them down as instances of ‘the dangerous prevalence of imagination’, although imagination aroused not by solitude, as in Rasselas, but by a communal fever. Johnson may have been more right than he knew to remark on our attraction to stories of others like ourselves undergoing credible experiences. As the kindred phenomena of Mesmerism and Perkinsism suggest, one’s bodily experiences—one’s very sensations—may mirror those of others, or those imputed to others. Indeed, the predisposition to feel what we suppose others do remains to this day one of the channels of the placebo effect. In the tradition of Perkins, a book on the popular therapy known as EMDR (Eye Movement Desensitisation and Reprocessing) may in fact preface the text on the reported experiences of others, the designers of the experiment, knowingly or not, followed a precedent now 200 years old.

What I wanted to hear

Routine ER page. He says it’s a COPDer.
This will be easy—nebs, steroids, O2. Home in a day.
“What about the murmur?” I ask
“No worries, it’s innocent.”
Just what I wanted to hear.
Admit to floor; return to bed.
3 a.m. nurse is calling. Looks worse.
“I can’t breathe.”
Smell of fear. Lunge for my arm. Dead.
Autopsy: pinpoint aortic stenosis.
Fixable.

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