

The Steady Solid (2019)
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There was a time when one could only eat up to two eggs per day. It was said that ldl (low-density lipoprotein) cholesterol, also known as bad cholesterol, in the yolk increased the level of cholesterol in the blood and that would increase the risk of arteriosclerosis, heart disease, and stroke. I can even visualize it: muddy, fatty sludge sticking to the vascular wall, piling up on both sides and becoming a yellow lump. That was how it was often animated on health programs on tv. Eventually, drifting blood cells get caught up in the narrow pathway and clog the blood vessel. The virtual blood vessel of the animation is an abstraction. It doesn't belong to any specific part of the body, yet it could be anywhere (even somewhere crucial) any moment, even now. It's a lifestyle disease indeed. On the other hand, eggs are the gold standard for protein quality. I read on the internet that egg protein contains essential amino acids which allow for rapid recovery post-exercise. Slowly absorbed proteins like those in eggs make for better protein anabolism, which is optimal for lean muscle growth. As the white contains more than half the egg's total protein, I found a way to get the egg's benefits without the cholesterol, by adding three egg whites at breakfast into my diet routine. There are bodybuilders who mix raw eggs into their shakes for practicality, however, when the egg is ingested raw, albumin, a type of protein, will be absorbed undigested. It is therefore preferable that the egg white is cooked until it loses its liquid state. The best, it seems, is to boil the eggs, but considering the work-load for my wife who would have to peel the shells from three eggs every morning, we compromised on three egg whites fried in a pan: "fried-eyeball" in direct translation from Japanese—but without the eyeball. No bad yellow eyeballs. A good solution, the optimum.

I know in English they call it "sunny-side-up." I used to travel to the United States and Europe at the end of the 1980s, when I was involved in the expansion project of a theme park in Japan. In the theme park business, one of the expansion strategies was to add resort hotels to the main facilities, allowing visitors longer stays with package plans. My research already began when I would land at the airport, analyzing the access to the theme park, the hotels and infrastructure in the surrounding

area. In the hotels that I stayed, I had the continental breakfast. The restaurant staff asked me if I wanted to have boiled eggs, scrambled eggs, or sunny-side-up. I knew already what boiled eggs and scrambled eggs were. I could quickly figure out what sunny-side-up was by a process of elimination. In foreign countries, where I didn't know the language well, I often observed situations, judged things from the context, and acted on these observations. Most of time it went as well as I expected.

For the last couple of years the joke has become useless. First, as a result of scientific research that suggests that most of the cholesterol in the body is produced inside the body, by the liver and other organs. That means that bad cholesterol intake does not necessarily remain in the body, and so the cholesterol intake limit was removed from the Japanese dietary criteria. Secondly, I started feeling a sense of paralysis in my left foot together, little by little, with loss of balance. As it progressed, I was diagnosed with a rare progressive brain disease. Science has still not been able to elucidate the mechanism and cause of this disease. The only clue so far is the accumulation of the protein tau which has been found in affected brain cells after autopsies of deceased patients. The disease bears some similarities to Parkinson's disease, but it affects a different part of the brain, and it has different proteins that accumulate, different symptoms, and a different speed of progression. My wife could not make a joke in this situation by saying, "I thought I would become sick because I was eating yolks everyday but it was a great lie about the two-eggs-per day slogan. And my husband who was eating only egg-whites is the one who got sick." Such a joke doesn't come across as funny even when delivered with a tone of self-deprecation. I have still have my wasted, leftover muscles from bodybuilding. They hang from me while I sit in the wheelchair.

There is a difference in the degree of consideration for wheel-chairs. When I take my wheelchair to the subway near my apartment, I can go to the station counter and ask the station staff for support. The station staff will bring a metal plate that covers the gap between the platform and the

subway vehicle like a bridge. They contact the driver of the next train in advance, and the driver will not close the door until the station staff confirms that I have finished getting on or off the train. This process was far more stressful when the paralysis in my foot was still light enough that I could walk with a stick. I became anxious about every small step elevated from the ground. As soon as I recognized a step or even a simple transition from one material to the other on the road, my left foot stopped listening to my brain as if my body had detected the danger independently of my consciousness. In these places outside of my conscious control, my feet would get tense and freeze in a way that flexed my muscles all at once. Such a sensation is called a "frozen leg," but even so, it doesn't mean that the leg is stable like a wooden stick. The muscles on the front and back of the thigh, calf, shin, and toes, all contract without stabilized continuity or coordination between them. The left foot cannot be lifted to cross a small step, nor is it reliable enough to put my body weight on in order to lift my right leg. If my eyes don't catch the step, my feet can go on without being frozen, but once the step registers in my unconscious, I cannot shake it off.

I used to manipulate my emotions and consciousness through force of will so that my body would be under control in the occasion of temporary body pains or pushing through hard training. Such a technique is no longer effective in this new body. It gets worse in situations where there is a time limit set in advance; pedestrian crossings with traffic lights, getting on and off trains. I cannot trick my body, it's with me, and my body already has the information before I do. The time that trains stop at each station is calculated according to statistics about the expected numbers of passengers getting off and on. In order to get onto a train within the allotted time, I also had to calculate for the possible time needed to lift my frozen left foot. This lack of control too can be made into data through statistics. I have all the passenger traffic patterns in this station in my head, for each train at different times of the day and different days of the week. By comparing these two data sets, the passenger traffic and my own mobility, I can determine the most optimal timing and location to board the train.

I stopped bodybuilding after my diagnosis. It became difficult to walk with a walking stick outside because I couldn't intuitively rely on my sense of balance. I began to walk in my apartment while holding onto various things. When I bent my upper body forward, it felt almost like losing my balance in a state of drunkenness. I needed to place both my hands on stable surfaces around me and to check whether my weight was placed well on both feet. When I got up from my reclining chair, I would pull my heels towards me first so that my knees were aligned in front of my toes. While pushing up the armrest using only the power of the arms, I put my weight on the soles of my feet little by little. Meanwhile, my knees were bent at almost 90 degrees. If I pushed it too much, I would fall to the front, so I would push my weight carefully to the point where my body could ride on my feet. When my heels and knees were not in the right place, I would sit back to the sofa and reset my feet position. And I would try it again. The balance is not sensed by my head, but it is judged by how much pressure I could sense on my palms. I would slowly set my hands free from the armrest, my knees still bent at the same angle. Only after confirming that my body was standing for a while could I finally stretch the knee. Here too, since I could not trust the fine adjustments of my left quadriceps, I would stretch my left leg slowly while adjusting the speed by compensating with my right thigh. It always felt much safer to pull my body towards its balancing point than to push it. I preferred door frames that I could grab onto, rather than flat surfaces like tables. A sense of relaxation was the key, and if I felt nervous, my left foot would freeze up and my hip would move down and backward. Those with Parkinson's disease usually fall forward but it is known that those with my disease tend to fall backwards. That was how it often happened. When my body sensed danger at the edge of carpet or even the thin cable of the phone charger lying on the floor, my left foot would leave my body.

Actually, it would be easier if it did physically leave my body but it remained attached and all the muscles strained in confusion. When I begin to fall, I rush to walk towards the walls or anywhere I can grab. Take one step with my right foot, left leg doesn't follow, right foot takes one more step. The distance between my legs widens and my hips go backwards from fear and throw my balance. My eyes see the handrail on the wall but it is too far. The doorframe, the edge of the counter, the overhang of the wall—too far. My hands search for everything in reach at the same time. Touching the surface of the dining table, it slips away from

the fingers of my left hand, and the right hand flails way behind. It grabs the corner of the sofa but I'm already half way down to the floor. Time goes slowly while I see these things and touch those things. Not only in my mind, but also in reality. I never fall suddenly. It always goes slowly, dragging the whole rooms down and backwards.