

Trying to Sleep

by [Theodore Dalrymple](#) (October 2023)



Insomnia, Norman Cope, 1943

*When you're lying awake
With a dismal headache
And repose is taboo'd by anxiety
I conceive you may use
Any language you choose
To indulge in, without impropriety
—Iolanthe, W.S. Gilbert*

Insomnia is seldom taken seriously by those who have never experienced it, and who therefore regard it as a minor inconvenience at worst. Let us hope that they never suffer it (by which I mean, of course, precisely the opposite, that I hope that one day they do, as a fitting revenge upon their callousness)! The misery of sleeplessness is considerable, especially when prolonged over weeks or months.

I have had only two periods of insomnia in my life, one nearly forty years ago and the other, alas, in the present.

Forty years ago I was working on a remote island in the Pacific when I was suddenly struck by insomnia. Until then I had always slept like a baby, my problem with sleep, insofar as I had one, being rather to keep awake than to stay asleep. Night after night I went to sleep all right but woke an hour or two later, and then stayed awake for hours. For some reason, I suffered at the same time from pompholyx on the sole of my right foot (why not of the left, or of both?), a form of eczema, from which I had never suffered before. I was not particularly anxious, and nothing much had changed in my circumstances. The body evidently has its reasons which the mind knows not of.

I tried the usual remedies for sleeplessness, and even counting flying fish skimming over the ocean waves in my imagination did not help. Fortunately, the island was pharmaceutically behind the times and I eventually found in the pharmacy a supply of barbiturate sleeping pills. They worked where nothing else had; fully aware of the dangers of this drug, I took it for only a very short time, and when I stopped, I did not suffer again from insomnia for several decades. The physician had healed himself, but with a drug which he was all but forbidden, with reason, from prescribing to others.

Barbiturates are dangerous in overdose and were long the favourite of suicides, as well as being addictive. I am just

old enough to remember the unpleasantness of the effects of overdose by barbiturates, as well as of withdrawal from their habitual use.

Like most addictive drugs, they could be taken for years without ill-effects, provided control was not lost. The mother of a close friend of mine, a woman of the most respectable kind, a pillar of local society, used to regulate her life by the alternation of an oral amphetamine and a barbiturate, the classic upper-and-downer regime that was once by no means unusual in respectable circles. I doubt that many of the people who knew her were aware of drug-taking and, at her death at a good age unconnected with her long-term use (or abuse?) of stimulants and soporifics, her son found a pot of amphetamines sufficient, if he sold them on the black market, to pay for a luxurious holiday—or, of course, land him in prison.

I have twice found caches of drugs, once in respectable medical use but since relegated to the status of illegal or black-market merchandise, in out of the way places. One was on the Pacific Island where I found a large supply of injectable methamphetamine. The only time I used it was on a patient who had been mute for ten or twenty years—the chronology was not exact, but at any rate everyone agreed that it had been very long time. I injected him with some methamphetamine, and he immediately began to speak torrentially, though no one could follow what he said, and he continued thus for twenty-four hours until I was asked to give him something to shut him up again by his exhausted relatives and carers. Once restored to silence, he never spoke again.

I would not be so reckless now. The story reminds me, however, of one told by Boris Cyrilnuk, a French psychiatrist, at the beginning of one of his books. One day a child who had hitherto been mute asked his parents to pass the salt. They asked him why he spoke only now, and not previously. "Until now," he said, "everything has been perfect."

I once came across a considerable supply of cocaine of the greatest possible pharmaceutical purity in a remote African clinic. It had been imported for use as a local anaesthetic in eye surgery. It would be an exaggeration to say that I resisted the temptation to take possession of it and transport it back to Europe for sale on the black market, because I was not for a moment tempted to do so, nor indeed would I have known how to go about selling it. But, I have often wondered about the ultimate fate of that cocaine.

More recently, I have once again fallen prey to insomnia, for reasons that I cannot fathom. I have no more reason to be anxious than at any other time in my life, unless advancing age be counted such a reason. The state of the world has never caused me much anxiety and I have lived through more than one terrible situation, admittedly more as an observer than as participant or victim. I know that the future in the post-Covid world is uncertain—that inflation or even hyperinflation may be coming—but since the past has always interested me much more than the future, I am not given to much anxiety about what is to come. There will always be a past to console me.

I lie awake, unable to sleep, without knowing why. It is not guilty conscience, though I have an average amount to be guilty about. I lie awake, therefore, and attend to the nocturnal noises of my house, which are surprisingly many and varied.

There is the ticking of a clock, but that is only to be expected since I was the one who wound it up. Sometimes there is a rustling upstairs, possibly of weasels in the attic, whose presence I would never have suspected until our pest-controller who comes twice a year told me that weasels are partial to the kind of fibreglass insulation which we have installed.

Weasels, of course, do not have a good reputation as animals: no one calls another person *weaselly* as a compliment, nor do

weasel-words presage any good. Sly, furtive, cruel creatures are weasels, though not physically unattractive: somehow, I quite like the idea that they make their home in our attic.

Our pest controller, it seems to me, has an enviable job. He knows about our various pests and respects them in an almost chivalrous way: flies, hornets, wasps of various description, untoward bees, ants, termites, mice, rats and bats. Bats are not really pests at all, besides which they are more protected by the law than is the average old-age pensioner, but they require two homes, a summer and a winter (like the Tsars of Russia), and while they are good for the control of mosquitoes and other flying nuisances, their droppings are not pleasing. Of a summer evening, the bats fly into the bedroom and although they are said to be possessed of the most sophisticated sonar system, they seem to have difficulty in finding their way out again and frequently fly into the paintings on the wall. Besides, one occasionally reads of someone who has contracted rabies from the proximity of bats, and though this is very rare, I find it difficult to get such cases out of my mind. Man can *think* statistically, but he cannot *feel* statistically, which is why he is prey to statistically-absurd fears, such as that a bat flying round his bedroom will communicate rabies to him.

There are a surprising number of clicks, bangs, knockings and other such noises in an isolated house such as ours in the dead of night. Some sound as if they were made by humans: could there be intruders? I resist the temptation to get up and see; if there are, the chances are that they are armed.

I once talked to a friend of my about the curious fact that in England, many more baseball bats are sold than baseballs, the very opposite of what you would expect if people actually played baseball. No, the bats are bought as weapons, offensive or defensive, or of course both, since offensive people more often have to defend themselves. Cricket bats, by contrast, make inefficient weapons, having flatter surfaces; it is not

impossible to inflict injury with them, but the injuries – at least, the physical ones – are not usually so serious (I remember one Sikh gentleman who, drunk, attacked his wife with a cricket bat, causing blood to run but no life-threatening injuries).

Subsequent to that conversation, and as a joke, my friend bought me a baseball bat to keep by me in our bedroom in case of hostile intrusion. Even someone as unaccustomed to exercise as I ought to be able to defend myself from intruders with a swing of the bat, but somehow I did not take to the idea: suppose the intruder wrested the bat from my hands and turned it on my wife and me? Even *in extremis* I think I might feel inhibited from applying it with my full force, whereas the intruder would not. Besides, the English law is very peculiar on the matter of defending yourself against attack: you are supposed to use only that force which is reasonable in the circumstances, or the minimum to produce the desired effect, in this case the withdrawal of the attacker. But how does one calibrate what is reasonable or the minimum? Suppose in repelling the attack I were to break the intruder's skull and do him lasting damage: according to our absurd law, the intruder could then sue and stand a fair chance of winning.

Well, that is England for you; but our very isolated house with weasels under the roof and all manner of nocturnal clickings and bangings is in France. The only intruder we ever had was a drunk who drove down our very narrow and winding track one night under the misapprehension that there was a party going in our house. He was so drunk that when he got out of the car he could hardly stand, and certainly he could not walk. "Don't worry, *ma poule*" (my chicken), he said to my wife with affectionate familiarity, but we did worry, not for ourselves but for him.

Should we let him depart in his state of inebriation? The roads near the house are very narrow and winding, sometimes with dramatic drops of several hundred feet, and a man who

could hardly stand without a prop was hardly safe to drive along them. The roads are so unfrequented, particularly at night, that it was unlikely that he represented much of a danger to others, but to himself he must have been a considerable hazard.

Was it for fear of a scene that we let him depart? We had thought of offering him a room for the night to sleep it off, but decided against. In any case, he was obviously determined to find the party of which he had heard, or hallucinated. His enthusiasm for a party was to me very strange, for I have no understanding of the pleasure of parties at the best of times, let alone in his condition. With surprising dexterity but predictable insouciance, he reversed his car and turned it round, though our track is very narrow and more than one fully sober person has got stuck trying to turn his vehicle round on it. He drove off.

As we watched him go, I thought of the last line of one of Chekhov's short stories: "Farewell, my treasure!" We thought that we might soon hear of a terrible accident locally in which a man had been killed when his car drove off a precipice, but we never did. We were relieved: his death would have been in some sort our fault, in that we could have prevented it if we had really tried.

Of course, most drunken drivers reach their destination safely, even if drunken drivers are disproportionately liable to accident. And this was comforting, because I had just read a paper in which insomnia was found to be associated, statistically, with the development of dementia. But most insomniacs do not dement ... and with that happy reflection, I fell asleep.

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Theodore Dalrymple's latest books are [*Neither Trumpets nor Violins*](#) (with Kenneth Francis and Samuel Hux) and [*Ramses: A Memoir*](#) from New English Review Press.

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