

A middle-aged woman (whom I will refer to as H. J.) first visited me with complaints of poor sleep, irritability and sad mood. I was baffled: The classic depressed woman in Heloise's age group would present with hypersomnia — the desire to sleep more, not less. But our patient, Ms. Johnstone, was sleeping less, not more!

What was the missing puzzle piece in H.J.'s case — what Mandolini would call her “key signature”?

I had three tools in my doctor's bag. Since my degree does not allow me to prescribe medications, those were: refuse the case, or do therapy (my degree does not allow me to prescribe medications).

I asked myself, what would Dr. Silva say in this situation? The answer was simple, but it would take one more fateful night for me to understand it.

On a cold October night in 1976, a small girl in a wolf-man mask came to my door.

Halloween.

I handed the girl a homemade fig bar and froze. She said, “Are you alright, ma'am?” (I had long hair at the time). But my mind was on my patient: I realized that Heloise was afraid to love, and I needed a Trojan Horse to get past her defenses.

The next day, dressed as a blind man with a small guide dog, I took a seat next to Mrs. Johnstone in my own waiting room.

I was no longer the great Dr. Dean Payne; I was just a lowly homeless man. But what I discovered ensured that I would never be homeless for real: I found that I was able to engage the client in the waiting room *in ways that I could not in the suffocating confines of the therapist's office.*

After only 10 minutes, Mr. J. revealed to me that she was afraid to tell her therapist that she wanted to get a dog! That's why she was depressed!

I ripped my mask off. She left, cured, and I never needed to see her again.