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A HAND FROM THE DEEP

by Romeo Poole



SOMEWHERE near midnight my room telephone rang, and according to well-formed habit I rolled out of bed and answered almost before I was fully awake.

"Ambulance trip for you, Marsh—Whitby Home."

That brought me wide awake, and hustling into trousers, shoes, shirt and white uniform coat I descended to the main office. Dr. Lang, the superintendent, met me at the foot of the stairs with a heavy overcoat.

"Here," he said, "put this on—it's a pretty chilly night. Here's your bandage kit; you may need it. Ambulance in the back drive. Explosion and fire out at the Whitby Home. Send back for help if necessary. Now use some speed."

I used some speed, and when I got into the ambulance the driver used some more. We tore up the street at a hazardous rate, the chauffeur giving himself over to the task of driving, while I turned the crank that ran the shrieking signal horn.

The so-called Whitby Home was an obscure little institution occupying a shabby ten-room brick building in a low-class residence district in the outskirts of the city. The place bore a rather evil reputation, and it was

hinted that its owner and operator, Dr. Whitby, was guilty of various illegal practises in connection with his hospital work. However, no complaint of any importance had ever been lodged against him, and consequently no investigation of his activities had ever taken place and the general opinion of his character remained unconfirmed.

For aught I knew, the rumors about Whitby might have been born of the natural resentment of all medical men toward a practitioner who declines to be governed by their standards and becomes, therefore, a "quack." For Whitby had belonged to no medical society; he was careless about collecting anything for his work; and he practised any kind of medical theory, old or new, that happened to appeal to him, totally disregarding the ethics of the profession. He had no general practise, and the inmates of his would-be sanitarium were usually people of little learning and nearly always the victims of disabling accidents. I must mention, however, that my gratification at the thought of investigating the Whitby Home and some of its curious inmates entirely overcame my resentment at losing most of a night's sleep.

In a matter of seconds we drew up as near the place as we could get, the fire department having the narrow street blocked. The building was almost completely gutted by the fire when we arrived, and, grabbing my first-aid kit, I ran up to the captain who was directing the fire-fighting to inquire about the victims.

"Only one alive," he panted. "Rest all killed in the explosion. Come over here."

The survivor, whose room had been on the ground floor, had not been injured by the accident, although he had been stunned temporarily by the shock of the explosion. The firemen had wrapped him in a blanket salvaged from the burning house and laid him in a sheltered place to await the ambulance. Passing the mangled bodies of the dead, we found him sitting up, looking a little dazed at the excitement, but feeling cheerful and apparently comfortable. He was a common-looking little man of probably thirty years, a laborer of not very extensive intellect, but alert and sensible in answering our questions. He had been staying at the place on account of the amputation of his left arm a little above the elbow. I sat by his side on the return to the hospital, and questioned him regarding the cause of the fire.

"Gas or gasoline explosion, I guess," he responded readily. "Fox, the fellow that did the odd work around the house, was in my room along about 10 o'clock, and sat there and talked to me a while. Finally he said he smelt something like gasoline or escaping gas, that seemed to come down the stairs, and he went up to see to it. After a while I heard him open the door at the top of the stairway, and that's about all I knew till I come to, out there in the yard. Something must've blown the whole top of the house to pieces. I was lucky, for I was the only one that slept down-

stairs. Are any of the rest of 'em—alive?"

No, not a soul, I told him. The patient's face betrayed genuine regret at this.

"Too bad. Doc Whitby was a good fellow. I got this arm cut off in a smash-up over at the barrel-stave mill, and Doc Whitby just happened along before I even got it wrapped up, and he took me in and took care of it ever since, and never asked for a dollar. I had a couple weeks wages with me, and I turned that over to him, but he didn't seem very anxious to get it. Wanted me to wait and see what a nice job he'd do on that arm—some new scheme he had."

ARRIVING at the hospital I installed my patient in a ward bed, made out his record card in the name he gave me, Simon Glaze, and then proceeded to look after the dressing on his arm, which I found soaking wet. I removed this and applied iodoform gauze, dry, covering it with a linen bandage.

"Aren't you going to soak it up?" he asked.

"Soak it? No. That's no way to take care of a stump."

"Doc Whitby kept it wet all the time."

"It's a new one to me," I told him. "We always keep wounds like that clean and dry. You'll be all right with this dressing."

"Well, maybe," he said doubtfully, as I left him.

The next morning I went in for a look at my patient, who appeared to have spent a rather bad night.

"Doc," he began, eagerly, "couldn't you stretch a point and wet this bandage for me? I haven't slept a wink all night with that dry rag on it."

I wondered what kind of faith cure Whitby had been practising on Glaze, and I maintained my position that the wet bandage was not the proper treatment. Glaze stared at me with red,

sleepless eyes, misery showing in every line of his face.

"Doc," he finally said, "I want to talk to the regular top boss of this concern, and I want him pretty soon."

We had considerable argument over this, but ultimately I went and brought up Dr. Lang in compliance with Glaze's request. Glaze had been lying face down on his bed during my absence, and when Dr. Lang and I returned we opened the felted door with its silent latch without a particle of noise and had stepped into the room before Glaze was aware of our approach. Dr. Lang started to speak and his heavy voice broke on the stillness of the room with quite a jar. The effect on the patient was most startling. He gathered his legs and his good arm under him like a flash and sprang backward, clear on to the next bed, which, fortunately for its occupant, was empty at the time, the patient being in the dressing room.

Lang gasped.

"Aha, a mental case, as I might have suspected."

He crossed quickly to where the patient lay, still crouched in the same posture, speechless, doubled up. The doctor laid a hand on him, spoke to him, turned him over on his back, all without evoking a word from Glaze, who lay with eyes half-closed like a man playing dead.

"Well, let's have a look at the arm, anyhow," said Lang, and he proceeded to uncover the unresisting man's stump.

"Bad-looking job," he commented. "No infection, but just doesn't look right. I suppose Whitby was trying some wildcat scheme on him, and so long as he has no infection maybe we'd better continue it for a while just to keep him calmed down. Then we'll gradually break in on some reliable modern treatment. Didn't you say he was perfectly rational last night?"

"He certainly was."

"Next time he has a lucid interval, just call me, will you, Marsh? No matter what I'm doing. This is an interesting case, and I'd like to know what the late Whitby has been doing to him."

Some time later in the day Glaze recovered his poise, and Dr. Lang talked to him at length, questioning him about the treatment administered by Dr. Whitby, but the answers only increased our curiosity. Glaze admitted that he had been under chloroform a number of times since Whitby had first cared for his arm stump, which seemed rather unusual to us. Questioned as to the purpose of this, he said he didn't believe the arm had ever been touched when he was under the anesthetic, as it was never sore afterwards. There was an injury in the roof of his mouth that bled a good deal, he said, and there were little sore spots on his back that were quite painful for a day or two.

"And then," he finished, "there was a good deal of time I can't remember at all. Guess I been kinda feverish or something, for there's long stretches of time go by that I can't remember anything. This morning was one of 'em."

"And, say, Doctor, I wonder if you could fix it so I can have a bath pretty often—say every day, or twice a day. I don't want much hot water—just plain cold is good enough for me. Doc Whitby always let me bathe two or three times a day, and I just can't seem to get enough of it."

Dr. Lang was interested enough to assent to this, although he hardly expected to collect a cent from the patient. He was retaining Glaze for the satisfaction of his private curiosity.

"That's the weirdest case I ever saw or heard of," said Dr. Lang to me later. "Call it intermittent insanity if you want to, but he hasn't a trace of fever, nor a sign of locomotor ataxia, both of which lunatics practically always have. In fact,

when he is in those silent fits his temperature is actually *below normal*. And how he takes to water! Whatever is wrong with him, it isn't hydrophobia."

I prepared Glaze's bath for him several times, and he demanded water that was practically unheated, although the time was early winter and the temperature outside well below freezing.

Glaze was removed to a room by himself, with a bath attached, where his eccentricities would bother no one else, and during the next two weeks he showed very little change in symptoms. I was careful not to startle him unduly, but even under the most careful treatment he still showed that curious inclination to double up into a ball and go backward—always backward—away from any one who approached him. His talkative intervals grew shorter, and if allowed he would spend hours in his tub of cold water, hardly moving a muscle.

MAKING an examination of the arm-stump one morning I noted for the first time three or four little warty growths in the suture where the skin had been drawn together over the stump. As the patient was feeling apparently normal at the time, I held a hand mirror up to the stump so that he could see the warts, too, and told him they would probably have to be cut off. He looked intently at the reflection of the end of the stump for a few seconds and then turned to me with a startled expression in his face and voice.

"Don't cut 'em off," he pleaded, and on the instant he doubled up again into a ball, rolling on the floor of the dressing-room like a wooden thing.

When I told Dr. Lang of the incident his curiosity at Glaze's behavior put a severe strain on the good doctor's self-control.

"If that man Whitby were alive today," he remarked with studied re-

straint, "I'd be inclined to put him on the operating table and persuade the truth out of him with a red-hot iron. It's some devilish work of his that makes a man act like a dried armadillo every time any one looks at him. And that subnormal temperature? Where does he get it?"

Two days later we took the somewhat unwilling Glaze into the operating room to care for his unhealthy stump. Dr. Lang of course superintended the work, and the actual cutting had been turned over to my fellow-interne, a young Irishman named Lancey with a flaming red head and a likable manner, whom every one considered to be destined for a brilliant future. As I gradually whiffed the ether into the patient's nostrils Lancey was busy unwrapping the stump. When the cut-off member was exposed, Lancey's eyes reared for only a second on the bits of flesh he was expected to remove; than his whole face changed as if he had been struck with a club.

"Holy cats!" he gasped, his lips turning gray-white. "Cut out the ether, Marsh. I don't want to operate on *that*."

I stopped and turned toward Dr. Lang, who was a little nonplussed at Lancey's sudden refusal to carry out his commission.

"Pardon my abruptness, Doctor," apologized Lancey to his superior, "but I'd like to have six or seven days' time before going ahead with this cutting."

"You'd like it?"

"Yes, Doctor. If you'll give me a week before you disturb this man's arm I think I can tell you something about the honorable Dr. Whitby's work that'll make your eyes open. But I've just got to have that much time."

"One week," ruminated the superintendent, slowly, "won't kill nor cure him, in his present condition. I presume we can wait that long. But aren't you forgetting that I am in

charge here, and that this man is being kept here solely on my responsibility? Do you have to be so extremely reticent with your theories? I feel that I'm entitled to know something about what you think you've discovered."

"I know what Whitby has done," said Lancey simply. "And in a week I can tell you what he did it with. Can I have that much time?"

"Yes, take your week," exploded the doctor, with some irritation. "But I'm holding you strictly responsible for the condition of this patient."

"That's all right—that's what I want."

"And I still think you might give me an idea of what you're talking about."

"Take a look at that, then," pointing to the bared stump.

Dr. Lang scrutinized the growths. As he had not recently been reading on the subject that had given Lancey his sudden inspiration, it is possible that he did not see anything definite on Glaze's arm; also it is possible that in his dignified conservatism he doubted even his own eyesight. But as he retreated, dissatisfied and silent, I bent close and looked. What I saw took my breath away and made me wonder if I were really awake. Lancey hurried away, and I trundled the unconscious Glaze back to his bed.

DURING the next two days Glaze lost nearly all that was left of his normal human instincts and speech. He moved and obeyed mechanically when spoken to but seemed to understand motion better than speech, so that it was often necessary for me to point to a thing in order to make him comprehend what I wanted. His mania for the cold bath increased, and if I went into his room quietly in the early morning I frequently found him doubled into the familiar ball, sleeping with his eyes half open.

Observing Glaze's eyes so much brought out another revelation. Upon first seeing the man I had noticed his bright, intelligent-looking eyes, which were rather prominent; but now, since his recent prolonged lapses into semi-consciousness, I noticed that his eyes were sunk deeper into his head and seemed to be losing their luster. Now, this condition might be induced by anemia or something of the sort but Glaze was in the pink of physical condition and not in the least emaciated, and I was at a loss to explain the change in his eyes. He had certainly grown less talkative at the same time, and vaguely I wondered if something were influencing a part of his brain causing it to shrink and thus by natural consequence causing his eyes to sink farther back in the bony structure. As I sat observing him it suddenly struck me that the crown of his head seemed to be less prominent than when I first saw him, and after a careful survey I was positive that the man's head was losing its prominent crown and sinking into a more brutish line.

Of course any physician knows that a man's skull can change shape in the course of time, if something happens to develop a new portion of his brain, just as the bones in a coal-heaver's shoulders bend under his heavy loads; but a change like that in one's skull would hardly be perceptible in less than two or three years, and the apparent alteration in the shape of Glaze's skull in the three weeks we had known him seemed like a preposterous dream of some kind. Not wishing further to upset my good superior, Dr. Lang, I kept still about this weird discovery until Lancey returned to the hospital that evening, he having been out by special permission all day. Late that night I brought Lancey up and told him about the patient's eyes and asked him what he could see in the shape of his head. While Glaze lay in his habitual stupor, Lancey felt

of his head and turned it right and left. Then he placed his hands behind him and said:

"It all fits together—perfectly. But, my God, where will it end?"

I could only stare at my friend.

"I've got it, Marsh, I've got the whole story—up to date. And I don't know but that it would be a kind deed to chloroform this poor wretch and let him out of it. I never dreamed it would work so fast. Tomorrow, Marsh, I'll tell all of you what I have found out."

And Lancey went back to the laboratory.

I now studied Glaze's habits more closely than ever, for I did want to get some idea about the mysterious case before Lancey had to tell me every detail as if I were a child. Glaze was not inactive all the time. He varied between his rolled-up playing-dead attitude and sudden snappy, erratic movements. He was beginning to snap at his food and devour it hastily, almost without chewing, and this habit caused him some little stomachic disturbance, as of course it would with anybody. In his frequent visits to the bath-tub he would dive for long periods beneath the surface of the water and come up half-strangled, yet seeming to enjoy it all. And if anything surprized or startled him it was always backward that he retreated from it—backward and suddenly.

Finding time to visit Glaze along in the afternoon, I dropped into his room and found him sitting up in his chair, apparently his old, cheerful self. I spoke to him gently and without startling him, and he smiled and looked as if he would like to reply, but simply could not. Hoping to draw him out into one more conversation, I sat down beside him and continued talking to him about little things around the house with which he was familiar. Finally, unsuccessful in getting Glaze to talk, I play-

fully shook hands with him, preparing to leave. The hand that gripped mine nearly broke three of my fingers, and the smile left Glaze's face as he shut down on me with a grip of inhuman strength. Tugging at his hand with my own left, in an effort to free my sadly pinched right member, I saw that his thumb reached clear across my own very large palm and had almost an inch to spare. How could I have escaped noticing that huge thumb before? Then I saw the nail. It bore a sharp ridge, like the gable roof of a house, down its center, and it occupied the entire end joint of that monstrous thumb. This certainly had not been the case when I had held Glaze's right hand a few days previously while administering chloroform to him. When I finally extricated my right hand Glaze kept opening and shutting that huge pincer with a motion that reminded me of the jaws of a hungry alligator.

What was this superhuman influence that caused a man's firmest tissues to alter their shape completely within a few hours? And what was it that that ghastly, gripping claw resembled?

I left the room with cold chills running up my spine.

THE next morning Lancey arranged to explain to Dr. Lang, two or three other doctors who had become interested, and myself, regarding his findings about the mysterious patient, for which purpose they gathered in Dr. Lang's back office at 10:30 o'clock.

You may be assured that it was a highly interested little group that gathered in that room considerably before 10:30, Dr. Lang himself being almost rabidly impatient.

"Well, shoot, Lancey," he said, before the door had closed behind the last man. And Lancey shot.

"There's just one man in the room, I think, who saw and understood what

was growing on the end of our patient's arm a week ago today. At that time it was four perfectly good little fingers and a model thumb!"

This statement was greeted with voiceless gasps.

"It's something different now—in fact I hardly know what to call it in its present form, but we'll go up and look at it presently. Anyhow it is now perfectly plain that what Whitby tried to do, and partially succeeded in doing, was to modify the regenerative processes in his patient so that a new forearm would grow in place of the lost one.

"The theory is nothing very new. As early as 1906 it was observed that when a limb is amputated at the middle of a bone, the bone starts to grow out again, but increases only about one-fiftieth of an inch in length before it is halted by some other influence. You know also, of course, about the little warts of so-called "proud flesh" that apparently try to replace the original muscular tissue in case of injuries, but which are misshapen or misplaced. What Whitby was trying to get at, as I see it, was to so control these misdirected efforts of nature as to produce a new and perfect limb.

"The human body is already able to repair damaged bones by rebuilding small particles of the bony tissue; it is also able to replace muscle, nerve and even finger-nail tissue, although in somewhat imperfect forms. Whitby was trying to induce it to build a lost member in perfect form.

"Seeking this result, his studies naturally took him to observing the water animals that have this power of regeneration. A crab, for instance, when it gets a limb broken, promptly bites off the rest of the limb, and a new one grows in its place. The same is true of the lobster family, down to the tiny crawdad, no larger than a ericket. Specimens of these little creatures are frequently found with

one limb far smaller than the others as a result of such occurrences.

"It seems that Whitby has been experimenting for years with the ductless and other glands of shellfish in pursuance of this theory of regeneration, and we have upstairs the living proof that he was able to prepare a glandular extract that changes the bodily cell-structure as well as influencing the building-up processes of nature; but it appears that he never succeeded in isolating the one influence from the other, both being present in his preparation.

"I have found that Whitby bought the little crawdads, which are really dwarf lobsters, from children around his neighborhood, and that his purchases ran into tens of thousands of these little creatures, and I also find that he bought live lobsters in a quantity that his dining table would never have warranted.

"In short, this patient, Simon Glaze, has had his body so saturated with the glandular extracts from lobsters that he has actually developed regenerative powers, and the bits of proud flesh on his arm-stump which you saw only a week ago became quite well-developed fingers. At that time, of course, they were getting natural human material for their reconstruction. All that has changed now, and as a result of the other influence of his medication he is now coming more and more every day to resemble a gigantic shellfish, in both body and mind—if a shellfish can be credited with a mind.

"You remember what he told about a wound in the top of his mouth? That was the easiest access to the region of his pituitary gland, a seat of powerful influence over any structural change in the man's body. Other injections were administered along his spinal column, and I firmly believe that Whitby was successful in providing the man with something that he has used since Whitby's death

in promoting the change, not understanding the real results."

I objected a moment, to state that Glaze had positively had possession of nothing he had brought from the Whitby home.

At that Dr. Lang leaped to his feet, suppressing an oath.

"I've got it!" he ejaculated, his steel-blue eyes snapping. "This infernal lunatic Whitby was afraid somebody would take his patient away from him before he got through his nice little experiments. So he just lodged bodies of oil-soluble extracts along his spinal column where they would continue to be picked up in the lymph. In this way he has gone on poisoning and wrecking this poor wretch of a laborer after he himself is dead and in—wherever such people belong! We'll go up now and have an X-ray made and see if anything can be done."

The unfinished lecture broke up and Lancey, Lang and I went up to Glaze's room immediately. As we waited for the elevator Lancey finished explaining to Dr. Lang:

"That nice little set of fingers has now turned to an almost perfect lobster claw, only two fingers of the original five having developed, both with scissorslike claws. His good right hand is today nearer a lobster claw than anything else. His speech is gone. His temperature is 93 degrees instead of a normal 98. His backward leaps when startled are the behavior of a crawfish. And the occipital bones of his head are shrinking day by day. Above all, note his fondness for water, especially on his stump. A crab could not grow a new limb except in a wet place."

We hurried into Glaze's room and on into the bathroom beyond, where he spent so much time. In the tubful of cold water we found Glaze's nude body, doubled and curled up, face far down under the water—dead.

"Poor devil," said Lancey, as we extracted the body and laid it upon the bed. "His lobster brain taught him that the only safe place for him was under water, but he lacked the lobster's breathing apparatus. Well, it's better this way, after all."