

BOOK REVIEW

Em and the big Hoom: A book review

Author: Jerry Pinto

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Reviewing a book on its literary merits (or lack thereof), and doing so for a professional journal through “professional lenses,” for what it can tell us about mental illness and the universes of the mind tends to be a very different process. Be that as it may, the starting point of review must necessarily be the literary.

And so, on the literary front, in “Em and the big Hoom,”^[1] Jerry Pinto tells us the story of growing up in a Roman Catholic Goan Christian family in Mumbai. It is the story of Imelda (Em), Augustine (the big Hoom, or Hizonner), of Susan, and of the teller of the tale, the younger sibling, a son. The book tells us of Em’s stories, her letters, her rapier-sharp comments, and her interconnected memories. It tells us the stories of Em’s madness, her deep dark depressions, and her fearful excited manias. It is a coming-of-age novel, in which the coming of age means grappling with the knowledge of mental illness and how it ravages families, and the desperate remedies, which they evolve in dealing with mental illness.

The growing adolescent’s attempt to make sense of a topsy-turvy, forever-changing world, where the only constant is dread—dread of what the next day will hold and being found wanting when the tomorrow comes, and a more secret dread of sharing the same fate. What happens however, is the dealing with all of this with wit, compassion, and love. It is a child’s attempt to see the reality of the person the mother is under the masks created by the illness. It is an attempt to acknowledge that personhood.

Starting with the brilliantly evocative title, (reminiscent strongly of Dr. Seuss) the book flows as a story. In acknowledging his mother as a writer, from disparate personal diaries and letters, Pinto manages to get the “effortless lift-off” that he sees in so much of her writing. In mapping her “mania through font size,” he tells a simple, yet profound story. He brings her vividly and poignantly to life, leaving us, along with the big Hoom, in tears when she dies. Using the very effective technique of quoting both her

and her writing from letters, diaries, and sundry jottings, Pinto weaves compellingly human tale, which are both a tender love story and a tragedy. It is, at many levels both narrative and testimony to her, and to the stoic, patient, capable father, who holds the family together through crisis after crisis. It remains a gentle, witty, darkly poignant, and astonishingly well-told tale. It also is an excellently produced, well-designed, and laid out book that is old-fashioned, a pleasure to hold and read, no small achievement in itself.

While this is a book about mental illness it, however, is many other things: It is a book about the process of writing, it is a book about families, of how parents relate to children, of how children are “parents” to their parents, it is a book about looking for and finding both humor and hope in despair, and it is about the defeat of despair. It is, I think, destined to become a very celebrated book, which will be read by many who will see in it many different things and connect with it at various levels.

As an aside, being interested in writings on mental illness, I have spoken of this book to many people, and am yet to find one who is not most fulsome in its praise. In fact a friend was so enthusiastic about the book that he plans to gift it to many others.

For the mental-health professional the book tells a story from a perspective that few among us hear. In a sense all of us create, and indeed, mold the narratives that we hear. The clinical gaze is about looking for illness in personhood, about deciphering the pattern that will distinguish manic depressive illness from schizophrenia, as much as it is about distinguishing disorder from “normalcy.” While this is essential for the exercise of diagnosis and hopefully of treatment, what it does is that by its very clinical nature strips skin from bone. As Bishop^[2] says, “for the doctors who care for patients, the patient’s experience is often understood as, at best, a story that points them to the truth of an illness.” What the clinician does is to “reconstitute” the story of the patient’s experience to help the diagnostic

process. The diagnostic process and the therapeutic process are however, while connected, different. It is a different matter that the eventual intent is a duality of gaze, being able to see the clinical pattern as well as the essential individuality that makes us all unique, whether we have a mental illness or not. This story, like many others, reminds us starkly of how often in the practice of psychiatry that duality tends to get lost, leaving only clinical impersonality.

This is in many ways a sobering narrative, telling us the limitations of interventions. In a lifetime of illness, the doctors remain largely faceless, and nameless, apart from a few exceptions. It is the “hopefully gentle” hands of the attendants that occupy larger mind-space, rather than what the doctor is saying or doing. Furthermore, apart from the rather brief summer of Lithium Carbonate, it tells us the limitations of medication in prevention and management.

In an earlier review of *Sepia Leaves*, by Amandeep Sandhu,^[3] I have commented on how peripheral the psychiatrist seems to be to the actual living of life with mental illness. Pinto, again, underlines the point.

This is clearly not to suggest that psychiatry itself is unimportant. The “summer of lithium carbonate” shows us how a change in medication could dramatically alter the landscape of lives. Who is to say whether the medication, had it been used earlier or if she had responded “better,” whether much suffering may have been prevented? This however, is not a book about psychopharmacology, however, about the lived experience of illness and viewed from that perspective, there may be much that we may want to think about.

The other aspect which psychiatry must concern itself with is the stance taken regarding treatments like electro-convulsive therapy. As Amandeep Sandhu^[4] in his review says, after a session of Electro Convulsive Therapy (ECT) the tenor of the story alters “from being a terror against madness to being a terror against the system.” I would consider this not so much a difficulty with the mode of ECT as a failure in the process of communication and reaching out to both the individual and the family so that they could have made more informed and participative choices. What happens here is that the family feels both helpless and alienated, having no recourse but to seek help, and at the same time, feeling at the receiving end of a process that should ideally be mutual. In the attached, rather hard hitting commentary, Pinto,^[5] articulates part of this anguish.

What we are seeing across the world today is a coming together in conversation of people who have lived with mental illness, of family members of people with mental illness, and of the mental-health professionals. Pinto, in this novel, articulates wonderfully the care givers perspective, and this is certainly a voice that needs to be heard. For

the professional it underlines the need of both listening to and talking to both the patient and the family. As medicine and society continuously renegotiate their contracts, both awareness and appreciation of other positions becomes vital.

This book has generated much deserved discourse in the public space. Jai Arjun Singh,^[6] in an excellent, insightful review, speaks very warmly of the chords that it manages to touch. His only difficulty with it is how much of the book is “fiction” and how much “fact.” This, to my mind, is not particularly important. Pinto in a book reading says that it is 95% fiction and 95% fact, which to me is a wonderful concept. It is a telling of tale of disorder, of the seeking of the person within a disorder that is terribly mutilating of individuality, of the finding of both love and redemption in it. It illustrates brilliantly, the fact that all telling’s of a tale are essentially true. All telling will be by its very nature different, but no less valid.

I firmly believe that this book should be essential reading both for those who deal with illness in a professional capacity, and those whose lives are touched by it, and I would say this not only because it deals with mental illness, however, that it tells an excellent story.

Other suggestions of readings would be Amandeep Sandhu’s *Sepia Leaves*,^[7] and Satnam Sanghera’s *The Boy with the Topknot*.^[8]

Alok Sarin

Department of Psychiatry, Sitaram Bhartia Institute of Science and Research, New Delhi, India

E-mail: aloksarin@gmail.com

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