Back To Go

‘As a neuroscientist, I’m only too well aware of the vulnerability of the brain, but also its astounding ability to adapt. *Back To Go* is not just a memoir of a life after brain injury, but a celebration of that life. Leonard Lewis’s journey of navigating hurdle after hurdle is at once unique, but also a testimony to the power of the human spirit. His voice grows louder with each turn of the page, is highly personal, humorous, and honest. He speaks not just for himself, but for many who can no longer do so.’

Professor Susan Greenfield

Back To Go

Life After Brain Injury

Leonard Lewis
with Catherine Blyth

Illustrated by Trashy Mags Art

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The James Lewis Foundation was established in memory of James Lewis, who passed away in 2011 having suffered a fatal epileptic seizure. Funding focuses on organisations working to support people living with epilepsy and epilepsy co-morbidities; research into epilepsy, specifically SUDEP (Sudden Unexpected Death in Epilepsy), and further education in art.

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In memory of James (1987-2011)

My mother Lorna used to say: ‘Quality, quality, quality.’ She could have been talking about my three boys. They lived through a challenging time in their preteen years, and now my daughter is the same age. I would like to dedicate my book to all my children: Joe, Ollie, James and Lorna. And my grandchildren, James, Eliza and Esther.



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Foreword

Christmas Eve, 2024.

I was sitting with my daughter Lorna in our flat overlooking the River Thames. She blinked her enormous blue eyes at me, then started a conversation I had been waiting for since she was born eight years earlier.

'How old were you when you had your accident?'

'Forty.'

'So you have spent most of your life in a wheelchair.'

'43 per cent. Give or take.'

'So I have never seen you out of a wheelchair?'

I did not know what to say. Surely she could remember me walking, from time to time, with a stick, and somebody standing by to catch me if I fell? Then again, it had not happened in a while.

Lorna had another question. 'Will I ever see you out of your wheelchair chair?'

'I hope so.'

Three decades had passed since the accident that caused devastating damage to my frontal lobe. My recovery has been long and difficult. I have decided that TLI is a better description for my situation than TBI — traumatic life injury, not traumatic brain injury, because this kind of trauma alters everything. The changes have been dramatic, and I am not the way I used to be. My new life is meaningful, but in dark moments it feels like I have been on

the same treadmill for 30 years. It just goes on and on.

In spring 2024 serious illness led to my hospitalisation, sending me back to ICU for the first time since my fall. I recovered enough to return home, but I was seriously overweight and had abandoned all efforts to walk. For there to be any hope of getting back on my feet I needed to reconnect with rehab. Above all I wanted Lorna to see me walk, but I also wanted her to understand a bit more about me, and what happened after I woke up from a coma into a body and a brain that were worlds away from the man I had been before.

Luckily, I had collaborated on a memoir two decades earlier. Here follows that story, more or less as it was written in 2006. There are certain advantages to putting things on hold. The luxury of revisiting my experiences so many years later is that I can review the text in the knowledge of what happened next. No names have been changed, although we have updated, edited and expanded a few details.

I called the book *Back To Go* as a nod to the board game, Monopoly, because ever since the accident I have felt as if I completed one lap of my life and was being asked to begin a second lap. I am still waiting to collect my £200. Since I wrote it, science has caught up with neuroplasticity, the capacity of the human brain to adapt and foster new neural pathways. The hard facts of my loss are simple: the destruction of millions of irreplaceable neurones. But neuroplasticity makes it possible to relearn lost skills. Since I recommitted to rehab this year, following on from that conversation with Lorna, I have seen real progress, and it is a process that helps to keep my mind, and spirit, alive, which I write about in a new epilogue at the end of the memoir.

So this book is largely a story of trying to walk again. Due to its narrow focus, a number of very important events

are not covered in the pages that follow. One is the greatest sadness of my life, which took place in 2011, when Emma and I lost our beloved youngest son James after a seizure. No words can account for this sorrow.

The most positive change happened when I met Ingrid, an amazing woman and fantastically creative designer. She cared for me in an extraordinary way, and my quality of life improved considerably. Then we were blessed with the arrival of Lorna in 2016.

It is a comfort to me that you can glimpse something of James in this book, Lorna. Thank you for being interested. You are the wonder of my life, Part Two.

Leonard Lewis, November 2025

Co-author's Note

Revisiting work is a privilege, but it is daunting too. Would the words still speak to me after so many years?

I also knew something about the afterlife of this memoir that Leonard did not. When I first met his wife Ingrid over dinner there was an extraordinary moment when suddenly she gasped and said, 'Oh, you are the writer? But reading that book is when I started to fall in love with Leonard!'

It turned out that he had given her a copy early in their courtship. It is the best review I have ever received. But of course it was not for me, it was for him.

The desire for privacy has limited the circulation of this memoir to friends and family. For me, although it details an experience as extreme as any astronaut's tale of returning to earth, at its heart lie universal themes. Each of us must navigate our limitations as we seek our purpose in life, but few will confront obstacles as steep as Leonard has faced, or need to develop such a deep awareness of the miraculous human body.

It has been a joy to share his story.

Catherine Blyth

Introduction

The cliché is that life begins at forty. I never imagined that on 25 June 1994, 84 days after celebrating the big Four-O, I would make a dramatic vertical entrance into part two of my life, after falling headfirst off a pony onto the turf at Guards Polo Club in Windsor.

I lay in a coma for 18 days, but failed to make it past heaven's gate. Instead I woke up with a severe traumatic brain injury to my right hemisphere, leaving me unable to move the left side of my body. This event put a serious dent in my social life. It also gave me the opportunity to become a nicer person (or so my sons tell me). And it provided a great excuse for not doing anything I did not want to do. Doing what I wanted, however, would prove an uphill battle. And what I wanted most of all was to be me again.

Brain damage is not the end of the world, but it does require patience from all involved. At times I felt as if nobody was listening to me. Although I have lost some brain cells, I have not lost my mind. But it is hard to convince other people of this fact — particularly strangers, particularly if I happen to be sitting in a wheelchair when I meet them.

In many ways it could be worse. I have a great support system, I have financial security, and most important of all, I have a loving family. Not everyone is so lucky.

Countless people have faced similar challenges. In the

United States alone, one and a half million people suffer from neurological injuries, with 10,000 more hospitalised each year. If the States represents five per cent of the global population, the worldwide scale of this problem is immense. I shudder to imagine the numbers, especially when I remember that the world's population has tripled in size since I was born, from 2.75 billion people in 1954 to 8.5 billion in 2024.

I have also discovered that the style and quality of treatment for brain-damaged patients varies hugely from institution to institution, country to country. In part these differences are cultural, but also down to personalities. One medic's lost cause is another's potential miracle. Support and resources are unevenly distributed too, meaning that people with disabilities face extraordinary inequities, with varying forms of financial and living assistance available in even the richest countries of Europe. For example, France offers the most generous benefits, especially to those who require caregiver support (up to 2,500 euros a month). In Germany the benefits are at a lower level, but then again social services tend to be more extensive. In Spain more expansive pensions are available, but these tend to be linked to past employee contributions and work history — bad news for young disabled people who cannot find employment that accommodates their needs.

What has angered me most over the past three decades is the widespread perception that someone with brain damage has nothing left to offer. But brain damage does not automatically cancel you out. And it is important to remember that there is no such thing as a perfectly normal brain.

Much has been written about traumatic brain injuries, yet few books give the inside track on what it is like to live

with one. In a small way, with this memoir, I hope to change that. I realise that my version of life with TBI is out of the ordinary, as my resources have allowed me to explore so many possibilities and treatments. At times I have felt guilty about my good fortune and inhibited from speaking up because I cannot claim to be representative. The flip side of having this level of support is that it has enabled me to write, giving me a voice that is denied so many. If sharing my story can build understanding of TBI, then it will be worth it.

There are many ways to enrich life for a brain-damaged person and their loved ones. Hope and determination are the most important factors. Since my accident, my eyes have been opened by charities such as Chicken Shed, the theatre group that makes no distinction between able-bodied or disabled actors, harnessing the talents of every individual. And Headway, which supports the families of those who have suffered traumatic brain injuries.

Hindsight is a good companion. When I sit around of an evening and reflect on my lot, I recognise that what happened to me offered the chance to experience life from a different perspective. And there is life, and it is worth celebrating.

Before

I like to make out that I have done something useful in life. In fact my only claim to fame is to have been in trade. I took over the family business, Chelsea Girl, and in 1988 I reinvented it as River Island.

The company started with a knitting wool shop opened by my father Bernard after the Second World War, in a shack that he built with his own hands on a bombed-out patch of land in the Nag's Head, north London, where the Holloway Road meets Seven Sisters. Over the following decades he and his three brothers, David, Geoffrey and Godfrey, built up the business into Lewis Separates, a national fashion retail chain. In the 1960s, inspired by the boutique revolution kicked off by the likes of Mary Quant on Chelsea's King's Road, they converted Lewis Separates into Chelsea Girl. It was an instant sensation.

I am my parents' eldest child, born in 1954. Then there is my brother, Clive, and my sister, Caroline. Shops were an enormous part of our life growing up. Our father worked hard. Mounds of paperwork were a standard feature of the living room landscape. But he was always there to tuck us into bed and tell one of his made-up stories, and pretty much every weekend we would visit one high street or another with him, seeing how the merchandise was moving in our stores, and also checking out the local competition — a family ritual that I would one day enjoy with my sons. It did

not occur to me that I would want to do anything else with my life other than work in the family business.

I soon began helping in the shops for pocket money. Then at fifteen I tried my hand at independent retail with my mate Simon Harley, setting up a fashion stall in Kensington Market. The hippies were all around us, and I had a great time watching Mick and the other Stones in Hyde Park that July, but I could not see the point in skinning up and getting out of it. Why bother when there was a chance to get out there and make something happen?

My mother Lorna, as glamorous as she was eccentric, regularly dropped by to embarrass me — or, as she saw it, to share the dark arts of market trading. One of her top tips was to scatter pins over the ground around our stall. She reckoned that the light they threw off would bring customers flocking. If only she had chucked sixpences instead.

Like Mick Jagger, I attended the London School of Economics for a brief time, then decided to move on to the university of life. A single term in the early 1970s was enough to teach me that I was more interested in the realities of commerce than academia. So I decided to acquire my business knowledge hands-on. I had convinced myself that learning about shoppers' behaviour was more important than being educated in the classic sense. Nowadays I see it was not such a smart move. I quit before learning what else formal education might have to offer and short-changed myself. But back then I was totally committed to the industry. I dedicated around 90 hours a week to thinking about retail.

First I took charge of the Chelsea Girl store in Kingston upon Thames, where I learnt how to manage a sales force, and began to attend buying meetings at the head office on the Avon Trading Estate in Olympia and give my take on the

merchandise. The following year I moved to the HQ to become a permanent member of the buying team in charge of the skirt department. And when I say department, I represented 50 per cent of the staff. The other 50 per cent was Janice Dilley, the designer.

I met Emma, the beautiful sister of Suzy Purdy, a famous model, at a friend's birthday party. Marrying her and then welcoming our son Joseph in 1984 was the icing on the cake. Ollie arrived a couple of years later, followed by James. I had never been happier.

James was diagnosed with a chromosomal disorder known as Noonan Syndrome. He did not let this hold him back in life. Noonan also provided a focus for some of our family's charitable efforts. I teamed up with Sheila Brown, a mother to two disabled children, to found the Birth Defects Foundation, and in 1993 we established a trading company to create a new fundraising platform. My idea was that we could sell donated goods and excess merchandise from our shops and other high street retailers. The New Life Superstore opened in 1996. Today there are ten New Life stores across the UK, working with over 300 retailers across Britain and Europe to raise significant amounts of money, not to mention employing hundreds of disabled adults.

My first big a-ha moment in the family retail business had come a good decade earlier, when I set myself the task of studying the comparative earnings in different locations within stores. While merchandise flew off the rails on the ground floors, it shifted far more slowly in the basements and first floors. I thought we could make these secondary spaces more productive if they became a destination in their own right. Top Shop, one of our biggest rivals on the high street, had done this effectively by creating a brother brand, Top Man. It struck me that maybe we should introduce

menswear too. (I preferred to regard borrowing ideas from Top Man as being inspired by Top Man.)

After a Saturday visit to Chelsea Girl in Liverpool, I was strolling along Church Street when I wandered into Burton's, then the leading menswear chain on the High Street. I wondered how much the store took because to judge by the crowds, it seemed pretty successful.

Luckily in those days one was able to adopt a pragmatic approach to market research. Back at my desk the following Monday in our new HQ on Hanger Lane, I phoned up the Liverpool Burton's and asked to speak to the branch manager. I introduced myself as Brian in the accounts department and explained that we needed to confirm last week's sales. To my surprise, he told me. The figures exceeded what I had expected and some similar research with Top Man confirmed the scale of the opportunity. I proposed it to the board, who agreed, and in 1983 we opened our first co-ed branch of Chelsea Girl and Chelsea Man on Argyle Street, Glasgow.

The launch was great — until we received a stiffly worded legal letter informing us that the name Chelsea Man already belonged to another company. Discussions with them progressed all the way to the High Court. After my cross-examination by Robin Jacob QC I accepted that if we were going to continue with menswear we would have to trade under a different name.

We tried out Concept Man in a number of shops, but it did not grab customers so I set out to find a new brand identity, one that would create the image of a special place. I quite liked the idea of Fire Island, after the famous New York party hangout. Then one Sunday, enjoying a river trip with Emma and the boys on the Thames, not far from our then home in Cookham, we passed an island. I realised this

was just what I had been looking for.

On 10 September 1987 the first River Island opened on the former Chelsea Girl site in Exeter. We set out to appeal to a broader customer base than Concept Man had served, offering mid-priced fashion-forward menswear aimed at young guys with an individual sense of style. David Dalziel designed the eclectic shopfit. Displays of contemporary photographs covered the walls, with antiques and American-themed memorabilia scattered around the store. An evolution rather than revolution perhaps, but the high street had not seen anything like it. The opening got off to a fantastic start. So much so that after four hours of trading, on the plane back to London, the company board asked me if I could create a women's River Island too.

At that time Chelsea Girl's star was fading and our stores looked tired compared to upstarts like Next. One of our family's great strengths in business has been the ability to recognise that just as each generation gives way to the new, so a fashion retailer's identity must be updated. When the request came, I already had a three-stage plan for transforming Chelsea Girl into River Island.

A major challenge was to re-brand the stores but avoid serious mark-downs, through clearance sales of merchandise with the Chelsea Girl label. To smooth the transition I devised a bridging operation: two new designer brands, Charlotte Halton for smart clothing, and Luisa Calvino for casual wear, which could sell in both stores. They made their debut in the next iterations of River Island in Luton and Oxford, in spring 1988. Both shops surpassed our highest expectations. It was time for phase two: to roll out River Island throughout the group.

I used the term 'River lslandising' to emphasise the lifestyle that the brand sought to evoke. We were not only

selling clothes but a vision of the life that our customers might lead in them, encapsulated in the look and feel of the stores.

The overhaul from Chelsea Girl to River Island took two years. We ran it like a military campaign, opening a new store every ten days. Then came phase three, applying the River Island brand name to stock.

I was now forty years old and River Island's managing director, hungry to take the business into new territories. Industry rivals began calling us Treasure Island. Above all these riches I had a full and active family life with Emma and our boys, living in the countryside and enjoying all sorts of sports, especially skiing. I could not have wished for more.

Then Emma and I discovered polo.

Windsor

Once upon a time I thought I could play polo. I was big on talking the game and had the ability to sign the cheques to support a low-goal team, which I called the Terminators.

On 25 June 1994 the family sat around a table in my brother Clive's garden. We were there to celebrate my niece Clara's birthday. I had to leave early because of the match. Emma loved polo almost as much as I did, but very sensibly did not play it competively, so I headed off alone to meet my team in Windsor. I remember cruising through Guards' magnificent grounds in my Ferrari with the roof down, past the gleaming lake in which, according to rumour, King (then Prince) Charles's groom once received a surprise bath, having taken a wrong turn and plunged the royal Aston Martin straight in.

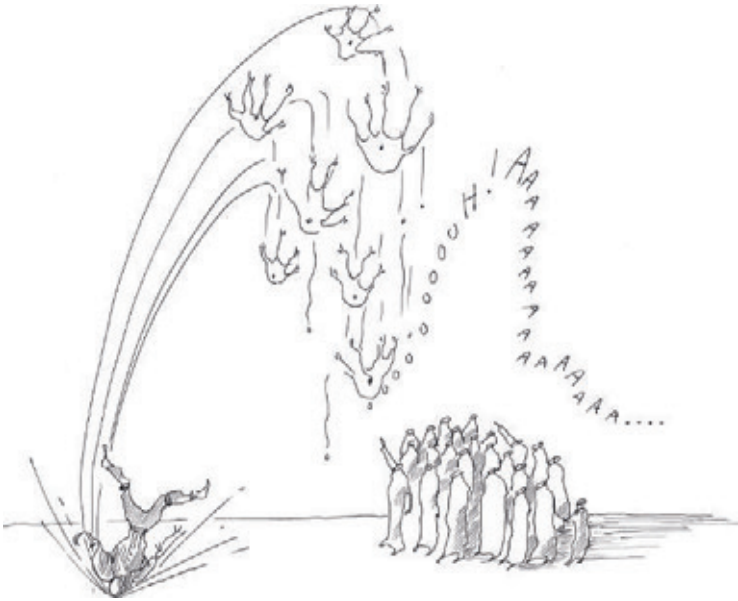
The other three Terminators had gathered in the woodland beside the polo fields. Our ponies were saddled up, ready for their fifteen minutes of glory. I buckled on my new American helmet, which my good friend from Sacramento, polo aficionado Dan Patrocchi, had recommended (in those days English polo helmets were constructed out of cork, unlike the sturdy ones in the US). The team manager, Helga, gave me a leg up onto my favourite pony, Lucia, and we rode out for a few practice shots at goal.

I have no memory of what happened next. But this is

what I have been told.

The match began and some time around 4.30 pm another pony crossed my path. Lucia tripped and came to an abrupt stop. I shot out of the saddle and landed on my right temple. Lucia toppled over, falling a few feet from my body. If she had fallen a few feet the other way I might never have woken up at all.

In an odd coincidence, although I did not know it then, that same afternoon my youngest son James was meant to be go-karting, but he tumbled downstairs on his way to collect a crash helmet and hit his head. Luckily, he was free to leave hospital after a check-up. The same would not be true for me.



Oxford

An ambulance rushed me to Wexham Park Hospital in Slough. Clive called our mother to tell her about the accident. She said, 'Silly sod.'

At this point nobody knew that I had sustained a traumatic brain injury. But it soon became apparent that my injuries were extremely serious and I was transferred to the Intensive Care Unit at the John Radcliffe Hospital in Oxford.

The Glasgow Coma Scale is a system to assess the degree of brain impairment. Patients are subjected to a series of tests and their responses graded accordingly. Those scoring 13 and up have a mild brain injury; nine to 12 indicates a moderate injury; eight or less reflects severe damage. My grade was three. Any lower and I would scarcely have been alive.

Emma, Clive and his wife Sarah, my father, my sister Caroline, and Emma's mother, Anne Hough, were in the waiting room when they were told the news. My prospects did not look good.

People often ask what I remember of that time. The answer is nothing. I did not hear Emma beg me to wake up because other patients were 'popping off all around me'. I do not recall the smiling nurses who kept my family's hopes up, or the glum doctors who shot them back down.

For days Emma slept in a box room off the ward. She and her mother were so desperate to improve my chances

that they cut a lock of my hair for their friend Mary's black box, where it would be subjected to occult healing forces. This marked my first and by no means last leap into the unknown in search of a remedy.

Two weeks to the day after the fall, Anne noted in her diary: 'Len looks better.'

I remained in the netherworld of coma for 18 days, prolonged by a deep anaesthetic to aid healing. Then one morning my eyelids flickered and Emma thought she saw the glimmer of a smile.

It was a start. But of what, nobody could predict. Brain injuries are as idiosyncratic as individual personalities.

One doctor offered a cautiously optimistic prognosis.

'He thought full recovery one year to 18 months. He doesn't know Len!' Anne wrote in her diary.

Her confidence in my ability to confound the experts is touching. I suspect that the doctor's idea of a 'full recovery' was rather different from what she had in mind. Just as he did not know me, nor could anyone say with certainty how long may be the path to recovery from injuries such as mine. Or how far that path might lead me back to the person I was before.

Three weeks after the accident I moved from the Radcliffe to the Devonshire, a private hospital off Marylebone High Street in London.

Devonshire

1. Waking

I have spent many hours trying to pinpoint the moment when I woke up. In a way it is the wrong question. 'I' could not wake up, because 'I' would take a while to reassemble. What is more, the changes — physical, mental and emotional — mean that the man I am now is different from the one before. The truth is that there was not one clear instant when I rejoined the world; it was a gradual, stuttering return to consciousness. Due to post-traumatic amnesia my scattered recollections only line up in some sort of order from September 1994. So I have borrowed other people's memories to fill in the picture of those early months.

Initial progress was agonisingly slow. According to my mother-in-law's diary of the first four months, a few days after arriving at the Devonshire I moved my eyes and now everyone could see I was trying to smile. Another three days and I squeezed my brother Clive's hand.

Four weeks after the accident I could move the toes of my right foot, but not my left. Another week and I could drum the fingers of my right hand, click them, even clasp a stick. My left hand remained inert. On the 39th day I held Emma's hand, on the 40th a newspaper, albeit awkwardly.

24 hours later I cupped my chin in what Anne called my 'old thinking mode'. By day 48 I could press numbers on a



calculator.

So a recognisable me was emerging, in gestures. But only one half. My left side remained contorted and numb.

Apparently my first words were ‘Jerome K. Jerome’ (he had once lived in our home). But the first thing that I remember is coming to in a strange bed in a light, gleaming room. The walls were pale blue, there was a modest television mounted on the wall opposite, a window to one side, an empty plastic chair by my bed, and sturdy carpet tiles on the floor. If there were any pictures I have forgotten them. A door led off to an en-suite bathroom. The window was a blank of more pale blue — the cloudless sky. It gave no clue to my location.

Which hotel was this? The bedlinen was white and well starched, so I decided it must be the place where we had stayed in Zermatt, Switzerland, when we had gone skiing earlier that year. These thoughts were interrupted by a terrible pain in my left thigh. Why it hurt I did not know.

I have no doubt that this single memory represents the repeated experience of countless days, each morning waking up and feeling again that I was taking my first look at a strange world. Then a nurse would walk in and reassure me that at least someone seemed to know what was what. Eventually I learnt my favourite nurse’s name. Brendan Moore, a chirpy chap from Australia.

Slowly I began to question how I came to be there. Something bad had happened, but what, or why, I could not grasp. In an attempt to apply logic to my confusion, I grew suspicious that the nurses were withholding the facts. Little details, like where I was, and how I came to be there. Of course, I would have seen my family too, and no doubt they explained about the accident time and again. But my mind was unable to hold onto the memory of their visits, let alone

stitch their words into any lasting sense.

I had skipped a whole chunk of time, eventually that much became clear. The television news bulletins went on and on about the new leader of the Labour Party. A man called Tony Blair. Whatever had happened to John Smith?

2. The Room

In everything I do I like to have a game plan, and a game plan requires a goal. But initially at the Devonshire just existing seemed all that was required of me. My mother-in-law Anne's diary records an occasion when I was watching the *Flintstones* cartoon on TV. Asked what I thought, I managed to reply 'stupid'. It says a lot about my condition at the time that this was an achievement worth noting.

A few weeks before this my father Bernard had asked my consultant if I would ever be capable of so much as enjoying television. When he replied yes, probably, my father broke down in tears. Of relief. It was the first positive comment he had heard about my future prospects.

Brain damage or no, being bed-bound is boring. But I would perk up when my father showed me company figures and fabric swatches. At least, Anne reckoned that I seemed interested, and definitely more cheerful. Maybe it was the thought that some day soon I would be back at work.

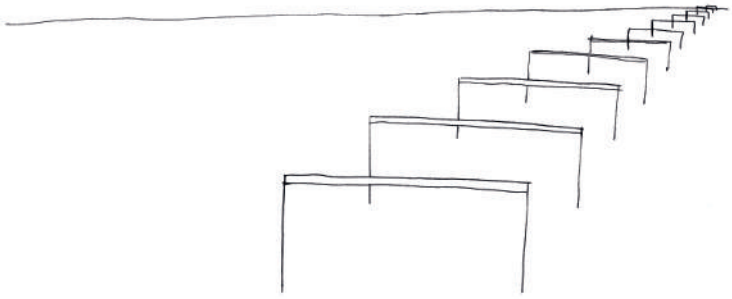
What I did not appreciate at the time was that my injuries were concentrated in my right frontal lobe. This part of the brain is involved in planning, organising, problem solving, selective attention, behaviour, emotions and personality. Most of the damage lay in the posterior of that lobe, which controls the motor areas in the left side of the body.

Like so many people who have experienced loss, a TBI

patient passes through five phases: denial, anger, depression, bargaining and acceptance. However, given the complicated nature of brain damage, these phases do not always follow in a neat sequence, and they certainly did not for me. As I was to find out, an enduring effect is that one has constantly to grapple with negative feelings. Just as I accepted one disability, I would discover another, then become angry and confused all over again. Even now, every day I have to fight the sense that I have been stripped of my previous accomplishments and the respect they brought me. Anger and acceptance still vie for supremacy, day after day. To cope, I learnt the importance of two things, laughter and patience. But the challenge remains the same: how to motivate myself, in the face of the pain of being detained on the reserve bench of life.

Back then, the very concept of recovery was open to interpretation. Was it a return to self — picking up the reins from where I had left off — or was it getting through the endless tasks that lay in front of me like a toddler's obstacle race, scaled up for an adult beginner? I would have to learn again how to sit up, eat, drink, and walk. There were so many challenges that I could not see a finish line, never mind tell whether recovery ended where I hoped: back in my old life, inside the old me.

It would take years to face up to the reality that there is no finishing line, years of struggle, frustration and loss. Anger will always lurk, circling, ready to surface. Understanding this has been part of coming to terms with my new life. Eventually I would learn that rehabilitation is about readjusting my co-ordinates to an altered life and body. Accepting this new self has been the hardest adjustment of all.





3. Beyond the Room

'How do you feel?'

It is a normal enough question, and one that visitors often asked. But answering it is complicated when your emotions are strange to you and constantly submerged by a sense of helplessness.

Fear was my dominant emotion. My first bath after the accident — in water, as opposed to a bed bath — left an indelible impression. What made it terrifying was the ordinariness of the actions I seemed incapable of, like sitting up straight in the water. Who knew that so much depends on the tone of your stomach muscles? For a long time I was so weak that when the nurses needed to move me about, they would slip an orange nylon cloth (a 'slide sheet') under my body. Another effect of lying down was that my heels were constantly sore.

Throughout those first months I received shock after shock, as I adjusted to the range of my difficulties. It would be the work of many weeks to learn how to sit up again, because another consequence of my injuries was that my midline — the brain's sense of the centre of the body — had shifted to the right. What this meant was that I was literally off-balance.

The patient's hospital is a small-scale universe, no larger than a room for most of the time, with little to distinguish one day from the next. My isolation would end for an hour or two when I was taken to a long wide therapy room on the ground floor, which was filled with machines and soft mats like a school gymnasium, plus tables where therapists pummeled and stretched my fellow patients. But sitting up took all my energy, so I hardly noticed anyone else. Nobody and nothing mattered except me, my body and the person in

white, helping me to move it. Speech is also profoundly affected by posture. As a result I could not talk myself out of solitude either — not that I had enough spare energy to try.

Inside my bubble, the line between fact and fiction was faint. Unable to process information properly, my brain attempted to assemble sense from those scraps of information it was able to hold on to, making up stories to rationalise what had happened (this sort of confabulation is very common after a brain injury).

Once I could eat again, daily life consisted of breakfast, a trip to the bathroom, back to bed, lunch, a visitor, dinner, interspersed with endless hours of TV. In retrospect I would say one of the chief hurdles to the brain-damaged patient is misery brought on by boredom. The stories my brain made up for me were a lot more fun. I recall dreams with as much clarity as the monotonous daily routine, and for a long time I was convinced that the dreams were real. I particularly enjoyed my visits from the Marquess of Tavistock, dressed in full eighteenth-century costume and wig. He would tempt me with a range of exotic substances. I was surprised the night nurse did not spot him.

Another recurring dream. Convinced that I was much smarter than the average patient, I was thrilled to be the first to discover the Devonshire's incredible scheme — and amazed that no-one else seemed to have cottoned on to it. Each night, you see, I would walk to my window (remember, I was dreaming) and watch other patients leave through a secret exit at the back of the hospital, loaded into ambulances and driven off into the night. Eventually my turn came. My bed was wheeled out of my room, into a lift and down to the basement, then out and into an ambulance. We pulled up at Chelsea Harbour where someone carted me onto a ship bound for South America. There, they promised,

my body would be rebuilt.

Only years later did I find out what the doctors had thought of my long term prospects at this point. On 2 August the man in charge, Dr Richard Greenwood, made his assessment: 'In the longer term [Mr Lewis] will be unemployable on the open market and ... may not be fully independent in the community.'



4. Terrors

As a Glasgow Scale Three graduate, I reckon I have come as close to the edge as it is possible to get without falling off. Logic and brain trauma make uneasy bedfellows and happiness does not get a look in. Mostly I veered between confusion and anger, and started issuing bizarre orders, which gave other people an insight into the strange stories that my mind was telling me to explain the situation I was in.

One day, for example, I issued an edict that nobody was allowed to visit Thorpe Park, the amusement park, for fear of sinister consequences. Another time I raged about how my son Joe had been kidnapped, my sister Caroline's house burgled, and finished up by declaring that my injuries were the result of falling out of bed. The next day I knew I had come off a horse, then claimed I had been asleep for seven weeks.

Visitors offered a distraction. My mother could be relied on for a laugh with her unlikely gifts. Once she brought a carrier bag full of salmon and cucumber sandwiches from Marks and Spencer because I 'needed feeding up'. Old school friends flew in to say hello: David from Hong Kong, Roberto from Brazil. Rachel made it from as far afield as Newmarket.

Some kind person had arranged a rota to ensure that l would have someone to see every day, to remind me who I was. Of course, I did not know that then, so initially could not understand why these people kept coming to see me.

Finally, it dawned on me: I must be dying.

I am proud to say that I could accept my end. Perhaps it was easier to believe I was dying, but even though I 'knew' that death was imminent, equally I became convinced that


WHERE?
WHY?
WHO?

my disabilities were only a temporary blip. The two ideas co-existed.

I would lie in my pale blue room on my pristine bed, resigned that I had only a few more weeks to live. Moments later I would fill with confidence that, just as people believed of the First World War, this nightmare would be over by Christmas — in time for our usual family skiing holiday. This led to a favourite daydream: my miraculous return to normality at the foot of a mountain in Zermatt. I would be wheeled to the ski lift, then witness my family's astonishment as I rose up and walked into their waiting arms.

Many dull hours whiled away, playing over this imaginary scene. Admittedly it was difficult to reconcile the timeframe for this miracle with the fact that I could not even stand unaided. I was slightly bothered by the discrepancy, but not unduly — not until I decided I was dying again and the gloom descended once more. Then, when my sons came to visit, I would look into their eyes. How would they get on without me? They did not know the truth.

For months after I had left the Devonshire this death fixation persisted. I remember being with my father, visiting a branch of River Island. Suddenly I announced I was dying. He asked why I thought that and we had a long discussion. He seemed simultaneously concerned and amused. I could understand him being one but not both. Of course, he could not appreciate the terrible pain in my left thigh. Then again, nor could I. It looked fine. There was no external damage. Nobody seemed able to explain why it hurt so much.

What were they keeping from me?

In time the obsession with death would fade, replaced by a feeling that everybody was out of step with reality — everybody except me. Yes, I saw through the schemes and

the lies.

I had never felt more alone.

5. Judgement

People with severe head injuries have a lot to process. First, they must understand that they have a problem. Then they must grasp that brain damage is not temporary. And then they must find a motivation: a vision for their recovery.

The trouble is that however many visitors you have, however much family and friends may care, if you lie in bed, day after day, any sense of purpose wanes. The condition of waiting takes over.

This is where hope is supposed to come in.

Before the accident I had been dedicated to my career. Passivity was alien to me. In my spare time, family filled every moment — when I was not playing some kind of sport. Lying in bed was what I did to sleep. Now I had to re-learn the most basic skills. And how do you avoid feeling helpless when everything is done for you? All there was to mark the passing hours was food, a visitor. Doctors and therapists began to blend into one another, and it always seemed to be late afternoon. It was purgatory.

I knew I was partially disabled. It would be months, however, until I understood that I would not be back to full capacity any time soon. If ever.

Acceptance was also more complicated because I believe in maintaining a determined outlook. You can will yourself to win.

I was depressed when my mind flashed back to my previous life. I never thought the accident was fate or some divine punishment; it was just bad luck. This did not stop me

from being angry. Polo. What a lame reason for losing so much! Why had I not seen what I was risking, for a game? I had not even been much good at it.

When rehab started at the Devonshire my mood began to shift. On good days I felt I had been given a second chance. Yet nothing in my past had prepared me for this new version of life, Part Two. Problems like being unable to pee without assistance were bad. But worse were the cognitive disabilities, which are trickier to fathom than physical disabilities. When you are told that your voice is too soft to be heard, the words muffled, it is even harder to have any confidence in your thought processes. The sense of isolation, disorientation, and the blow to self-confidence are acute.

I had always been physically active. Now, although physical exercise brought immediate rewards in terms of visible and measurable improvements, there was no rush of endorphins or adrenaline to lift my spirits. Cognitive examinations were draining too, as well as frustrating and embarrassing, the tasks seemed so basic. And if the tester seemed to have limited intellectual abilities, I panicked. This person — this stranger — was judging me!

The implications were truly scary. I mean, how was my brain qualified to tell how damaged it was? Reading the clues to my new limitations — as revealed by the simple challenges being set to me — the conclusion was clear. I was in big trouble.

For instance, in an early test I was asked to write out a numerical sequence. I managed nought, one and two. But simply gripping the pen and scrawling the figures demanded all my concentration. I could not keep the paper in place with my left hand, and my torso hurt from the effort of holding me up in a posture to write.

Another test, another therapist. Plastic blocks and a box with square, round and triangular holes. This I passed with flying colours, although they noted that it was tricky to assess me accurately because I considered such tasks 'childish'.

In time I learnt a way around more challenging assessments, by asking my nurse Brendan to coach me on questions the doctors were likely to ask. Everyone was delighted when, shown a picture of the Eiffel Tower, I said, 'Paris.'

I was thrilled too. I had shown initiative, and delegation skills!

The main action of my day came in the morning when Brendan escorted me to physiotherapy. I grew more excited with each trip to the gym. As far as I was concerned this offered the only opportunity to demonstrate real progress. It turned out that my competitive spirit had survived the accident intact, and I was determined to outdo other patients — to prove to the doctors and my family that they should believe in me.

In truth the other patients were not really my rivals. As every brain injury is idiosyncratic to the individual, the real game in this one-man race is to identify your limitations, then transcend them. No doubt many in the gym were not even TBI patients. But I have always held that having an enemy can make you stronger. And so, as Anne Hough recorded in her diary, I 'wouldn't stop wanting to exercise'.

Looking over my medical notes today, I see that when I first woke up from the coma, I was assessed as having the mental age of a nine-and-a-half year old.

I had a long way to go.

6. Outside

There was a lot that I remained ignorant of, now the universe revolved around me, myself and I. Emma had so much to cope with, supporting me, the boys. She also had to contend with huge additional losses. Her father, her uncle, and an aunt to whom she was particularly close, all died within a fortnight of one another in September. The pain and the strain she must have suffered are horrible to imagine. But somehow she hid them from me.

Slowly I grew aware that there was a world outside my hospital bubble and longed to get out there. Countless times I plotted my escape via the lift, although the fantasy did not extend to working out how I would slip past reception undetected. But whenever I was alone with a cleaner or porter, I would ask probing questions about the hospital layout. I got the impression that they were not used to patients talking to them and got it into my head that this was somehow against the rules.

Only gradually did the doctors wean me back onto the outside world. I tried out a wheelchair in mid-August. Then for my first outing, nearly two months after the fall, Brendan accompanied me on a trip to Marylebone High Street.

This part of town is not your average retail chain destination. It is more like a gastronome's paradise. We passed windows dedicated to fine cheese, a butcher's like an illustration by Beatrix Potter, as well as boutiques and the famous Daunt Books, with its high ceilings and parquet floors. Any luxury that you might want for your home seemed to be available in one or other of Marylebone village's emporia, at a price. It struck me that I would not be receiving so many visitors if the Devonshire had been in a less fashionable location.

Everything seemed strange, all the noises and smells, cars and people. I felt like a Martian, dazzled, utterly separate. And the world looks different from a wheelchair. At Daunt's I could not read the spine of any book higher than the third shelf.

Overwhelmed, I was relieved when Brendan took me into Villandry, a deli on Great Portland Street. We parked up in the restaurant at the back and I recharged. I needed the loo, but could not go, the access was too tricky. So there I sat, unable to browse the displays, feeling lost and desperately self-conscious.

I remember another excursion to Regent's Park with my sons Ollie and James. Sunlight drenched the scene. Children played and ran, enjoying the last of summer. Delightful. Yet it was hard not to feel sorry for myself. Seeing what others could do reminded me how much I could not. But recognising limitations is a crucial part of the TBI patient's recovery, and Brendan continued to take me on regular trips to watch people going about their business.

Another time my mother took me out for lunch at a restaurant across the road from the Devonshire — the sort of place where the waiters treat you according to how high a tip they reckon they might get. My mother was always elegant and today put on her usual show of style, so despite the shabby man in the wheelchair beside her, the maitre d' dished up the royal treatment.

He did not know my mother.

She fixed him with a stare. The poor bloke sidled over.

'Everything all right, madam?'

She looked him up and down, then said at last, 'No, not really.' And refused to say another word.

I am afraid to say it made me laugh. Waiter baiting suited my bleak mood perfectly.

7. Home Leave

I have forgotten my first trip to Ridge End House with Brendan at the end of August. The afternoon was generally deemed a success. According to my mother-in-law's diary, I did not want to leave.

One of my greatest frustrations — and another sign that I was getting better — came from the awareness that I was no longer in the driving seat of my life. Other people made the decisions. Other people dictated the timetable. And this first trip home must have galvanised me, because the next day I began ordering the doctors about and insisted on having my tracheostomy tube removed.

I suspect — okay, I know that this only happened because my health was now up to it. The doctors were not just humoring me. However, the illusion of control regained was powerful. Looking back now, I think this moment marked the start of my rehabilitation: I was taking responsibility for rebuilding my body.

Even so, my terror of death persisted.

Emma and my sister-in-law Sarah waited outside my hospital room as the medics removed the tube and sewed up my throat. I remember feeling alarmed by their presence. Why were they both here? Was this it? Was I dying?

As the weeks went by the doctors upped my doses of home leave. For my first full weekend break I remember exiting the hospital and being lifted into the car. Why couldn't I climb in like normal? I had never felt more disabled. (Clearly, I retained no memory of previous visits.) These distressing jolts kept on coming and because I could not recall things reliably, every new thing that I found I could not do, I would be shocked and hurt all over again. It was like *Groundhog Day*. As a result, any form of change

frightened me — because it might present another challenge for me to fail at, and further evidence that I was broken.

My driver that day was Carlos, one of my old polo professionals and the man who had taught me the game. Carlos came from Argentina and was equally devoted to the national sport, football. In fact, he used to be proud of his resemblance to the hand of God himself, Diego Maradona — until he joined Weight Watchers. (It had been a while since Maradona put the fear of God into any goalkeeper.) Carlos was there when I had my accident and worked for me ever after. So he became my Mr Fixit.

The road home to Marlow Common took us on to the M40. I gazed in wonder at the passing scenery. Everything looked different. New buildings had sprouted from nowhere. I felt as if I had popped out for lunch, stumbled into a time-warp, and re-emerged several years later.

At home Emma and the boys were very welcoming, but I could see that their lives had gone on without me. I felt like an outsider. I could not manage stairs, so that evening Emma made up a bed out of a mattress and blankets on the living room floor. We spent the night there together.

The next day was difficult because I was the only one who did not realise that at the end of it I would be returning to the Devonshire. It is not that this information was withheld from me: simply, I could not make it stick. So when the time came to say goodbye, I was confused. I felt like I had been given a sweet, only to have it taken away after one taste.

My brother Clive drove me back to London. I ruminated on the changes. In my mind I had always been the one to make things happen for people. Now, although my love for my family remained fierce, and inside I felt unchanged, my body had thrown in the towel. Had my family given up on


I'M NOT
GOING
DOWN THERE.

me too? I sensed they were prepared for the possibility that I would never return home.

This doubt hurt. I felt a powerful urge to prove that I was still a major part of their lives. But did they want me home at all? Why else send me away again? What could I do? I had no control.

Only back at the Devonshire, tucked up in bed, did I relax.

This was home.

But it was not, I realised in a panic. It was security in an artificial world.

8. Exit Strategy

According to my consultant Dr Greenwood, typically the next phase of treatment for a TBI patient would be to live in a specialist rehabilitation centre until key skills were mastered. By this point I could sit unaided — but not stand. I could swallow food and communicate too, but my voice was faint and my speech slow.

The lack of movement also impacted my breathing. I began to feel as if my bronchial tubes were rumbling continually, unable to get enough air with all the phlegm in my throat. At some point I was diagnosed with asthma and every winter from this point on I would be dogged by bronchitis.

This awakened a family fear, because not only did my father suffer from bronchitis, but his childhood had been profoundly affected by my grandfather Len's chronic respiratory problems. I grew up hearing stories of how Len suffered before dying at a very young age. He did not live to see the success of the family business. If he had, my father

would have been able to move his parents to a warmer climate, and Len might have led a fuller life.

In the real world you know nothing about someone until you are introduced. In hospital the world shrinks to fit you and I assumed — rightly — that everyone attending me knew who I was and what had happened to me. This gave me a great sense of security, and an even greater fear of how I might manage outside. As doctors recorded in my medical notes, for many months to come I dreaded any form of change. Baths still scared me. Is it safe? This phrase became my mantra. Nothing feels safe when you cannot stand on your own two feet. Yet the terror that I would never be me again was worse, and I came to regard hospital as a trap. I was determined to regain my place in the world, and for me that began at Ridge End House.

My campaign to return home was ruthless. I battled self-doubt as much as medical opinion. Recovery should, by definition, be a finite process, yet I felt I was becoming institutionalised.

Poor Emma. Rightly or wrongly, I felt the balance of power between us had shifted, as if she and I had swapped roles. So when she asked me to be patient, I asked if she was planning to leave me.

Visits home continued, but anxiety nibbled at every joy. Anne recorded on 13 September how, mid-doze, suddenly I sat up and cried out, 'I'm dying.' Half an hour later, I woke up and announced, 'Oh! I'm alive.'

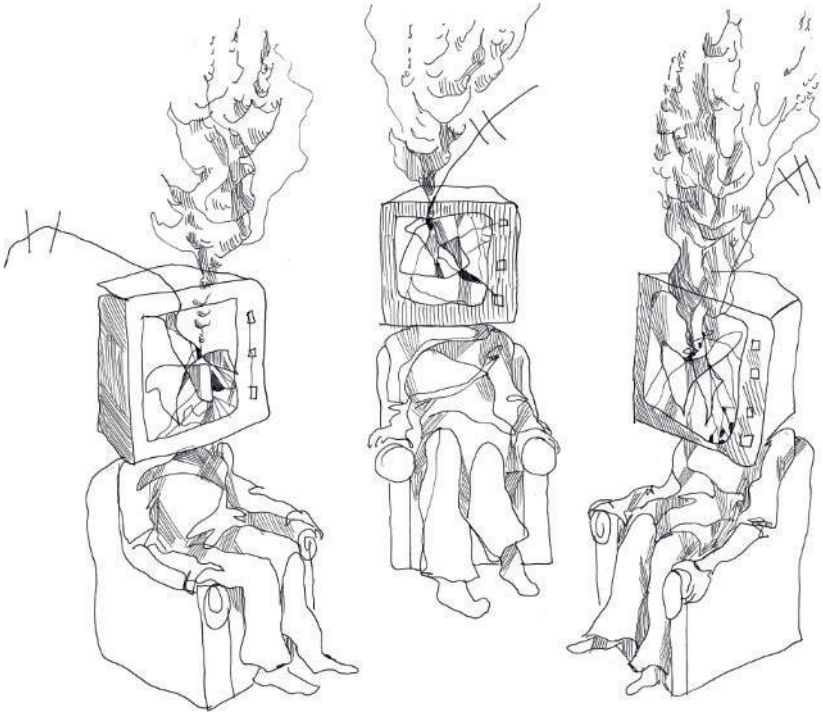
Trust was in short supply. Sometimes I would question whether the accident had even taken place. Or I would reveal that the left side of my body did not work due to 'an operation'. I also construed anything smacking of mechanical help for my disabilities as bleak confirmation that people did not expect me to get any better. So when

Clive bought me an electric massage chair — the idea was it could help me to relax — I refused to try it.

On 11 September, the day after James's seventh birthday and 79 days after the accident, I laughed for the first time, then immediately added that I was a failure.

I would like to thank a neuropsychologist for accelerating my departure from the Devonshire. She asked Emma to leave the room so that she could gauge my abilities. Conversation turned from the general to the deeply personal. She explained that many marriages end after a spouse sustains a traumatic brain injury.

Any suggestion of worse rather than better things to come was completely unacceptable to us. Emma agreed it was time to seek new hope elsewhere.



Rivermead

1. Entrée

We drove through a sprawling complex of prefabricated buildings and drew up outside a grand Victorian Manor House. It was the Rivermead Rehabilitation Centre, a few miles outside Oxford, although to me it looked more like a posh boarding school, reminding me of long-gone days when my father would drive me back to Millfield after the holidays.

A lady came out to greet us. I swallowed my pride as she and Emma loaded me onto a wheelchair. Inside we met the man in charge, Derick Wade. He had a soothing manner and when I told him about the intense pain in my left thigh, he reassured me that he would continue to prescribe the painkillers. However, as he and Emma talked I came to realise that he wanted to sign me up as an in-patient.

Fear went into overdrive as he led us on a tour of the in-patients' building. Then I was parked up in a common room while Emma and Derick Wade went off for a private chat.

Sitting there was like waiting for exam results, only far worse. The room itself resembled a scene from *One Flew Over Cuckoo's Nest*. All the action seemed to centre on a large TV. There I sat, surrounded by silent residents, my sense of doom growing with every second. Here were the forgotten people. And I was about to join them. The perfect

setting for my inauguration as Yesterday's Man.

Emma reappeared with a big smile on her face.

'You'll be able to start the week after next.'

Wade had agreed to make an exception and treat me as an out-patient. It felt like the first triumph in as long as I could remember. Not very long, admittedly.

Back at the Devonshire I told Brendan the news, then offered him a million pounds to come and look after me at Ridge End until Christmas. For some reason he refused but agreed when my family reduced the offer to £25,000.

This was typical of the interference I had to put up with.

2. Re-entry

I used to think of the Devonshire as a boutique hospital: a one-stop shop for immediate health gratification. They patched you up, you paid the bill, and then it was off to the next joint for the long-haul business of getting yourself together. At the Rivermead, I firmly believed, my rehabilitation would begin in earnest.

Moving home, back in the heart of my family, felt like a blessed release. But slotting into normal life was not an option. Just as playing with my sons remained pretty much impossible, so were the most ordinary things. Such as conveying myself from room to room unaided. Or reaching for a book on a high shelf. It was like being born again, child-sized, only minus a child's energy.

I still saw change as my enemy and resisted any adjustments necessitated by my condition. No, they were compromises to illness — barriers on the path back to the real me. But it was also impossible to ignore that Ridge End House, set over two floors, now presented an obstacle course

and it did not quite resemble the home I remembered, not from the perspective of a wheelchair. I could not even manage the steps up to my front door.

The Rivermead dispatched an occupational therapist to measure the leg heights of our beds, tables, chairs and sofas, and concluded they were all too low for easy transitions from my wheelchair. She also suggested various other modifications to make the house more accommodating. In came the builders with their noise and dust.

I moved into a new bedroom because the old one was split-level with a raised floor. A stair lift was installed. I did not like that. Stairlifts were things you saw advertised in the back of magazines, occupied by grinning geriatrics. It seemed to confirm that I was an old man. At forty.

3. Work It

I try not to take myself too seriously, but I am serious about what I do. So when it came to rehab, I tackled it like a job, putting in overtime at home with my nurse Brendan to re-master basic skills such as washing, dressing, brushing teeth. Not everything came easily. A lifelong wet-shaver, I was persuaded over to the dark side and started using an electric shaver.

A typical week at the rehab office began when Carlos arrived to collect me. He is a problem solver. In our polo-playing days, he was the one who passed me the ball, right in front of the goal — in other words, it was his role to make me look good. And so it continued. He would help me to put my outfit together in the morning — a cognitive as much as a physical task. His first question would be, 'What colour socks do you want to wear?' Then an outfit would be built

around the socks. (A breakthrough came on the day I perceived there might be a more sophisticated way to plan my look.)

At 9 a.m. we would pile into the morning rush for the one-hour drive to Rivermead.

The last stages of that journey are seared into my memory. Each turn in the road ratcheted up anticipation for a day in which something might be achieved. We would hang a left at the McDonald's, burn past the Vauxhall factory, then Sainsbury's, Tesco's, hang a right, *et voilà*: the Rivermead campus. Its distended layout seemed to mirror my general sense of disorientation. There was no apparent focus, a long central thoroughfare meandering through a jumble of single-storey buildings, with the administration offices located in the Victorian house and a modern occupational therapy block across the road.

I looked forward to my day's work, even as I shuddered a little when we drove past the in-patients' residential wing — to me, an implied threat of where I might end up, if I failed to make enough progress to satisfy the doctors. Because it was quite clear to me that this customised rehab of mine was not the done thing. My fear of failure conspired with my sense of powerlessness to create a terrible paranoia. I had better get well again — be me again — as soon as possible. Or else…

Routine provided some balm. Each day divided into neat quarters. Two sessions of therapy, usually a double dose of physio, starting at ten, followed by a break for lunch with Carlos and Brendan. Often we ate at the café in the nearby Tesco supermarket. It was just as well that Brendan was with us. My swallowing reflex remained unreliable for some time, although once re-mastered, I put it to great use and my weight recovered, and then some. Well, cafés are very good at old-

fashioned comfort food, which is easy to swallow, especially with custard.

The afternoon brought two more sessions. I did my best to be enthusiastic, even if the activities, such as peeling a potato, lacked glamour. And the cognitive tests remained at a level that would not challenge many five-year olds. Mortifying — especially when I could not manage them. Then came the rush home to beat the commuters.

Twenty therapy sessions and ten hours in the car. This was my working life, Monday to Friday, week after week. But it had structure and it gave me hope, and I worked as hard at it as I had ever worked at anything, confident that Rivermead was the place to fix me.

But doubt was always there, and it was hard not to draw negative comparisons. One plus of living at home at wheelchair height is that I did not have to eyeball photos, particularly those of the old me skiing, or fooling about on a polo pitch, or waterskiing with Jamie, my youngest boy, perched on my shoulders. On the other hand, the place was full of reminders of the past, and at times I felt like a ghost: able to witness but not participate in family life. Watching from the edge of the court as the rest of them played tennis, or the boys romped, was bittersweet. It was not easy to sustain any pride I might have felt at the morning's success in bending my knees.

All I wanted was to be me again. That was not too much to ask, was it?

4. Project New Me

The first thing I had to accept was that my thoughts would be dominated by a fixation on myself. It was not a case of introspection. If only. No, I was consumed by the most banal sort of questions. Such as: How am I going to get into the kitchen? How much longer can I wait before going to the bathroom?

I began thinking like an estate agent, calculating the length of rooms, the number of paces from one safe perch to the next. Eaten up by the problems of inhabiting this disobedient body, there was little energy left to be an interesting person, and this increased the sense of distance from other people, especially the ones I loved. I felt so boring.

It did not help that I had to rely on others to fulfil my basic needs. When I wanted anything, from a sandwich to a trip to the bathroom, and nobody was in the room with me, there was only one option: shouting. With the result that it felt like I was shouting at my family all the time. It took us years to start using bells instead.

A shouting invalid was not the person I wanted to be, and I was not very good at reconciling myself to this situation, which ramped up my frustration. Not much fun for Emma, or the boys.

I tried to take part in normal activities but felt haunted by the man I used to be. Before the accident, Emma, the boys and I used to love going to the cinema. Now I would be directed to a special spot for wheelchair users, either plonked at one end of the front row, or in a reserved space at the back. I soon stopped going. On one occasion I joined the boys and other parents for a school trip to Windsor Great Park. Everyone lounged on picnic rugs, taking turns at

kicking around a football. I sat in my wheelchair and watched.

In the past we enjoyed family suppers sitting at a long table in the kitchen, exchanging news about our days. But it was difficult to shift from my wheelchair to the chairs in the kitchen, so we began eating dinner off trays in the sitting room. And yes, the TV was on, which made it even harder for my voice to be heard.

In these and so many other ways my disability reshaped our family life. Far more than my recovery was at stake. It was my job to sort it out. And so back to work I went, at the Rivermead.

The reality of my new job was slightly more mundane than the significance I gave it, and the routine soon began to grind. For instance, Monday's star feature was occupational therapy, which seemed to be a hodgepodge of skills that did not fit into physical or cognitive therapy: things like personal grooming, or safely navigating a kitchen. One early session focused on how to make a pot of tea. But what was the point in learning that now?

I saw the same faces day after day, but hardly noticed the other patients, regarding them at best as pacemakers rather than as potential friends. Most of them seemed far more relaxed and, well, patient than me. They were the Group, and I was the Outsider. My hunger to regain normality set me apart.

Or so I thought then. Looking back, I can see that if I had been an in-patient my rehabilitation might have been more focused. Perhaps I would have been calmer too. But the idea of moving into Rivermead would have been a defeat. Anything that smacked of accepting limitations meant accepting disability. So I continued to approach my recovery as a business, drawing up a time-frame, with particular goals

to be reached at a certain point. It was my way to impose order on the unpredictable reality of getting better. Of course nobody could tell me exactly what better would look like. And this way of tackling rehab cascaded its own stresses, as the goals I had set proved impossible to reach. But I would not give up or change tack. On the contrary, I was deeply alarmed by the passivity I perceived in others and determined to set myself apart. Their serenity, and perhaps greater contentment, I scarcely noticed.

Or it may be that I was simply too self-obsessed to pick up on how upset they really were, how hard they might be trying to improve. After all, getting around a kitchen takes concentration. Especially if, until this point in life, your idea of cooking is dialling for take-out.

5. Walking Tour

Picture a room, 30 feet by 70. Benches line the walls, lino covers the floor. There are ten of us here, each with a therapist at our side. But for all the company, we might as well be alone: battling a single enemy, our body, trying to bend it to our will.

I am trying to cross the room. I concentrate all my energy, trying to motivate myself with the thought that each second that goes by brings me closer to my goal. How long till I get there?

The question reverberates, swelling in its implications. Because it is not just about reaching the other side of the room. It is also about reaching that elusive next level: evidence that I am one step closer to being a man who can walk properly, without a mind that fizzes with images of all the terrible things that might happen if I stumble and fall.

As the weeks drifted by, I came to accept that I would never get to the place I truly wanted: back to where I was, before I climbed on that bloody pony. But there was no point in thinking that way. I had more immediate challenges.

Learning to walk is no mean feat. To most of us it feels instinctive, yet in reality it is our first acquired complex skill. With every step that we take, a dynamic list of instructions issues from our brain to our muscles, enacting a complicated sequence of movements. But we do not consciously read these instructions, for the simple reason that most of us walked before we talked. And because we learnt to walk unconsciously, it is something that healthy people tend to do unselfconsciously. What none of us remember is that before we mastered walking, we had reflexes. Think of a baby in its cot: how it clutches your finger when you touch its palm, the uncontrolled kicks as it sleeps, the way it might suddenly punch the air. These spasmodic movements are the only truly instinctive actions available to humans. Unfortunately they are not far off from the uncoordinated lunges and lurches that I was able to perform with my impaired left side. And that was on a good day.

It is very difficult to isolate the individual manoeuvres that your body choreographs when you walk: the varying postures, the ever-changing flexions of hip, knee and foot; the vital skill of standing upright, your gaze directed ahead. It is especially challenging if you feel so much safer bending forward and staring at your feet, which lowers your centre of gravity, meaning that there is less far to fall…

None of these manoeuvres will be any easier if your head is full of memories of running, jumping, skiing — especially not if the critical voice within says, ‘Walking is easy, so what’s your problem?’

Now consider how much harder any of these things would be if you no longer possessed the full range of brain cells that previously communicated with your limbs.

To remove one element of difficulty from the equation, my physios decided to bind my ankle in a splint-like brace. This lent each step a firm-ish foundation. I also acquired a rollator — basically, a walking frame on wheels.

I was learning to walk, sort of, and very slowly.

6. Gear Shift

As the months passed my motivation began to waver. But other shifts were more positive. In particular, instead of joining Carlos for the trip to Tesco's café for lunch, I began spending more time in a common room at Rivermead chatting with other patients — a.k.a. the Group.

Occupational therapists encouraged us to play board games such as Trivial Pursuits. One young guy seemed to know everything that there was to know about pop music. Ask him who was Prime Minister, however, and you would get a blank look. His age, or brain damage? I never could tell.

Part of the recovery process is to discover new incentives to drive you on. I became intrigued by my fellow TBI patients, hungry to hear about their experiences and insights, as well as how they had lived before, and what sort of life they might lead after leaving Rivermead.

Talking to the Group taught me a few things about myself and my version of normal. A typically nostalgic conversation turned to cars.

'So what do you drive?' asked one guy.

'Ferrari Mondial,' I replied.

He gave me a look of great pity. ‘No way mate. You’ve got it all wrong. You must mean a Ford Mondeo.’

I could not help noticing that other patients seemed baffled when I asked what was their deadline for re-mastering walking, or their step-by-step plan for improving their short-term memory. Undeterred, I clung to the idea of myself as a businessman and sought new ways to refine my methodologies and devise new timelines for my progress, with a particular focus on anything that I thought might get me onto the nursery slopes of Zermatt.

Christmas 1994 came and went, and the main notable event was Brendan’s departure from our household. As for Zermatt, those mountains seemed extremely far away. But if I put in another X hours on the rollator, there was still next year…

Sometimes the sensation of being lost was overwhelming. Each morning I would ask myself the same question: Where has my body gone?

The mirror showed the whole me, but it did not reflect the person inside my mind. While I could see my left side perfectly well, for some reason I seemed unable to inhabit it. My proprioception — my sense of my body within space — was way off. This was the result of irreversible damage to my brain’s right hemisphere, which meant that the mental co-ordinates simply missed out a large chunk of my left side. As a consequence, my midline — my conscious centre of balance — had gone adrift, settling somewhere to the right of my body.

No matter what work I put in, this off-kilter feeling refused to shift back towards the centre of my actual body. With further consequences. Such as: I would automatically put food into the right side of my mouth and brush my right-hand teeth first. Walking in a straight line was particularly

difficult because my body listed automatically to the right, dragging the left side behind it like an afterthought. I will always have to focus hard to correct this wonky gait.

I also had a blind spot that meant any object located to my lower left-hand side simply vanished from my field of vision. Even today I prefer other people to sit at my left. Then I can use my right arm to stress a point in conversation, which gives me a greater feeling of control. This is one example of how what might seem a minor, everyday detail to you can make an enormous difference to me.

My blind spot first became apparent during a disabled driving test at a centre near the Rivermead. The driving theory section went okay. But when I took the car out for a spin it was exhausting, and frightening: the thought of me, let loose on the road, in a killing machine… I knew I would not have the energy or concentration. In any case, it was not my choice to make. The examiner failed me.

'I think you've made the right decision,' I told her.

In future every single outing would need both advance planning and someone on hand to shuttle me about. So much for spontaneity.

In these and so many other instances recovering from my brain injury felt more like a pitiless process of scaling back my ambitions. This is another reason why being an outpatient remained such an important distinction for me, marking a line between victory and defeat. Home provided continuity with the past, hope for the future, and above all, time with my beloved family. The boys were growing up, and I could play a part. So football was not an option, but we talked, and I grew to know them in ways I might never have done in my previous life, putting in long hours at a desk.

The physios thought I would benefit from an electric wheelchair. At first I was dismissive. Surely it would be a

waste of time, as I would be walking again soon enough. But eventually they persuaded me to try a motorised buggy, with the idea that I could use it to zoom about the garden.

Joe, Ollie and James gathered outside to admire Dad in his new toy. The test drive came to an abrupt stop when I broached a small upward slope. The buggy made it to the top. Sadly I did not.

Back in its box went the buggy. No, I thought, I will get better.

But I would not, it turned out, ever again enjoy our wonderful garden under my own propulsion. The stables, the paddock, might as well have been in another country.

7. Impatient

It is hard to admit, but being disabled does not necessarily make you a nicer person. Nor does it always grant you the wisdom to embrace adversity. In my case, I became impatient.

Improvement was so gradual that I struggled to be excited by each small change, however significant I knew it to be. Finding the discipline to keep trying was tough enough.

This is where the physical therapists came in. Of all the therapists in all the world — and I must have met a sizeable percentage — one thing comes guaranteed: that smiley, happy face.

To them, no failure is a failure, no disappointment is a setback. Theirs is a world of challenges, opportunities, and endless encouragement. How they present their message may vary, but the upbeat gospel remains the same.

Of course they are right. Before I could hope to stand,


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TRAINING

my spirit had to be up. And so the therapist's ruthless smile never wavers.

Sometimes it is unnerving. You could even say unreal.

Okay, there were days I found it irritating. Especially when I could see no evidence of the supposed improvements that the professionally smirking person at my side kept applauding.

Inner confidence is no match for the gruelling realities of disability, day in, day out. It was inescapable but still depressing to accept little changes, such as the urine bottle that I kept in the bedroom at night, because I could not make it to the bathroom fast enough.

If such indignities whittle at self-esteem, anxiety is more corrosive. And when I was not feeling sorry for myself I spent inordinate amounts of time being scared. I particularly hated walking on stairs. Since most of the Rivermead consisted of single-storey units, this was something we had to practice in the old Victorian admin building. Going upstairs was not so bad. But if I close my eyes I can still picture the horrific view down from the top step. Next comes the lurch forwards to grab the banister…

Of course there was always a therapist, beaming mercilessly at my side. But in a way their presence did not matter because this battle was between me and fear, me and my body. And in that I felt utterly alone.

Cognitive assessments conjured a different kind of vertigo. Often my performance disappointed me. Also, if I considered the tasks pointless or demeaning, I became, as the medics tactfully put it, 'resistant'.

It did not help that when I asked therapists to clarify the purpose of an exercise, their answers often seemed unsatisfactory.

My brain was also remarkably agile at creating excuses.

For instance, it was never the case that I did not 'get it'. Perish the thought! No, if a test seemed incomprehensible to me, this was, according to my convenient logic, proof that the test itself was useless, and therefore not worth bothering with.

On the other hand, some tests were so basic that this itself caused confusion. Take this example.

I was asked to continue the numerical sequence two, three, four, five, six. I remember thinking that the answer could not be the obvious. Surely there must be more to it than that. So I tried something different and I failed.

The only certainty with a traumatic brain injury is that nobody knows to what extent you will recover: not doctors, not therapists, and certainly not you, the patient. Your mood will be equally unpredictable. On the other hand, the questions posed by the critical inner voice can be pretty repetitive. As in:

What the hell was I doing?

What had I been reduced to?

To my mind, the main role available to me remained this one task: getting better.

Project Me had a troublesome side effect. This hyperfocus on my future, improved self made me undervalue the present-tense person. No, my body's limitations were my enemy in this rehab battle. And I lost sight of how all of this impacted those around me.

At the end of each day at Rivermead I would come home exhausted, slump on the sofa in our TV room, and nod off. I would wake with a start, alone in the room apart from the voices chuntering on the TV. Then I would have to call out in order to be helped from the room and immediately feel bad for needing the help.

Many weekends I remember sitting in silence in the back

of the car, with Emma up front in the driving seat, suffused with misery at this life I could watch from the sidelines but no longer fully enjoy. I did not appreciate that by rejecting my less-than-starring role in family life, I was failing to make the best of what I had.

Was I a grouch? With all these frustrations there was bound to be an overspill. And resenting the fact that I had become so dependent is not exactly the same as appreciating the kindness that was required to take care of me. My shouting voice wore me out: what can it have been like for Emma?

Preoccupied as I was with the ever-growing list of things I could no longer do, I did not notice how we had settled into routines that stitched us into subtly but profoundly altered relationships.

Emma, my lovely wife, was now my chauffeur. Why? It was surely a hangover from hospital journeys. Being transferred from the wheelchair into the back of the car had been the way we did it ever since my first visits home from the Devonshire. It never occurred to us to explore another approach.

When Emma was not caring for me, she was ferrying about the boys, tending their needs, not to mention looking after the house. And once Carlos had finished for the day, there was only her to look after me. Talk about multitasking. As for my job description? Apart from impatient patient, inert Dad? It is hard to choose the right adjective to sit alongside the word husband that could paint an accurate picture of the type of partner I had become. Put it this way, I was less Man of the House than Man in the House.

There was some progress. My preoccupation with death had faded and, slowly but surely, the terror I had felt during any physical challenge, from standing up to walking

downstairs, morphed into boredom. Even fear seemed a bit tedious. What was the point?

Comfort food kept me going. And then some. Before the accident I had been fighting fit, weighing in at a healthy 160 pounds. But burning calories is difficult when tooth-brushing passes for exercise, and by March 1995 I had reached 210 pounds. Man in the House was more like Man the Size of a House. It was time to begin the long, hard weight-loss slog.

8. Second Guessing

I was no longer surprised by other patients' apparently relaxed attitude towards the great Whatever of recovery. Nevertheless, for me the rehab business remained a high priority. I would not, perhaps could not accept that brain damage is not susceptible to deadlines. No, I wanted solutions.

After six months at the Rivermead disillusion set in. It is not that they did anything wrong. Far from it. But my recovery lacked momentum and I am not great at accepting disappointment if I sense that better opportunities lie elsewhere. And as you would in any business, it felt like time to bring in the consultants.

My family were supportive as I began exploring second, third and fourth opinions while continuing at Rivermead. Meeting fresh faces in unfamiliar places beat the deadening routine. And the simple fact that I wanted change rather than feared it represented a big shift in my mindset.

Initial results were nothing to write home about, however, confirming pretty much what the Rivermead had said all along. One physio reported: 'I found Mr Lewis to be

an exceptionally motivated gentleman who is determined to walk again independently … He has recently stood to brush his teeth and pass urine, which he naturally feels are key functional tasks.'

I needed new inspiration; a gospel of hope delivered in a fresh voice. And this is when a family friend introduced us to Dr Paul Burgess.

Paul was a world-renowned expert, specialising in research into the processes of cognition and frontal lobe injuries. To give him his royal title, at that time he was the Reader in Cognitive Neuroscience and Wellcome Trust Senior Research Fellow at the Institute of Cognitive Neuroscience, University College London (he is now a professor). He had a good track record of working with overachievers who had suffered brain injuries and become frustrated overreachers. He was also, as I discovered when we met in his office at U.C.L., a keen surfer, and we had an instant rapport. It helped that he laughed at my jokes.

Paul took me through a preliminary assessment. One question asked something like what discount would be necessary to increase sales of an item by a certain percentage. I glanced at the data and gave the right answer. Paul seemed stunned. This skill must have been hardwired into my brain after years of retail. But to me, in that moment, it felt like a miracle.

What other abilities might there be, lying dormant elsewhere in my brain, waiting for someone to fire up the right neurones and bring my old circuitry back to life?

Paul and I agreed to meet again at St Andrew's Healthcare in Northampton, home to the specialist Kemsley Brain Injury Centre, where Paul conducted most of his case work.

This encounter changed everything for me. From now


X here be
dragons

on no form of therapy, no matter how outlandish, would be dismissed without giving it a go first. I decided to sample any type of alternative therapy if there was a chance it might fast-track me to health. Little did I suspect that I was embarking on a path that would lead to some very strange places.

Chelsea House

1. Work Space

Just as my left side felt like it had vanished, so without work I felt incomplete. And because ours is a family business, I was able to get back to it, after a fashion…

We made a start late in 1994. I remember being wheeled into my office in Chelsea House, the headquarters of the Lewis Trust Group (LTG). It was filled with disused furniture. Not the most tactful way to convey to someone that they are on the scrap heap, or that is how it struck me.

The anger was beyond anything I imagined myself capable of.

Regular visits resumed from March 1995. Initially I attended a couple of meetings a week, with the plan that I would build up over time. Since the room was cleared, my office looked pretty much exactly the same as it always had. This set off an eerie feeling, similar to what I experienced during that first drive home from the Devonshire: a sense that I had gone out for lunch, then slipped through a time-warp to find everything subtly but irrevocably changed. And rather like in those moments when you walk into a room, looking for something, only to realise you have forgotten what that something was, somewhere along the road back to Chelsea House, I seemed to have mislaid my purpose in being there.

Yes, there was my desk, and there were some papers on it for me to read. But nothing for me to sign, you understand. Still, I went through the motions of working. The dislocated sensation only grew stronger. It was hard not to wonder if what went on in this room was any business of mine at all. Sure, I was there, but I felt invisible. And in meetings, my role was as an observer. Not to make points, not to steer discussion.

I also began visiting fashion stores again, something that had been a powerful feature of my life since I was a boy, out casing the High Street with my father every Saturday — studying customers, watching how merchandise was performing, spotting the big hits and little misses as shoppers delivered their verdict at the tills, and comparing our stores with the competition.

Unfortunately now these visits could not take place on a Saturday, the shops would have been too crowded, but I always set out with a purpose in mind. Such as, why were earnings in one branch not up to scratch: was it the wrong merchandise, or not enough stock? And how did our ranges and prices measure up to rivals'? These excursions taught me one lesson, fast: how hard our stores are to navigate in a wheelchair. I cursed the person — me, as it happens — who had decided to break up the layouts with raised platforms 'to make things more interesting'. Improving disabled access at River Island became a priority.

2. Oh Brother

When my brother Clive was a teenager he had to spend a month in hospital in Paddington. I remember visiting him one day, finding him asleep, and for a prank covered his face with a sheet.

21 years later Clive had the opportunity to return the compliment. But he did not. Instead he stepped into the breach. Despite having his own young family, he found time to come and be a sort of super-uncle to my boys, teaching Joe how to walk on stilts, taking Ollie to the movies (Oli is now a filmmaker). He moved across from overseeing the finance division of the family company, L.T.G., to take up my old role as Managing Director of River Island. In this he did me, and the business, a huge favour. Regrettably it took me a long time to see things that way. Clive has put up with a lot.

For instance, twelve months after the accident I paid the Harrow branch of River Island a visit. They were trying out a new style of window dressing, but to me it looked dated and uninspired. I thought it needed something different, something that would project a more fashionable image.

I called Clive. A heated discussion ensued. We agreed to discuss it face to face in Chelsea House. When we met, the argument only grew worse.

And then we stopped and looked at each other. If we carried on like this our relationship would suffer. We agreed that in future all business discussions would be kept broad, confined to the proper context of meetings, and separate from family life. I would not micromanage, and Clive would step back from merchandising.

Such moments nudged me closer to acceptance. My old life was over. If I wanted to have a life that felt positive and meaningful I needed to ditch expectations that would lead only to disappointment. I had to find new ways to engage with the world. But the process of adjustment would be painful.

Not that I had huge amounts of energy to dwell on the big picture. The little details felt mountainous enough. Even

the most minor interaction was laborious for me. Communicating with the office entailed me writing out a message in longhand, then faxing it in to be typed up by my secretary. Everything changed when I discovered email. But that was still in the future.

Far from an indispensable cog in the L.T.G. machine, most of the time I felt like a spare part. So what was I there for? I could not put my finger on it. It would come back to me, I hoped. It was a bit like with those tricky yet seemingly purposeless cognitive tests: I could not grasp the point of me.

3. Speak Up

Being stuck inside a damaged brain wreaks havoc with self-knowledge. My cognitive abilities were impaired, but given that fact, how could I trust in my own assessment of the extent of my limitations? It was a logical conundrum, and incredibly stressful given my desire to redefine my place in the world. My confidence was crushed.

Just as the wind is visible only when it ruffles the trees, so there was only one way to prove to myself, and to others, that I was thinking well: to show it. But how?

I undertook a range of neuropsychological tests. These confirmed I had 'many well-preserved assets'. However, the quality of inner thought and specific judgements is not easy to evaluate during the course of day-to-day life. Especially given that my ability to express myself was hampered by sluggish speech and my soft voice. In theory it was easier when I wrote things down. Unfortunately writing remained desperately time-consuming. And I was a man in a hurry.

I was referred to an excellent speech therapist, Pam

Enderby, at the Frenchay Hospital in Bristol.

'Given the severity of the head injury and the problems with dysarthria initially, Mr Lewis has made a remarkable recovery and it is very likely that this will continue,' she reported.

So far, so hopeful.

Dysarthria is not a problem of word selection or finding the right phrase so much as articulating it. In practice this meant that spoken words emerged painfully slowly. Moreover, swallowing was still an issue for me, so the sounds that came out of my mouth did not always match up with what I intended. It took me ages to reply to a question, exacerbated by the fact that delayed — no, let us call it considered — responses are something of a Lewis family trait (truly: my medical notes said so).

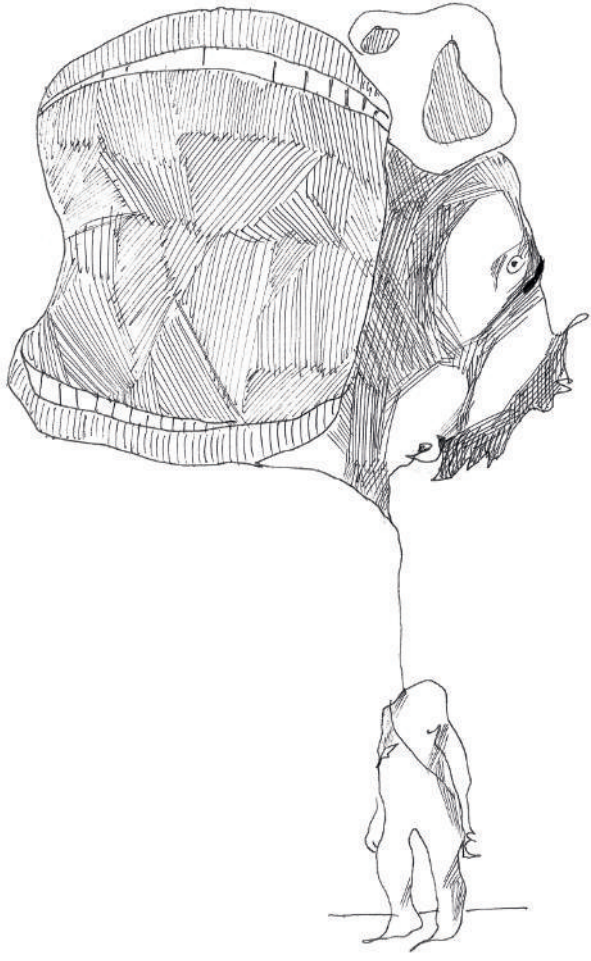
In other words, even if my brain was dying to get to the point, my voice could not oblige.

So what happened? Painfully aware that slow speech made me appear slow-witted, silence often seemed a wiser option. But in a business meeting, or anywhere for that matter, this would not be construed as wisdom. Nobody else in the room could tell whether I was quiet because I had nothing to say, or because I could not face the painful task of attempting to say it. A new pattern formed. I spoke up only when I felt particularly strongly about a topic. This cemented the impression that the disabled person had little to offer. In my mind, at least. And so the inhibitions and frustrations multiplied, increasing my isolation.

Can you have self-esteem without self-expression? Certainly, even as I struggled to content myself with the role of observer, I was painfully conscious that I was being observed. By my family, by former colleagues. This fed my sensitivity to any whiff of condescension.

Trying times. Still, I staggered to the end of 1995, still hoping that the next phase of rehab — my reintegration into business life — lay just around the corner.

LOUD
AND
CLEAR



Eilat

Workers have holidays, and although the second Christmas after the accident came and went without that dream trip to Zermatt, January 1996 saw Emma, me and our sons in Eilat, Israel. It was our first proper break together in years.

Strangely enough, tennis and waterskiing were out for me. But I wanted to explore as many of the alternative activities available as possible. A friend tipped me off about the incredible skills of Dr and Dr Kosov, a husband-and-wife duo from Kiev who specialised in acupuncture.

Emma and the boys waited with me in the hotel room. At the appointed hour in walked the doctors with their leather bags of tricks.

The acupuncture went well enough, with pins inserted painlessly into my ears and arms. But I had not bargained on the next treatment: cupping. Mrs Dr Kosov opened her case to reveal an array of glass vessels, like something from a mad professor's laboratory. She passed a flame under a glass, then swiftly placed it upon my back. And there it stuck, sucking up the flesh in an angry red blister.

My boys looked on, mesmerised. I told them it was enjoyable. In fact it was bloody painful and the next day my back was dotted with bruises. The effect was more domino than pin cushion. Anybody who saw me sunbathing that holiday could be forgiven for having some strange ideas. Still, I took comfort in the knowledge that the Kosovs'

methods had an illustrious pedigree. I had seen the film, *The Madness of King George*, in which the crazed 18th-century monarch is handled in a similar fashion before his physicians drape him in leeches, and remember thinking that the treatment for damaged minds had not advanced much in 300 years.

I persisted with the Kosov method for the rest of the holiday. I even had a laugh when I showed the boys a large beaker of amber liquid provided by Mrs Dr K., explaining that I was now required to drink my own urine. (It was apple juice.) For some unfathomable reason, the combined effect of all this cupping and pricking was to make me aware of and, crucially, to feel greater command over the left side of my body. After two weeks I was able to take the few steps from the end of my bed to the bathroom, so long as I used the walls to prop me up.

The boost to my confidence was phenomenal. I was so impressed that I invited the Kosovs back to England to continue a further fortnight of treatment. Looking back, I have no idea why I decided to import my own instead of sampling one of the many capable pin-pushers in the UK. Even King George made do with the local leeches. But you must remember, I had brain damage.

I returned home full of excitement at my renewed powers and went to see Derick Wade at the Rivermead with a bullish projection for the future that I wanted his help in steering me towards. The assessment went well, I thought.

Wade reported back to my G.P.:

> He is now able to talk while walking. He walks in a more upright position and looks ahead … At our review we agreed to continue working towards the same general aims: for Leonard to be as active within his family as

> possible; for him to be as active as possible within his business; and for us to minimise his invalid role and maximise his role as an independent member of society… One of Mr Lewis's overriding objectives is to minimise his time at Rivermead and to maximise his time at home. We are in full agreement with this.

Is it me or was there a trace of irony in Wade's last sentence? I cannot have been an easy patient.



Jerusalem

That March I returned to Israel for a course of treatment that belonged squarely in the twentieth century.

The man in charge was Professor Bernard Brucker — Bernie to his patients. A psychologist by training, Bernie had dedicated three decades to developing a mind-body therapy with a catchy name: biofeedback. His goal was to use this technique to help people with neurological damage or motor difficulties. Normally based in Miami at the Brucker Biofeedback Center, he was working out temporarily of a clinic in Jerusalem when I first sampled his talents.

Initially the precise mechanism of biofeedback was as obscure to me as the secret of the Kosovs' demonic cups. But I will try to explain.

In essence, biofeedback is a teaching tool. The therapist placed sensor pads on an area of muscle tissue, and these were hooked up to a cathode-ray oscilloscope (C.R.O.). The C.R.O. displayed any pulses of electricity travelling down my motor neurones into the muscle in the form of waves across a screen. This showed the intensity of electrical activity inside a muscle during an exercise, revealing the power of the information delivery system from brain to limb. And this enabled Bernie or whoever was on hand to assess my percentage of 'normal' motor function. Having identified specific areas of brain-muscle weakness, the goal was then to target these areas with tailored exercises, exploring ways

to amplify and strengthen the motor signals. It was also deeply empowering. Now I could see the impact of each movement, raising my awareness of how my body ticked.

I tried it for five days. Each session involved two long hours practicing exercises, followed by one hour hooked up to the biofeedback machine. According to my medical notes, the clinic 'had never worked with such intensity before'. 'Progress was very rapid', but this came at a price, leaving me 'completely mentally exhausted by the end of each session'.

It was like trying to learn a foreign language while tap dancing. But I did not want to stop. On the C.R.O. I could witness my body and mind working together better. The most minute variation revealed improvements that would be hard to spot just by looking at me. Every increase in muscle power, however tiny, gave me hope. A reward, as well as a spur to carry on.

The other reason I applied myself with such gusto was Bernie. Far from a solemn Prof, he was a world-class motivator and expert manager of egos such as mine. He also had a uniquely flamboyant image, with a bushy black beard, barrel-loads of charisma, and a passion for cowboy boots, ten-gallon hats and year-round, tailored three-piece suits. The Texan twang of his outfits clashed with his kosher New Jersey accent, and it made sense to me that this theatrical personality had been born in Hollywood. But Bernie was no snake-oil salesman.

In the years since he began his work, neuroscientists have learnt far more about how the brain operates. Dead brain cells cannot come back to life. But it is possible to forge new neural connections by redeploying other living cells, and to an extent these can compensate for lost areas. Neuroplasticity is a remarkable thing.

This was just as well, because the C.R.O. showed how far I had to go. To take one example, at the beginning of session one, my left quadriceps, the largest thigh muscle, enjoyed only one per cent of full function. After three hours this had increased to around seven per cent — not huge, but on the other hand a 700 per cent improvement and significant enough to make a difference to my walking power.

Each time the wave leapt on the C.R.O. screen, there was the evidence. I had done an exercise better! Each flicker of improvement drove me on. And repetition brought understanding, as these C.R.O. signals also identified nuances. Learning when I was doing something in a different way somehow made it easier to do it again and improve. Exactly how this learning process was unfolding inside my body, I had not a clue. But it felt like a miracle, every time, if a very tiring one.

At the end of the five days Bernie had taught me a new technique for getting up from my chair, which caused my left leg to tingle, for what seemed like the first time since my accident. I felt as if I was coming back from the dead. Bernie also got me walking with a stick — a quad-stick mind you, with a four-pronged claw at its foot. Not the elegant silver-tipped cane I might have liked. But it was a step up from the rollator. Bernie did not doubt that I could learn to walk unaided again, in a normal setting. What held me back, according to his notes, was my crippling fear of falling.

Home

Back in Britain there was no Bernie. But I wanted to keep up the pressure. A training room was set up near to my office in Chelsea House, to allow physiotherapists to treat me between meetings. Paul Burgess arranged for two facilitators to come into the office and guide me through the working day, to enhance my cognitive skills on the job.

The only trouble was there did not seem to be much in the way of work for them to facilitate.

Nearly two years had gone by, but I remained largely an observer in the office. Desperate to prove my worth, I continued to believe that I could get back to normal. It was only a matter of time… But brain damage is not great for your reputation, and self-doubt crept in at every opportunity. And when you are always questioning your own judgement, it is natural to be paranoid about other people's opinion of you.

No matter how hard I tried to fight the feeling, I also resented the fact that I could not be hands-on. River Island was not going great guns at the time either. Fashion was changing, becoming more international, with customers increasingly aware of trends. Our brand lacked edge.

The business had succeeded since it started in the 1940s because we were always willing to reinvent it. Instead of getting hung up on a particular identity, we recognised that everything is a marketing tool. River Island had launched in

the late 1980s and now it was nearing the end of its cycle and ripe for a makeover. Our brilliant creative director, Vanessa Lewis (also my stepmother), along with Richard Bradbury and my cousin Ben Lewis, relaunched the business with great success.

Without me.

To say I felt left out of this process doesn't begin to cover it. Although the team's outstanding performance ensured our family's financial security, I am afraid to say that my immediate reaction was to believe that I had been manoeuvred out of the mainstream. Everyone was against me!

Nobody could escape noticing my frustration, and this frustration made it even harder to communicate. Emotional, angry, sullen, I found it hard to share my ideas for the business, never mind persuade others of their merit. And I had no way to prove that my thinking processes were improving. With the result that my self-censorship increased, and my sense of exclusion became entrenched.

Sure, they consulted me on new initiatives, but it was not easy to accept this as anything more than lip-service paid to a man past his sell-by date. In my non-executive capacity, I could agree, 'Time for a change.' But the details of operations were beyond my grasp, making it harder to contribute meaningful, concrete suggestions.

Slowly I made my peace with this shift. I would have to sit back and focus on the big picture.

Miami

In the autumn of 1996, my brother Clive and my sister Caroline accompanied me on my first visit to Bernie Brucker's biofeedback clinic in Miami. Bernie had suggested I might relate to the treatment better there.

He must have been thinking of his A-team of professional motivators, who cheer and cajole patients through their paces. Picture rehab's answer to cheerleaders. In this case, they tended to hail from South America, look great in white lab coats, and have brains to match their looks. My dream at the Devonshire hospital of sailing to South America in order to be healed was about to be realised, in a way.

At the initial meeting Bernie's can-do attitude did not mask the fact that things were looking bleak for me. I tried to lighten the mood and asked him if I would be able to play the drums. He smiled.

'Well that depends on whether or not you could play before the accident.'

I replied that I used to, but I did not know if there was much demand for a one-handed drummer.

One thing I soon discovered is that rehab, Miami-style, moves to a different beat. In the UK, when a therapist asks you to walk across a room, he will say, 'Go when you're ready.' In the US it is, 'Okay, kick butt!'

Bernie's A-team had me doing some truly ridiculous

things. One day I was asked to hump a large plastic ball. This would strengthen my hip flexors, whatever they were. I thrust away valiantly. When it was over I asked the ball if it had been good for her. At least the therapist laughed.

A fortnight in Miami brought me to the next level and I became hooked on physio for my daily fix of positivity. So it may seem surprising that the most stressful experience in my rehabilitation — and possibly the most exhausting of my life — occurred in Bernie's clinic. We were following up on work begun in Jerusalem and I was attempting to dorsiflex my left foot. That is, to turn my toes up towards my shin.

Sounds simple. But the stakes seemed huge. The therapists explained that if I could not relearn this basic movement, I would never walk properly again and be stuck wearing an ankle splint for life.

I could understand what they wanted me to do. But my brain seemed incapable of transmitting the message. I formed a mental image of my toes rising, but the harder I tried, the more impossible it seemed to realise. I stared at my foot, willing it to obey.

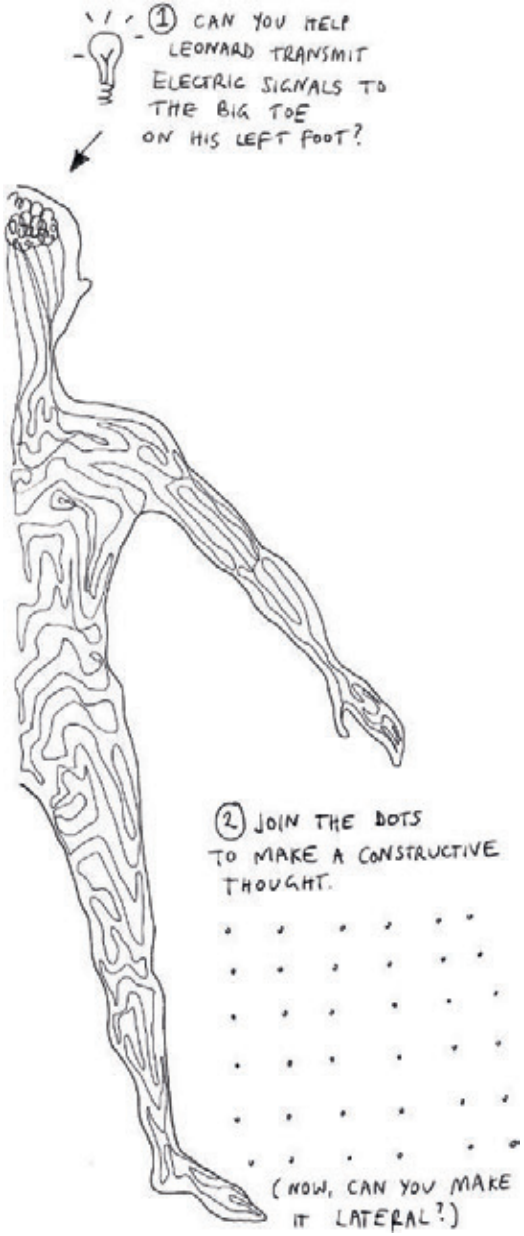
Nothing.

Again and again I tried. It did not move.

Until I spotted a tiny movement in my big toe.

So there was life in there. Just not as I knew it!

When my time was up in Miami I flew back to the UK, full of zeal for biofeedback. I also had fun in the plane with a new toy bought in Duty Free: a Nokia Communicator. Most of the flight passed in playing a game, Hangman. When I got home my boys showed me how to send e mails. This discovery proved truly life-changing, bringing me into contact with anyone I wanted, anywhere in the world, day or night, at the touch of a button. In this and so many other ways technology would help to liberate me from my


1 CAN YOU HELP LEONARD TRANSMIT ELECTRIC SIGNALS TO THE BIG TOE ON HIS LEFT FOOT?
2 JOIN THE DOTS TO MAKE A CONSTRUCTIVE THOUGHT.
(NOW, CAN YOU MAKE IT LATERAL?)

limitations, shrinking the distance between me and the people and ideas I cared about. Fifty years ago I might well have been left staring at a wall. Now I could hold video conferences and on the wall — or a screen on the table — there would be someone else, talking back.

Emma, Joe, Ollie and James met me at the airport. I felt as proud as a newly fledged toddler, tottering out of Arrivals into their waiting arms. They were the first steps I had taken in a real-life situation without a rollator since climbing onto that pony, two summers before.

Northampton

1. On My Knees

From this point on Paul Burgess was in sole charge of my treatment in the UK. But he might not agree with that description. When I began work on this memoir I approached him for information, and he replied with his usual good humour.

'Trying to be a case manager for your rehab has been like trying to herd two dozen wild cats through a one-foot-wide door. You have always followed your own path.'

This path now led to Northampton.

St Andrew's took a slightly different approach from Rivermead. Every patient was called a client. My routine there was much as it had been previously, with therapies in the mornings only, to give me more time at home. For the next three years, every other day, three times a week, Carlos and I would make the three-hour round trip to Northampton. The other two mornings were dedicated to the office. Weekends were for family.

Paul placed me in the capable hands of Judith Bentley, the Superintendent of Physiotherapy, who is wonderfully gifted, with a firm and low-key style. She specialised in the Bobath method, an holistic treatment that addresses the balance of the body as a whole.

It could not have seemed more different from high-tech

biofeedback. Yes, at our first session, Judith asked me to drop on all fours and get crawling.

I had lost count of the occasions when a therapist had asked me to perform an action without really comprehending the reasoning or purpose behind them. But this time I was full of questions.

Patiently, tirelessly, Judith convinced me that in order to walk again, properly, I needed to master more fundamental movements. Her argument was that I had to find my balance — my centre of gravity — before I could find my feet. So the concept was she would guide me back through my developmental phases, a process that would help me to integrate my reflexes, stimulate my balance awareness, and so on. And then, eventually, to ditch the ankle splint.

What?

Having already walked in Miami, what Judith was suggesting seemed a backwards step. How could my main business of the day be shuffling back and forth across the rehab room, from the parallel bars at one end to the wash basin at the other? And back again. And again.

I was a grown man! But if the wheelchair made me feel old before my time, here I was, demoted to infancy. Deep down, I was also terrified, remembering the intense effort it took in Miami, just to wiggle my big toe.

What was the point in learning to crawl?

But Judith did not let up, and in time I did crawl. Just as finally I learnt to pee standing up again, and to get out of my chair safely, and to walk, regularly, over increasing distances, without a cane too.

As well as persistent, Judith was also extremely considerate. She made a point of walking me out to my car at the end of each session, always finding some achievement or other to congratulate me about along the way. Her powers

of persuasion are top notch. On 9 January 1997, with Judith at my side, I walked 20 paces, unaided, minus the ankle splint.

Still, I had not forgotten Bernie. I made considerable efforts to bring his version of biofeedback to me in the UK, but this proved complicated and it has not happened yet. This setback did not stop me from looking for inspiration in other places.

2. In My Eyes

I used to be a sceptic, but deepening gloom about my future permitted me to dream — just occasionally — that there might be such a thing out there for me as a cure. Or at least, a short cut to recovery. All things would be considered.

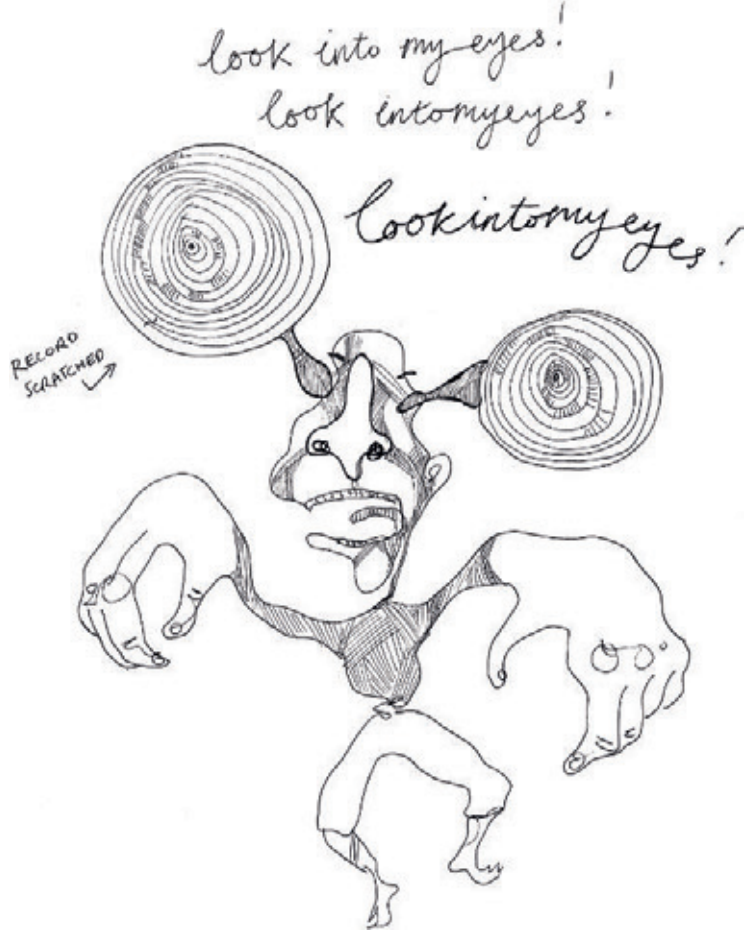
The trouble with physio is it is a slow-burn treatment, yielding fine results over the longer term. But my experience with the Kosovs' acupuncture had taught me that you can get an instant boost if you are prepared to leave your comfort zone. And I badly wanted an optimism fix. Just a little something to rid me of this crippling fear of falling…

So I was open to the idea that a hypnotherapist might be able to help. I began having second thoughts when his sports car swept into our driveway.

I complimented him on his motor. He thanked me for helping him pay for it.

We found a quiet spot in the house. He asked me to walk across the room three times. Then he sat me down and proceeded to draw a cross on the back of my right hand. To me it looked a bit like a swastika. This did not bode well.

He told me to stare at the cross while he talked. Gradually his speech slowed. He began repeating certain


look into my eyes!
look into my eyes!
look into my eyes!
RECORD SCRATCHED

phrases. Soon I was feeling sleepy.

Was I under his spell, or just bored?

I snapped back to attention when he said that a journey of a thousand miles starts with the first step.

I had heard that bull before. And if I could think that, how could I be hypnotised?

3. SHAM Recovery?

Someone told me that my approach to rehab was too short termist. If I missed one goal, I would simply set a new target, a new deadline.

But my guiding principle — as a businessman, as a parent — has always been that if you want to hit your mark, aim high. Without an objective I would lack focus. That was why I always wanted to see my sons with a goal in mind. It was vital to be vigilant and revise targets. Keeping up to date also kept me interested. So I continued to set weekly objectives, not always reflecting on how realistic they were.

Looking back, I see this attitude was self-defeating. Rehab's real goal was learning to adapt to a new life. Embracing flexibility would be a strength.

I needed to live for the present. And to recognise that rehab and physical training would be a permanent feature from now on. Other people gave me endless encouragement — I could have drowned in it. But understanding and accepting limits is knowledge that comes from within. The riddle of becoming me was mine to solve.

Three years to the day after my accident I found a new way to measure my progress. I called it the Shaving Assessment Method: SHAM for short.

In my old life I was a committed wet shaver, just like my

father. After the accident nurses coaxed me into using an electric razor. My reliance on it now felt like a symbol of my inability to perform basic tasks. So on the morning of that fateful anniversary, I looked at myself in the bathroom mirror and said, 'No.'

I found an old razor, slathered my face in soap, took a deep breath, and began.

The results were not barber-shop standard, but I did it, all by myself. One decision, a bit of initiative. What else might I be capable of?

I gazed at my reflection. Today wet shaving. Tomorrow, the world.

Not long afterwards I parted company with the urine bottle that I had been keeping by our bed, and ditched my old slippers too, now able to walk to our bathroom in bare feet — driven on by thoughts of Judith's tireless encouragement, with Emma walking behind me.

It was tougher to deal with my cognitive challenges. I was pretty good at concentrating, comprehension and naming tasks, but there were many other weaknesses. In the past I prided myself on my lateral thinking skills, creative leaps of thought that helped me to solve problems. But my recovery in this area was hard to measure, unlike linear and logical thought, which are easier to evaluate.

The evidence that my imagination was still firing came thick and fast in ideas that buzzed in my head, although I could be shy of communicating them. But I did not hold back when it came to inventing fantastical stories for our sons. It was a tradition that my father began when I was a little boy, captivated by his bedtime tales of mysterious beasts called Migrees (part-monkey, part-tiger).

I loved telling my tales. But how to know if they were any good?

Another beef I had with cognitive rehab was that the exercises did not seem particularly relevant to my idea of the real world. Some of it made practical sense. Me and the therapists spent hours making lists, identifying compensatory strategies to balance my weaknesses. Once a gap had been identified, we would find a way to plug it. For instance, time management was problematic, so we wrote out daily schedules.

One routine chore set by Paul Burgess was to report on the previous day's peak temperature in Manchester and the height of the tide in Liverpool. I was not convinced that this would improve my judgement or executive ability, so gave my old management skills a workout and delegated the task to Carlos, who would look up the answers in the *Daily Telegraph*. It took him a while to fathom why there is no tidal chart for Manchester.

In another task, designed to enhance my mind-mapping abilities, I was given a plan of an imaginary shopping centre and asked to find the quickest route between two points. Unfortunately, I failed. But I remember a real-life shopping trip around Northampton's town centre with my son James, a young occupational therapist, and Carlos behind the wheel. En route, planning our agenda for the morning, the therapist asked, 'Mr Lewis, do you ever go to the shops?'

I did not have the heart to explain.

On these and many other days it felt like rehab had become my substitute for existence. And rehab was getting boring.

In the summer of 1997, accepting that I would never pass a magic signpost saying that I had completed the cognitive recovery and was finally back to Go, I said goodbye to the facilitators who had been accompanying me at the office. It was time to let go instead.

4. Handle With Care

We took a family holiday to France, where I was introduced to a man who specialised in reiki. This one was new to me, but I decided to give it a whirl.

I stretched out on a table in the treatment room and waited. He explained how he was guided in his work by ancient spirits. Apparently they would help him to improve my balance. Or at least I think that is what he said. His English was only marginally better than my French.

As he passed his hands over my energy fields, I began to wonder which of us had the brain injury. Then I remembered who was paying for this experience. Still, I was curious enough to complete the course of five sessions. If magic was out there somewhere, why let a little doubt get in the way?

There were darker times. Such as falling out of bed, or being trapped in a car on a hot afternoon, or getting my hand caught in the doors of a lift. Each of these crises were a major drama for me, powerless and calling for help. In one case that call was placed, by carphone, to an office in another continent because my memory could not stretch to recalling my new home telephone number.

The main constant of my life post-accident remained the need to have somebody on hand, 24/7. However isolated I felt, I could never be alone. There was always the person outside while I used the bathroom, on hand to escort me safely out. And the person behind me when I walked, ready to catch me if I fell. Getting out of the bath always required a helping hand. No question, being able to access this level of care was a luxury. But at times it felt like a punishment.

I got very good at counting my losses, as seen from wheelchair height. For instance, I could never stroll into a bar or restaurant on the spur of the moment. No socialising

could be casual — not when I had to struggle to get inside a venue or to hear over background noise. Meeting new people felt pretty impossible, although not quite as hard as getting away from conversations with people I did not want to talk to. Even when I felt grateful to whoever was pushing me around in my chair, the fact was there was no escape. And conversation is always difficult when you are addressing someone behind you.

Another aspect of life at wheelchair height is that navel gazing is mandatory. When you are addressing someone's belly, not their face, how can you feel you are meeting as equals? And if you are caught in a crush, that sense of impotence can overwhelm.

I remember a holiday with Clive and his family in Santa Barbara. There was a festival to celebrate the history of California. Clive valiantly pushed me down cobbled streets through seething crowds, which was exhausting for him, but after an hour of this I was less than happy and he, not for the first time, bore the brunt.

Out and about, meeting people I do not know, is always a trial. Many seem uncertain what to say, unsure if my problems are physical or mental, perhaps fearful of saying the wrong thing. Often they end up addressing the person pushing the chair while I sit there, like a child, feeling ignored.

'What's wrong with him?' asks the stranger in a stage whisper, tipping his head in my direction. I am two feet away, neither deaf nor dumb.

Fellow wheelchair users assure me this experience is commonplace. But I try to be tolerant.

Somebody pointed out that when I was in my wheelchair I tended to scowl. Once I became aware of this, I tried to make a more positive impression.



THANKS.

My first defence was humour. Each morning after the wet shave, I would splash on liberal dollops of irony. Then I would reinvent the universe, with everything revolving around me, and remind myself that there are advantages in being wheeled around. For a start, you jump to the front of the queue, even if you are the last to arrive. I also felt that I had earned the right to pull up on yellow lines. Gone were the days of driving around car parks, hoping to find a spot. My blue disabled sticker made me king of the road.

Sadly, it is hard to look interesting in a wheelchair. Trousers left little scope for creating any sort of fashion impact, and anyway, they blend in with the chair. On the plus side, my new posture and physique allowed me to wear clothes with elasticated waistbands without shame.

Shoes were another matter. You might think footwear was less important for me than an able-bodied person, but you would be wrong. You need to start thinking like a dude on wheels.

All eyes go down when people meet you in that chair, as do expectations. You would be lucky to be credited with half the intelligence of an able-bodied person. But when strangers pasted on their smiles for talking to the poor dear in the wheelchair they were also searching for something nice to say, a compliment that could not be misconstrued. Their eyes would travel down my body until eventually they reached my feet.

'Oh!' they would cry, in relief. 'What sensible shoes!'

5. Benched

So I mustered some defences, but anger smouldered under the surface, ready to ignite. I would try to remind myself that sometimes I was confused. And also that because cognitive recovery is unpredictable, and invisible, I had to accept that sometimes people would talk down to me so I had better find a way to deal with it. But I was not always successful.

On darker days I felt it had been a mistake to come back from the dead. My existence lacked meaning, the days strung together with rehab tasks. My only success was my three wonderful sons. And one by one they were heading off to boarding school. I remember taking James to Papplewick, the prep school in Ascot. I asked his housemaster, Mr Bunbury, how he recommended differentiating between our three sons. He thought for a bit and then replied, 'Whatever you do, don't make favourites.' This answer was very helpful. From then onwards, James became known as Favourite Son by everybody in the family.

Such moments of light were offset by gloom. Socially I had become increasingly introverted. If friends came over for dinner I soon tired. On more than one occasion I slunk to bed without saying goodnight, convinced that I would not be missed or they would be better off without me. Mired in these feelings, I found it difficult to consider what it might be like for Emma.

One question wouldn't go away: why had I nothing to do apart from work on my body? Businessmen I once saw as rivals were rising up the premier league, and I could only watch from the sidelines.

Of course the reality was different. My family picked up the shattered pieces of my life and helped put them back together. Their care was extraordinary, and their generosity

and understanding afforded me wonderful opportunities. But it would take me years to appreciate this. At least I had begun to see that being a non-executive director had a plus side: life on the reserve bench gives you a great view of the wider picture. I could see how the retail scene was changing, and how the economic muscle of the world was shifting towards the east. So I began to use my time studying emerging economies and shifting trends. It would not be long, I felt sure, before I found my niche.

6. Come Fly With Me

Traumatic brain injury certainly opens the mind. I had come to see that faith, love and acupuncture were not going to get me onto the piste of Zermatt. But there has been a lot of scientific research into the healing power of hope and I did not stop dreaming. Hell, I even went swimming with dolphins. So when a barrister friend recommended that I meet Uri Geller I was all ears.

Geller is best known for his alleged paranormal talents, as seen on television in the 1970s, in particular his ability to bend spoons with the power of his mind. Global fame made him a multimillionaire, although I had not suspected there was quite so much money in destroying cutlery until Carlos drove me through the gates of Uri's Palladian mansion by the Thames in Sonning, Berkshire. As the portals closed behind us a man came out and introduced himself as Uri's manager.

This was going to be expensive. What had I got myself into?

As I lowered myself from the car into my wheelchair, Uri appeared. He smiled then handed me the propeller from

a model of a turn-of-the-century aircraft.

'I don't know exactly why I'm giving this to you,' he said. 'I found it this morning walking in the grounds and felt it was something for you.'

I was stunned. Recently I had become fascinated with the legendary aviator, Colonel Samuel Franklin Cody Jr, an American travelling showman once dubbed — by himself, no doubt — as *Le Roi des Cow-Boys du Wild West*. When he brought his show to England and his Wild West act ran out of punters, he turned to the air to astound his Edwardian audience, becoming a pioneer of kites then making the first recorded flight of an aircraft in Britain.

In 1996 Michael Rich, an art dealer friend, tipped me off about a Sotheby's auction of the S.F. Cody Archive. This sparked an interest, leading me to acquire a range of Cody memorabilia. Now my thinking was coalescing around a business proposition. There was no way that Uri could have known anything about this, I thought. And yet there was the propeller in my hands, just like one from a Cody biplane.

Uri led me through a grand hallway and into his study. I told him about my accident. In response he offered me a large crystal. Unsure of the etiquette, I thanked him and held it in my lap. Then Uri placed his hands on my head. At this point silence seemed appropriate.

If a burst of healing energy coursed through his palms, I did not feel it. But I woke up the next morning after seeing him and thought about walking to the bathroom unaccompanied. I only thought about this, mind you, but it was a big deal that I could entertain the possibility. And to my surprise I found it easier to lift my left arm. Whether this was because Uri possessed a life force, or had a preternatural ability to market positivity, I did not care.

In all, I would visit Uri ten times. And he charged me not one penny.

7. Reboot

Cognitive exercises were all very well. But my brain needed something more creative to do. It was up to me to find it.

So I improvised. First up was writing up some of the children's stories I had been telling my boys about the grand adventures of a character named Binky Beaumont, along with his Australian cousin, Stinky, and their butler Bartholomew, who took a subterranean voyage to meet the ruling sultan of middle earth. Next I began devising board games. Media Moguls, The Castle of Intelligence and Stallions were my favourites and I was sufficiently excited to mock up prototypes. Many weekends passed testing them out on long-suffering family and friends.

Pleased with the results, I decided to research the market. Yes, I hit the shops. It soon became clear that hardly anywhere sold board games. Computers were taking over. This got me thinking. Where exactly did people buy gifts?

The market was fragmented, but worth a fortune and growing all the time. Yet few retailers catered to it specifically. A strong business case could be made for a new multi-channel retail concept centred on gifts.

Experience had taught me that people liked their brands to feel authentic, with a heritage. Samuel Cody could provide the DNA for that identity. S.F. Cody's Emporium had a nice ring to it.

But it would not be a natural fit with the family's other businesses, so I decided to take the idea outside L.T.G. to the open market. One of my first moves to speak to a friend and neighbour in Marlow, Andrew Higginson, then finance director at Arcadia, the retail group (he went on to become Tesco's finance director). He liked the idea, wanted to invest, and came on board as non-executive deputy

chairman to my non-executive chairman. Andrew put me in touch with Steve Cotter, the chief executive of Limelight, a mail-order company. Cotter agreed to become S.F. Cody's managing director, if our plans bore fruit. Steve in turn brought in Pauline Wood, who was running retail for Laura Ashley in the United States. She would be our retail director. I reached out to Andrew Vaughan, Director of Gifts for Marks and Spencer's. He would be our buying director, and two of his staff were prepared to follow him in with us for the adventure.

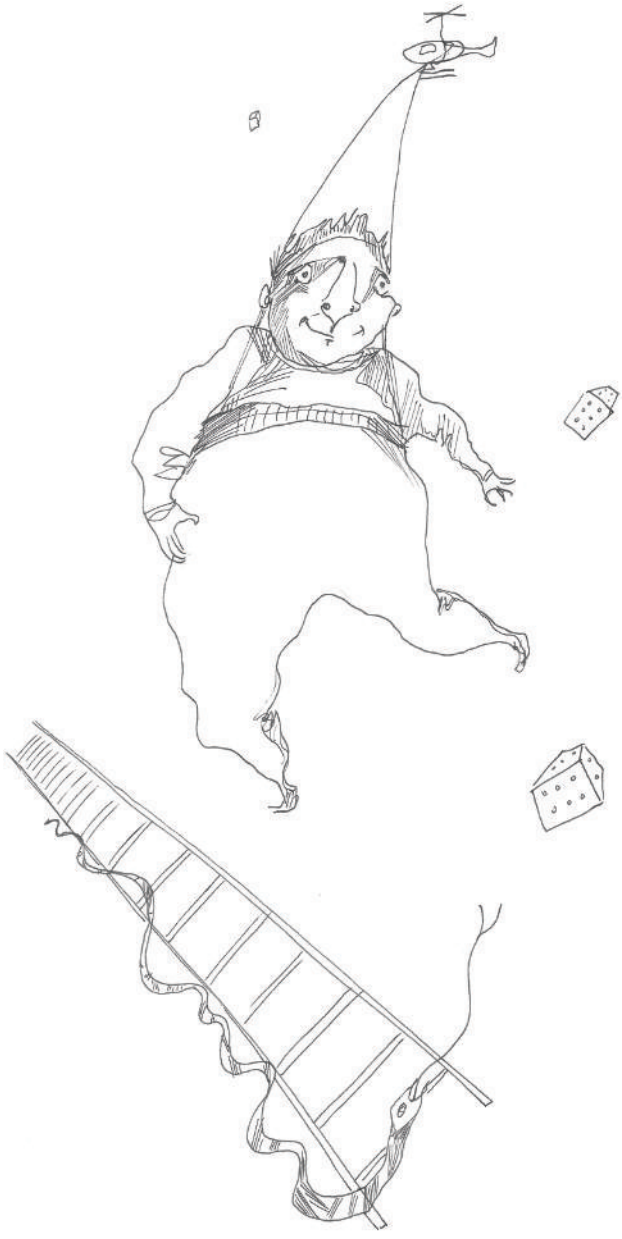
In a matter of weeks I had a first-rate management team, ready for the green light. Only then did I approach private investors, selling a portion of the business to raise funds for the next stage. I was ready to get back to go.

8. Lift Off

It is an odd thing to be rejuvenated by a ghost. But as I told an interviewer from the *Daily Telegraph* during the build-up to our launch, since starting work on Cody, three different doctors observed that my cognitive performance had improved.

I remember our first management meeting. Everybody sat at the conference table, suited up, their ties knotted. It was Andrew Vaughan who raised the idea of dress-down Fridays. This concept was new to me. Sure enough, the following Friday, we reconvened in our casuals. I looked around the room. Aside from me, every man there wore a shirt embroidered with the famous polo player logo. It hit me then that I was entering a very different corporate world from the fashion business.

Our opportunity was clear. Until now, nobody had



attempted to bring focus to the gift market. My role as founder was to drive the business's strategic success and monitor its performance. Throughout the year I visited trade fairs around the world, checking out merchandise, scoping out our competition. I cut back on physio, and lost a bit of fitness, but there was too much going on to worry about that, and for the first time in a long time the work made me feel like me.

We secured prime sites in two major new shopping centres, the Trafford Centre in Manchester and Bluewater in Kent, which were due to open in autumn 1998 and spring 1999 respectively. No doubt the Lewis family reputation helped persuade landlords to take a punt. For the shop design we brought in David Dalziel, whose work helped River Island strike such a chord. And my new friend Uri promised to infuse a range of 'Good Luck' cards with his mysterious healing powers. Everything looked good, for now and the longer term. Here was a team capable of running a far bigger business than the one we were starting with. A mail-order spin-off was under discussion. More store locations were offered to us, and we even began receiving approaches to license franchises abroad. And of course there was the on-line potential. In 1998, dot. commerce was enjoying its first boom. According to our forecasts, the internet would be key to the business's growth.

On 10 September I flew to Manchester with Emma and the boys for the Trafford Centre's grand opening and proudly made my way with them around the 6,000 square feet store. S.F. Cody's Emporium was finally airborne.

9. Onwards

Every weekend I would fly to Manchester with a son or two in tow, to see how things were going in the Trafford Centre. Once we were challenged at the entrance to the British Midlands Club Class Lounge. The steward said James was too young to go in. I pointed out that James was thirteen.

'In that case, fine. Just one thing, sir. Why is he on a child's ticket?'

Whoops. I had already blown my confused-disabled-person-in-a-wheelchair cover. Unable to play the sympathy card, we smiled and said goodbye. British Airways proved more accommodating.

It was a good way to spend time with my boys. By now they had all left for boarding school at my old alma mater, Millfield in Somerset.

After the initial flurry, Cody was up and running, and it required minimal creative input from me. But a big moment came in November 1999, on holiday at Beaver Creek, Colorado. Finally, I made my triumphant return to the slopes. While Emma and the boys skied, I contented myself with a toboggan.

The Millennium came and went in a burst of fireworks over Ridge End House, then life continued rolling along its established grooves. One evening we were invited to dinner at my cousin Paul and his wife Amanda's house. The legendary comic actor Rowan Atkinson was there. Naturally, I took the opportunity to tell a joke. Sadly it fell flat. But I could sense there was something more on Emma's mind.

When we got home Emma said we had to talk. She needed space.

It was her voice speaking, but the words did not sound

like her. I could not believe what I was hearing.

That night she slept in a guest bedroom. A few weeks later she left and went to live with her sister Kim.

When Emma asked for a divorce I could not understand why it was so black and white. It strikes me now that she had been working hard at the marriage for the previous six years. Work being the operative word. Somewhere along the line my wife had become my caregiver. And throughout she had cared for me faultlessly. But I was often unhappy, and my dependency put a huge amount of pressure on the relationship.

After she moved out, I was left alone in a large house in the middle of fifteen acres and needed 24/7 professional care. I missed her terribly. For many months my sons' photographs on the walls seemed the only positive reminders that my life had a purpose. In time I learnt that Emma was seeing Ray again, the boyfriend she had been with when we first met, nearly 20 years before.

Once divorce proceedings were underway every aspect of my life had to be scrutinised and costed. Emma and I met to look over the figures. Our lawyers had worked everything out. I sat there, listening to legal arguments, watching strangers examine my affairs, carving up the life that we had shared. My family's future was at stake, yet I felt completely detached from proceedings.

Thanks to Clive's good offices, the terms were agreed out of court. Emma and I remain friends.

10. Departures

Solitude opened my eyes to the large gaps between the therapeutic activities that gave my week its shape. I trudged through 2000 and much of the following year, battling depression, leavening the rehab mix with speech therapy, a touch of cranial osteopathy, a dash of yoga here, a twist of Pilates there.

Between times I dedicated long hours to staring at the wall. I was angry, this time with myself. I needed to take responsibility for filling the void. Once again, rehab had become my primary occupation, meaning I was travelling miles and miles for treatment, returning to an empty bed. What was the point of this great country house? I was not exactly enjoying the views, or even the garden, just sitting inside, twiddling my thumbs, growing bitter. It felt like a nowhere land, stranded between life and death. If I was to survive and build a future I would have to break free of the past.

I started where I knew best. First, I adopted a new dress code. Henceforth I would wear only jeans and T-shirts, and only black ones at that. It occurred to me that I should extend my wardrobe principles to the rest of my life. Streamline it. Before too long I said goodbye to Ridge End and moved to a more manageable flat in London beside the River Thames, somewhere I could feel closer to the hum of life.

My emotions swung between anger and misery. I had to find a new purpose. But before I could rebuild I needed an injection of motivation.

I remembered the master motivator: Bernie Brucker.

Miami

1. Level

I escaped a grey British autumn to the Miami sunshine.

Florida is a great place to live, particularly if you happen to be an orange or disabled. Why? Because Miami is the rehab capital of the United States. It helps that the land is flat, the climate balmy, and since most buildings have been built since the 1970s, disabled access is virtually universal. Another bonus is the University of Miami's Department of Neurosurgery, made famous by the work of Barth Green, a surgeon who arrived in the city in 1976 with a modest goal: to cure paralysis. Ever since Miami has been a top destination for clinical research and innovative neurosurgery.

The Lois Pope Life Center for Neuroscience Research is another hub. 'Home of the Miami Project to Cure Paralysis', according to the large black letters on the front of the building. There is great demand for their work, with ten thousand spinal and cerebral injuries occurring in the US every year (all those cars). After his riding accident, Christopher Reeve, the *Superman* star, came to Miami, one among the many who flocked from around the world.

Because traumatic brain injury is such a big business in Miami, the logistics were in my favour. Compared to my three-hour round trip to Northampton, my new base was just

a 35-minute drive away from intensive biofeedback, physiotherapy, speech therapy, yoga, acupuncture and Pilates. Not to mention sailing sessions at Shake-a-Leg, and art and creative writing classes if they took my fancy.

Bernie drew up a new programme and introduced me to Robin Smith at Miami Physical Therapy Associates (MPTA). Unlike Bernie, Robin is an understated sort with a dry sense of humour. I am sure it was not he who let slip that Miami's biggest home-grown superstar, Gloria Estefan, was one of his patients.

We had a few trial sessions. Robin took a restrained approach. When I goofed up the closest he came to criticism would be to say, 'Okay, let's regroup and restrategise.' This was Robin-speak for, 'What the hell are you doing?'

When I presented him with time-charts for the progress I hoped to achieve, with targets to review each week, he did not laugh at me. It would be a while yet before I finally accepted that this approach made disappointment inevitable. Ultimately, the most challenging part of the learning curve has been to accept that the curve could level off.

I did most of my work with Robin and his brilliant colleague Miriam Guanche. Unlike them, many therapists, especially the young ones, tended to say 'we' a lot. As in: 'Let's try this, shall we?' Or 'Aren't we doing well?' As if we were in this together.

We were not always amused.

Take the time a speech therapist asked me to talk for about 30 seconds. I said I could, but it might help if she took the video-camera tube out of my right nostril.

We needed to keep it down, she explained, in order to see how I co-ordinated respiration, speech and swallowing.

I treated her to a customised line from *Hamlet*: 'To breathe or not to breathe.'


TO BE—OR NOT—TO BE...

After this initial visit I arranged to return after Christmas for a long-term rehab programme, with frequent visits back to the UK to see friends and family. I went home and as I was packing belongings to take with me, inadvertently I solved a mystery. Among my books I came across a biography of the Marquess of Tavistock, my old friend from the Devonshire hospital. He could stay behind.

2. New World

In the New Year I flew over with my cousin Paul to help me settle in. We found a flat to rent on Fisher Island, off the MacArthur Causeway, and hired a personal assistant to set up an office and organise my life. I had given self-sufficiency a go, but after spending hours trapped in automated telephone systems I was through with it (and that was just trying to put in a landline at my new home). After a week Paul went back to the UK. Welcome to the real world, I thought.

The therapies went well, but I missed my family terribly. Life on Fisher was not without attractions. Yet as the weeks passed it reminded me of the island on the 1970s TV series, *The Prisoner*. Somehow the place did not ring true. For example, the supermarket was low on basics but excelled at luxuries, and deprivation was nowhere to be seen. Occasionally I would spot a couple of Buddhist monks pottering around the island's Observatory, but most residents moved about in the air-conditioned luxury of their cars. It was a fictional paradise in other ways, with the white sand on the beach imported from the Bahamas. If you lay there, you needed only to raise a flag and a beach steward would come to attend you. Comfortable, yes, but lonely. I

began looking for another place to live, winding up in leafy Coconut Grove.

I also found it a bit odd living in a country where Halloween is regarded as one of the key festivals of the year. I could not help remembering that when I first visited Miami, as a young man back in the 1970s, it was not my cup of tea. It struck me then as somewhere old people went to eke out their retirements on the golf course. But the more I saw of it now, the more I understood how the city had evolved. Florida as a whole was going through a period of amazing growth. In 1980 the population stood at nine million but was projected to reach 21 million by 2015. Most Miami residents had lived in the state for under a decade, which shaped the culture. All eyes seemed to be trained on the future and the opportunities it might offer. It was a city founded on optimism (just as well, given how close it was to sea level). To me, on my best days, these vibes were very seductive. Another benefit was that my regular inter visitor, bronchitis, did not make its appearance, not being a fan of the warm climate.

When I was feeling dislocated, however, I wondered if I had made a mistake. Only then to go to the Brucker Center and be humbled by somebody extraordinary, like Clarence Adoo, a gifted trumpet player from the north of England. One day in 1995 Clarence was driving to his brother's stag party, only to wake up in hospital, paralysed from the neck down. Yet despite this devastating accident, he was making music again, using a specially adapted synthesiser, which he played by moving his head and blowing through a straw. Clarence believed that biofeedback had renewed the strength and sensation in his upper body. Despite his struggles, he mastered his frustration, putting a lot of energy into raising funds for the Salvation Army, all the while

rejecting self-pity and keeping a sense of humour. Clarence reinforced my sense that faith is everything: be it spiritual or the simple conviction that life is worth fighting for. He gave me a lot of courage.

So I fought back homesickness and tried to think like an immigrant instead. I began investigating business opportunities, then would fly back to Britain to see the boys, catch up with family, and discuss new ideas. Then back I would go for the next bout of therapy.

I told myself I was a New World person. I would have a better life. Wouldn't I?

3. Feldenkrais

Robin recommended I try out something called the Feldenkrais Method.

'Yes,' I said. 'But what is it?'

He shrugged. 'I don't exactly know.'

Perhaps I had overestimated him. 'So why are you suggesting it?'

He smiled. 'Because I think you should.'

The following week Corinne Luria met me in the lobby of MPTA. She wheeled me into a therapy room, helped me onto a bench, sat down opposite me, and began explaining the technique. I gathered it was something to do with somatic education or body intelligence — that is, increasing awareness of what I was doing, how and why, in order to achieve more controlled, intentional physical actions. Feldenkrais emphasised posture because the alignment of the spinal vertebra is the basis of balance. Learning to place my head and upper body in the optimal position above my pelvis would facilitate greater freedom of movement.

Or something.

I also gathered that Feldenkrais was big with actors and racehorses.

To illustrate her points Corinne fluttered her hand, slashing the air one second, then shaking her fingers, wafting them with a fluidity that made me think of an octopus swimming.

I liked what I heard, even if I did not fully understand it.

'Wait and see,' she said. 'Once you've got into it you'll find that everything falls into place.'

I took a long look at her. Suddenly I realised what had been nagging at me.

'What are you sitting on?'

She laughed, stood up and stepped to one side. Thin air. She had been squatting all this time we were talking. Whatever Feldenkrais was about, I wanted to know more.

4. Flow

Dead brain cells cannot be reborn. My dream was to train the living to take over the duties of their fallen comrades. Recruiting living brain cells is not straightforward, however, and the damage to my cerebral cortex made it hard to control the reflex motor movements in the left side of my body, meaning they were rigid and jerky instead of smooth and flowing. But Feldenkrais could help.

The core objective of the Feldenkrais Method is defined as 'Functional Integration' — that is, restructuring the mind-body relationship. For example, the part of my brain in charge of balancing my left side was largely out of action, but we could train another area to become aware of what was going wrong in a movement and make adjustments to

compensate. This work would never become automatic to me, always requiring a conscious effort. But if I made that effort I saw results.

Integrating my lost left half meant consistently challenging myself. Every day I had to fight the instinct to lean on the nearest wall, or find a prop to steady me. I needed to remind myself that my left side was still there, even though my mind scarcely felt like I inhabited it. This disembodied feeling was a permanent feature of life as me, Part Two. I had to remember to lower my left foot before lifting the right, and force myself to use my left hand even though my right was far more obedient. It was easier to make the effort when I reflected there was always room for improvement. To that end I began to eat using my left hand, and to type with it, and brush my teeth.

The emotional battle was equally intense. Who likes doing difficult things when there is an easier option? Facing up to your weaknesses is upsetting. Especially when my physical constraints forced me to spend more time thinking, ruminating on my problems, and made it harder, so much harder, to walk away. Anxiety and anger had always to be kept at bay.

But Feldenkrais proved a powerful weapon. My left hand would never resemble an octopus swimming but in time, with Corinne's help, I was able to rise from a seated position on the floor and stand on my feet — an accomplishment that was, to me, as impressive as pole vaulting. Ms Luria was an inspiration.

At the end of one session I asked her out for dinner.

'I can't,' she said. 'You're my client.'

'No problem,' I said. 'You're fired.'

5. Travellers

I had taken Corinne to the Vermont countryside to celebrate her birthday. In the middle of the night my phone rang. Clive was on the line. My son James had suffered a seizure.

I flew back to the UK. By the time I reached his bedside James looked fine. Although at fifteen years old this was his first fit, the doctors diagnosed epilepsy. It did not appear too grave a case, though, and he returned to boarding school.

Towards the end of 2002 I was on a plane to New York for a wedding when my mobile rang. Another seizure. Terrified, I took the first available flight back. Again, James seemed well, but we decided not to send him back to school. He wanted to try something different. Emma agreed he could come to stay in Miami, initially with home tuition, see how he liked it. He completed his GCSE syllabus here, and then announced he wanted to transfer to the American system. To my delight, he gained a place at the prestigious Gulliver School. I was thrilled to have him with me. And in a way he was not making such a radical move. While his oldest brother Joe was taking an undergraduate degree at Edinburgh University, Ollie had moved to New York to study film. We would be New World people together.

Go

It has been years since I could walk alone. Will I always need someone by my side?

Sure. Yet in countless ways I enjoy enormous freedom. I get to explore, to dream, and to make things happen. I appreciate that very few people have come so close to death, travelled so far from normal existence, and lived to tell the tale.

Each day I need to find a fresh motivation. Lifting my left arm is hard, and painful. When I remember how lucky I am to have this movement, it is easier to make the effort. I am not paralysed. But, like you, I am stuck inside me. This limits my ability to perceive how my personality might have altered since the accident. I cannot shake the feeling that now I am outside the loop.

The word rehabilitation implies a return. My emotions changed for the better when I saw that happiness lay in front of me, instead of looking over my shoulder, longing for the man I was before. Yes, I was angry — still can be. But this shifted when I realised how important it was to seek out new experiences.

Life is a short-term project. And I got a second chance. When I consider how far I have come, I can see myself as a winner.

In the past I wanted to spend more time with my family. Now there was nothing to stop me. I was not tied to a desk.

I had the freedom to think big. This life was not necessarily less than what went before. It was simply *Life: Part Two*.

Realisations kept on coming. Such as the afternoon I was inside a mega branch of H&M on Broadway in New York City, ploughing my wheelchair through the mass of people examining Halloween outfits in the back of the store.

Why was I struggling? What need had I to visit all the young fashion stores?

So I stopped. And no, the sky did not fall in.

But I would have to eat my words. Because somebody introduced me to the Go Chair, a super-light, toggle-controlled, all-action electric wheelchair. Having sworn against them in the past, fearing they would limit my recovery, to a sports-car fanatic like me, this machine was irresistible.

In my new chariot, I could take a walk with James and Oliver through Boston, where both were studying. We moved ahead, together, side by side yet independent, for the first time since I plummeted from my pony. Better yet, I could whizz off wherever I wanted, whenever I chose. (Boston's town planners have a lot to teach London's about wheelchair friendliness.)

On the downside the Go Chair has a low wheelbase, meaning a three-inch step is enough to stop me in my tracks. Still, there is always another chair, and I am fortunate enough to have someone on stand-by to push me along in it. And on a flat, step-free day, the Go Chair lets me travel under my own steam, a Nokia Communicator in one hand, the chair controls in the other, free and plugged into the world. Few people in my situation have these choices. I am determined to make the most of them.

There are still scares. Last night I was in my bathroom, standing by the sink. I lowered myself into my Go Chair, but

my aim missed its mark, and I landed on one of the arms. Falling forwards, I collided with the wall, then back, smack to the floor.

It was a worrying hour, waiting for someone to find me, wondering if I was about to head back to go, all over again. But I survived. And here I am.

Once upon a time doctors said I might never walk again. Once I was on my feet, they thought I would never manage stairs. But people change, and so have I.

Epilogue

1. Here We Go Again

A lot happened after I finished writing my memoir in 2005. We lost James. Nothing can describe the anguish.

Meeting Ingrid was a magical moment. A spectacular Spanish fashion designer, she is also a true artist. Her creativity, love and enthusiasm transform everything she touches. Including me. Thanks to Ingrid, and the team that she enlisted, I got fit again and the world opened up to me. Her vision and boundless energy led to many adventures, including travels with our families (even skiing). She oversaw the redesign of extraordinary new homes in London and Aigua Blava in Spain (where the climate was also good for my bronchitis). I am also extremely proud of the childrenswear brand she launched, Strawberries and Cream. The birth of Lorna was the miraculous cherry on top of the cake.

In time the marriage ran its course, but co-parenthood and friendship took its place. I struck gold again when I began a new relationship with beautiful Amanda.

In 2024 I suffered an unfortunate series of events, including two bouts of COVID, and ended up in the ICU at Chelsea and Westminster Hospital with suspected sepsis.

After weeks of investigations we discovered the source of my problems: an infection in my big toe! Nobody could

believe that such a small body part had caused so much trouble. It was a relief to know what was wrong. I did not realise then how hard I would have to fight to get back on my feet.

By the end of June the infection was under control. I had another chance at life. But I was weak, significantly overweight at 95 kilos, and immobile. If nothing changed, my daughter Lorna would not remember me walking at all.

One day I was out in my wheelchair, waiting in the queue for the coffee stand outside St Mary's Church, Battersea. I got talking to an Italian lady who said that she was writing a book on grief, then told us how she had turned to the Feldenkrais Method combined with NLP (neurolinguistic programming) to help her overcome cancer.

This sparked my interest. I was aware that Feldenkrais has many applications. Actors and musicians use it to reduce self-consciousness and move with greater fluency. And of course there is the approach used for neurological injuries, as deployed by my former partner, Corinne Luria. I had given up Feldenkrais 15 years earlier, believing that it had not made a difference, but this conversation started me thinking. I remembered a consultation that Ingrid and I had with a neuro-rehabilitation doctor in Spain. He told us that my sense of balance would never recover, but my condition could improve. The key challenge was, as always, to compensate for the fact that my damaged brain had lost awareness of my left side.

I tapped an email to Corinne, describing my deterioration. Could she help?

At the end of 2024 Corinne hopped across the pond and began to work with Sharon and Marcelo, my neurophysios in London. Together we would try and reboot my nervous system and see if I could walk again.

We broke down this mission to step-by-step goals. My first priority was to increase my ability to move from one position to another. Second, to stand without assistance. Third, to improve my balance. Fourth, to walk a short distance. Not a long list, but for me it represented little more than a battle for independence.

We began with simple movements. Slowly, every aspect of my mobility improved. As my muscles toned up, I learnt to sit with a more aligned posture, then stand. Alongside these efforts I changed my diet and began taking Mounjaro, the weight-loss drug. By the summer I would lose 15kg.

Newton's third law of motion states that for every action there must be an equal and opposite reaction. This principle is fundamental to the balance of any system. It is why, in order to stand, you need to press your feet into the floor while pushing your sternum and hips forward. Easy to describe in words. In practice, it required intense concentration, because I needed to compensate for my poor posture, intermittent spasms, and the perpetual sense that my midline is adrift to the right, which meant I was doing too much with my right side.

At Corinne's suggestion I had an eye test and we discovered an additional handicap. I had known for years that my bottom left and right fields of vision were impaired. I thought things had improved, but although my right eye could now see perfectly, my left — the side affected by my brain injury — had a quirk. Instead of seeing a vertical line as upright, it tilted ten degrees off centre (for comparison, Pisa's famed Leaning Tower is four degrees skew-whiff). Of course, my right eye helped to correct my vision, but this visual distortion was a hidden cognitive load that I did not need and was making it harder for me to judge distance or position my body accurately. Instinctively I looked at my

feet because it felt safer, even though this made it harder to balance and maintain the posture that would help me walk. So I constantly needed consciously to remind myself to look forwards, and up, with my head held high. Only then could I rediscover my horizon.

Hard and tiring as our work was, gradually my stamina increased, and I felt the green shoots of the old me return: a sense of hope.

I had told Lorna that I would walk again. At 12.15pm on 13 May 2025 I delivered on my promise. It was not a four-minute mile, but in my newly streamlined body I managed to walk around 20 metres at a reasonable pace, the first time I had walked independently in 18 months.

It had taken 30 years to feel this positive about myself. My body felt responsive, I had more energy, and my mind felt focused. But could I take my next steps forward?

At the end of May I headed to Spain for a month of intensive training at Casa Ino in Aigua Blava, my home on the Costa Brava, with Corinne, supported by Sharon, Marcelo and the magical skills of Joan, a local physio.

2. Camp Feldenkrais

Thanks to the changes Ingrid had orchestrated, everything at Casa Ino was set up ideally for me, with lots of flat areas to walk on, a swimming pool by the house and the warm climate to keep my lungs clear and my muscles limber. All the pieces were in place to enable me to move around with more fluidity. I felt the pressure to perform acutely. Above all, I needed to maintain my motivation.

After breakfast each day our work began with an hour or two of walking and working on the mat with targeted

exercises to build strength. An exercise might be as seemingly simple as picking up my left leg from the ground ten times in a row, but the concentration this demanded would be far more tiring than the actual muscular effort. After a break we would spend a couple of hours in the pool, where I could explore movements, freed from gravity. Then came lunch and a rest.

In the afternoon I would gather myself for more walking around the house. Sometimes Corinne would stand at my left, holding my hand — another sensory input to remind my brain that my left side was there. Interestingly, after a few weeks I could sense the ground under my left foot more clearly: evidence that more nerve cells had been recruited to reinforce my body's sense of itself in space. This was neuroplasticity in action.

I had feared that the month would be about as exciting as watching paint dry, and some days it struck me that relearning how to walk is quite like watching a stock market index, a never-ending series of ups and downs. Every session focused on repetition with minor readjustments. To keep up my morale, I did not set distance targets but instead tried to focus on quality, and despite my fears, mostly I found it very absorbing because we were studying the process of movement in such minute detail.

Here follows my *Owner's Manual of Walking* (also known as *The Neglected Art of Falling Forwards)*:

1. Maintain a sense of balance over both legs. Spread the legs apart until stability is achieved.
2. Place full weight over left leg held in a vertical position.
3. Lean forward far enough to ensure that my left ankle, shin and hips are all in alignment and hold at

an angle of about 70 degrees (Note: although this is how it feels to me, Marcelo assured me that, in reality, the lean is only around 5 degrees).

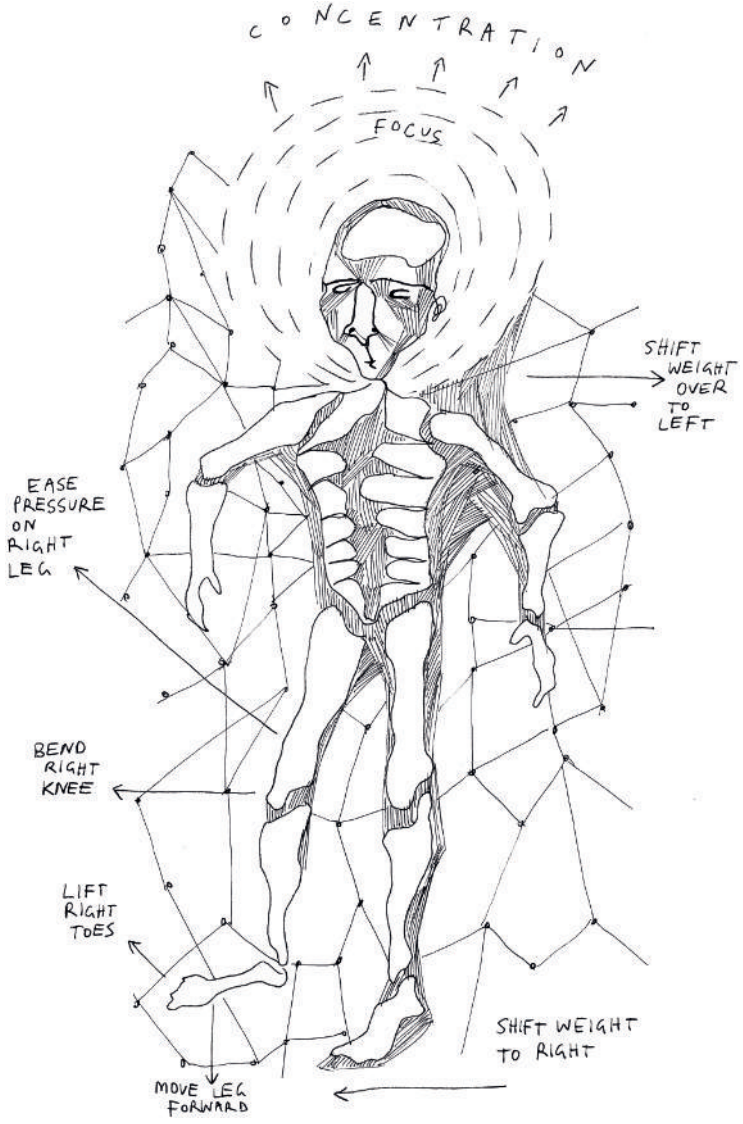
4. Start falling forward, remembering to step out in time to break my fall.

So in essence, walking is about maintaining a straight leg, pressing into the ground, leaning forward and shifting your weight to the other leg. You could think of it as controlled falling, but no matter how much I reassured myself, no matter who was standing at my side, or behind me, falling was the last thing that my brain wanted to do. As a result, leaning forward never became less than frightening to me. To help concentrate, I tried to picture myself balancing a pot on my head and hold in mind the Feldenkrais credo that every movement is an exploration.

I did not know where I would end up at the end of the month, but also felt this was not the right question to ask. Because the real aim was to improve my quality of life. And there were other joys on offer, given our proximity to the sea.

Gravity is a real downer for disabled people. But a few years earlier Ingrid and I realised that if you walk under water the problem is solved. The trouble is how to get there.

When this idea first struck us we bought some kit in a diving shop in Aigua Blava and tried diving off the beach. I soon discovered that walking across the sand and wading into the sea was far too difficult. Next we had a look at the rubber dinghies used by the local diving club, only to realise that rolling backwards into the water would be impossible for a disabled chap like myself, never mind clambering back out again and into the dinghy. So Ingrid and I decided to source a boat. Fratelli, the Italian manufacturer of classic


CONCENTRATION
FOCUS
SHIFT WEIGHT OVER TO LEFT
EASE PRESSURE ON RIGHT LEG
BEND RIGHT KNEE
LIFT RIGHT TOES
SHIFT WEIGHT TO RIGHT
MOVE LEG FORWARD

wooden motor boats, was able to adapt their model according to our specifications, with a wide walkway so my wheelchair could reach the front of the boat, a lift to access the bathroom below deck, and a mobile platform that reached the jetty so my wheelchair could drive straight on. I christened her *Yabadabadoo*. Since acquiring her I had become a serial underwater walker.

Every few days we would drive to the marina after the morning's work. I would put on the wet suit, pull on a vest loaded down with weights, and the platform would lower me into the Mediterranean with my oxygen tank and two diving companions.

Tramping around under the sea is very different; I imagine it must be similar to walking on Mars. That deliciously free sensation was one thing. Just as enjoyable was appreciating the terrain and the amazing aquatic life around me. This became my passion and reward for some long hard training sessions.

19 June was a landmark day. After training in the pool for about two hours I rested for 30 minutes, then I decided to walk for a bit.

Well, it went on and on, turning into a complete lap of the outside of the house, perhaps 100 metres. This was exactly what I was hoping for — and something I had not been able to do for many years. I was very happy.

Of course that was not the end of the story. Some days spasms gripped my left side and nothing was possible. In these moments the frustration could feel devastating and I did not hold back from sharing how I felt.

On 6 July Joan commented: 'The improvements have been palpable, even though you don't see them that much. The position in the chair, the transfers from the wheelchair, the tone of the muscles, everything is getting better. The

problem is that you've been upset the last days because you thought you could walk better at the end of June. You put so much enthusiasm into it that in the end it turned against you and became pressure for you. That pressure and the desire to do well made you more tense than you should have been, and you know the rest.'

When the training camp came to a close I headed to Barcelona airport with my helper Ivy. We were waiting at the door to the aeroplane but there was a delay in being brought my wheelchair because crew were helping another disabled person. They asked if I would like to walk on board instead. So I did, remembering Corinne's words: always look up, into the distance.

I promise I did not look down. But somehow or other I noticed that my left leg was bending automatically as I walked. A small step, but a great stride for me.

3. Keeping Going

Sometimes I think about the man I was before and what kind of life he might lead today.

Prior to my accident, my timetable consisted of one hour on a cross-trainer machine followed by a one-hour drive down the M40 to River Island's HQ. Then I would jump into nine hours of work on the family businesses. Nowadays my constant companion is my iPad, enabling me to maintain awareness of my business and world affairs. But when I am in the UK my daily routine starts with one hour on my NuStep recumbent cross trainer, followed by two and a half hours of physio devoted to walking and improving my sense of balance. Afterwards I am driven to my office in central London for three hours of investment meetings. Then I

move onto the fun part of the day: picking up Lorna from school in Battersea. My job is to collect her in my wheelchair then we walk home, ensuring that we do not ever stop at the ice cream van on the way. On Saturday I have returned to my longstanding tradition of shop visits. Sunday is my day of rest.

All of this is accomplished with the assistance of my helpers. This means that I do not have to attend to any housework or cooking. Another change is that I do not have any executive interaction with the trading business, and I miss the buzz that came with that. But then I reflect that I am 71 years old, and I am satisfied with my daily routine.

I enjoy the quiet pleasures and watching the seasons roll by and my loved ones change and mature. As soon as Lorna turned eight we decided that she would be able to take on the responsibilities of dog ownership and started an intensive period of researching the market. It did not take us long to realise that the right dog for Lorna was a cockerpoo. We visited a breeder, who showed us three puppies. One was smaller than the others and shy, too shy to come forward. We were convinced that he should become a member of the Lewis family. It was an easy sale. It took Cinnamon little time to become an expert at pulling the strings in our household.

Every time Cinnamon and I go to collect Lorna from school I appreciate the fact that I am getting to experience one of the peak joys of being a parent for the second time around. I thought that I was the oldest father until I spotted another, slightly more famous, 82-year-old LSE dropout, waiting in the playground and looking just as energetic as when I watched his band play in Hyde Park a few years previously. Uncanny, because one of my earliest memories is of my mother taking me and Clive to see the Rolling

Stones perform at the ABC Cinema in Exeter, in 1964.

I never knew how I would feel seeing Lorna ride a pony. But she was so eager to try, I could not say no. And it turned out that I was relaxed about it — after being satisfied the risks would be minimal, with a safety helmet, back support, and close supervision one to one. Lorna loved bonding with the pony and mucking out. Watching her I realised that I had failed to learn the basics. All my focus had been on the thought of winning polo tournaments.

I have also taken up new challenges. I even invited Duolingo into my life to learn Spanish. One of the things I like about the app is how it has gamified the learning process. The other day I noted that I had moved up into fifth place, although I did not exactly know what the competition was about, and because I declined to purchase additional elements, the last two questions in the challenge were deleted, limiting my chance of moving ahead. I did not take offence — it is AI, after all — but the funny thing is that I think that my Spanish has improved. Lorna, my fluent in-house Spanish speaker, is not so sure. When she heard me chatting to the app, she asked me what language I was speaking.

The lessons came in handy when I heard that they were about to terminate the golden visa scheme for Spain. I thought that when supply of a product is restricted, demand increases and realised that I would want one. But did I need it? Well it would entitle me to spend more time in Spain. I would also be able to move to other Schengen Area countries around Europe — all 29 of them — without restrictions. In addition I could join the European line at immigration.

I could not resist.

The application process is made for lawyers, particularly

Spanish lawyers. After a three-month wait I was invited to the police station for questioning. I worried that we would have a communication problem. After a long 30-second conversation with the police sergeant, I was confident that I would like being part of a country that has streamlined its entry process to 30 seconds of interrogation. My visa application granted, I was invited back to the police station to collect the paperwork. I decided to show off my new fluency to the policeman.

'*Estupido*,' I said as he handed it over, then quickly corrected myself. 'I mean, *estupendo*!'

The policeman smiled.

I was desperate to try out my new status. So when I next entered passport control at Barcelona airport, I chose the European channel. Big mistake. It would have been quicker in the disabled queue.

4. Moving On

For all the freedoms of my unusual life, I am very aware of how much I have missed out on. I continually evaluate my own growth — in mind, body and spirit — and used to compare it to economic growth. But then I remember that the size of the world's economy in 1994 was approximately $27.9 trillion, and in 2024 it was $105 trillion, so on reflection, I can see that this is not the best index of comparison. In other words, my greatest hurdle remains to keep myself motivated.

Towards the end of August I visited a popular local fish place, Marisqueria Xaco in Platja d'Aro, with Ingrid, her mother Presen and Lorna. I was thinking about my volatile record of success in the walking challenge I had set myself.

Then I looked at the family seated on the table on the other side of the walkway, a father, mother and young son, and noticed that the father was in a wheelchair too. He also had an artificial arm. It looked incredibly high tech, with exposed metal joints. Yet he had amazing dexterity. First he smoked a cigarette with it, then he drew a picture for his son. Seeing him put me in my place. In so many ways I have been lucky.

I delayed writing the final paragraphs of this epilogue in the hope that I would walk a four-minute mile. Unfortunately, reality got in the way. The other day my brain was unable to send the message to my left leg to move backwards. After continuous training since the beginning of June until the third week in August, less a 10-day break in July, I had been hoping for more. The truth was I had exhausted myself. I could not take another step. There is only so far that determination and willpower will take you. Then again, there is always another day.

I told Marcelo, my physio, that I was disappointed. He replied that I had to be satisfied with the direction of the recovery macro-graph, which is still moving upwards. It will be volatile and there will be good days and bad days. Just keep moving, he said, and do not stop. Then he showed me a video of myself walking three years ago.

'You see, it is different. Now you are bending your left leg before bringing it forward. The leg is strong and the angle of attack on the shin has improved significantly, meaning your foot sits better on the ground. It is now working on that leap of faith for continuous steps.'

The incline of the road ahead is steep. My journey is a never-ending marathon. It will never follow a straight line. Some days I move forward, others I decline. I can walk, and then I cannot. I am up and then down. But I keep trying,

lifting my head, casting my gaze to the future.

Every day is another fork in the road. Life is good.

Postscript, 2025

There have been three great improvements to my life in the last 30 years. First was meeting Ingrid, who is a creative genius and wonderful mother. We married in 2012. Second was the arrival of our daughter in 2016. When I shared this updated memoir with Lorna, she commented, 'I remember asking the big question like it was yesterday. The family were about to arrive for a nice supper. When the words came out he looked at me for a moment, then he told me everything. Since that day he has been my hero. And now I have read the book I know what he is thinking when he is sitting quietly. I also understand why he admired my long legs: wishing for his own to work just as well. But we are all helping him to get back to go!'

The third improvement was reconnecting with a dear friend, Amanda. When I asked how she would like me to refer to her, she suggested two options: 'She who must be obeyed' or 'Her indoors.' I suggested 'Girlfriend', but she rejected it. In the end we settled on 'Partner.'

2025: The Leading Players

Joseph graduated from Edinburgh University and married Rose. They have three children: James, Eliza and Esther. Joseph sits on the board of Blue Coast Capital, our family's

investment business.

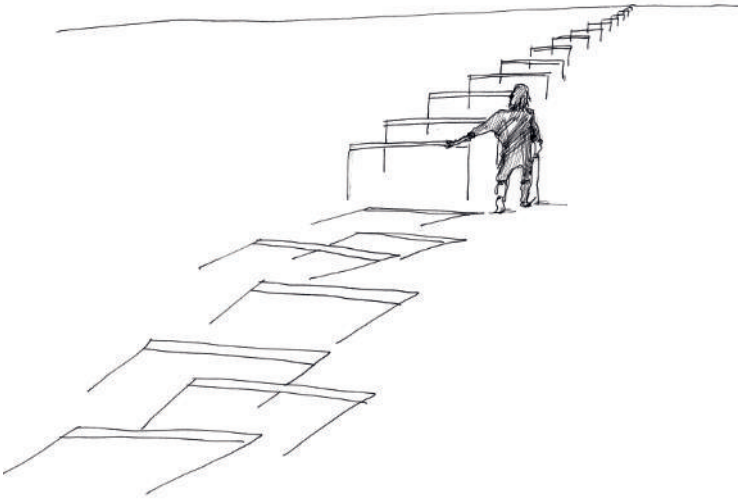
Oliver and his partner Imo, along with their dog Einstein, now live next door to Joseph and Rose in Camden. Oliver is a maverick investor.

Emma and Ray married and had a daughter, Lana, who just graduated from Exeter University with a degree in neuroscience.

Bernard and Vanessa have just celebrated his 99th birthday. Their sons, my brothers Sam and Jake, power on. Sam and Raman have a son, and Jake pursues his music interests.

Clive has taken on the responsibility of chairman of the family company, which is focused on trading and investments.

Caroline married Lucian and moved to La-La-Land with the family.



Acknowledgements

When I was drafting and redrafting and revising my notes for this account of how I got myself out of a hole, first and second time around, I needed the assistance of a few lost souls with nothing better to do. All of whom were rather good. This is my shout out to the A List.

Amanda — Thanks for being my new 'her indoors' and for being happy to take on 'damaged goods', as well as being a great friend of Lorna's.

Andy and June — Thanks for being great neighbours and great sports.

Bernie — Thanks for giving me confidence.

Brendan — Thanks for not accepting the offer that I made when I had a mental age in single figures.

Carlos — Thank you for teaching me polo.

Carmel — Thanks for being prepared to be my PA before the internet and able to accept dictation via the car phone.

Caroline — My favourite sister.

Catherine — She is better than wot I am on grammar and arranging letters in the right order and then producing text that is as fine as silk.

Clarence — Still the best trumpet player in the world.

Clive — Thanks for stepping in and being a brilliant brother.

Corinne — In the past six months we spent so much quality time together. It would not have surprised me if we had wanted to kill each other. But Corinne is such a professional she probably would have explained to me that is more efficient to pull my right shoulder back while plunging the knife in.

Dad — Thanks for outliving the Empire State Building and for passing on the lucky genes.

Dan — Thanks for making me aware of the superiority of American polo helmets and real estate in Sacramento.

David, Julian, Simon and Ben — Thanks for putting up with my impossible emails.

David H — Thanks for popping across from Hong Kong. Even though I know that you only wanted to claim the airmiles.

Deana — Head of Research and trainer to the stars.

Diana — Thanks for reminding me of the benefits of Feldenkrais and the possibility within me and my mind to transform.

Divina — Thanks for going the distance.

Emma — Thank you for being a great mother, wife and chauffeur.

Erika and Sally — Thanks for being my Ms Fixit team. Able to do the impossible.

Geoffrey and Adele — Thanks for lots.

Godfrey and Pru — Thanks for introducing me to Florida.

Grazia — My multilingual, multi-skilled PA.

Helga — Thank you for keeping me company in the ambulance on the way to hospital.

Helpers — Ivy, Geraldine, Ionela, my multilingual, tech-savvy, enablers.

Imo — Thanks for looking after Einstein and his co-

owner.

Ingrid — Thanks for entering my life. I had lost all my confidence. You took me in hand, cared for me beautifully, and refocused my life. Your flair and artistry match your brilliance as a mother. I feel lucky for everything you brought me, and to call you my best friend.

Joseph, Oliver, James — Now both Joe and Ollie have made successful family lives and are past the age of 40, I have warned them not to play polo.

Judith — Thanks for making me aware of the importance of the Bobath method.

June — Deputy Boss of Bosses.

Kim — Thanks for giving me hope.

Leslie and Doreen — Thanks for introducing me to North Carolina.

Les — Writing coach supremo.

Lorna — I asked Lorna what she wanted me to say about her and she replied, 'You can write anything because it is your book.'

Sir Lucian — Thanks for taking my favourite sister off to La-La-Land and introducing me to Elliot 'Arsenal' Grainge.

Mags — When we first met you were a student in Edinburgh and were offering yoghurt-encrusted raisins with a free illustration. I asked you if it was possible to buy the illustration without the raisins. But you countered by negotiating.

Max and Geoff — The best dudes in Hollywood.

Mick and Anita — Thanks for being great friends and neighbours.

Miriam — Thanks for being the best physio in Miami and for preventing Robin from saying, 'Okay, now regroup.'

Mum — Thanks for giving me life and for helping me to

keep things in proportion.

Paul, Amanda, Mark, Jan and Laura — Thanks for lots and lots, including helping me to get used to the capital of Latin America.

Physios: Sharon, Joan, Marcelo — I regard them as my AAA team, my saviours. I tried to have a volume discount from each of them, but I was never successful.

Paul B — Thanks for helping me herd a pack of cats through a tight space.

Presen — When I met her, I knew I had discovered the secret to Ingrid's creativity. A former book editor, she was the first person I had met whose library was so packed that there were two rows of books on each shelf, one in front of the other. I thought if Ingrid is like her, she is an exceptional person. I was not disappointed. Thanks Presen.

Rachel — Thanks for the memory of the hot pants.

Richard B — Thanks for listening to my advice.

Robin — Thanks for teaching me how to regroup, stand up and face the world.

Rose — Thanks for introducing us to the wonders of classical art and delivering my three favourite grandchildren.

Sam and Jake — Thanks for looking after our Dad.

Sarah, Clara, Max and Lillie — Thanks for sharing Clive.

Simon and Dee — James's favourite Americans.

Uri — Thanks for being right.

Vanessa — Thanks for introducing Sam and Jake to the family and for reinventing Dad as a young 100 year old.

Vivian — Thanks for teaching me how to speak proper.

Wendy — The mystery lady from Texas.

Appendix

Insights into Feldenkrais and Neuroplasticity by Corinne Luria

Alexander Luria is often credited as the godfather of neuropsychology. His remarkable case study, 'The Man with a Shattered Life', describes the struggle of a soldier, Z, after being shot in the head in 1943 at the battle of Smolensk. Based on Z's daily journal, this account records 25 years of accommodating a frightening new reality. Z had amnesia of all recent events, had lost half his field of vision, and experienced great difficulty speaking, reading and writing. Luria's observations alongside Z's insights elucidate the fascinating and precise workings of the human brain.

Like Z, Leonard has used writing to bring order and meaning to confusion and loss. Three decades after his accident, he decided to revisit the Feldenkrais method of relearning movement with the aim of accessing uninjured parts of his brain.

Awareness of movement is central to the pioneering method of somatic education devised by Moshe Feldenkrais. An engineer and physicist by training, and judo fanatic by inclination, he studied in Paris under Marie Curie. When an old knee injury was exacerbated during the Second World War, Feldenkrais developed his own rehabilitation

techniques. He believed that impaired connections between the motor cortex and body can improve through targeted exercise. This concept had been understood empirically since the beginning of the century. What made his approach so remarkable is the methodical way he applied the theory.

Feldenkrais's goal was not simply to improve movement, but to restore human dignity. A lesson in the Feldenkrais Method is never an exercise in the conventional sense; rather, it is an exploration and a learning opportunity. The lessons are designed to teach students a more ideal way to exercise. Or to stand and walk, or to play a sport or a musical instrument. This approach is based on a rich understanding of how we act through our inner worlds of sensation, by focusing on how we feel when doing things. Feldenkrais also explored how revisiting key developmental stages can facilitate new movement patterns. He continued to refine his method, teaching 'Awareness Through Movement' lessons at his studio in Tel Aviv, and ultimately internationally, to many thousands of students from 1950 until his death in 1984.

Neuroplasticity

The human brain does not merely calculate a movement as a robot might; we perceive motion, just as we perceive colour or depth, as a unique qualitative experience. This is a property of consciousness.

In recent years neuroscience has begun to unveil the neural basis of consciousness. Imaging techniques like functional MRIs and PET scans show which areas of the brain are activated, when. Now we know that a single cerebral neurone can have up to 10,000 synapses, with

upwards of a hundred trillion in each brain.

When our body moves, hyper-astronomical magnitudes of brain cells are jiving in harmony. Within a fraction of a second, electro-chemical signals flash across a million-odd neuronal groups. These nerve-cell circuits are in constant communication, weaving continuously changing patterns of connectivity.

The implications for those seeking rehabilitation after a brain injury are profound because the capacities for modification are practically infinite. Simply put, we can change our perceptions by raising our awareness of previously unconscious patterns of thought and movement. In other words, if we can learn, we can change. This is the meaning of neuroplasticity. We have huge potential to improve our functioning and thus improve our lives.

Moshe Feldenkrais was one of the first to recognize and document neuroplasticity. His focus on monitoring movement has been reaffirmed by evidence that long-term change of neural connections and improved function is possible. This occurs most readily when a person — or any other animal — pays close attention while learning.

It may seem magical to propose that movement problems can change simply through becoming more aware of the actions involved — especially in the rehabilitation of people with serious brain damage. Traditionally, science views the body as a machine, with sensory functions separate from motor functions. But imaging techniques that let us see the brain at work in real time confirm that our sensory system, the part of us that feels, is intimately related to our movement system.

Awareness unlocks the potential for improvement because our kinesthetic sense provides immediate feedback about the location of our head, body and limbs. This helps

us to guide and assess the success of a movement. The more detailed our awareness, the more exacting we can be. And the easier it is to change.

Mind-body maps

A core principle of the Feldenkrais Method is that after a neurological injury plenty of brain matter remains to take over the damaged function. Noticing fine sensory distinctions between movements builds brain maps.

Brain maps were discovered in the early twentieth century by an American-Canadian neurosurgeon called Wilder Penfield. He demonstrated how the surface of the body is represented in the brain by a map that he referred to as the homunculus. The size of each body part on a brain's map was proportional not to its actual size in physical terms, but to the number of nerve endings. These reflected how often and how precisely that body part was used. In the homunculus the mouth is relatively huge — our lips and tongues are so sensitive, being important for communication and eating — whereas the thighs are relatively small, with far fewer nerves involved.

Building on Penfield's work, it is now understood that when a part of the body is not used or is injured, its representation in the brain map decreases. In other words, your brain's structure is a history of your thoughts and actions. You have to keep doing and thinking, or the connections in your brain will fade.

After an injury or damage to the brain, the connections within it change too. Areas may become over- or under-active. While we cannot physically get into the brain and change connections, we can modify both the input (sensory

information) and the output (movement). This is why it is more accurate to talk about improvement than recovery when discussing neurological rehabilitation. A brain cannot revert to its previous state, but improvement is achievable. This process is unique to each individual, according to the extent and location of the damage.

Retraining

Every movement during a functional integration session or 'awareness through movement' lesson is an opportunity for the brain to make new connections. Even the smallest action involves the entire body. Strain and mental pressure are not particularly helpful in developing awareness because they can increase muscle tension. This is why the sensation to aim at is one of effortless action, since this leads to better coordination of the entire body. But of course this can require emotional and psychological effort — something of a paradox.

After his fall Leonard learned to organize his every movement around the difficulties that resulted. In the months since Leonard decided to resume a full-on program of neurologically based physical therapy and Feldenkrais functional integration his balance, differentiation of movement and spatial orientation continued to improve. Awareness was key: training the brain to recognise minute changes in muscle tone, direction and orientation. Slow, small movements enabled his nervous system to develop connections between his sensory experience and the motor outcome. By paying close attention, neglected areas became more clearly and fully represented on his mental map. This refined control helped his balance, and he walked.

But the process was not straightforward, and full of trial and error. On any given day he might be able to organize his posture, balance and sequencing of movement to walk around his home with only minimal help. Other days he was confronted by stiffness and unrelenting reflex activity on his left side, leaving him frustrated and exhausted. In such moments the eye movements, depth perception, vestibular responses and overall body awareness necessary to stand and walk could seem unattainable. Fatigue, distractions and anxiety all affected his ability to function in an independent, efficient way.

The curve of improvement is not a straight upward line. Periods of improvement will be followed by a drop, then a plateau. But errors are essential to discover new patterns of movement, and Leonard showed an impressive ability to adapt and persevere. In six months he improved so much: his alignment, balance and sense of midline, leading to more independence and ease. Because there is no right way to move — only better ways. It is a lesson we can all learn from.

Further reading on publications and related readings in neuro-rehabilitation, consciousness and neuroplasticity

Body and Mature Behaviour: A study of Anxiety, Sex, Gravitation and Learning, Moshe Feldenkrais
Sets out the foundational principles of his movement-based learning process.

Higher Judo, Moshe Feldenkrais
Feldenkrais presents judo as the art of using all parts of the body to enhance general health. The judo mat served as a research lab for explorations in how to promote optimal function through awareness.

The Elusive Obvious, Moshe Feldenkrais
An inquiry into the process of action, outlining the basis of his theory that learning how we do what we do is a hallmark of our individuality.

The Master Moves, Moshe Feldenkrais
Transcripts of workshops undertaken across the US, which introduced the method to thousands of students. Includes discussion of human potential with scholars such as Margaret Mead, Karl Pribram, Heinz Von Foerster, Jonas Salk, Milton Erickson and Gregory Bateson.

The Potent Self, Moshe Feldenkrais
Explores the relationship between faulty posture, pain and the underlying mechanisms that lead to compulsive and dependent human behaviour. He shares insights into resistance, motivation and habit formation.

Body Awareness as Healing Therapy: The Case of Nora, Moshe Feldenkrais
Classic case history of a woman who has suffered a severe stroke and lost her neuromuscular coordination, including the ability to read and write. Feldenkrais used rational, intuitive approaches to help his student relearn basic motor skills.

Embodied Wisdom: The Collected Papers of Moshe Feldenkrais
A collection of articles and interviews presenting a concise and comprehensive statement on the theory behind his work.

The Feldenkrais Method: Learning Through Movement
Written and edited by 25 leaders and experts in the field, it covers the concept of somatic education, in which movement is informed by the conscious brain and nervous system.

Making Connections: Roots and Resonance in the Life and Teachings of Moshe Feldenkrais, David Kaetz
A biographical and historical context for Feldenkrais' teachings about the fundamental and functional unity of body and mind.

The Man with a Shattered World: The History of a Brain Wound, A.R. Luria
Portrait of a brain-injured soldier's struggle to regain his mental faculties after being shot in the head. Woven throughout the narrative are excellent brief introductions to the topic of brain structure and function.

The Mind of a Mnemonist, A.R. Luria
Study of a young man with a limitless memory, who eventually became a professional mnemonist. He was handicapped intellectually because he could not make distinctions: every abstraction or idea immediately dissolved into an image for him.

The River of Consciousness, Oliver Sacks
A collection of essays on evolution, medicine, neuroscience, the roots of creativity and the nature of consciousness.

Consciousness: How Matter Becomes Imagination, Gerald Edelman and Giulio Tonino
The role of a dynamic core in the brain that is responsible for perception, language memory and self-awareness, as it has evolved over millennia and constantly evolves over the course of our lives.

The Brain That Changes Itself, Norman Doidge
The discovery that our thoughts can change the structure and function of our brains, even into old age, is the most important breakthrough in neuroscience in four centuries.

The Brain's Way of Healing, Norman Doidge
A portrait of the human brain's endless adaptability.

Cerebral Reorganization of Function After Brain Damage, ed. Harvey S. Levin and Jordan Grafman
Clinical research on neuroplasticity after brain injury.