I signalled an orderly from across the room, who was completely absorbed in his phone. He hurried over. "You can't just approach people like that. Calm down and come away."

Sarah leaned in closer to Michael, attempting to straddle him and pin him to the chair. Before I could reach them to pull her back, Michael took hold of her upper arms and pushed her away with such force that she seemed to fly through the air, across the breadth of the circle, with a speed that couldn't be natural. She skidded backward across the linoleum, and with a sickening crack, her head hit the metal leg of John's chair – a harsh thunk of steel meeting flesh that reverberated in the abrupt silence.

Eyes fluttering closed, she twitched once and went limp.

The room erupted. Janet scrambled backward in her

chair, the legs scraping on the floor as a strangled cry escaped her throat. John bolted upright, gasping as though for oxygen, panic written across his features. George – or it might have been Lillian – raised a shaking finger at Michael and whispered, “What the fuck are you?”

I couldn’t move. The pulse in my head beat so loudly it was all I could hear. Two orderlies pushed me aside, checking Sarah’s pulse and trying to lift her without doing any damage.

He’d said he wasn’t human. I’d started to believe, but... No normal person could have thrown someone that distance, with such strength and speed. The physics were all wrong. Sarah had to weigh at least nine stone, yet Michael had launched her through the room as if she were made of tissue paper.

Across from me, Michael stood quite casually, brushing down his trousers as though they were dusty. Straightening to his full height, his dark eyes found mine and held them, calm despite the chaos.

“See?”

7

SESSION SEVEN

Patient Notes: Michael Elias Swynford

Date: ■/■/2015

Time: 9:00 AM

IT WAS SEVERAL DAYS BEFORE I could break free of the visual of Sarah flying across the room. I was obsessed with it – the speed Michael had thrown her with, the strength required to overcome the physics of her weight and size. Everything about what he'd done was too easy. And he'd been so comfortable with the violence... I even wondered if he'd done it to show me – to demonstrate, right there, the first time there had been anyone really present beyond the two of us. It was a haunting thought, and I should have been terrified.

Part of me was. But my fascination was stronger.

Of course, Michael's behaviour had more far-reaching consequences than just my interest – and my curiosity had piqued long before I'd been called in to oversee group therapy. Michael was confined to his room for two full days, his meals delivered. No one was permitted to speak to him until a full investigation was conducted – into both his actions, and... well, mine.

The paperwork was a nightmare. Never, since I'd started work as a psychiatrist, had I been forced to lie. But I had no choice – I couldn't admit to my suspicions about the truthfulness of Michael's claims, and I had to find some way of explaining my lack of appropriate action in the moment. On paper, I called it shock. Secretly, I'd wanted to see what Michael would do – I'd let it happen. Something I'd lose my licence for immediately, if anyone ever found out.

Sarah was up and about within thirty-six hours. She was being closely watched, but overall wasn't as hurt as she'd first appeared. Though I doubted her quick recovery was simple good luck – I'd seen the way Michael watched her as she was carried to the infirmary, and suspected he might have intervened.

Whether he had or not, I was still left in an awkward position. The orderlies might not have been paying as much attention as they should have that day, but the patients had. Each of them was questioned, and as a result – despite my report on the event – I was kept from Michael. The nurses and orderlies developed an annoying habit of popping their heads in during my sessions, and I quickly realised no one trusted me to keep my patients under control anymore.

“MICHAEL. WOULD YOU CARE to take a seat?”

He closed the door behind him with a soft click, and without bothering to look at me, crossed the room to close each of the Venetian blinds. I should have objected – it was my office, to keep as I saw fit – but I sat silent, watching him move through the room as though he had every right to alter it to suit himself. I found I didn’t mind as one by one, he shut out the sun without ever stepping directly into it, edging around it with a grace and precision that was unusual for someone so young. The pale afternoon light that had been streaming across my desk disappeared, leaving us in the artificial glow of the overhead bulbs. Only then did he take his seat,

settling into the shade like he belonged there.

Eventually, he spoke.

“Hello, Doctor.” There was something in his voice that I hadn’t heard before. I couldn’t place it. “It has been... some time.”

I tapped my pen against his file before catching myself in the action. “Are you alright, Michael?”

“Yes, Doctor. Quite well.” The note was there again. Bitterness, I thought. Understandable given his recent return to isolation. I hoped it wasn’t aimed at me.

“You don’t seem yourself.”

He raised his eyes to mine, and I saw that behind the usual darkness, there was something... more. A pained look.

“A patient died this morning.” He tilted his head to one side, watching me through narrowed eyes. “I assume you heard?”

I took a deep breath and shook my head. “I was late. And I’m sure the nurses have other things on their minds.” In truth, I should have been informed immediately.

“Janet took her own life.” He laced his fingers together, his attention never leaving his lap. “Why do you people *do* that? Kill yourselves, simply because you

are unhappy?” He laughed, but there was no humour in it. “If you are sick, yes. Dying, even. But unhappiness is not insurmountable, is it?”

Janet. The woman who’d resisted his help, had seemed to know something the rest of us didn’t... Dead by her own hand, less than a week after refusing whatever Michael had offered. The timing felt significant, and my chest tightened at the idea of it. Whether it was from curiosity, dread, or something else... was less clear.

“I can’t tell you, Michael. I don’t know. People... they do what they can to cope, but sometimes it becomes too much. A person can feel trapped by their circumstances and lose hope. And life without hope is a daunting prospect.”

How had I been so blind, to not see how ill Janet really was? She’d seemed so stable. Had we all been fooled? Grimly, I wondered how she did it.

Michael lifted his chin and sneered. “Your kind are fools.”

“Is there a reason this is affecting you so strongly? I was under the impression that you and Janet didn’t get on particularly well.” It *was* an unexpected reaction, but I couldn’t help but wonder... Michael’s opinion of

humans was fairly low most of the time – he'd made it clear he thought we often made the wrong decisions. So why did he care? Because she'd rebuffed him? The word didn't seem right.

"She refused to let me help." He sighed. "There is no longer any reason I should keep it a secret from you, since it can make no difference to her now."

I swallowed, bits and pieces falling into place. "How were you trying to help her?"

Resting back in my chair, I resisted raising my hand to massage my temples. The headaches were worse than ever, and it was all I could do to ignore them – though the distraction Michael presented helped. Placing my notes to one side, I straightened, giving him my complete attention.

He didn't respond to my change in demeanour, only watched me curiously. "The only way I can. Could. You know I cannot tell you the whole truth, Doctor. But... it does not matter now."

"Why her? Who was she to you?" I'd thought now – at last – he might give me something more. But no. Frustration and disappointment fought for dominance within me, and I could only hope it didn't show on my face.

“What a peculiar question,” he chuckled. “I could tell you her life story should I want to – even those parts she thought were hidden – but she was merely another unhappy woman.”

I sighed. I would have to check the records – it was apparently the only way I might get the full story.

“Really, Doctor?” He sat forward, an urgency in his rasping voice that hadn’t been there a moment before. “And have your records taught you anything of use before now?”

I blinked, recoiling in surprise. My mind reeled, leaping ahead from possibility to possibility. Yes, I’d suspected something like this before, but this was... brazen. Close to the truth.

“Oh, calm yourself, David. You *did* know, despite what you may tell yourself.” Something lifted within me to hear the casual intimacy of my name from his lips. Though the words were laced with ice, and for the first time I realised I’d be wise not to make him angry.

He took a deep breath and sank back in his chair. His fingers worked their way into the familiar steeple, and I watched him, wary of another outburst. “You can hardly say I failed to mention it before.”

“No, and... I believed you. I still believe you. I just

had no proof.” I closed my eyes, pinching the bridge of my nose.

“You still have no proof. I might have guessed you would run to the filing room as soon as our meeting ended today. But I did not.” He glanced to the door with a slight frown. “To return to our discussion. Where might we normally be, at this point?”

“Ah—” I scrambled, grappling with the two opposing realities – one where we were a normal patient and doctor, and another where we were... something else. “Hmm. Based on the usual progression of our talks, perhaps we’d be talking about you and the other patients. We’ll not talk about Janet today; I can see you don’t want to.”

“Thank you, Doctor.” He returned to using my title. “I have spent some time with the others, it is true.” He paused, watching his fingertips as he locked and interlocked them. “Do you remember, when we first met, I told you that not all the patients here are ill?”

Like it was yesterday. “Yes, I remember.”

“Well, perhaps that is not strictly true. You and I both know there are many kinds of illness. Some physical, some of the mind. Those who trained as you have can cure some. But there are others, who... cannot

be cured.” He waited, apparently for dramatic effect, but I said nothing.

“Do you remember George? An odd case of the human condition, to be sure. Since arriving here, I have learned a great deal about him – how he has shared his mind with Lillian and occasionally others, since he was but seven years of age. I have watched him. Each day he sits, alone only in the physical realm, attempting to keep a part of himself under control through sheer force of will and the drugs your nurses feed him. But despite the effort this costs him, most days, she eventually claws her way to the surface.”

“You *have* been getting to know the patients.” I scribbled down a quick note to ask the nurses how George and Michael were getting on.

“Yes. I happen to like George very much. And now I may get to know him better, with Lillian gone.” He smiled mildly.

“Lillian gone?”

“As I said, medication has never really worked for George. I spoke with him for a little while, then I spoke with her. We came to an agreement, and now Lillian has gone. At least, in the sense that you understand her existence. Really it is more that she has truly joined him,

but it's all theological. Or perhaps philosophical, depending on how you look at it."

I stared at him, trying to process. Dissociative Identity Disorder didn't just... resolve. Alters didn't up and 'leave' because someone had a conversation and asked them nicely. It was a complex neurological condition that required years of therapy, and even then, integration was never a guarantee. But Michael spoke with absolute certainty, though he couldn't prove it. If he was claiming responsibility—

I reminded myself I had no real proof he could skim thoughts from my mind, either. No accurate way to even test for such a phenomenon, and yet—

"Michael, if Lillian isn't present, George is in remission. He has a disorder – it's just not possible for his recovery to be long-term, not unless some medical breakthrough has happened in the last twenty-four hours that no one mentioned. Our medication helps him stay in control, but it's not a permanent solution. Nothing is."

He nodded, though he wasn't agreeing with me. "Of course. But I assure you, she's gone."

His conviction was hard to argue with – the assurance of someone stating a fact. I gripped the arms

of my chair, the ache in my knuckles as the skin pulled taut a welcome reminder that I was awake. This *was* happening.

“Michael,” I said slowly, barely breathing the word, “how is that possible?” By now, doubt was little more than a ghost in the back of my mind, barely seen or heard.

He tilted his head, studying me with those dark eyes. “You are an intelligent man, Doctor. You have seen what I can do. How many patients have you watched improve in ways that defy your understanding?” His usually hoarse voice was soft, and I wondered whether he was trying to be gentle. “Perhaps the question should not be how, but whether you are ready to accept what you already know.”

If I didn’t know better, I’d have thought my heart flipped in my chest, tightening until each breath grew strained and it was an effort just to move air in and out of my lungs.

Was I ready to accept the truth? Because it *was* the truth, wasn’t it? I already knew what I’d find when I made my rounds and met with George later. What I would have found with Benjamin, had I the chance – and had seen with Andrew, the outpatient who’d woken

up one morning able to walk...

It had always been there, plain to see if only I acknowledged it. In Michael's test results, in the way he sometimes seemed like he was struggling with another person's problems, only to be fine again the next time we met.

I hadn't spoken for several minutes. Michael, who had been watching me as my thoughts churned and tumbled, now rose from his chair with his usual graceful ease – yet another quality that set him apart as *other*. He moved toward the door and paused with his hand on the handle.

“As you say, meet with George later, Doctor. I suspect once you do, well... we'll talk soon.”

8

SESSION EIGHT

Patient Notes: Michael Elias Swynford

Date: ■/■/2015

Time: 6:15 PM

THE FINAL TIME I MET with Michael, I barely made it from the car park to my office. Two days earlier, my doctor had given me the worst news I'd had since my initial diagnosis – the disease had accelerated at such a rate that my treatments had become all but pointless. There was no hope left.

As though it were a festering creature, sentient within and aware that it had finally won its battle, each morning brought a flood of new symptoms. My vision blurred, and I had to resort to public transport to get to

work. The joint pain that had been background noise before, now turned up to eleven – screaming that I should rest every time I dared to move my body. But rest was all I could do, and it did nothing. The fatigue took the simple task of climbing and made it a Herculean task – unless I enjoyed the sensation of gasping, starved of oxygen from just a single flight. I did not.

I should have stopped working. I knew it, my doctor knew it, and my colleagues were more vocal than I'd have expected on the topic. But I *couldn't*. I might have lost control over my body, but while I could still maintain some semblance of normality at work, I had every intention of carrying on.

Though it probably made everything harder, I took to arriving early and staying late – less from dedication and more because everything I did took longer than before. And then there was the delicious irony of the job itself. When I'd inquired about George, I found he'd been declared in full remission – the very diagnosis I'd never get.

His was an impossible recovery. Every person in the facility, staff and patients included, knew it defied medical explanation. So, on the morning of my last session with Michael, while I sat, hands trembling as I

tried to type, no one could argue that I knew exactly what I was getting. I understood perfectly – maybe better than anyone ever had – exactly what Michael could accomplish, should he choose.

“MICHAEL. WOULD YOU CARE to take a seat?”

“I would, Doctor, thank you.”

For the first time in a long while, I looked at him properly. Maybe I was searching for some visible sign of the things he claimed to do – and I believed he could do them, I did. But for all the world, as he sat, lounging almost elegantly on the worn grey sofa, he appeared to be just another man. A little too slim perhaps, and with a confidence that defied his age, but nothing more than a man.

He didn't seem to notice my examination, though we didn't speak for several minutes. Strangely, he seemed unable to stop himself gazing out into the gardens, where the last of the evening light filled the dull concrete space with colour.

I took a deep breath, my chest aching with the movement. “How are you this week, Michael?”

With some effort, he dragged his eyes from the

window and looked at me, pupils widening infinitesimally. “I am quite well, Doctor.”

“That’s good to hear.” I put a hand to my mouth, giving myself a moment to gather my scattered thoughts. “Have you spent any time with George this week? Following on from our last session?”

He shook his head, staring at his hand as it rested on the arm of the sofa. “No. I find it is better to keep my distance, once...” A crease appeared between his eyebrows. “How is he faring?”

“Very well, actually. It’s likely he’ll be released, soon – though I’m sure you already knew that.” I smiled.

Michael was silent, nodding reflexively. Something had changed in him since our last session. Glancing again and again at the window, I could only conclude he was drawn to the dying light – a surprising evolution, considering his usual aversion. The struggle was easy to see: his impulse half-drawing him from his chair, then settling back as he overcame the desire, fingers drumming against his thighs in a display of restlessness I’d rarely observed from him.

Finally, he gave in and crossed the room in three long, fluid strides. I’d expected him to avoid the light; to stand by the edge of the frame, but instead he pressed

his fingertips to the windowsill, nose brushing the glass as he tilted his face toward the sunset.

“It has been so long,” he murmured, so quietly I almost didn’t hear him. “Since I could...” He trailed off, stepping back with a low sigh.

“George is well, you say. But the same cannot be said for you, can it, Doctor?” Though he retreated somewhat, his eyes never left the sky outside.

My lips drew into a thin line. I didn’t want to speak to Michael or anyone else about my health, but there wasn’t much point in trying to hide it – not from someone with his capabilities.

“It’s not one of my better days, no.”

“Are you in pain? What is that like? I see it in your face, of course, and your mind is... deafening. But I cannot feel it to know.”

I searched for the words. “My body’s forgotten what it’s supposed to do. It’s chosen to turn on itself, each part fighting the others instead of working together. It feels like it’s separate from me, a cage my mind is trapped in. And the pain... is difficult to explain. Crimson, maybe. Furious, vicious and relentless.” Staring at the floor, I willed my voice into some semblance of steadiness.

Michael turned his face half in my direction with a

lazy smile that said he understood. "I can only express my admiration for your resilience, Doctor."

Returning his gaze to what lay beyond the window, we were silent again. His breath, I noticed, didn't mark the glass. It was as though he wasn't there at all.

After several long minutes, he returned to his usual seat. "I believe you wish to share something with me?"

It was my turn to nod, and I swallowed. "I spoke to the board on your behalf. About your diagnosis."

"Ah. Grandiose delusions, was it not? Atypical presentation of course – a lack of attention-seeking behaviour, an absence of elaborate fantasy systems..." He pursed his lips. "I did not expect they would be easily swayed. It must be fascinating for them, how I fail to respond to chemical interventions."

So he knew.

"They're unwavering. I couldn't sway any of them. They're determined that until there's some resolution to the events of your admittance... they won't release you. Unless, of course, you ask to be moved into police custody instead."

He sighed. "As I expected. It does not present too much of a problem, Doctor. Though I'm grateful you tried to intervene."

I couldn't explain it, but I'd known – almost exactly – how he'd respond. And I didn't doubt he could leave whenever he wanted – his strength was clearer than ever after what he'd done to Sarah. My main concern was what might happen to anyone who tried to keep him here. "You realise people will try to stop you, Michael?"

"I am aware."

"Someone could get hurt."

"I will try to avoid hurting anyone. But as I said once before, I am no pacifist." His angular face broke into a grin, and I wondered whether he enjoyed this power he had over us all.

"I remember." I nodded. "And after? Where will you go?" The question escaped before I could stop myself.

His expression softened almost imperceptibly. "I believe I will find my sister. Isabel. It has been... a very long time since I allowed myself to remember her." He paused. "And I've learned here that some connections are worth holding onto."

We were quiet. It was late. Outside, the sunset had grown glorious: the sky filled with a scarlet so intense it seemed unnatural, fanning outward in waves that burned across the horizon, smudging into shades of deep orange, palest blue and eventually a cool lilac that

descended slowly from the heavens as the stars winked into life.

Michael broke the peace.

“I can help you, Doctor. It is your turn... if you are willing.”

His words lingered in the air, like the highest note of a piano, continuing into some unknown place long after the pianist had stepped away. There was hope in that final note. A question and somehow a threat, yes, but there was a touch of optimism there that I’d long since given up on.

He was offering what he’d given to George. To Benjamin and Andrew and who knew how many others over the years. Decades, even, I suspected. Despite all that I’d learned, I still knew so little about Michael – he’d never let me anywhere close to the truth, revealing only the very surface and keeping the parts that I believed may be truly dark to himself.

It was only the darkness that gave me pause. What did it mean, to be helped by him? No creature on earth was truly selfless, and so no part of me believed that he didn’t have something to gain from his Devil’s bargain. Would a piece of me be lost, if I chose to accept his offer? Was it worth the trade?

My body was failing. We both knew it – each beat of my heart a conscious effort; harder than the previous one. I had no doubt he could hear as much. I'd like to say I thought only of the patients I'd leave behind, of the great things I could still do with my life, if only I had the time to... but it was the smallest voice that won out. A shameful voice that said: *I want to live. Let me live.*

I watched his face, familiar by now, his skin lightly bronzed in the twilight, creating planes and shadows that only emphasised the truth about him. His differentness. My decision would be one to remember forever – because I'd already decided. Deep down, it had never been a question.

“What are you, Michael?” I whispered.

He smiled at me. “Does it matter? You are an intelligent man, Doctor. All you must do is consider the facts and choose: do you believe in coincidence?”

I didn't. Since his arrival, more patients had been released from the unit than in all my time at the facility so far. And yes, Michael himself was inconsistent in his behaviour. The wheelchair, his manic period, today's fondness for the light despite his biological aversion to it... he was ever-changing, and somehow eternally the same. Handsome, cold, and... gifted.

“What will happen to me? To you?” The last shafts of sun disappeared below the horizon, taking the last of the light with it and throwing the office into darkness.

“Do you really need to know?” His voice was a rumour in the sudden gloom. Insubstantial.

Hesitation was no longer an option. I shook my head, the movement sending a spike of pain through my skull. But I knew he would see and know.

I sensed rather than saw him move – a dark figure that coalesced with the shadows, moving with them and through them. A chill swept through me, and for a split second I questioned myself. What would become of me?

There was no time to formulate an answer. A force hit me square in the chest, knocking me and my chair backwards with a thud and a clatter that rang on in the blackness. As I landed, my neck twisted to one side with a crack, and a hand edged up along my jaw, a thumb caressing the spot below my right ear as though searching for something, keeping my head pressed into the floor.

The darkness condensed – not only throughout the office, but in my mind, too. My eyes were still open, but I couldn’t see. There was nothing to see.

There was nothing to see. Nothing to see. *There is*

nothing to see, David. Nothing at all.

And then there was nothing at all.

A GREEN LIGHT. WINKING IN and out. It filled my vision, sharp in the centre, soft at the edges. Gradually, my eyes focused, and I realised it was the standby light at the base of my computer. The office was still pitch dark, but the sickly green light filled the space beneath my desk, giving it an eerie, alien glow.

Movement was not an option. I lay, watching it blink, trying to gather the strength to pull myself upright. I didn't remember much, but I didn't think I was supposed to feel so... helpless.

With an effort, I managed to shift my head, and stared at the ceiling instead – the ghost of the green light dancing a pattern across my vision. My throat throbbed sharply as I moved, and instinctively I reached to touch it. Yes. My hands and arms worked. I wiggled my toes. Those too.

Dragging myself into a sitting position, I rested against the desk. My pulse beat powerfully in my ears with each movement, and I braced myself for the agony that usually followed – the sharp stabs that preceded my

headaches, so familiar these days. They never came. I waited, mentally checking myself over. No joint pain. No fatigue. No headache.

My eyes adjusted more quickly than expected. Heaving myself up with the side of the desk, a cursory glance around the office confirmed what I'd already known. Michael was gone.

I sank into my desk chair and switched on the monitor, clicking between files – all password protected, of course. Every folder was empty – everything I had on him, gone from the computer and the cloud. Though I didn't expect to find anything, I quickly rummaged through my drawers and filing cabinets. Nothing – every handwritten note, gone. The personal diary I kept in my briefcase, also gone.

There was no evidence he'd ever been here. When I finally found the courage to get up and walk around, I went to the front desk and demanded to see the security files from the CCTV. Everything was gone. There wasn't even proof I'd had a session booked in my calendar for that evening.

A few days passed. My specialist pronounced me a miracle on legs – not only clear of the cancer that had been working its way through my system for the last

twelve months, but healthier than ever. No more pain or dizziness – a little anaemic, but within the month that too was no longer a problem.

A month went by. Every day, I thought of him. Sometimes the memories were so clear and strong that I honestly thought I'd find him waiting in my office when the sun set, ready to start a new session. I'd pause at my door in the evenings, half-expecting to see him in the shadows.

The other staff were more eager to forget – there wasn't any trace of him in the system, no proof he'd been with us at all. They didn't want to remember, but to me that was the greatest sadness of all. A man who could never remember himself, so disconnected from the world that he was quickly forgotten by all.

I knew it was for the best.

The New Year rolled around, and as usual I volunteered to work. We had a small celebration with the patients – nothing much, but something I'd never expected to live to see. Being alive felt like more of an achievement than anything else.

It was long past midnight – close to dawn, even – before I made it home to my cramped apartment. The door was locked, as expected, but when I stepped into

the hallway, brushing snow from the shoulders of my coat, I tensed.

On the small kitchen table was a parcel – maybe two feet long either way, square and wrapped in brown paper. Picking it up I was surprised to find it weighed very little.

The string tied around it came loose with barely a tug, and the paper fell away. A painting. Running my hand over the texture of the paint, I could feel each brushstroke beneath my fingertips – though the detail was phenomenal. It could have been a photograph.

Two men walked by the edge of a dappled forest clearing, one older, bearded and greying with a hunting bow slung across his back. The other was taller but younger, hair dark and worn long, unmistakably *him*. Sunlight fell through the trees, creating a stark contrast between the warmth and light of the pair and the ominous, shadowy woods beyond.

It was otherworldly. Beautiful. I turned the canvas over, and a piece of rough paper fell onto the table. The note was short:

'For David.

The only doctor I recall trusting in all my years.

Good luck.'

If you enjoyed *Michael*, I'd love if you'd consider leaving a review on **Amazon** or **Goodreads**. Even just a quick rating costs nothing – and for indie authors, can make a world of difference.

If you haven't yet read *The Gloaming*, the story that began this world, it's available now in paperback and eBook.

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Blood and coffee,

J

ACKNOWLEDGEMENTS

BRINGING *MICHAEL* INTO THE WORLD has been... well, it's been a long bloody journey. So long, in fact, that I can hardly remember the names of some of the people that deserve thanks.

Michael was my dissertation at university. It did very well, if I do say so myself, but it took some fighting to get it to where the story is now. Battling tutors who didn't get it (one person suggested that the story should have more religious overtones and Michael should be an angel, obviously she didn't know me very well) and fellow students in my group who just couldn't understand what I was getting at.

While I've been working on getting this novella into ship-shape for release, I've expanded on the original story – a mysterious man arriving at a psychiatric facility – to try and bring you, the reader, into David's mind a little more. Once upon a time, David was a lot more formal and clinical – back when I first wrote him, I was

convinced that the only way I'd be taken seriously was to write that way. Maybe I was right – my tutors certainly liked the piece. But the David and Michael of today are far more like real people to me now than they ever were back then. Michael has a family (remember his sister, Isabel?) and David is lonelier than I ever originally realised.

The old version of this story went through weekly revisions, received input from a group of several people who weren't quite sure what I was playing at, and while I owe thanks to all of them, it's only with age and okay, maybe the tiniest bit of wisdom, that I've really allowed these characters to come into their own.

Did I do a good job of it? I hope so. I was very proud of *Michael* when I first wrote it, and I still love the oddness of him now. But today he's only a part of the bigger *Blood of the Revenants* puzzle. Sometimes the best thing you can do for a character is give them more, even when it might make them seem like less.

Anyway. Thank you to the many students and tutors this story passed through the hands of – I can't remember most of your names because it was 2011 and I was young and fresh faced and drunk a lot more often, but I appreciate your contributions, nonetheless. Thank you

to my parents for encouraging me to keep pursuing my weird little story back then too, it gave me the confidence to continue. Thank you to Luke, my husband, the one who puts up with my ramblings about imaginary characters and hypothetical circumstances so I can figure things out. And thank you to all of the wonderful readers who came for the vampire romance but stayed for the gothic horror vibes. This novella would have stayed a bound copy in a plastic folder, tucked into the back of the wardrobe, if not for you.