

Near Misses

*We are, all of us, wandering about in a state of oblivion,
borrowing our time, seizing our days, escaping our fates, slipping
through loopholes, unaware of when the axe may fall.*

Maggie O'Farrell, *I Am, I Am, I Am*

The first time I remember thinking about dying was as an impressionable seven-year-old. Then, at the height of the Cold War, my early morbid fascination was inspired by Mrs Dewar, my brilliant but idiosyncratic primary school teacher, a woman with the Soviet Union on her mind. Thin and intense, with a piercing stare, she could flip in an instant from subtraction to mutually assured nuclear destruction, holding her young audience rapt and quaking.

'Children!' she would warn us, glowering darkly. 'The Russians are coming. I tell you, the Russians are coming.'

None of us was entirely certain who or what the Russians were, but we were mercilessly brought up to speed. When they came for us, they would slaughter us all, mothers, fathers,

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brothers, sisters. The world we had happily taken for granted was teetering, all of it, on the edge of oblivion, apocalyptic horrors on the cards at any time. No part of the country, not even the tiny village I inhabited in rural Wiltshire, was impervious to the threat of East–West animosity escalating into full-blown nuclear war. This was too enormous for my young brain to fathom – not a single person’s death, but the annihilation of a species, no human being spared. Dread seeped into my bones.

Children are meant to be so absorbed in the vital business of day-to-day living that their own mortality passes them by. But I remember going to bed, aged seven, genuinely fearful I might not be alive in the morning. I would lie awake, rigid with fear beneath the duvet, and when I did sleep, mushroom clouds haunted my dreams. One night, in the small hours of the morning, my father was awakened by the clanking of a clumsy intruder. Stark naked and armed with only a poker, he crept – half superhero, half Benny Hill – into the living room to find not a burglar, gloved and masked, but his sleep-walking daughter, knocking ornaments flying as I groped my way along the window sill, eyes tight shut, muttering my now-internalised dread: ‘The Russians are coming, the Russians are coming. We are all. Going. To. Die.’ Dad scooped me up in the darkness and tucked me back into bed. I can still recall the feeling of absolute safety, as though nothing could touch me when held in his arms.

My early existential angst at nuclear Armageddon was swiftly superseded by more pressing concerns, like whether seven-year-old Ben Hardy, the boy in my class famed for eating nothing but tomato ketchup sandwiches at lunchtime, would

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ever agree to marry me. It turned out that, like most children, I was indeed too entranced by living to dwell upon something as abstract and ethereal as dying.

Death, if it cropped up at all, was in the form of illicit entertainment. Every Friday night after school, for example, clean and fresh from our evening baths, my brother, sister and I would eagerly clamber on to the sofa for our weekly treat, on BBC television, of an old black-and-white Tarzan movie. In the title role, Johnny Weissmuller, the Olympic swimmer turned 1930s Hollywood star, ran, leapt and hollered his way through the jungle, his oiled six-pack gleaming. The highlight was never Johnny however, nor even his feral sidekick, a filthy-cheeked child known only as 'Boy'.

What we loved, as only eight- or nine-year-olds can love, was the terrible scene, towards the end of each movie, when a baddie would receive a very special comeuppance. 'It's the tree!' one of us would scream with ghoulish delight, since not all of the movies contained this blood-curdling finale.

'The tree' involved furious natives (as Tarzan referred to them) spread-eagling the baddie upon two crossed tree trunks, then raising him, pinioned, into the sky. His left arm and right leg were tied tightly to one trunk, his right arm and left leg to the other. Far below the hapless baddie, jungle drums beat in a manic crescendo while natives danced themselves into a frenzy. Tarzan himself would be hidden or captured, thus powerless to prevent the imminent slaughter. A machete would be raised, and quiver briefly in the sunshine. Then, all of a sudden, the ropes securing the trees would be cut, a female starlet would avert her eyes in anguish, and the trees would snap apart with a sound like a bullet, ripping the victim clean in half.

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‘The tree, the tree!’ we’d laugh uproariously before descending, every week, into the same heated argument.

‘You wouldn’t be ripped in half,’ one of us would declare.

‘Yes, you would! Right down the middle.’

‘No, you wouldn’t. Your legs would get pulled out of their sockets. And your arms. They’d stay on the tree trunks and your body would fall down and you’d bleed to death.’

‘Well, actually, your body would be ripped in half – all the way up to your head – and then your skull would fall off and that’s how you’d die.’

And so it went on. Rarely – an extra special treat – Dad arrived home from work in time to perch with us on the edge of the sofa while we revelled in Metro-Goldwyn-Mayer carnage. He laughed at the tree as much as we did.

For a child of the 1970s, death by Dalek, werewolf, cyborg or shark was the absolute highlight of British television, the grislier the better. We knew our glee at the gore was faintly indecent, but this was celluloid make-believe, fantasy dying, and hence a permissible pleasure.

Once, though, around this time, Dad told me a story that made death – perhaps for the first time in my life – feel unnervingly close to home. My father was a physician for forty years, most of them practising as a general practitioner in an era when family doctors cared for their local community night and day, every day of the year. Before that, like his own father before him, he had sailed the high seas as a medic in the Royal Navy, and his seafaring stories transfixed me. His speciality, in my view, imbued him with the dark arts of a witch doctor. As a naval anaesthetist, he possessed the ominous power, via

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mysterious vapours, to ‘put people to sleep’ – which was, I noted, what eventually happened to my friends’ pet dogs, a sleep they never woke up from.

One day, Dad began to tell me about an occasion when his naval warship was touring the South China Sea. I adored Dad’s medical stories, hanging upon his every word as he told and retold, at my insistence, all my favourites. Somehow, whatever his patients threw his way – drama, trauma, poignancy, despair – Dad seemed to hold their lives in his hands with confidence, omniscience and a distinct hint of deity. He may have seen himself as only an ordinary doctor – as run of the mill, nothing special at all – but to my child’s eyes he was the undisputed hero of his tales.

This story, however, was not anything like that. Dad was only a young man himself, just a few years out of medical school, when the news filtered up to his ship’s sickbay that an explosion had ripped through the boiler room. Two junior ratings had been caught in the blast. ‘They were even younger than me,’ Dad told me. ‘No more than eighteen, nineteen years old.’ A faulty pressure valve had allowed a lethal build-up of steam which, when it blew, flung the lads across the room and burned most of their skin from their bodies.

‘Did they die?’ I asked him, unable to imagine how injuries so dramatic could be compatible with survival.

‘No. At least, not to begin with. That was what made it so awful.’

Dad relayed what happened next with such absorption he forgot he was talking to a child. The two casualties were successfully dragged from the scene and rushed, still alive, to the sickbay. There, he and his senior doctor worked furiously

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to stabilise each patient. They dressed the burns, assessed the airways, obtained intravenous access, and started infusions of fluids and morphine.

‘What’s morphine?’ I asked.

‘A very strong painkiller. Although, in fact, they didn’t need it. They were barely in pain at all.’

Knowing how excruciating mere sunburn could be, this confused me. Dad’s explanation was blunt: ‘You need the nerve endings in your skin to feel pain there. They didn’t have any skin left, so they didn’t have any nerve endings. They were pain free. Chatting, Rachel, laughing. They were full of relief. They thought they’d had a lucky escape.’

Something in the way my father said this caused me to sit up and lean closer. He was talking as though he was back there.

‘We were hundreds of miles from shore. We had to sail to Hong Kong to get the lads to a hospital. It was going to take at least a day, maybe two. My job was to stay with them, comfort them. They didn’t know they were dying. Why would they? They weren’t in any pain. Their eyes were bandaged so they hadn’t seen their injuries. But I knew. I knew that full-thickness burns over this extent of the body was fatal. I knew they’d lose consciousness long before we reached shore. My job, most of all, was to lie to them.’

The idea of professionally obligated lying had never occurred to me. As a fairly puritanical nine-year-old, I was not even sure I approved of white lies. I liked my human values rigid and polarised – right and wrong, black and white, entirely admirable and wholly unworthy. But the sadness in Dad’s face, in this moment, was anything but binary. He must have ached with the knowledge, unvoiced to his patients, that one by one their

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organs would inexorably shut down. His voice softened as he continued talking.

‘The Navy arranged to fly their parents to Hong Kong, so the boys knew – or thought they knew – that they’d be seeing their parents as soon as we arrived there. One had a girlfriend. He was worried about how he’d look to her. So I lied. I pretended they’d have a romantic reunion. I tried to make them feel positive. They hadn’t been adults for very long, Rachel. To me, they still seemed not much more than children. After about twenty-four hours they started to become groggy, and not long after that they lost consciousness.’

‘But ... wasn’t there anything you could do to save them?’ I asked.

‘Nothing. Nothing at all.’

‘And, then ... did they die?’

‘Yes, they died, Rachel.’

Dad looked away for a moment. I wanted to cry. I was not sure what disturbed me more, the thought of the two young men sailing unknowingly to their deaths or the sight of my father, visibly overcome. Being a doctor, I had assumed, made you close to a god, and I loved having my father on that pedestal. Now I had glimpsed, even if I was unable to articulate it, the uncomfortable truth about medicine that, while the demands of the job are indeed exceptional, the person occupying the role of doctor is, just like their patients, merely human. Whether I liked it or not, I recognised my father as someone with fallibilities and frailties, just like the rest of us. And although I did not know what ‘empathy’ meant, I felt a little of his sadness.

None of Dad’s stories lingered quite like this one. Countless

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times as a child I had observed his job leave him so numbed and weary on returning home to his family that he could scarcely do more than flop upon the sofa, gin and tonic in one hand, newspaper in the other. But until then I had never considered that the core of his medicine might be kindness, not heroics, and what an instinct for kindness could cost a person.

Many years later it would dawn on me that in those moments, while sweltering below deck in a windowless sick-bay, my father had in fact struggled to practise a brief and unusually horrible form of palliative medicine, the pain of which had never entirely left him. His actions that day, his lies to the two young naval ratings, were an attempt to eke out for them some quality of life, no matter how tiny, even as death bore down on them. In conventional medical terms, he had achieved nothing at all. He had not prolonged life, enhanced life, slowed death's swoop, bolstered health. Yet in human terms, by managing to stifle his horror at the charred flesh and looming demise of two young men, by keeping close at their bedsides, by ensuring they knew they were not alone, perhaps he had helped make an intolerable fate bearable. Perhaps he had done everything that mattered.

Twenty-first-century acquaintance with dying is televised, digitised, sanitised – and everywhere. My first fix of death as on-screen entertainment came courtesy of Johnny Weissmuller flexing his muscles. In the case of my son, however, it was different. At the age of eight or nine, he began returning from afternoons with his friends wired with tales of gore while annihilating PlayStation hordes. Forgetting the childhood frisson of seeing death at one remove, I would fret that this early exposure

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to make-believe gun crime would somehow bestow a blasé attitude to dying or, worse, serve to glamorize casual killing. Finn, however, put me neatly in place. He knew exactly the difference between a screen and real life: ‘Er, Mum, you do know that trees aren’t pixelated?’

With a doctor for a father, and a nurse for a mother, my siblings and I bucked the demographic trend for human dying to be an abstract experience. The children of medical parents often discover abnormally early that there is no neat demarcation between home and the hospital. Dad’s stories were one thing. But more fundamentally, he was so immersed in his patients’ lives that sometimes, unwittingly, he brought death into the home, and us out to meet it.

Once, on an idyllic Sunday afternoon, a call from the police dragged Dad away from the Ashes. All week the sun had been ferocious, the grass unmown, as an epic sporting rivalry enthralled the nation. Unusually, on this occasion, it was not the urgent need for medical expertise that denied Dad the satisfaction of watching England’s cricketers thrash Australia. Instead, a bureaucratic formality was called for, one that only the on-duty doctor could provide. A few miles from our home, under milky blue skies, a young man had thrown his life into the path of a high-speed train and, as is necessary in cases of sudden or unexpected demise, a doctor was required to certify death as having occurred.

Dad had muttered as much to Mum before he departed but, as you would expect, my brother, sister and I had been kept in the dark. On his return, though, Dad’s expletives were thunderous. None of us could fail to hear what had provoked them. ‘Total waste of sodding time . . . hardly need a bloody

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doctor . . . he was smeared along five hundred yards of track, for Christ's sake . . . bits of him stuck in the blackberries.'

I have no doubt I caused Dad's afternoon to deteriorate still further. 'Wait, what happened? What do you mean, "smeared"? What was in the blackberries?' My torrent of questions was relentless. Consumed with anger, which even I could tell was not entirely about missed cricket, he was forced to explain, in child-centred terms, how, even when a body has been reduced to small chunks of flesh on a track, the law still requires a doctor to diagnose and confirm death in writing.

Like his experience of tending to the two dying sailors, the event never left my father. Over the years we would revisit it, many times, in conversation. For all his appreciation of the sheer desperation that drives a person to suicide, Dad's sympathies lay with the driver, whom he had met that afternoon, on the side of the track, still trembling and retching beside his own vomit.

'In those days,' Dad told me, 'there wasn't anything like counselling or time off work for someone who went through that. You just went back to work the next day and got on with the job.'

What he never quite admitted – how could he, given what the driver had endured? – was the pain for himself, as well as for the police officers and railway staff, of being yanked from his family one weekend in late July to inspect freshly pulverised human remains beneath serenely indifferent summer skies.

What I learned as a child that Sunday was that Russians were not needed for death to strike from nowhere, suddenly and horribly, and with the power to transform, if temporarily, the lives of those who had never even known the deceased, let alone of

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those who had loved them. One way or another we were all, I saw clearly, just moments from death. It could be folly, despair or plain bad luck – catastrophe lurked everywhere.

Dad spent the rest of the day impatient and irritable, as we cautiously gave him a wide berth. I could not conceive of doing what he did, and nor, if I were honest, did I want to.

If I thought about medicine at all as a child, it was more with ambivalence than enthusiasm. On the one hand I was addicted to Dad's tales of doctoring, but on the other, like most children, I was fully aware that doctors did things to you without permission or mercy – even my own father.

The one occasion on which I could, very easily, have died as a child was a prime example. We had driven all the way to Fort William, in the Scottish Highlands, to spend a couple of weeks in a log cabin surrounded by mountains. Old enough to be allowed to play outside by ourselves, my brother, sister and I spent hours damming streams, climbing trees and, most excitingly, swinging on a rope across a river. Except I was rubbish at rope swinging. Nervous at the prospect of falling off, I allowed my legs to trail feebly behind me, while the other children curled up tight as bullets, flinging themselves on to the other side.

As everyone issued instructions on how to do it better, slow-burning shame overtook my wimpish fear. I stood on the edge, clutching the rope with all my might, consumed by the thought that this time I had to make it to the other side. A deep breath, a moment of silence as the other children looked on like a panel of judges. Then, I launched myself into the air, wrenching my knees towards my eyeballs, determined to redeem myself.

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My next sensation was of a sound worse than nails on a blackboard, an ear-splitting screeching, from far away, but becoming louder and more hideous with every moment. It took a second or two before I realised the noise was coming from me. I was surprised to find myself sitting in water, submerged in it up to my neck. More baffling still was why I should be screaming when I felt neither fear nor pain. Rough hands started grabbing and clawing. My shrieks had caused adults to come sprinting from their cabins and scramble down the muddy bank to drag me up to the grass. With the hoisting and yanking came the rush of pain. I was fainting with it, too shocked and nauseous to appeal for gentleness.

Carried by my father back inside our cabin, he proceeded, as every doctor would, to conduct a brisk clinical examination. I remember Mum looking on, face pained and anxious, as Dad went straight for my right arm, now dangling at a drunken angle, to assess its range of movement. When he lifted the limb, bone ground on bone. The impact had snapped off the head of my humerus and the pain was like nothing I had known. As she watched me passing out on the sofa, Mum could not stand it any longer. 'For God's sake, Mark, stop it. Look at how much you're hurting her.'

Terse words followed, whose content I barely registered.

We set off for the nearest hospital, an hour or so away along contorted mountain roads, while I slumped on the back seat, trying in vain to keep still as the car lurched and twisted round corners. In the front, Mum and Dad discussed whether surgical fixation with metal pins would be needed, and how only an inch or two's grace had saved my neck from being broken. I kept my eyes closed, pretending to sleep, filled with gratitude

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to Mum for demanding that Dad take the corners a little less hastily. One surgical manipulation and a night spent driving back through the mountains later, and I endured the rest of the holiday with my arm elevated into a horizontal position by layer upon layer of dense foam packing, all kept in place by surgical tape wrapped around my torso. I looked and felt ridiculous.

The children's author Roald Dahl once told an interviewer that adults should get down on their hands and knees for a week, in order to remember what it feels like to live in a world in which all the power resides with people who literally loom over you. Nowhere are the powerlessness and indignity of being a child more evident than in a medical consultation room where you know, at any moment, you may be subjected to a spatula down your throat, a metal probe in your ear, foul-tasting liquids or a doctor's halitosis. When your parent *is* the doctor, your entire world holds those risks, even the summer holidays. It would have never occurred to me to question Dad making me faint with pain to elicit a diagnosis, had Mum not reacted against it so fiercely. But it was, I later realised, an odd quirk of fatherhood that protecting one's offspring occasionally necessitated causing them physical suffering.

Six weeks or so later, while standing in a hospital out-patients department, strip-lit and naked from the waist upwards, I received a smarting lesson in how doctors by no means monopolised the matter of pain and its infliction. My humerus had knitted together, and it was time for the foam packing and tape to be removed. I did not like the look of the nurse who grimly picked at one end of the tape, trying to dislodge it. With her severely scraped hair and thin tight mouth, to me she seemed much like a Roald Dahl antihero herself. And when

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she pursed her lips and prepared to pull, I was certain she did so with relish.

I gasped. The tape had adhered so tightly to my child's soft flesh that the force required for its removal took the top layer of my skin clean away. Slowly and deliberately, the nurse walked around me, tearing off translucent ribbons of skin as she went. I looked down to see beads of blood trickling towards my abdomen. Mum was aghast in the corner. I clenched my teeth, stared up into the fluorescent lights, and vowed not to make a sound, even as my eyes, swimming with tears, betrayed me.

'There,' the nurse stated, dumping bloody tape and foam into the clinical waste bin. 'That wasn't so bad, was it? I don't know what you were so worried about.'

Weeks later I still thought about her with burning hatred as I picked the old scabs off my ribcage. The fact that a centimetre here or there, a lurch to the left or a list to the right, and it could have been my neck, not my shoulder, that had snapped in two occurred to me not for a moment. Only years later would the realisation dawn that I might have been a hair's breadth from death. How innocently we all exist alongside what might have happened, yet, on this occasion, didn't.

Early clues that I might follow my father into medicine included hunting for owl pellets while walking our dog in the countryside, then spending hours dissecting out the tiny rodent bones and meticulously labelling and mounting them on cardboard. Later, when I was first taught about the female reproductive system at school, I was so appalled by the prospect of messy, embarrassing, inconvenient menstruation that I spent an entire afternoon's double biology discreetly sketching

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a root-and-branch pelvic redesign that diverted menstrual products from the uterus to the colon, ingeniously avoiding the unwelcome palaver of periods. As far as I was concerned, my new improved female reproductive organs beat evolution's hands down.

But as a child I did not want to be a doctor, I wanted to be a writer. I could not believe adults were given money for the pleasure of writing stories, or that you were allowed to borrow eight – eight! – books a week from the library, or that a book existed, an extraordinary book, that taught you the meanings of words. My mother describes me tearing downstairs one day and thrusting a book under her nose. 'Mum! Did you know about this book called the dictionary?' I announced ecstatically. 'It tells you what every word means *and* it even tells you how to say them.'

My own stories were obsessively transcribed, after school and at weekends, into clumsily illustrated, homemade notebooks. Gore featured prominently – disembowellings and amputations – for which I blame my father. Dad had a broom cupboard lined floor to ceiling with bookshelves. The 'library', as it was grandly known, was filled with everything from James Joyce to Harold Robbins, Isaac Asimov to Jeffrey Archer. From early childhood, I surreptitiously devoured age-inappropriate fodder, continuing late at night with a torch beneath the duvet, long after Mum and Dad had gone to bed themselves. The James Bond and Modesty Blaise series were best for racy excitement, while the horrors of Edgar Allan Poe both repelled and enthralled me, inspiring my own gruesome dramas.

The best stories, of course, came not from a book but from Dad himself. Dr Mark Rendall came to know intimately many

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generations of patients – all the loves, losses, hardships and joys that knit families together, or sometimes tear them apart. He could not walk down the street of the little market town where he practised without a string of cheery hellos called out to Dr Rendall. At Christmas, there were so many gift-wrapped bottles from grateful patients we could not fit them all under the tree.

From his children's perspective, all of this meant nothing. Time spent devoted to the needs of his patients meant time away from us, and from Mum. Often, like so many doctors, Dad returned home at the end of the day as empty and spent as a field after harvest. Having poured all of himself into back-to-back consultations, there was nothing left for his family. The innocuous-sounding 'one in three' – his standard GP's roster – had to be lived to be believed. Every third day of his working life, he worked thirty-six hours straight, from nine in the morning until six or seven o'clock the following evening. All night long, patients would call him out on visits to their homes. Mum answered the telephone calls while Dad was out responding to them, so both my parents suffered semi-permanent sleep deprivation. Sometimes, after a particularly gruelling night, as Dad helped us get ready for school in the morning, he looked so haggard and worn that even making coffee seemed beyond him, let alone another day spent making potentially life-and-death decisions with patients. Fatigue quickened his temper as we fumbled with schoolbags and shoes, dragging our feet in the hall.

Once a year I glimpsed for myself the clinical world that claimed so much of my father. Every Christmas, my siblings and I would rip open the contents of our stockings and devour

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our special festive breakfast before setting off for Dad's local cottage hospital in the car with my parents. These small, rural hospitals, now largely closed down, enabled villagers to avoid huge treks to a county hospital, and to be treated close to home by the one doctor, their local general practitioner, who was familiar with their life and problems. Babies were born there, great-grandparents died there. My father knew every one of them.

Each year, a handful of his patients, men and women in their eighties or their nineties, would spend Christmas marooned in the cottage hospital. Dad moved from bedside to bedside, chatting warmly and easily, with his young family in tow. At barely five or six years old, I would hover uneasily at each ancient patient's side, nauseated by the smells of iodine and bodily fluids. Rarely was anyone else there. Sometimes, it seemed as though the visit from the family doctor was the highlight, so far, of their Christmas Day.

For all my anxieties about what to say, how to behave and whether someone was about to gasp their terminal breath in front of me, one thing was clear. These faces, so wizened and old, would light up with delight at my father's arrival. And when my siblings and I crept closer to their sides, often they would beam with joy at the chance to chat with a small child. Somehow I knew that in spite of my fears and awkwardness, the little we gave of our Christmas mornings mattered greatly to my father's bedbound patients.

By the time it came for me to choose my A-levels, medicine felt no more connected to people than school chemistry did to medicine. Except for Dad. He was the link. He made medicine

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human. As I had grown up, the stories I had once loved for the way they framed Dad as my two-dimensional childhood hero had become a nuanced, complicated and treasured form of father-daughter intimacy. When we talked about his patients, he shared himself with me, the reserved, self-questioning doctor who wore his losses and failures – his patients' deaths – like rust around his heart. For the first time, it crossed my mind that perhaps, all those years ago, when Dad had manipulated my broken arm, it had hurt him as much as me to do so.

'Dad, you know if I do English A-level it means I can't do Chemistry?'

We were chatting one Sunday morning while walking the dog through the farmland that surrounded our house. The deadline for me to submit my A-level choices loomed the next day. My sixth form was small, and Chemistry clashed with English on the timetable. Dad knew exactly what this signified.

'So, if you choose the subject that's essential for Medicine, you won't be able to study the one you love more than anything?'

I nodded. We walked on. The silence hung comfortably between us. Some way in the distance, our Labrador was chasing rabbits with such inept enthusiasm that we both burst out laughing. We stomped through the mud, skirting the cowpats. I hesitated before asking the question I knew my father would not answer.

'Dad . . . do you think I should be a doctor?'

Had he said yes, I would have followed his lead in an instant, and he was, I knew, well aware of that. He paused, then smiled. 'I can't tell you what to be, Rachel. Only you know that.'

Not once, to their credit, had either of my parents ever tried

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to steer me towards their vision of the life that was best for me. I knew how grateful I should be for that, yet still longed for Dad to tell me what to do. In the end, ironically, it was because of him that I ruled out a career in medicine by choosing to study books above Bunsen burners. I was wary of becoming a doctor not out of genuine vocation but instead, deep down, to make him proud of me.

Rather than helping people through healing, I harboured instead a vague, romantic, childish notion of using words to make the world a better place. Stories, I knew, were infinitely more than mere entertainment. Not only could stories save lives, but people sometimes died trying to tell them. As an idealistic teenager, I watched transfixed as the BBC broadcast images from China's Tiananmen Square of a thin man in shirt sleeves standing in front of a dictatorship's tanks, defying them to crush him as the world's press looked on. The idea that speaking out, of telling the truth, could easily, in another part of the world, end up being the death of you made journalism seem like a moral imperative. Through all those years hanging on tenterhooks as Dad enthralled me with his tales of doctoring, it never occurred to me that the heart of both jobs, journalism and medicine, might fundamentally be storytelling.

I gave neither medicine nor mortality another thought until, just before setting off for university – Philosophy, Politics and Economics my degree of choice – I was forced to confront, in a rush of adrenalin, the apparent fact that I was about to die.

It was deep winter, one of those dismal English days in which dawn never properly breaks and by teatime, the

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dregs of daylight are gone. My friend in the village had plans though. Tom rocked up on the doorstep that evening, hardly able to stand still as he spun a battered set of car keys from his fingertips. 'It's mine, all mine,' he boasted eagerly. 'Fancy a spin?'

I gawped at the banger on the driveway. To me, these superannuated wheels promised more thrills than the world's fastest Ferrari. A car – any car – was a means of escape from the back of beyond. Pure intoxication.

'Wait. Is this actually yours? Have your parents really given you a car?' I gasped.

Tom had passed his driving test a few days earlier. His reward, from his parents, was deliciously unexpected. 'Yep. Come on. Let's go.'

There are no surprises as to how this story ends. It was bitterly cold, with frost in the air. Black ice had been daubing the country lanes all week. After a stuttering start and some amateur reversing, we crept sedately through the village at a law-abiding pace and then, out in the open, began to accelerate. Tom whooped as he crunched through the gears. There was a wildness about his desire for speed that initially did not frighten me. We laughed together as the engine strained and spluttered, and the hedgerows began to melt away around us. The speed, the liberation, as we played at being grown-ups, claiming the roads as our own.

But Tom's first taste of speed had unleashed something primal and dangerous. With his foot to the floor, the engine first roared, then screamed in protest. I began to bristle with fear. 'Hey, Tom. You need to slow down.' It was as though I had not spoken. 'Tom, seriously, slow down. You're going too

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fast. Tom!' The more I begged, the more recklessly he swerved. My screams only seemed to incite him.

Even as adrenalin flooded my body – my panic a kind of bile in my mouth – a part of me observed the road ahead with cold, hard, unflinching clarity. I knew, with utter certainty, how the next seconds would play out. Tom's shaky hold on the tarmac was about to fracture. The car would no longer be swerving but skidding. He would fight for control and never regain it. We would be flung into oncoming traffic. The shriek of wheels, the smash of cranium on glass, would go unfelt, unnoticed, because moments from now we would be mangled and lifeless, dangling inertly from our seatbelts.

And sure enough, the car began to lurch from one lane to the next. Tom's wrenching on the steering wheel was futile. I could not tell if the thundering in my head was my blood or the brake pads on metal. Neither of us could change how this would end now. When we were flung, for the third time, into the opposite lane, the car had acquired such drunken momentum that its wheels left the road – we were launched skywards. A thud, a screech, the crumpling of metal and then we were upside down in a ditch, axles spinning above us.

Every window was smashed, the bodywork chewed up, the car a write-off. No one could have crawled from that wreckage intact, yet somehow we emerged, coated head to toe in glass, scratched and trembling but otherwise unscathed. We stood on the road next to smoking scrap metal, silently clutching each other. It was bitterly cold. Our breaths, condensed, were visible proof to the world and ourselves that we were still, against all odds, alive.

On the far side of the road was a country cottage, outside

Dear Life

which an elderly woman stood in her nightie. ‘Come here,’ she called, leading us inside. ‘The bang woke me up. I thought there’d been an explosion.’

I borrowed her telephone to call my parents for help, shards of glass from my hair pattering on to the table. Mum and Dad arrived, stared in horror at the wreckage, and drove us home in silence. What was there, really, to say? Tom and I never spoke of what had happened. And, after a day or so of intrusive, slow-motion, high-definition replays, I successfully dismissed the crash from my mind. *Move along*, I told myself. *Do not stop, do not look back. You are eighteen years old and there is all this life to be living.*