

ONE

No one paid attention to the bent old man wearing navy blue slacks and a dark brown cardigan walking slowly up the ramp to the main entrance of Balgownie Nursing Home. He was unmemorable. Anyone who accidentally glanced in his direction simply saw a bored octogenarian shuffling along aimlessly with little or nothing on his mind.

A closer look might have suggested he was deep in thought, perhaps regretting an opportunity missed with a loved one. Or perhaps he was trapped in the recurring resentment of decades of bad choices. More likely he was bewildered by the new surroundings confronting his dementia in each waking moment. However he appeared to the outside world, he did not look like a man about to commit murder.

The nursing home was in a back street of affluent Mosman Bay n Perth. It was built in the 1980s by doctors who foresaw the wave of aged baby-boomers. It had been refurbished many times and was now known by its more politically correct name of the Balgownie Aged Care Facility. As such it housed wealthy geriatrics unable to look after themselves but rich enough to pay others to do it for them.

The man had been inside many aged care facilities but this was the most upmarket one so far. The cuffs of his cardigan were frayed, and the threadbare material of his trousers was splattered here and there with dark patches smeared with paler crusty blue. It was not an especially cold morning, but he had pulled his navy blue beanie down over his grey hair to cover his ears so it would make it that much harder for anyone to describe his face.

There were plenty of people around—a few visitors coming and going, two nurses exchanging notes at shift change, a nun speaking softly on her mobile phone—but he knew that the old were easily ignored, and that one who moved slowly, apparently without purpose, was all but invisible to the nurses and carers rushed off their feet helping the genuinely needy. If anyone happened to look at him, they forgot him instantly. He was just another old man, wearing old clothes in an old folks' home, going nowhere.

That was how he wanted everyone to see him—an anonymous geriatric, unimportant and unmemorable.

He had looked this way many times before and he knew it worked. His face was well whiskered and appeared to be creased with age, but his eyes were clear and sharp. Today his eyes were green. They were not always green. Today they were green because of the colour of the contact lenses he had chosen. Even so, he instinctively squinted and bowed his head to conceal them. Eyes gave away too much.

To a casual observer he was just an old anonymous man in a nursing home. In fact, just a few days later, a visiting couple who remembered seeing him told the police with great certainty that he had a full beard, brown eyes, grey hair and used a walking stick.

He shuffled past the unattended reception window to which a sign had been blue-tacked suggesting visitors should try their luck ringing the bell placed alongside it. He ignored the window and turned right into the main corridor.

As he dragged his feet along the grey and green carpet tiles, he kept his eyes fixed directly ahead, never once intruding into the privacy of open doors. He used to look inside the open doors when he visited such places, but there were always people inside looking back at him. Withered people. Hopeless people. Waiting people.

It became too depressing to gaze into the staring eyes and hollow faces, so he stopped doing it. His mission was depressing enough. He did not need to add to it. He looked straight ahead and kept his to a slow shuffle.

He passed eleven rooms on the right, ten on the left, before reaching the corner he was looking for. When he turned the corner, a carer, a woman in her twenties from Gabon, or perhaps Senegal, with skin as black as night, rushed past him with soiled sheets held at arms length. Her face was turned to one side to avoid the worst of the stench, hardly noticing him. An invisible cloud of ammonia enveloped both of them, then she was gone. The stench lingered and threatened to make him gag.

The corridor was wide and empty so he crossed to the opposite side and speeded up a little to move out of the cloud. No one noticed his short burst of speed.

Eventually he reached Room 16. The name on the door was written in bold type on a piece of white cardboard, which had been slid into in a label holder screwed to the wood. It read 'Mr Mikhail Tokasonas'. The man paused and looked slowly around in mock confusion, as he imagined a demented man would when confronted with a confusing problem. It was a good tactic for surveying the surroundings without appearing overly inquisitive.

Suddenly a nurse appeared from a nearby storeroom and walked past him quickly holding an aerosol spray can over her head. The can hissed loudly, mixing alpine fragrance with the pungent reek of geriatric urine. He watched her for the twenty seconds it took her to reach the far end of the corridor, then she disappeared around the corner, and all was quiet again.

The man stepped into Room 16 and closed the door, pushing the stopper wedge under it to jam it shut. A male patient lay on his back in the bed. Stainless-steel stands on either side of the bed held clear plastic bags of liquid high above him. Clear tubes allowed the liquids to flow directly into the veins and arteries of his arm. Other tubes carrying liquids of various shades of yellow and orange emerged from other parts of his body, hidden under the bed covers. They all converged into a white plastic box below the bed.

The patient's mouth was open but his eyes were closed. There was no sign of eyeball movement. The only sign of life was the slow rise and fall of his chest, but even that was barely discernable.

The man in the brown cardigan walked closer. The patient's breathing made a slow wheezy rasp that sent shivers up the man's back. He lifted the patient's wrist to check the identification tag. It, too, had the name 'Mikhail Tokasonas' printed on it. The arm felt bony and frail, and the elbow grated as it moved, indicating the joint was almost seized. Mikhail Tokasonas did not open his eyes or turn his head.

Mikhail was a fisherman and businessman, or once had been, before he passed the business over to his son Michael and his daughter Litsa, soon after he found out he was going to lose his mind and die. The Tokasonases were a Greek family, well respected in the Perth business community. As well as being financially successful, they supported community initiatives and contributed thousands of dollars to local charities every year. They also donated much of their time as unpaid

directors on the boards of non-profit organisations and were pillars of the Fremantle Orthodox Church.

Orphaned as a one-year-old during the 1914–18 War, Mikhail was raised by his grandmother in Greece until it was clear another big war was imminent. He stowed away on a ship to Australia to start a new life. He was twenty when he arrived in Fremantle, with no money and almost no skills.

All he knew was how to catch fish, a skill taught him by an uncle back in Greece. With no fear of hard work, a strong determination to succeed and a willingness to take risks, Mikhail worked as a deck hand on a leaky snapper boat that fished all along the west coast. He spent his first five years in Australia at sea, making landfall only to bank his wages and take lessons in English. Eventually he saved enough money to buy a fishing licence of his own, and take a one-third share in a crayfish boat. The family seafood business was now the third largest in Australia.

Mikhail had been an impressive man—intelligent, honest, decent, likeable and inherently happy within himself. Once a man of great physical strength and even stronger will, now he was no longer a man at all. Alzheimer’s disease had seen to that.

He no longer knew who he was, or even what he was. He recognised no one, not his family, nor his friends, nor even himself the last time he was able to look into a mirror. He could not walk or speak or read a book or pick his nose or scratch an itch or choose when his body should pass waste. Indeed, he did not know when his body soiled itself because he did not know he had a body. There was really no *he* anymore.

The body that once housed Mikhail had been refusing to eat and drink for weeks. The throat muscles that coordinated swallowing no longer received signals from the deteriorating brain, so supposedly well-meaning people—doctors, nurses and lawyers—arranged for food and water to nourish the body and to remove waste from his bowels, all via plastic tubes.

His family had pleaded with the doctors to let the body die. They knew their father would have been utterly humiliated to think his body might be kept in such an indecent, inhumane and immoral state. They took their case to court, pleading their father should be allowed to die with dignity.

But the hospital argued that it was duty bound to feed patients in any way possible. They also had experts examine Mikhail. They testified that technically

he was not on a life support system, since his heart, lungs and digestive system were operating autonomously.

The family said the doctors were keeping the body alive artificially by feeding it with nutrients against its will. The hospital lawyers countered that Mikhail had no will but, if he did, he would surely choose life over death. They never explained how they might know that, but the court agreed with them, so body and indignity remained bedfellows in Room 16 of the Balgownie Aged Care Facility.

In reality Mikhail was already dead. He had died weeks earlier, but his body still ran on automatic with the help of lower brain functions. His higher brain, the part which had created the person everyone knew as Mikhail Tokasonas, had gelled into a slowly drying paste over the past months and no discernible brain structures existed where grey matter should have been. Deeper down, inside his brain, his white matter was also drying up, but much more slowly, so the body twitched on, imitating life.

His family knew that their father was dead, without having to see x-rays of his brain, because they had known him for thirty-five years—longer than any of the doctors who now decided his fate. But the face still resembled their father and it caused them terrible anguish to see him kept this way.

The man in the brown cardigan stood by the bed, ready to end that anguish for them. This one would be easier than the others he had done. It would be less intrusive, less demanding.

Despite everything he had read and heard about killing another human being, it did not get any easier. Life was unique and precious in the universe. Ending it required great courage and exceptional commitment. It was not something he found easy to do. Only his deeply held belief that he was doing good work got him through it.

As always, when he was about to kill someone, he paused and thought about his mother and his sister. Then he said to Mikhail, ‘You will understand why, when you meet them.’

He placed his left hand under the body’s chin and closed its mouth gently and respectfully, squeezing the nostrils together with his thumb and forefinger. He did not really need his right hand for the job because the body was so weak and frail, but nevertheless he placed his other hand gently, palm downwards, over the eyes to hold them closed.

Within seconds the chest quivered as it strained to draw breath. The emaciated belly barely rippled the sheets, but the head never shook from side to side nor made any conscious attempt to deflect the man's hands. Neither did the body's hands move to protect itself. A living man trying to survive would do all those things, but a body whose only remaining job was to pump blood and to breathe simply executed those motions on autopilot.

For a while the diaphragm muscles continued to receive their signals from the brain, contracting and expanding obediently, but no new oxygen entered the lungs, no new oxygen entered the blood and no new oxygen reached the brain.

Then, after two long minutes, when all the old oxygen was used up, the signals stopped going to the heart, and the heart stopped. Mikhail's body finally died.

The man waited another minute to be certain, then took away his hands. He produced a stethoscope from his pocket and checked for a heart beat. When he was certain the heart was no longer pumping, he pocketed the stethoscope and walked to the door, kicking the wedge away and opening it a hair's breadth to look out. The passage was clear, so he swung the door wide and jammed it open with the wedge before leaving. An open door attracted less attention.

He began walking slowly in the same direction he had taken earlier, knowing that the corridor looped around a central block and would eventually lead him back to the entrance. When he reached there, he walked past the reception window, where a woman was on the phone staring at a computer screen and two couples waited at the counter for attention.

He walked out of the building looking the same as when he had come in, as a slow moving, unwashed geriatric. Despite the light drizzling rain, he shuffled across the wet bitumen car park without hurrying. It took him a few minutes to reach a white van parked in a bay, well away from the entrance.

He slid open the side door and sat on the van floor with his legs still on the bitumen, pretending to be exhausted. He lifted his head and took deep breaths, all the while looking around for possible witnesses. But no one cared about an old man sitting in a van doorway. When he was sure no one was watching, he swung his legs in and slid the door shut behind him.

He lay on the floor of the van for a few more minutes breathing deeply and quietly to calm his nerves.

It was his twelfth killing.

After five minutes of deep breathing, he felt fully calm again. He removed his beanie and sat up to slip a white lab coat over his clothes. In the pocket was an electric razor, which he used to shave the three-day-old stubble from his face. Then he peeled off the grey wig to give his bald head some relief from the adhesive that had held it there. He wiped his scalp with a damp cloth to remove the glue, then massaged it gently.

After another few minutes he pulled some adhesive out of the lab coat pocket and dabbed a few spots on his scalp with his fingers. Then he donned a different wig, his regular, short-cut light brown one, so when he climbed into the driver's seat and drove out the gate he looked a much younger man.

He said a quiet goodbye to Mikhail Tokasonas as he turned the corner into Solomon Street. He headed for his George Street office in East Fremantle.

It would be breakfast time the following morning before anyone else went inside Room 16.