**Scar Tissue**

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**Scar Tissue**

by [7PercentSolution](http://archiveofourown.org/users/7PercentSolution), [J_Baillier](http://archiveofourown.org/users/J_Baillier)

**Summary**

John has scarcely recovered from his Afghanistan tour when Sherlock is injured at work, putting their already strained relationship to the test.
The sound of the phone ringing jolts John awake. He sits up and fumbles in the dark for the offending item which he has a vague memory of leaving on the bedside cabinet. Finally, his fingers grip the phone he carries when on call, right after he accidentally shoves the alarm clock on the floor with a crash.

Cursing, he presses the green receiver button. "Watson, anaesthesia."

"Mornin', John-Dawg," drawls the thick accent of Maurice, a Trinidadian janitor from the A&E department who has under his short tenure quickly become a most beloved member of the King's College staff. He is the size of a walk-in-fridge, sports an impressive bushy beard, has an infectious smile, and appears to love nothing more than to discourage with his mere presence the usual Saturday night legions of brawny drunkards from causing trouble in the waiting room. Maurice puts others in a better mood with his disarming demeanour and makes the night shift staff feel safer when he is around. He always steps in to help, never caring about whether something is part of his official duties or not. He calls all the physicians by their first name, followed by doc, though he never quite got the hang of the proper pronunciation.

John doesn't mind such a nickname at all. John has decided that every department needs a Maurice to run smoothly. "Hello, Maurice. What can I do for you?"

"You wanna get down here," the man suggests. It's unusual for a janitor to summon the anaesthetist to attend to a patient at the emergency room, but it's hardly the strangest thing John would have witnessed Maurice doing.

"Is there a major trauma alert?" John asks. That could explain why it's Maurice calling – if A&E is already being snowed in with a large number of patients, all the other staff will have their hands full.

Maurice's hearty laughter crackles down the line. "That's one way of puttin' it, yea."

They ring off, and John drags himself out of bed. According to the numbers the alarm clock is now showing, he can't have been asleep for more than twenty minutes. Most of his night had been spent battling with the fluid balance of an elderly woman taken into theatre with mesenterial thrombosis and then talking to her afterwards. The surgery had been an open-and-close thing; there was nothing that could be done, since most of her small bowel was already irreparably necrotic. She is lucid, and had taken the news of approaching death astonishingly well, unlike her relatives. It's par for the course; John has been having a run of bad luck cases and punishingly difficult procedures while on call lately – just when he is at low ebb. It's not the fault of the hospital or its emergency patients, of course; they aren't to know that he is still having trouble getting any sleep at home, which is draining him of energy and making him increasingly short-tempered. Back three months from Afghanistan, the shoulder might not be the issue he'd once feared it would be, but the nightmares are still a major problem. Some of them are predictable rehearsals and re-runs, his subconscious trying to arrange memories into acceptable form by processing if he might have done something differently to avoid ending up with his companions in the car dead and picked off by a
sniper himself. Other dreams are more surreal; his least favourite is the one that sees him running down corridors of King's College Hospital, trying to lead a gunman away from Sherlock, only to turn a corner and find him there in the line of fire. Every time, he faces the gunman and tries to protect Sherlock and every time, the horror of it wakes him with a shout just as the weapon is about to go off. Tendrils of dread still seem to linger as he stifles a yawn while waiting for the elevator; has he managed to have that damned nightmare again even though he hadn't even been asleep for very long?

The resuscitation bay of the Accidents and Emergencies department is empty when John arrives there. It's a strong contrast to the frantic bustle he usually encounters when being summoned there to attend to a patient who's badly enough off that they need the services of an anaesthetist.

He rounds a corner and heads towards a section where non-critical trauma patients are kept, but the place looks as deserted as the acute bay. Just as he's about to enter the break room in his search for a nurse, another door nearby opens. It's one of the isolation rooms. That's odd – there's no yellow biohazard sign on the door to signal why that room is being used.

Maurice's head pops through the doorway. "This way."

John's brows hitch up as Maurice holds open the door for him. "Where is everyone? I thought there was something big going on?"

A voice pipes in behind Maurice's hulking form from the trolley parked at the back of the room, and it's one John would recognise even half-comatose: "Hello, John."

Maurice steps aside.

John has seen many strange things at A&E during his time as a doctor, but the sight of his significant other lying on a trolley with a neck brace and an impressive bump on the forehead is definitely a new one.

"Sherlock--- what the hell? Are you alright?" John has already made his way to the trolley. Sherlock can talk, which means he's breathing, and his pupils are the same size, and he seems to be able to move. "What happened?"

"Laura-Dawgtor told me to make sure he don't abseil out of here before she come back," Maurice explains. It signals his reverence for her that she gets the full "doctor" denomination instead of just doc.

John's lip quirks up, but only slightly, because the adrenaline of the alarmed surprise is only beginning to fade. "She probably said abscond, though I wouldn't put the other thing past him, either." His eyes shift back to Sherlock, who can't turn his head to face him properly because of the stiff neck brace.

Sherlock's fingers are curled around the trolley's raised side rail as though he's ready to hurl himself over it and make a run for freedom. "They're overreacting. This ogre---" he shoots an icy glance at Maurice, who crosses his arms but doesn't look the least bit of offended, "---manhandled me here even though I was simply momentarily stunned and not even unconscious."

John turns to the Trinidadian. "I think I'm going to need you to tell this tall tale if there's to be any truth in it."

"I was doing the hallway, the one near Pepsi machine, when I hear the crash. He be screwing off the light tubes again in the neuro call room," Maurice explains, cocking his head knowingly at
Sherlock.

John's brows knit together. "He was what?"

They both turn to face the trolley.

Sherlock raises his arms in dramatic, defensive disapproval. "Those beastly halogens chitter, and the colour temperature is horrible – it should be much closer to six thousand Kelvins, preferably six thousand two hundred which would emulate Xenon short-arc---"

"Shut up," John says and focuses on Maurice again. "So, he was removing a light bulb for God-knows-what-reason. How does that lead to this?" he sweeps his palm in an arc across the sight of Sherlock on the trolley, now with his arms crossed and glowering at the both of them. He is wearing identical scrubs to John's, since he'd been in theatre earlier with a subdural hematoma evacuation done under local anaesthetic and sedation. John had been confident that the anaesthesia registrar who'd been handling the case didn't need him as on-site backup at the OR floor, so he had gone to the anaesthesia call room to try to catch up on sleep.

Maurice continues his report: "He gone and put a chair on a desk and climbed it and he fell from that. Cracked de head on desk. Laura-Dawgtor say no concussion, but he on the floor when I went in."

"I'm not concussed," Sherlock snarls. "There's nothing wrong with me! These idiots are simply trying to bulk up their patient numbers since it's quieter than a graveyard around here this week!"

"Dawgtor think he need a CT," Maurice says. He often minces simpler words, but the man has already got the medical lingo down pat even though he has only worked at King's College for six months. He had once told John he'd been a physical therapist in his native country and moved to London to be with his daughter when her husband had died very suddenly.

"You've had a CT?" John asks Sherlock. Judging by the neck brace, the imaging has likely included at least both his head and the cervical spine.

"Yes, and they won't let me take this thing off until Arthur's seen the results." He rips one of the velcro straps of the neck brace off to emphasise his point, leaving it jutting out towards the wall.

John reaches across his neck to strap it back into place.

Laura Arthur is one of King's orthopaedics consultants and the A&E department's head of trauma services. Her short stature is compensated by her no-nonsense approach, sharp communications skills and, as some of her fellow orthos tend to joke, her huge set of balls. She has ginger hair which she keeps cropped short into a military hairstyle, and not even Sherlock would attempt to walk over her. John, who finds it easy and pleasant to work with her, has noticed that Sherlock, too, seems to openly respect and value her skills and knowledge, often choosing to consult her instead of the other orthopaedists specializing in trauma. She's tough on her trainees but never unfair or mean. She communicates her needs clearly, and never cuts corners when it comes to providing the best possible care to her patients.

One of whom now is Sherlock.

"Any symptoms? And---" John raises up a warning finger, "Honesty, please. I'm too damned tired for your usual I'm-never-ill-crap."

"Can I go?" Maurice interjects, "I still have two hallways to mop, and there be that big inspection tomorrow."
Shit. John had managed to momentarily forget that NHS representatives are arriving to do their annual audit of The King's College Trust first thing in the morning. He had cursed this call shift because he wouldn't be able to go home right after because of that very inspection. There's a crisp suit waiting at his office for what will likely be a very long and very boring day escorting bureaucrats around the hospital and trying to convince them they are still a unit very much worth the Trust's three-star foundation status.

Sherlock had better be alright. John knows he can't juggle his antics and a bunch of paper pushers with sticks up their arses at the same time.

"Yeah, sure," John tells Maurice. "I can handle him."

Maurice gives Sherlock a wink, earning himself a well-honed eye roll in reply. The janitor then disappears into the hallway.

John cards a hand through his hair. He's so bloody knackered. He needs a shower and a shave in addition to more sleep before the NHS suits arrive, so Doctor Arthur had better return promptly with the imaging results.

"Couldn't you have, say, borrowed a ladder if you really had to be redecorating the call room at four fucking a.m.?” he asks Sherlock, exhaustion creeping into his tone. Being on call during a shift such as this one can thoroughly drain his patience and his empathy. Self-inflicted injuries included.

He lowers the side rail of the trolley and leans his right buttock down on it since it's all that will fit on the narrow thing besides Sherlock's midsection.

"The ladders are in the broom closet, and I couldn't get to it without walking past that idiot. He keeps putting those blasted torture devices back every time I take them out. I filled out a requisition form for proper lighting ages ago, but the head of A&E is much slower with paperwork than you."

As Clinical Director of Operative Services, John sometimes fast-tracks Sherlock's paperwork just to make life easier for himself. Sherlock has elevated nagging into weaponised communication and isn't afraid to use it at home as well as at work. Not for the first time, John wonders to what degree he is enabling his partner's manipulative behaviour. He decides against asking why Sherlock couldn't simply switch off the ceiling lights if they bother him that much. The dripping faucet tantrum of 2015 had taught him the lesson that most often it's best to not question Sherlock's needs. There are three letters that explain much of Sherlock's quirks, but they haven't actually talked about his ASD all that much; Sherlock is clearly willing to do so only out of situational necessity, and John hasn't felt it necessary to pressure him into talking. In all honesty, it's all still a bit of a mystery but he has gleaned this much: life isn't easy for someone with sensory processing issues and severe difficulties in managing social interaction.

He gently runs his fingers over the bump on Sherlock's forehead. "Any nausea, headache, that sort of thing?"

Sherlock gives him a glare. "Told you, and told Arthur: I'm not concussed. I didn't even lose consciousness. She's elevating health and safety at work to some sort of religious conversion. The NHS must have instituted some new, ridiculous guidelines about ruling things out to avoid litigation."

"She doesn't exactly order CTs for everyone who bumps their head."

"There may have been some tingling," Sherlock admits, "but that's gone now. All nicely resolved."
"Tingling? Where?"

"Fingers. Arms. Doesn't matter. Everything works perfectly now," Sherlock announces and raises his arms, wiggling his fingers as though playing the piano.

The door opens, and John is relieved to see Doctor Arthur walking in. She's carrying a large-ish laptop, holding it from the edge of the screen and the bottom since the screen is open. The isolation room, unlike the other patient areas at A&E, does not have a wall monitor for reviewing imaging results. John isn't surprised they'd placed Sherlock here because it is also sound-proofed – he can make quite a racket when forced to endure something he considers stupid, such as necessary medical assessments and interventions. Doctors are often given a bit of space at A&E out of courtesy, anyway, if they end up there as patients.

"Hi, John," she acknowledges, stifling a yawn.

"Morning," John greets her. "Please let's get this over with so that we can all get some bloody shuteye."

"Well, unfortunately that'll have to wait. I think you’ll want to be present for what happens after we agree on a diagnosis," the trauma orthopaedist says curtly and a little ominously.

Sherlock sits up before John can stop him. He swings his legs off the trolley and lets them hang from the edge as he leans closer to see the laptop the orthopaedist has now raised higher so that they could all see the CT images on the screen. She stabs her finger on the middle of the image. "There. How's your cervical trauma knowledge?" he teases the two men.

John and Sherlock compete for the best line of sight.

After a few seconds, John turns to his partner. "You broke your dens!"

Sherlock leans away from him, eyes blazing with outrage. "Not deliberately!"

"No, someone forced you at gunpoint to stack up half the furniture in the bloody call room and play don't touch the floor at fuckoff a.m.!

"Alright, girls, calm down!" Doctor Arthur commands and both men snap their mouths shut.

Sherlock's attention is now back on the screen. Doctor Arthur brings the laptop closer and he starts fiddling with the contrast adjustments.

"Your head's fine, by the way, the CT showed nothing but a subcutaneous hematoma," she tells Sherlock.

"I could have told you that without frying my head with radiation."

"Your neck clearly did quite a whiplash backwards when you bonked your head on the desk. Not an uncommon mechanism for a peg break," the orthopaedist comments next.

John doesn't need an explanation for the colloquialism; he knows that it refers to the dens being a protrusion of the second cervical vertebra which reaches up to interact with the first cervical vertebra. Together they form what is called the atlantoaxial joint – the pivot joint on which the head turns. A broken dens can mean a severe threat of complete paralysis from the neck down if the broken bit of bone starts to press on the spinal column, which is why even mild symptoms are cause for concern. "Is it common to fracture the dens just by falling?"
She frowns. "Most atlantoaxial fractures come from either car accidents or from falls; as I said, it's not uncommon." She then gives Sherlock a stern look. "Are you sure that the tingling has stopped?"

Sherlock looks like someone's trying to teach him the alphabet. "I told you already: yes, it has. I assume the dens is intact enough that transoral odontoidectomy isn't needed. What will it be, then: anterior osteosynthesis or posterior C1 to C2 fusion? I'd rather avoid a scar on the front, but would naturally prefer to preserve range of movement. There should be an OR team available right away – they were finishing up the last thing on the list when I left the theatre floor and John would know if a major emergency had tied up the resources," he suggests.

To John, the eagerness with which Sherlock is placing himself under Doctor Arthur's scalpel speaks volumes about his respect for her.

She regards Sherlock with a calm, patient look. "Oh, there isn't going to be surgery."

Sherlock's face lights up. "Oh. Oh! Well, excellent, then. I thought the fracture looked unstable, but if you say so--- I'll want a more comfortable model than this, of course," he tugs at the chin rest of his neck brace. "Six weeks? Twelve weeks?"

"I'd say most likely twelve weeks, but a neck brace won't cut it." Her eyes are fixed on Sherlock and John gets the distinct sense that she's waiting for a shoe to drop.

That shoe does drop quickly, and it's a heavy one. Sherlock inhales sharply, looking absolutely scandalised. "NO!"

Doctor Arthur's expression softens, but just a bit. Not so much that it would look like she'd ever cave in to Sherlock's demands or protestations. John is grateful for her sternness as he scrambles to deduce what the hell has Sherlock this riled up.

"You're young, and you don't have any risks for non-union. It's a non-displaced fracture, a very clear Anderson-D'Alonzo Type II, and in patients like you the standard for treatment is a halo vest for six to twelve weeks."

John's jaw drops. There it is, then. *Fuck*. Halo vest. *Bloody hell.*

Sherlock in a neck brace would be a formidable nuisance; Sherlock with his head screwed into a cage of steel rods attached to a rigid vest will be an insanity-inducing exercise for all involved.

Sherlock drops down from the trolley, and determinedly makes his way to the door. "I'm going to UCLH for a second opinion," he announces loudly and before John has managed to stop him, he marches out the door.

John realises that Sherlock hadn't even bothered to grab his OR shoes from the basket below the trolley – he seems to be too riled up to have realised he's walking around in just his socks.

Doctor Arthur slips through the door in pursuit before it has even swung closed, John hot on her heels. They catch up with Sherlock in the lobby where he's smashing the lift button with his thumb.

"Sherlock," the orthopaedist calls out, placing a hand on his arm which he promptly swats off. "I trained at UCLH. I did my PhD on non-union factors for thoracic and cervical fractures in non-osteoporotic patients. You won't get a different answer from any trauma specialist worth their salt in this town."

Sherlock's shoulders drop just a little bit from the tense, stiff posture he'd held, but his expression
tells John the battle is far from over. He turns to face Doctor Arthur, stepping closer to tower over her much smaller form. "I’d prefer the surgical solution, and since you are supposed to respect a patient's opinion---”

“It’s not going to happen, not when an evidence-based preference for a non-surgical alternative exists. You would be the first to tell any patient that their opinion won't change the medical facts.”

Disgruntled, Sherlock snaps: "Well, list the risk factors, then, since you're using them as an excuse."

"There's no delay in seeking treatment, no comminution, displacement only one millimetre, you're well below fifty years of age, you have no osteoporosis, and you don't smoke."

"Ha!" Sherlock announces. "What if I was to tell you I consume no less than two packets a day?"

John clears his throat. "No, he doesn't."

"You're supposed to be on my side!" Sherlock snaps at him. "I used to smoke. A lot," he announces to Doctor Arthur more proudly than anyone in their right mind should.

Then again, John hardly thinks he ever fits that description.

"How long ago did you quit?"

"Three years."

"Then it doesn't count."

The orthopaedist and the neurosurgeon are now in a staring match, both with their arms crossed. The lift announces its arrival with a ping, and soon a nurse squeezes her way in past their troupe, glancing suspiciously at the spectacle before the lift doors close.

Eventually, Sherlock averts his gaze and a slight triumph flits across Doctor Arthur's features before she regains her usual, carefully constructed, neutral but not disinterested expression.

"John?" Sherlock asks, biting his lip. He sounds half-hopeful, half-resigned.

John realises it's a desperate plea for backup, but all he can do is spread his arms in defeat. "I don't know what you want me to say. If this is the recommended thing, then you don't have a whole lot of options. At least it'll feel safer, having the vest instead of a brace. If my head was being kept in place only with muscles and skin and a bit of luck, I wouldn't want to gamble with just a bit of plastic." It's a brutal way of putting it, and John has worked hard to make Sherlock understand the value of diplomacy and gentleness when telling patients bad news, but the man himself appreciates honesty and people not sugar-coating things when talking to him.

They both know what could happen if that broken bit of bone shifted and pierced his spine. The consequences would be infinitely more devastating than even John's gunshot wound.

If the fracture ends up not healing properly with the halo vest, there will be surgery, of course, but that would likely extend recovery time since Sherlock would have already spent some time in the vest before starting the healing process all over again post-operatively. And, surgery naturally has its risks, especially when done right next to the spine. In Sherlock's line of work, even a minor aftereffect could decimate his ability to do surgery on a level that's required for brain tumours and aneurysms.
John picks up Sherlock's hand, the thumb of which is now nervously plucking his other fingertips, and encloses it in his own. "Come on. Let's get this over with so we can get home."

There's no way he'll be able to attend to the auditors, now. He can't send Sherlock home alone and risk him removing the halo vest with a screwdriver the minute he gets annoyed with it for the first time.

Without a word, sporting an expression similar to someone being escorted to the gallows, Sherlock follows him and Doctor Arthur back to A&E. Once back in the isolation room, he digs out his phone from his pocket, making no move to sit or lie back down.

"Who are you calling?" John asks.

"My tailor," Sherlock says nonchalantly. "I'll need alterations to my work clothes."

"You're not calling that poor man at this hour, because you're sure as hell not going to work in that thing!" John tells him. He snatches away the phone and ends the call.

"Why?" Sherlock asks, genuinely perplexed.

Doctor Arthur cuts in: "Reason number one: you will frighten the other patients. Reason number two: it'll be impossible for you to scrub in because no sterile surgical gown will have a wide enough neckline for you to be able to tie the sash. Reason number three: you won't be able to operate, since you can't even look down without bending yourself from the waist---"

"I'm very spry. John will attest to that," Sherlock announces with not a whiff of innuendo, but the statement still sounds lewd.

"Number four," Doctor Arthur says, closing the lid of the laptop still on the trolley with a snap. "Is that nobody would ever let you work with a broken neck. Occupational health and safety won't allow it. So, you need to start preparing for a long, restful recovery."

---

"Go tell her right now I've changed my mind; I'm not consenting!"

"Just calm down and think about it for a second----" John tries.

"No!"

"Goddamnit, Sherlock, you use that word more than a two-year old! I can't, and you know perfectly well why!"

Sherlock glowers at him from the day surgery unit bed into which he has now been safely tucked. They're in the post-anaesthesia recovery area of the OR unit, waiting for the OR trauma team to get a theatre ready for the halo vest instalment.

The consent form, unsigned, is on a clipboard held by John. They've spent the last half hour arguing and, not to put too fine a point on it, John is getting thoroughly fed up with it. He leans forward and says through clenched teeth. "There is no alternative. She's said that; you won't find anyone else worth their salt willing to take a surgical route before this has been tried."

“You don’t know what you’re asking. The idea…” Sherlock stutters to a stop, his eyes left to
communicate what his tongue can’t manage for the moment.

“Yes, I do now. If you are irritated by a light bulb enough to risk breaking your neck, then just wait until you are pinned like some butterfly in a specimen box.”

He hadn't meant to be so harsh; it had just slipped out. He's certain that Sherlock will now clam up and sulk, unless he softens the blow somehow, but before John can get a word in----

"Exactly!" Sherlock claims, downright triumphantly – as though John has finally understood.

"You are the one who has just spent the last three months telling me to stop second guessing how things are going to turn out on this shoulder of mine," John reminds him. "You lectured me about not catastrophising everything and about the stupidity of always looking for the worst-case scenario? Well, pot, this is the kettle telling you the same..” He knows Sherlock had been trying his best to be supportive, but to John his lectures had always sounded a bit snooty and rehearsed. "Until you’ve actually tried the halo vest, you won’t know if you can stand it or not."

Sherlock takes the clipboard to sign. “If you’ll do the anaesthetics…”

John waits until he gets his hands on the signed form before replying. “Sherlock, I’m knackered. Besides, it's not a good idea; you know what the rules are about doctors working on their friends and family.” He fails to conceal a yawn.

"Oh, get off your high horse! All that's required are things that are such basic anaesthesia skills that I assume you could do it fast asleep. Nobody's going to be telling the GMC and nobody's likely to make any complaints. If they do, I will pay them off. Is that good enough for you?"

John pinches the bridge of his nose. "Like you said, it's a minor thing, one Aisling can easily handle; she's the one who sedated your subdural case three hours ago. Four shots of lidocaine into the scalp, Laura puts the screws in and you're done. I doubt you'll even need a lot of sedation for that."

"Would you want to be perfectly aware of everything when someone screwed stuff into your skull?" Sherlock asks, his tone louder than necessary and carrying a high-pitched, slightly hysterical tint.

To John he sounds genuinely horrified. Sherlock is right in that all the staff know the two of them and are jovial enough not to give a toss whether John interferes in Sherlock's treatment or not. Were this a bigger operation, John would very sternly decline for his own peace of mind most of all, but this certainly is minor, in terms of the anaesthesia required.

*Fair enough*, John thinks. He hates the idea of having to stress a trainee with the burden of having to care for Sherlock, who all the trainees are at least a little bit afraid of. John is still wearing his scrubs, and he hasn't actually called Aisling yet – he had thought it was better to let the poor young woman catch a bit of shuteye before being dropped the bomb of having to anaesthetise a colleague. They could have tried to call in one of the other senior anaesthesia consultants, but it's still very early in the morning and John is quite certain he's not the only one who would consider simply doing this himself since it's not exactly a very demanding task.

A decision is made. He hates himself sometimes for letting Sherlock blackmail and seduce him all the time into doing whatever he wants, but this is different.

Sherlock is fretting, now – staring at the ceiling since it's cumbersome trying to lie on his side with the neck brace. His mouth a thin line, his breathing is shallow and fast and an alarmed sadness in
his eyes makes John feel guilty. "Alright, love," he says quietly. "You'll have me, then, if that's what you want."

He half expects Sherlock to twist his turn of phrase into a naughty joke – that's what he often does to draw John's attention away from the fact that he's nervous or worried or upset – but Sherlock averts his gaze even further from him instead.

Maybe the reality of what's going on is sinking in. "I don't like this," Sherlock says quietly, and he sounds younger than his years.

"It'll be crap," John admits. "Absolute crap, but we'll get through it."

As he holds the clipboard up above Sherlock's chest so that he can scribble his signature on the empty line, John wonders where he'll find energy for the practical side of such optimism. True, they have gotten through some rough patches, the worst of which had been when he had been injured in Afghanistan. Sherlock had been his rock, his saviour and his unwavering support – he'd even followed John to Afghanistan, arriving at Camp Bastion within twenty-four hours of the attack where John had lost many of his colleagues and nearly his own life. He'd been drugged half out of his mind with morphine, but he does remember thinking that he must have died and gone to heaven when he clapped eyes on the angelic sight of Sherlock walking into the hospital room.

That joy had, however, faded fast. Reality had hit along with electric jolts of pain when he had begun to understand the extent of the damage to his shoulder during the next few days. He had come terrifyingly close to losing his ability to be an anaesthetist. Sherlock's faith in him had felt irritating and naive during those days, but it had never faltered. It makes John feel ashamed now, thinking of the way he'd dived into the bottom of a whisky bottle after coming home, wallowing in self-pity as he compared his stagnant career path to Sherlock's stellar rise to surgical stardom. It had taken a bit of arse-kicking from Greg Lestrade and some hard truths delivered by Sherlock about what really mattered about being a doctor before he'd been able to go back to work. And, that hadn't been a walk in the park, either. The smallest things keep reminding him of what had happened when all he wants is to move on and try to scrape together some resemblance of motivation for his job.

Greg had tried to get him to get in touch with the therapist whose contact information he'd been given at discharge. He doesn't doubt the efficacy of talk therapy to some people, but he's never been one to weep and blather on about his emotions to others, and what happened to him can't be erased by wallowing in it. The only emotions he needs to discuss are those he has for Sherlock, and he likes to think he has done that well enough.

What a ridiculous year. First, he gets shot; now Sherlock snaps his neck building a tower of furniture in the middle of the night.

Chapter End Notes

J. Baillier wants to dedicate this story to lockedinjohnlock, a great treasure of this fandom, who has had more than her fair share of crappy medical things happening to her.
A great research debt is owed to 88thParallel, our Sherlockian curl maintenance consultant.

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Want some help trying to imagine what a halo ring and vest rig looks like? Hull and East Yorkshire NHS Trust has provided some pictures and quick words on the subject. Great Ormond Street Hospital has shared online the story of 1-yeard old Toby who got into a car crash and needed a halo. There are also plenty of online blogs by halo survivors, many of which we have used as research. And yes, J occasionally meets halo wearers and patients who are in acute need of one in her line of work.

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Since authentic medical lingo is part of the yum in this series, we have not explained all the terms in detail; if there's anything you want explained, don't hesitate to ask in the comments section. We love questions!
We are beyond blown away by the reception the first chapter received. Thank you. Thank you, you lovely people. This is an awesome fandom to write for.

J can't resist mentioning that this chapter is one of her personal favourites.

"Don't skimp on the propofol; I’d rather not be able to notice anyone's potential incompetence," Sherlock announces loudly the minute they park his bed next to the operating table. He'd been glancing around nervously during the short transport as though something was about to pounce on him. It's overcompensation, all of it – the more riled up Sherlock gets, the more theatrics he employs because there's no way in hell he'd allow himself to show even a little bit of weakness in his own workplace.

John hadn't really known what to say or do, save for trailing behind the bed trying to give Sherlock his most reassuring smile. That had only been met with an exasperated look – the visual equivalent of 'really, John?'

John had already called Clare, the anaesthesia nurse assigned to the case since she needs to know what drugs to make available. Opiates and benzodiazepines wouldn't be the best option to use on an ex-addict, but John had still requested a very short-acting fentanyl derivative to get them through the local anaesthetic part. After that, he can use a bit of propofol to make sure Sherlock stays docile and doesn't register a thing about the halo ring being screwed into place. Propofol doesn't do practically anything to dampen pain, which is the reason the opiate is needed. He had briefly considered ketamine, but that often causes hallucinations even with a propofol or benzodiazepine chaser, and he is not putting up with Sherlock falling out of bed chasing invisible butterflies or whatnot.

The bland colour of his hospital pyjamas that vaguely resembles peach is making Sherlock look even paler than usual, but his cheeks gain a brief, rosy tint out of infuriated embarrassment when he is lifted out of bed to the operating table. John feels it in his bones that another bout of acting out is imminent.

Sherlock raises himself by shoving his elbows under his sides in order to address Doctor Arthur who's talking to the scrub nurse at the opposite end of the OR. "If you screw one so deep it goes into my brain, I will sue."

John splays his palm on his chest to get him to lie back down. "Nobody's suing anybody."

Sherlock begrudgingly holds up his forefinger when John presents the pulse oximeter to him. Next up is a BP cuff. Clare steps in next to place electrodes for three-lead ECG monitoring. Working out good locations for them is challenging, since the vest will cover most of the areas where they are usually placed.
"Checklist?" Doyle, the supervising nurse asks after Clare steps back and the vitals monitor begins drawing a steady, normal ECG graph. John nods.

They ask Sherlock to recite his personal information. John then comments that the surgical site will be marked soon, and replies to the next question with Sherlock's oxygen saturation reading. The nurse working with John confirms she has done the anaesthesia workstation's automatic self-testing and drawn all necessary medications. They ask Sherlock to confirm he has no allergies, and even after years of having to put up with the proven-to-increase-safety WHO checklist, he still adds a put-upon sigh. John has never understood why some surgeons get so annoyed with it. It doesn't take up all that much time, and it is particularly good at preventing the sorts of cockups that can put a surgical unit on the covers of tabloids.

After Doyle reads out loud the last two questions from the laminated sheet, John confirms that there are no risk factors for aspiration or a difficult airway, and that blood loss will most likely remain under half a litre. Doctor Arthur had not insisted on any bloods to be drawn since Sherlock is healthy and the procedure is minor.

Sherlock watches John intently as he starts an IV on the back of his hand. Clare turns on the oxygen flow on in a venturi mask; Sherlock opens his mouth to protest, but John silences him with a stern look. This is his job, his area, his responsibility and he is already bent the rules plenty enough to be even standing there preparing to treat his significant other, despite GMC regulations.

"Won't supplemental oxygen delay the detection of an airway problem?" Sherlock asks.

"Technically, yes, but wouldn't you want to have some oxygen reserves while we fix it? It's not just the saturation reading we keep an eye on, you know. Any gas man worth their salt should spot an airway issue by looking at the patient before the pulse ox reading falls," John explains with more patience than he had thought he had left. It helps to know that all this fidgeting and arguing is nothing but Sherlock trying to distract himself and everybody else from the fact that he's nervous and very much out of his comfort zone. John has seen him feverish, treated his minor sports injuries such as sprains at home, patched him up a few times as long as it didn't require stitches. He's a terrible patient, but not because he deliberately wants to be difficult. As far as John has been able to deduce, it's because rescinding control over what happens is difficult for him and he doesn't cope well with physical discomfort or pain. In order to divert attention from his difficulties, Sherlock then tries to micromanage everything in order to regain control over things he can't influence. In hindsight, it isn't surprising that he'd demanded John to handle anaesthesia; he's a known factor Sherlock probably thinks he can bend to his will. Or, at least try to do so – John has put him in his place in theatre before and he will do it again, if and when need be.

"Ready?" John asks, wondering if either of them is really ready for what will happen when Sherlock wakes up. Getting this theatre part over with is only the beginning, and John wouldn't be surprised to see Sherlock's patience completely run out before the sun has set even once on this ordeal.

"Make sure they don't shave any more hair than they absolutely have to," Sherlock instructs John.

"You got it," the scrub nurse replies from where she's carefully dropping instruments from sterile packages onto a small, mobile table covered with a sterile drape.

Sherlock pinches his eyes shut. Worry is beginning to etch lines on his features and he looks almost resigned to his fate. A part of John wants to give him a reassuring peck on the cheek but that would be highly inappropriate.

"Do you want me to count down from a hundred?" Sherlock asks John, cracking one eyelid slightly
"When have you ever seen me make a patient do that?"

"I rarely hang around when you're doing an induction, since I prefer to skip such boring bits."

_Not so boring, when it's you on the table, is it? _"You do remember I'm not actually putting you properly under, that it's just a sedation?"_ John asks. He has no way to know what the optimal dose of the drugs he's planning to use are for someone like Sherlock. The line between deep sedation and general anaesthesia is often indeterminate; the goal during sedation is to preserve the patient's own breathing and the ability to protect themselves by being able to cough and reflexively close the flap covering the entrance to their trachea if stomach contents happened to slither up the oesophagus. Any patient given the slightest bit too much of a sedative will start slipping into the realm of GA and require assistance with their airways. Give too little, and they might move around and jeopardise the sterility of the surgical field and the surgeon's ability to do their job.

"I wouldn't mind GA. As you well know since you're a slave to that imbecilic list, I haven't eaten in twelve hours."

"Because you're an idiot," John whispers with a grin.

The sound of an electric razor alerts John to what the scrub nurse is doing, and a glance at Sherlock's head gives him the unpleasant sight of curls dropping on the floor. Thankfully, she seems to be sticking to her promise of only shaving off the bare minimum. Sherlock's mop is so thick that no one will probably notice those locks missing. The halo itself is what they'll all be staring at, anyway, John realises.

Laura had recommended hair to be shaved to a very short length all over but John had cut the conversation short. Sherlock would _never_ consent to losing his curls, even if it meant a higher risk of infection and bigger challenges in personal hygiene. The shop-sized collection of hair products in the bathroom and the gift of champagne he sends every Christmas to his hairdresser are a testament to the importance of that part of his look.

John had once made the mistake of questioning whether all the time spend grooming those luscious locks was actually necessary – couldn't Sherlock just give that mop a good brushing-through and be done with it?

Sherlock had regarded him with a look that said he had momentarily lost all hope in John's intelligence. The next morning – a Saturday, thankfully – he had appeared at breakfast having done exactly as John had suggested. His head had looked like something had exploded – instead of the gorgeous, carefully coiffed lush curls that are his staple, his hair was now a ball of blackish brown, tangled knots not unlike a badly done, fluffy afro. John had refrained from commenting beyond 'point taken'.

The orthopaedist joins the scrub nurse by the instrument table, now wearing a mask.

John dons his and so does the anaesthesia nurse. He glances at Sherlock. "Everything alright?"

Sherlock lifts a hand, waves an indecipherable shape into the air above his stomach. "I'm fine," he says almost cheerily, "Get on with it."

John empties half of a two-millilitre syringe of alfentanil into Sherlock's IV port.

"Is that a normal dose for an adult patient under the circumstances?" Sherlock asks.
"Yeah."

"It's not going to do much," Sherlock informs him with a lowered voice, his eyes flickering suspiciously to the anaesthesia nurse as though he wants to avoid her picking up the conversation.

"Why?"

"Not discussing that now," Sherlock hisses.

John empties the rest of the alfentanil into his IV. After a minute, Sherlock's eyes drift open, pupils pinprick-small. He sighs and John doesn't like the dreamy quality of it. Alfentanil works well for short, painful procedures, but it hits the brain like a jackhammer of delight, and right now it's telling Sherlock's opiate receptors of all the fun they could be having. Sherlock had obviously trying to alert him to some level of tolerance to the drug. John knows that he has used something illicit when he was younger, but they haven't discussed details. Somehow, John has always assumed it would have been stimulants; after all, that's what some university students use to enable all-night reading binges.

The only things that would create potential cross-tolerance to fentanyl derivatives are other opioids. What has he used? Codeine or oxycodone tablets? Fentanyl lozenges? Those would seem logical in the sense that they are medically used. John knows he may have shot up – after all, he has scars on the crooks of his arms which look typical. John would like to think his IV phase was short, experimental, but the evidence is there. If Sherlock has misused opiates in his past, John knows that giving him something similar that hits the spot fast and hard may create a heightened risk of succumbing to temptation later – yet another reason for not leaving Sherlock o his own devices for a while. John knows he'll need to arrange more time off work – maybe for the rest of the week, at least? He needs to talk to Greg and HR, but that will happen later. Right now, he needs to focus on what's actually going on.

They shift Sherlock upwards on the bed so that his occipital lobe is barely on the table anymore. The supervising nurse holds his head in place by hand, preventing it from tipping backwards. The brace is still in place; it will only be removed right before Doctor Arthur fastens the connecting vertical metal bars into the vest and the ring-shaped halo itself around his head. Measurements of Sherlock's head circumference and his chest girth have been taken to ensure the right halo and vest size.

The orthopaedist dons a pair of non-sterile disposable gloves and a syringe of lidocaine.

John also picks up a syringe – one filled with thick, milky propofol – and injects sixty milligrams of it into the IV. He could have given a bit less, but Laura's fast and Sherlock might still be groggy and not sedated enough by the time she gets to work if John is too careful with dosing. Combined with alfentanil, there's a significant risk of respiratory depression, but he'll have good enough access to Sherlock's face for bag-mask ventilation if need be. He'll just have to do it from a different position than what he's used to – the standard way of doing it is by standing behind the patient's head. The brace will make it challenging to achieve perfect face mask fit, but with someone as skinny as Sherlock who doesn't have any abnormal anatomy that would predict trouble, John knows they'll manage.

Sherlock's pupils start twitching upwards in a typical propofol-induced manner, which seems to alarm him a little, since he raises his arm and tries to lift his head. John grabs his arm and gently wrestles it back onto the hand support just as his gaze loses focus and his eyes roll properly back in his head.

John steps back, letting go of the now listless hand he's still holding, and glances at the vitals
monitor. The pulse that had been on the higher side of a hundred is now a steady, relaxed 73 per minute, oxygen saturation ninety-seven. The last blood pressure reading had been a little on the high side due to stress, and the next one isn't due just yet.

Just as the orthopaedist is about to inject the first dose of lidocaine, a contented snore begins sounding from Sherlock. It sounds similar to what John hears at home, but just to be sure that everything's fine, John holds the back of his hand over Sherlock's mouth and feels the reassuring sensation of a warm, strong exhalation flowing across his palm. *Open airway.* This is confirmed by watching the effortless rise and fall of his chest without any accessory muscles trying to compensate for a narrowed route through which to breathe in.

"God, I wish it was this easy getting him to sleep at home," John jokes and the rest of the team laughs. "Or to shut up."

"You have no idea how many times I've thought that about my three-year old," Laura says and steps back after finishing the series of lidocaine injections.

"It won't be easy, John," Laura says soberly as she picks up the halo ring from a side table She holds the ring close to Sherlock's head, positions it carefully, and waits for the anaesthesia nurse to clip it into a supporting bar. "I know the patient approval rate percentage for halo treatment has varied in studies and can be as bad as in the low thirties. I don't know him that well, but I have a hunch it won't be easy for him to adjust. It'll affect his sense of balance, he'll need help with lots of everyday things, and you need to consider if there are any safety concerns at home that you need to address with your landlord or whoever."

She uses a hand disinfectant gel, then folds open a packet of sterile gloves. Once they're on, she carefully pushes the sterile ceramic pins through their assigned holes in the ring, grabs a tool resembling a power drill, and installs the first pin. It doesn't look all that disturbing on its own on the left side of Sherlock's forehead, but there will be three more: one on the right side and two behind his ears.

"We don't really appreciate how much we need head movement and neck muscles to function normally," Laura says and removes her gloves. The supervising nurse continues supporting Sherlock's head while the pyjama top is cut off, the neck brace removed and the vest slid into place and its straps fastened. All this requires calling in more staff since they have to lift Sherlock slightly off the table to get the back plate onto position.

Laura quickly attaches the vertical bars to both the halo and the vest. Now they can slide Sherlock back down on the operating table and prepare to take him back to recovery, assuming he continues breathing adequately.

"He'll need a lot of stuff to do at home to pass the time," Laura points out while filling out a slip of paper stating the procedure code and the diagnosis number.

"Don't I know it," John sighs. Three months without surgery to occupy Sherlock; he wonders what the hell is going to be able to stop that brain from going mad from boredom.

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John manages to time his sedative doses so well that Sherlock is already muttering seemingly random things and trying to turn to his side by the time they cart his bed out of the OR. Now that the halo vest is in place, John doesn't feel like cracking any more jokes. His pineal gland is
screaming for sleep, and if he wasn't so thoroughly exhausted, he'd probably be unnerved by the sight of Sherlock right now.

There's no way around it – people will most definitely stare. The sight of two ceramic pins thicker than a pencil sticking through someone's forehead and two from behind the ears might even make a layperson nauseous. John remembers a young couple who'd been in a car accident; the husband had thrown up on John's shoes after catching the first glimpse of his wife in a halo rig. At least there's no blood anywhere; the scrub nurse had taken care to swab Sherlock's pin entrance sites with gauze as long as they kept trickling.

John realises that the vertical bars attached to the halo crown will even make it difficult to kiss properly. He draws the blanket up to Sherlock's shoulders as they round a corner. The shoulder straps of the vest are still visible, and there's no hiding the halo.

The vest is lined with soft sheep wool – Laura had told John that lots of materials have been experimented with, but sheep skin with the wool facing inwards will develop less of an odour during the later weeks; she had promised that it will also irritate skin less than many synthetic materials. Sherlock won't be able to shower or have a proper bath – he can sit in a bathtub up to his waist, but the rest will have to be sorted with wet wipes which can be shoved underneath the vest.

Sherlock's hand pops between the bed rails and nearly gets rammed into a doorframe as they're arriving at the post-anaesthesia recovery area. John shoves it back in, and Sherlock mutters something indignant about snails, flapping his hand in the air as though trying to rid it of said creatures. Unlike ketamine, propofol doesn't tend to make people hallucinate, only lowers their inhibitions when they're sedated or waking up, but who the hell knows about how Sherlock's very particular brain might react to it?

They get parked in a quiet corner separated with partitions and curtains.

"Right," John says.

Sherlock flinches, his eyes flying open.

"Sorry," John adds. "All done. You can have a rest while I go find some more coffee. Roger will keep an eye on you," he says, nodding towards the nurses' station where the middle-aged, spectacled man in question is stacking saline bags into a cupboard. Clare, the anaesthesia nurse would have stayed with Sherlock if John hadn't volunteered to do that part.

Sherlock's gaze rolls upwards and John expects him to fall back asleep, but then he realises Sherlock is surveying the contraption now semi-permanently attached to him. "For Chrissakes," he mutters, then taps with the nail of his forefinger the thickest bit of the bar keeping his head a fixed distance from his torso. He looks slightly cross-eyed as he follows the structures he can see at the edges of his visual field with his gaze. "Close the curtains," he hisses to John, flicking his gaze towards the nurses' station.

John does as he's told, slightly baffled as to why this is a priority. The recovery area is empty: the night's urgent and emergency cases have either moved to bed wards after observation or been transferred straight to the ITU from theatre. The only other people besides the two of them present are a cleaner mopping the prep area and Roger, who has taken a seat at the nurses' station.

"I'll take you home in a couple of hours," he tells Sherlock. Normally, someone who has just been anaesthetised and fitted with a halo vest would stay at the hospital at least for a day. Sherlock, however, has no other injuries and, as Laura had put it, he has a live-in doctor to keep an eye on him, so there is little benefit to putting him in a bed ward. Sherlock would invariably terrorise the
staff, upset the other patients and be a general nuisance so John is convinced it's better for them to
go home and start making battle plans there.

"Greg promised to pop by when he comes in, sort out today's audit," he says mostly to himself. He
had texted the senior neurosurgeon while waiting for Sherlock to come back to his wits.

"He's coming here?" Sherlock asks, horrified.

John finally catches on. "Look, I know it's a bit unsightly and people will probably stare if you go
to Tesco with it, but it's nothing to be embarrassed about. Everyone here has seen halos before."
Judging by the fact that Sherlock is still throwing an accusatory stare at him, this is going to do
nothing to defuse the situation.

John tries again. "He's your boss; of course, he wants to see you. There's probably health and safety
paperwork to fill out since this happened at work, but I can sort that out with him and bring the
papers home."

"Who took over my call?" Sherlock asks.

John realises he hadn't lifted a finger to fix the fact that their only senior neurosurgeon on duty has
been indisposed for hours. Thankfully, finding a replacement is the responsibility of the A&E
senior emergency physician. "I have no idea."

"I've got a--- I had a fantastic subtentorial dysembryoplastic neuroepithelial tumour resection
scheduled for next week," Sherlock complains. "It would have been a solid nine!" Sherlock has
devised a grading scale from one to ten for levels of professional interest when it comes to the
surgeries he's taking on. Anything over an eight is a rarity. "Some idiot's going to get that, now, if I
don't get a word in. It's just as well if Lestrade's coming by; I need to sort that out with him."

"Wouldn't that be within the skills range of most of the tumour specialists here?"

"In a pinch," Sherlock. "Just as long as it isn't---"

Both their eyes suddenly dart towards a clicking sound as the curtain on the left side of the bed is
abruptly pulled aside.

"---Anderson," Sherlock finishes, which he shouldn't have, because the man himself is now facing
the two of them, fingers still clutching the plastic curtain.

"I had to see for myself. How on earth did you manage that?" Sherlock's fellow consultant
neurosurgeon asks in an incredulous tone. "They called me at three a.m., woke Sally and the kids
up, saying that I needed to be prepared to come in if there was work, because the current senior on
call was indisposed. I didn't know that meant you were finally having the screws you've been
missing installed."

John's fingers clench into a fist. There is no love lost between the two surgeons, even though
Anderson had once helped John drag Sherlock out of a mess he'd become entangled in that
involved a very dangerous colleague dead set on finagling everyone who caught his eye into bed
and into shady business. Sometimes John suspects Anderson's venom may be overcompensation
for deigning to help Sherlock that one time. Sherlock certainly flings his fair share of insults
towards the man he considers both imbecilic and highly incompetent.

John glances at the wall clock - it's nearly seven a.m. He'll need to find Greg soon to give him
ample warning about the auditors. That means kicking Anderson out lest Sherlock explodes at him
and makes everything even more of a mess that it already is.
"Get OUT," Sherlock snarls from behind clenched teeth, grabs a pillow someone had placed on the bed against the side rail and flings it at Anderson, who catches it effortlessly.

"I honestly don't know how you put up with him," Anderson tells John. "Is he like this at home?"

John is tempted to answer 'worse', but he needs to be on Sherlock's side. "How nice of you to pop by," he says coldly, popping his P:s like Sherlock does when he's being only mildly snarky.

Anderson marches away, muttering something about extra work about to land on all of their shoulders because of Sherlock's idiocy.

"Don't listen to him," John tells Sherlock, who is rearranging a corner of the duvet and clearly trying his damnedest to calm down.

"At least he didn't snap a photo," Sherlock says bitterly. "Any other surprise visitors up your sleeve?"

"I didn't invite him and you know it," John tells him, relieved to spot the familiar sight of Greg Lestrade, chief of neurosurgery, striding into the recovery area wearing a new-looking grey suit. John doesn't bother pulling the curtain closed around the bed; he waves a hand instead.

"Jesus," the older neurosurgeon comments, and emphasises his point with a mournful whistle as he surveys the scene. "Long story short?"

"He climbed on furniture in the on-call room, fell off, broke neck," John lists.

"Only a little bit," Sherlock protests.

"Yeah, because they do halo vests on every bugger who gets so much as a hairline on a vertebra," Lestrade snorts.

John circles to block Sherlock's line of insult to the man. "Look, mate, sorry to spring this on you, but it's that bloody audit today. Thanks for the report, by the way – nobody's as thorough as you. They're coming in at nine, and I'm not leaving His Highness to his own devices right now. Not today, maybe not this week."

Greg glances over John's shoulder at Sherlock. "Don't worry about it. Martha turfed that stuff to me for years; I know what they're after. You've got the annual OR usage reports and the complication rate data in your office?"

John nods. "On my desk. And you can call or text if there's anything you need to ask."


"The Spanish Inquisition would be proud," Sherlock retorts.

"Keep him happy," Lestrade tells John in a low voice. "He deserves it," he adds and there's weight in his voice earned through having experienced a significant injury himself.

"Don't give the dysembryoplastic resection to Anderson," Sherlock demands surprisingly politely. He can find self-restraint when he really, really needs to. That may be due to John's constant advice about what sort behaviour is a bit not good.

Still, John has an inkling that this relatively co-operative version of his partner is just a
smokescreen, behind which a formidable storm continues to brew.

"That's next week, isn't it? I was thinking of doing it myself, if you've got no objections."

The frown lines on Sherlock's forehead recede. "No, that's--- fine."

"Look at it this way: you can now do all the stuff you never usually have time for. Watch some footie, do some crosswords. Martha swears by knitting, used to do it while on call, though she's probably on hiatus with that since she's due for a carpal tunnel operation. Might be difficult to do, though, what with not being able to nod your head down."

"That's hardly the reason I will be doing none of those things," Sherlock comments.

John knows the limits of Sherlock’s patience, and the list of activities Lestrade has just suggested is about as likely as snow in the Sahara. "They usually schedule a PT to talk to new halo patients before they go home but I told Laura you'd probably say no. There will still be a nurse coming by from the outpatient clinic to give us some instructions."

"It's hardly rocket science living with this thing, since there are no moving parts," Sherlock announces.

Lestrade retreats from the bed, raises a hand in farewell, to which John replies with a nod.

Sherlock doesn't even glance at the retreating man. Instead, he shifts his shoulders a little, as though trying to squirm about to find a better position inside the vest. It's made of sturdy white plastic reaching down from his shoulders to his lowest ribs. He tries to tug off a bit of the wool sticking out from the vest under his chin.

He then tries to sit up with little success, so John slithers a hand under his shoulders and helps him. "Laura already gave me one leaflet with all sorts of tips and tricks about this thing. I read some of it while they took you for in for the preoperative MRI. It says we should roll you to your side so you can grip the side of the bed with your hand and push yourself up shoulder-first."

"I don't need physical therapy or a bloody manual!" Sherlock's volume is nearing yelling and John realises his patience is about to run out completely. If this minor a difficulty is getting him riled up, the following weeks are truly going to test both their patience to the extreme.

"Your neck muscles are going to get weak," John explains patiently. "You'll need to see a PT eventually, at least after they take that off."

Sherlock doesn't reply. He looks miserable, now, the anger completely fizzled out, and John thinks: finally. He had been hoping that the restless energy Sherlock channels into being a brat would run out, allowing them to start adjusting to what will most likely be a strange and very taxing time.

The leaflet had made John realise there are many things he'll need to check the very minute they get home. For instance, anything that's lying on the floor or just below his line of sight will be a significant tripping hazard.

Especially now that they're both tired, he'll have to choose his words carefully when talking about the halo. He most certainly shouldn't mention some of the more abstract things the small guidebook had warned about: mild depression is common. It's important to maintain as normal a lifestyle as possible, even though the patient may feel very self-conscious. Try to focus on positive things. Many small irritations will feel like bigger ones. Try not to take it personally if people need time to acclimatise to the sight or make jokes.
Sherlock takes even the *weather* personally.

More and more questions and potential sources of difficulties keep appearing in John's head practically every minute now that the audit is no longer his most pressing worry. A pang of guilt hits when he realises it should never have been that in the first place. Thankfully, the orthopaedist has given John her personal mobile number and prompted him to call whenever he needed advice. John suspects he'll be picking up the phone sooner rather than later.

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**Chapter End Notes**

A note from J: the name propofol may well sound familiar – the death of Michael Jackson made this anaesthetic drug instantly famous. It can be used both for sedation and general anaesthesia — the effects are dose-dependent. Invariably, giving it to a patient carries a risk of respiratory depression even with lower doses; this is why proper monitoring needs to be used when administering it, and there should always be the necessary equipment and a professional with sufficient anaesthesia training available to address problems if they arise. It is not a dangerous drug in the hands of a properly trained person using it in controlled circumstances – I use it practically every day at work. However, giving it to someone in their bedroom, without monitoring and proper supervision is definitely a recipe for disaster. Two of my colleagues have demonstrated how fast and potent a drug it is. Here are [some diagrams on halo installation](https://example.com).

John is doing everything by the book here – using the WHO checklist and making a plan to intervene if Sherlock stops breathing. He's still being outstandingly naughty by handling the case himself, though...
At nine in the morning Roger – the nurse manning the post-anaesthesia recovery unit – brings in three servings of tea since Sherlock hasn't exhibited any more signs of nausea.

Sherlock takes it from the side table where Roger had placed it and stares at it for a moment. Then he tries to take a sip straight from the rim, but since he is unable to tip his head back, the only way he can do it without pouring the hot liquid on himself is by leaning backwards. Being unaccustomed to the weight of the halo, he is forced to grip the edge of the bed to control his centre of balance, prompting John to grab his shoulder to pull him back into sitting up.

John retrieves the straw that Roger had put on the table and unceremoniously sticks it in the mug. Sherlock says nothing, simply glares at the offending item.

Laura Arthur had called John's mobile a few minutes earlier and John had put her on speakerphone. She had said that the X-rays taken in the OR after the halo was in place and Sherlock was still sedated had looked fine, and that she is willing to release him into John's care. Sherlock had visibly bristled at her turn of phrase. The orthopaedist had also told them that the whole vest and crown combination weighs about 4 kilograms. 'It doesn't sound that much, until it's perched on the top of your head,' she had pointed out, 'especially for a tall person, regaining a sense of balance and heaving your head and upper body up from the bed or leaning back or forward will be a challenge'. Sherlock seems to now be facing the reality behind that statement.

"Is your stuff in your locker or in your office?" John asks. "We've been here two hours and if you were going to go to respiratory arrest from the drugs, you would have done that already. All we need to do is to call the ortho outpatient clinic to get you an appointment for Friday and to have a nurse pay us a visit with some instructions; then we can get out of here."

He watches Sherlock shift to the side of the bed so that his legs can reach the floor. His eyes are narrowed and he's surveying the recovery area suspiciously. The tense shape of his shoulders makes him look ready to pounce at anyone who even dares to so much as look at him. John has rarely seen him this anxious, and he can't help pitying his partner a little, even though that must be the last thing Sherlock wants.

John doesn't even want to think about what could have happened if the broken-off piece of vertebra had plunged into Sherlock's spinal column, or if he'd hit his head properly and Maurice hadn't found him as quickly as he did. He swallows, fighting the onslaught of alarm and shock he has put off until now. The exhaustion is making it difficult to keep a level head.

John wonders if this is similar to the worry and shock Sherlock had felt in Afghanistan. It must have been worse. After all, Sherlock had not come even close to dying, not really. John could have, if---- he firmly stomps down on that thought yet again. He can't let himself think about Afghanistan if he's going to be functional and useful and patient and entertaining and all the other things he needs to be right now.

Sherlock is pinching his fingers around the bolts fixing the halo ring to the screws, probably testing if he can twist them. Thankfully, Laura had done her job properly and fastened the screws tight. John makes a mental note to hide the small box of tools currently in their hallway closet at home.

It feels odd that he won't be heading to his office to start the day like any Monday. Greg had sorted
things out with HR regarding John taking a short leave of absence, and it appears that he'll get to spend an entire week with Sherlock – just the two of them at home with no plans. It could be good. It could be fun. They could catch up on all the movies and TV they never get to watch, order food in, lounge around in just their dressing gowns. They can have sex whenever they feel like it – well, whatever sort of lovemaking the metal contraption will allow. Maybe they'll finally get back to the frequency they used to have before Afghanistan somehow decimated John's interest in even that.

He offers his arm to Sherlock so that he can grab hold of it while getting into a standing position. "Come on. We need to get you home."

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"You’ll have to get some slip-ons."

John is tying his shoelaces and making a bit of a mess of it; Sherlock can feel fingers fumbling. He can’t look down to watch because he can't bend his neck and if he opens his eyes, most of what he is going to be able to see are those stupid vertical bars. He can move his eyes, of course, but the bars catch his eye and make it hard to focus on anything in the centre. His whole visual field is severely constricted, making him realise how much he has relied on turning his head to see things. He has always relied more on his peripheral vision than most people; it’s a way to avoid the direct eye contact that can make him self-conscious and anxious if the person in question notices him looking and starts expecting some manner of interaction.

*I can do this.* It’s like a little mantra, and he has to keep it going in his head. What slips out, however, as an answer to John's remark, is a rather petulant: "I hate shoes that don’t tie."

John doesn't know that it had taken him a long time to learn how to tie his own laces as a child, and he’d loathed being told he had to stay in slip-on shoes. They don’t fit snugly and the slippage that inevitably happens would be yet another sensory distraction.

“Well, I bet you like the idea of me kneeling at your feet, but this probably isn't the exact scenario you had in mind." John accompanies this attempt at defusing humour with a tired chuckle.

Sherlock knows that this is John's attempt to defuse his anxiety, but it isn’t working. He doesn’t feel like laughing, because most of what he hears in John's voice is tiredness and forced interaction. A wave of nausea washes over him – he should have said no to that tea. Or, is the hollow feeling guilt, after all? With John’s sleep being so disrupted by nightmares these days, he now has had the added burden of having to deal with Sherlock’s injury instead of resting in the anaesthesia on-call room.

Through his own stupidity, Sherlock has now made himself a liability, and this whole experience of getting dressed is humiliating. It's his own fault, really, for pleading John to at least give him the dignity of walking out of the hospital in his own clothes. He should have realised they wouldn't make any difference: he looks and feels horrible.

They're in the staff locker room; he had refused to let John fetch his clothes into the anaesthesia recovery area. He was not going to traipse around in his pants while the whole theatre unit looked on as John dressed him like a child. It had been humiliating enough to leave the surgical unit wearing hospital-issue slippers and a dressing gown that was way too big for him.
There exists also a practical reason for wanting his own clothes. They smell like him and they are familiar; the sensations of the fabrics are known factors, which diminish the amount of new data pouring into his brain down to a manageable level. But, that's a fool's hope today, because the rigid plastic vest is driving him mad. 'Soft sheep skin has been proven to be the best lining for this sort of vest, according to the thousands who were questioned,' is what the orthopaedic outpatient clinic nurse assisting with his discharge had said. Sherlock doesn't care what a thousand people have said because none of them are him; sensory processing issues afflict only a tiny percentage of the population. Wool has always been an irritant and right now his skin is sending distress signals everywhere; the synthetic fibres of the alien cardigan itch, the wool scratches and the plastic shell smells like chemicals.

He wants to moan from the frustration. *Twelve weeks.*

Thankfully, the locker rooms are empty at this hour and John is gentle and patient as he helps Sherlock to get his socks and trousers on. It's a small blessing that they'd let him keep his own pants on for theatre. His usual button-down dress shirt isn't practical, given the vertical bars, so John has borrowed a soft vee-neck cardigan from someone which can be left unbuttoned at the top. Sherlock's coat should conceal the worst of its hideous purple colour from curious onlookers. He has to stifle a slightly hysterical laugh: as if anyone looking at him would see anything other than the metal cage surrounding his head that is making him look like Frankenstein's monster, complete with screws and bolts.

When John steps back to admire his handiwork, Sherlock feels terribly self-aware. A dull ache is settling in between his temples, and he's tempted to place a hand against a wall to help balance himself. John starts for the door, but he doesn't follow. The route to the staff entrance, something he navigates several times every workday, suddenly feels alien and fraught with difficulty.

John's steps halt and he turns. "What is it?"

Sherlock holds out a hand – for what purpose, he isn't sure. All he knows that he feels trapped, overwhelmed and strange. He wants to bury his nose in John's hair, collapse against him, to blot everything out by flooding his senses with the one person who has always been able to override his body’s nervous fixations. John returns to him, and Sherlock shakes his head and lets his hand fall.

In reply to his silent despair, John reaches his arms around his shoulders and gives them a brief squeeze. Because of the rigid plastic vest acting as a barrier between them, it's a poor imitation of a hug.

Sherlock pulls back and ignores the pat John gives his shoulder.

"You’ll be alright once we get you home," John tells him. "You can wait by the door and I’ll go fetch the car from the garage."

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As promised, John brings the BMW around to the staff entrance at the back of the building. Sherlock stands there, appearing to be fighting the embarrassment of having to hold his coat shut by hand since the width of the halo rig prevents buttoning it up properly. He glances around before stepping out of the shadow of the portico.

John hurries out of the driver's seat to open the front passenger seat door, but Sherlock makes a
beeline for the back seat instead. He hesitates before the door John hurries to open, slowly leaning forward and trying not to tip over as the weight of the halo threatens to put him off balance. John hovers his hand close by, ready to intervene if Sherlock threatens to bump into something.

"The guidebook says you should use the grab bar or the ring on the inside of the door," John suggests, "It'll help you with your balance and keep you from bumping into things since you'll have a spatial sense of where your hands are."

Sherlock gives him a slightly startled glance, but does as he's told. Once in the backseat of the SUV, he fits in adequately and the head rest turns out to be narrow enough that the back of his head comes into contact with it between the metal bars.

"Dim the windows," he requests once John is in the driver's seat. Only the backseat windows have this feature of a tinted pane that can be lowered and raised; it could explain why he'd wanted to ride there.

John sighs, remembering once again what the guidebook had said about the attention a halo vest can gather. Jokes about space travel were explicitly mentioned, and the thought makes John's blood boil. According to his brother, Sherlock had been a lanky boy with strange proportions until puberty turned him into the Greek statue of his adulthood, and other children had had a colourful collection of unpleasant nicknames for him along the lines of freak and alien. A tidal surge of protectiveness snaps John's spine straight and his shoulders broad – he is going to throttle anyone who dares to even look at Sherlock crooked.

Before pressing the engine start button, he digs the guidebook out of his briefcase and tosses it onto Sherlock's lap. If he has already accepted the merits of one suggestion from it, maybe he'd now be amenable to having a look at the rest of what's in there.

They're not even out of the hospital grounds before Sherlock finds reason to complain: "Who do they write these things for, children?"

"Laypeople."

"Ah." Sherlock's tone betrays that in his opinion there is probably little difference between the two groups. He sounds tired, a reminder to John that they've both had a regular workday and been on call before the accident, and neither of them has had the sleep that they would need to be able to face this situation with their normal level of patience. John feels on edge, as though he's gearing up for a fight – getting ready to put Sherlock in his place if he gets too difficult. He realises that he might be expecting Sherlock to be uncharacteristically rational about this – to do the research about life with halo would work the easiest, to grin and bear it, to stiffen up the lip, to not be his usual difficult self when it comes to self-care.

Truth be told, John knows he hasn't been very good at being needed lately. Not right before Afghanistan, and especially not after it. Everything has gotten so muddled and complicated, and John can't help thinking that with everything that's been on his mind lately, having an overgrown man-child at home griping incessantly about necessary medical treatment is going to do bloody wonders to his already low mood. "Anything you'd like for breakfast?" John asks. "I could swing by that one branch of Patisserie Valerie that's usually got some available parking spaces and pick something up?" He's not going to suggest they go in to eat, because the answer would probably be a resounding no.

"Whatever is easiest."

Sometimes it feels as though Sherlock would never eat a single morsel if John wasn't reminding
him to do so. When he's preoccupied with something – which is most of the time – food doesn't seem to register on his radar at all. John has no idea how Sherlock doesn't get as hungry as he does after call. Sleep deprivation gives John sugar cravings, and this won't be the last time he's stopping to stock up on fresh Patisserie Valerie almond croissants en route home.

"You alright back there?" he asks, glancing at Sherlock in the rear-view mirror after joining the flow of mid-morning traffic.

"I can't relax my neck in this thing, and I can feel the pins when you turn or drive over anything uneven." John hears him exhale and cough a bit. "Slightly nauseous. I'll let you know if it gets worse."

They drive on in silence for a while. John turns up the air conditioning, and a glance towards the back when he stops at a traffic light shows that Sherlock is now a bit less pale; his breathing seems to have normalised and he has closed his eyes. The nausea must have abated at least a bit, then.

Maybe this won't be so bad, John tries to convince himself. Laura was probably just trying to prepare us for the worst-case scenario. They're both off work, nobody's dying, and John is less than an hour away from breakfast and burying himself under a duvet. In some strange way, he has practically grown fond of the sense of liberation after a call shift that ends in the morning of a weekday. When the rest of society is trying to adapt back to work after a weekend he gets to go home and lounge around in just his pants and a dressing gown. If he's had at least some sleep, he often runs errands during these days off, and while picking up dry cleaning isn't exactly fun, it does give him a sense of order and helps with the constant guilt of not being able to sort these things out as often as he should.

If he's really lucky, a day off post-call could mean an entire day spent with Sherlock if he is enjoying that very same perk. They might go to an afternoon showing of a movie, try a new restaurant for lunch or just bury themselves under the duvet and have slow, lazy sex followed by a joint bath and then falling asleep arms around each other while the rest of London keeps themselves busy.

Or, that's what they used to do, before Afghanistan.

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John helps Sherlock out of his coat in the kitchen and sets up breakfast. When it comes to the halo, a smoothie supplied with a straw is entirely unproblematic; croissants can be managed as long as they're ripped into small bits – crumbs go flying everywhere, but it doesn't matter. Sherlock tells him that swallowing feels a bit tight with his neck kept so straight. John realises that chunky soups, salads and everything else that requires cutlery and dexterity will be harder than he would ever have guessed.

John doesn't make coffee, since they should try catching up with some sleep. He suspects that Sherlock is quite exhausted after the drive – he had asked that John pull over once, a few blocks before home, because the nausea had picked up momentum again.

"One would assume that the neck muscles would be relaxed with the frame supporting the head," Sherlock had complained once again, then explained that his neck had begun to cramp and that his scalp had felt stretched. To John, he does look more uncomfortable now than he'd been at A&E.
with the neck brace. He hadn't been in much pain then, but now he's grimacing as he reaches out to pinch the upper part of the trapezius muscle in his neck between his thumb and his forefinger.

John can't help but wonder if he's overreacting a little. This is *Sherlock*, after all, who can be quite the drama queen.

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The four steps between the hallway and their bedroom turn out to be a death trap for someone in a halo. Sherlock's only option to see where he's putting his feet is bending at the waist but that shifts his balance and poses an even bigger risk of falling flat on his face. All in all, his usually admirable balance seems completely off. John doesn't want to grab hold of the halo vest or the parallel bars when assisting, since that puts pressure on the pins, but it's hard not to, since holding on to Sherlock's waist does nothing to help him with his now over-weighted upper body.

Once Sherlock is safely sitting on their bed, John wipes a bit of nervous sweat off his brow. He goes back to the kitchen to fetch their phones, pausing at the start of the stairs to fire off a quick text to the owner of the flat, asking if he might be available to stop by soon. Even though it is not, strictly speaking, his role, they tend to refer to Allen Baxter as their landlord since the retired urologist always insists on sorting out all issues himself instead of outsourcing things to a maintenance company. John will need to talk to him about adding several safety features to the flat. The short set of steps between the hallway and the bedroom is in desperate need of a handrail.

Back in the bedroom, John is too tired to start considering the logistics of helping Sherlock wash up with the halo in place. "I'm going to have a quick shower. You alright without?"

Sherlock would have probably nodded if he could. "Thankfully, I showered after the subdural hematoma." He idly flips the corner of the duvet open, looking like he isn't quite sure what to do with himself. He watches John strip down to his pants, but the playful glint he often gets in his eye when awarded with such a spectacle never materialises. When he makes no move to undress himself or get under the covers, John realises that after the difficulty of sitting up in his hospital bed he may be feeling apprehensive about getting into his own.

"I won't be a minute," John promises.

Sherlock hums in reply, then reaches up a hand to briefly touch his curls near one of the pins. Doctor Arthur had told them that the halo shouldn't hurt, but if it feels so tight that if it's constantly distracting Sherlock they should contact her. John wonders what the definition of constantly distracting is for someone who can be driven halfway to madness in minutes by the noise from a light bulb that no one else would even notice.

Laura had called John when he'd been walking to the hospital garage, asking if he would like her to make a home visit for the requisite 48-hour pin check; she could pop by on her way home from a capoeira class. John had been grateful for the suggestion. They're not friends and he doesn't even know the woman all that well, but it's not the first time he's seen Laura Arthur make an extra effort to help out a colleague who has ended up as her patient. Over the phone, she had repeated some instructions about checking and cleaning the pin sites. Sherlock's thick, unruly curls will make all that challenging, and there's no way he'll be able to do it himself. John doesn't mind taking over such practicalities; it's what Sherlock expects of him *beyond* that which fills him with unease and guilt.

John knows that being this tired always turns him a bit moody and makes small problems seem bigger. They need to get to bed, catch up on sleep, and then start sorting out how they'll manage
the next twelve weeks.

When John returns to the bedroom, a towel wrapped around his waist, he finds Sherlock awkwardly trying to stack up pillows at the head of the bed. Since he can’t lean down to position them properly without over-balancing, he looks frustrated.

"I'm trying to work out a good angle. The thoracic zone is the least mobile part of the spine, so there needs to be back support all the way to the halo ring. Our pillows are too soft," he scoffs.

"Maybe if you turned that one sideways, you could stuff it between your head and the mattress," John suggests, pointing at a smaller pillow.

Sherlock frowns, then lifts and presses the side of the pillow against the back of his head. "Could work. I'll need something underneath my neck – perhaps a rolled-up towel. Not that I'll be able to actually sleep, but still."

Normally, Sherlock nearly always sleeps on his stomach with at least one appendage flung over some part of his bedfellow. Sometimes he may fall asleep as the little spoon, but eventually he will scoot away and start emulating a belly-flopped starfish. With a carefully stacked set of pillows, John thinks he might eventually be able to lie on his side, but he’ll have to start on his back. Sherlock also needs the dark in order to sleep well. John had grown accustomed to sleeping in broad daylight during his first tour in Afghanistan, but the first thing Sherlock had insisted after they'd moved in together was that their shared flat would need a quality set of blackout curtains. John pulls them closed, and clicks on the light on his bedside cabinet. An epiphany then hits, and he goes to drag the identical cabinet on Sherlock's side well away from the bed. "You'll have to roll out of bed side-first and you might hit the halo ring on that when you do," he explains.

John offers an arm to assist Sherlock in standing up, then helps him shed his trousers and socks and pull the borrowed jumper over his head. Sherlock then sits back down, shifts so that his back is mostly turned to the mountain of pillows and lets himself fall, back-first, onto it. After a bit of wiggling and grimacing, he pulls the duvet on top of himself and crosses his fingers on top of it.

John slips into his own side, grabs Sherlock's hand and presses his lips to the knuckles and then the back of his hand to his cheek. He wants to say something reassuring but all the options that come to mind sound trite and easily dismissible by someone who hates chitchat and being talked down to. Would Sherlock still appreciate the sentiment behind it?

Sherlock's thumb ghosts along John's upper lip, then gently pries itself loose and slips under the duvet.

John turns to his side, facing away. Finally, he gets to let his lids drift closed. "Let me know if you need anything," he mutters.

He doesn't find out if Sherlock ever replies or not, because sleep steals him away almost instantly.
"John?"

Someone is shaking his shoulder. "Mmm."

"John?"

He forces his lids open, seeing nothing but swirling reddish darkness for a moment until his eyes begin adjusting to the low light. "Yeah?"

"I can't sleep."

John glances at the digital screen of his alarm clock. It's been three hours since they'd come home. How long has Sherlock waited until alerting him to this unfortunate fact? "Well, now there's two of us."

John rummages around the upper drawer of his bedside cabinet for a blister packet, then reaches for the bottle of water he'd left on the floor next to his side of the bed, and shoves both items to Sherlock's side of the bed. "Melatonin. You can take two."

Sherlock's voice is bright and alert. "That stuff is more useless than a placebo."

"Well, then it definitely won't hurt."

John closes his eyes, having already slipped back underneath the warmth.

"I can't sit up," Sherlock says. "I need to be vertical to be able to swallow properly."

John grunts, sits up himself and pulls Sherlock up by grabbing his wrists. The bed shakes when he drops down onto his back after downing the tablets. John realises that if Sherlock gets up during the night and makes the mattress shift violently every time he returns, no one is guaranteed continuous sleep until the twelve weeks are up.

He grits his teeth. There's nothing that can be done about that, so they'll just have to grin and bear it.

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"John?"

There's a shove to his pelvis.

"John?" More insistent.

He turns around, yawning, not entirely sure yet if he's still at the hospital's on-call room or at home. He reluctantly pushes his arm out from underneath the blissfully warm duvet and pats around for Sherlock, his palm soon coming into contact with what is probably an arm. He refuses to open his eyes. "What is it?"

"I have a headache."

"There's paracetamol in the toilet cab--- oh, sod it." It will, of course, have to be John who bares the quiet chill of the hallway in just his underwear.

Once held in place by the halo vest, the fracture itself is not supposed to cause much pain, but there will be discomfort from the stiff position of the upper body, and Laura did say it will
eventually start causing neck muscle issues for the majority of patients. The pins may also add to the strain and provoke tension headaches, according to her, but she had assured John that non-steroidal anti-inflammatories and paracetamol should be enough to combat them.

It worries John that Sherlock is already complaining of a headache – it hasn't even been twelve hours since all this started.

He makes his way to the toilet, finds the paracetamol and resists the temptation to throw in a zopiclone tablet, a bottle of which he keeps hidden from Sherlock. No benzodiazepine would be a good idea to give to someone with a history of addiction and especially not with a broken neck causing balance issues. John wonders if he'll resort to taking some pharmacological help with sleeping himself before the ten weeks are over. He had been given the bottle upon his discharge from Camp Bastion.

Sherlock accepts his offerings without a word. Once they're both tucked in again, Sherlock drags John's arm on his stomach, and John falls asleep to the sensation of feather-light fingers idly dancing along his thumb.

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"John," says an insistent whisper that sounds like air being blown into a seashell when created so close to his ear.

He wasn't asleep, anyway. If he gets woken up too many times in one night, regardless of whether the reason is the on-call phone going off or nightmares jolting him awake, he'll be too stressed out to fall asleep. John nearly groans when he's forced to wonder if the next twelve weeks will be like being constantly on duty. "What is it, now?"

"Loo."

"Right." John sits up, manages to shove Sherlock into a sitting position and then collapses back onto the bed.

The familiar dip in the mattress disappears when Sherlock manoeuvres himself to his feet. John expects the sound of fading footsteps to head towards the bath room door, but nothing happens. He cracks open an eyelid. Sherlock is hovering by the bed.

"You can manage, can't you?" John asks. He tries to remember if the guidebook had mentioned anything useful about personal hygiene besides advice on showers and baths. Nope. Nothing.

"I won't be able to see what I'm doing," Sherlock points out.

"Well, I'm sure your cock's still where you left it, and I've seen you find it effortlessly even with your eyes closed. Now let me SLEEP."

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"John?"

"For fuck's sake, Sherlock, what is it now?"
Silence.

John draws in a deep breath. Exhales. Breathes some more. Tries to summon strength and patience he feels that he's thoroughly run out of.

"I'm not angry, just so bloody tired; you know what it's like after a night on call," he finally manages. "What is it?"

Silence.

Shit. He's done it now, hasn't he? He knows this silence from experience, senses it like a human barometer having spent enough time in close proximity to Sherlock to recognise when he's been startled into acquiescence and embarrassment. Very few people are capable of doing this to Sherlock, and John hates the fact right now that he is one of them.

He wishes he could circle his arm around Sherlock's shoulders, to press his forehead against his chest, to cocoon him under the arc of his body, but he is being kept at bay by the same thing that is probably making Sherlock seek his attention right now.

God, he's a prick sometimes, isn't he?

Before John manages to throw together some sort of an apology, Sherlock speaks up, sounding uncertain and bitter: "Twelve weeks is a long time."

John wakes up at around five in the afternoon. When he turns to his side, Sherlock is watching him from the corner of his eye, looking disapproving. As to why, John is not even going to start guessing at. Most likely because he had slept and Sherlock probably hadn't.

He needs to get some groceries. It has also occurred to him that most of Sherlock's clothes are so form-fitting that he'll need something new for the duration of the halo vest treatment. He probably won't be impressed by whatever John buys, but he wants to believe Sherlock will appreciate the effort. It had been obvious that Sherlock had hated that purple cardigan, so John digs out one of his old jumpers from the wardrobe. It's stretched enough that it will probably fit over the halo. They complete the strange ensemble with a pair of Sherlock's pyjama pants. To his surprise, Sherlock is quite keen on getting up even though he hasn't really rested. Or, perhaps that's exactly why. Sleep deprivation often seems to make him even more restless and quicksilver than he usually is.

The sight of Sherlock wearing the ratty old jumper – the sleeves puffing around his slim wrists and the hem hanging well below his arse – is more endearing than John would ever dare say out loud unless he really wanted to annoy his partner. He parks Sherlock in the kitchen to glare at a mug of tea with a straw sticking out of it, and heads out.

When John gets home, he finds Sherlock looking at himself in the mirror of the toilet in the hallway. It's obvious he has tried to shave, and he must have done the best he can with the cards
he's been dealt with. Without being able to bend his neck and stretch the skin over his chin, the result is a far cry from his usual level of perfection. He turns stiffly, twisting from the waist when he spots in the mirror that John is lingering in the doorway.


Sherlock looks scandalised. "The thread count must be terrible."

"Well, they're not going to be your bespoke stuff, but I did head straight for the more expensive shelf," he smirks. "We don't have to care about fit, since these need to be XXL."

Sleep has definitely improved John's mood, and so has the promise of dinner. He had realised that he doesn't want to go back to work next Monday. The thought of the two of them, at home, having quiet time without plans is becoming more and more enticing by the minute.

Sherlock stands on the balls of his feet for a moment. "It's mechanically intriguing how the hamstrings seem to take the worst strain when having to reach for something without being able to hunch over," he muses and then turns back to face the mirror.

"It'll take a while for your muscles to get used to that thing." John bridges the distance between them, slithers his arms around Sherlock's waist and presses his groin against the delectable bottom on offer.

Sherlock sighs, shifting his shoulders as he tries in vain to readjust his position inside the unyielding vest. "Standing and walking on even ground aren't too bad. Lying against something drives me crazy. I can't manage to forget about the pins even for a fraction of a second."

"We'll have to clean them soon. Laura said twice a day with the antiseptic."

"Eugh. The antiseptic stinks."

"Might as well get it over with."

John fetches the Q-tips and the cleaning solution from the bathroom. It doesn't take long to swab around the pins where they pierce the skin and it doesn't appear to hurt much, either. It's just that keeping Sherlock's hair out of the way is like trying to keep a thousand live worms inside a teacup.

At one point, Sherlock suddenly squirms away from him – well, quite stiffly, but still. John raises his arms in surrender, his face a question mark.

"It tickles," Sherlock huffs indignantly. "You'll have to press in firmer."

"Not the first time you've ordered me to do that," John jokes, exhaling his quiet, suggestive words straight into Sherlock's ear and relishing the shudder this provokes. "That guidebook had sex advice, too, you know." He throws the last Q-tip into the bin in the corner and puts the antiseptic in the cabinet above the sink.

Sherlock's expression reflected in the mirror does not point to sex having been the topmost thing on his mind. Instead, there's a weariness that seems to envelop his very being. He follows John out of the toilet and into the kitchen. The guidebook is on the top of the island cabinet.

"I don't mean we should jump into anything," John explains. "I meant it when I said that you should rest. But, twelve weeks is a long time and it's best to try to live as normally as we can. That thing doesn't put me off in the slightest," he thinks to add, when he realises Sherlock might well be worried about such a thing.
In all honesty, it had put him off a little, perhaps for five minutes, but it doesn't change the fact that Sherlock would be gorgeous to him even if wrapped in toilet paper and rolled around in tar. "There is plenty of stuff we can do – what I can do for you, if the mood strikes," John continues, digging out the shirts he'd bought from the M&S bag. Sherlock looks at them as though they are infested with something nasty. He looks like he wants to wrap himself up in a blanket and sulk, not to succumb to John's charms. He grabs the new shirts and heads for the bedroom, taking the stairs very, very slowly.

John is beginning to understand; twelve weeks is going to be a long time.
The First Tuesday

The next morning, John catches Sherlock staring at himself in the bathroom, annoyance telegraphed by the frown lines between his eyebrows. It's obvious what he's looking at with such disdain.

“It’s going to feel a bit strange until you get used to it,” John says encouragingly.

“I can’t see to spit toothpaste into the basin properly. I think it ended up all over the taps.”

When Sherlock turns, John can see that he has managed to get both toothpaste and shaving cream down the front of his pyjama top, which only has the bottom two buttons done up. A sliver of his lower belly is visible since the stretched top is riding so high. His pyjama bottoms are resting low on his hips, the legs bundling a bit on his feet. John frowns – this is yet another thing that poses a definite hazard of tripping. He's tempted to yank Sherlock's trousers upwards, but refrains since it's something Sherlock can still do himself and such a gesture would probably be taken as mollycoddling, especially since his cheeks have now gained a slightly reddish tint of embarrassment. He must have realised that John is surveying the state of his clothing.

Unsurprisingly, he tries to cover up his mortification with anger: "Stop looking at me like I'm utterly useless."

John can't help but pity him a little – yet again – for the defeatist misery in his tone. "You are a little bit useless right now, but it's fine. We'll manage. I can clean up the sink; stop worrying so much.”

“That’s easy for you to say.” Sherlock tries to squeeze past him.

John blocks his way, reaching out a hand to gently touch the bruise on Sherlock's forehead. The swelling around the point where his head had struck the desk is going down and John can see from the halo of reddened skin around a pale patch that it is healing nicely. His assessment: "That doesn't look too bad."

“Stop trying to find a silver lining. There isn’t one.” Sherlock sidesteps and heads out of the bathroom.

To John his gait looks strange, his movements stiff and he even puts a hand out to touch the wall as if he doesn't trust himself at all to walk in a straight line.

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The morning then goes downhill fast. John would class breakfast as a downright disaster.

“Not hungry,” Sherlock announces.

“You need to eat.”

“No.”
John still puts the bowl of cereal he'd prepared on the table in front of him. “You can hold the bowl up high enough to be able to see it, and the same with the spoon. It’s not rocket science.”

The cereal goes soft, untouched, because Sherlock stands up and walks away from the table after ignoring it for a few minutes. There is something definitely off about his walk, more than John would have expected with the halo; he’s wobbly and it worries John. A fall at this stage is one of the worst possible things to happen – the broken dens could shift and become a threat to the spinal column. Stifling his anxiety, he watches Sherlock try to get seated on the low sofa, bending at the knees and backing onto the cushion before dropping his back down hard. John flinches at the thought of what the impact must have felt like. Flouncing off in a huff and making a dramatic landing to sulk on the sofa like Sherlock normally does is going to be impossible for the next twelve weeks.

“You might find it more comfortable if you sat up,” John suggests. Sherlock's lower back is not touching the backrest and his position would be better suited to a deck chair than a modern leather sofa.

“No, I won’t. Even the bit of sitting I did before breakfast hurt. There’s something not right about the way this thing is fitted; it's clearly putting too much pressure on my lower back. And, my forehead hurts.”

John resists the temptation to sigh. “It feels weird; I’m sure. But the ortho team are not idiots, Sherlock. I'm sure they fitted it correctly; Laura definitely took her time to check that it was as it should be.” John doubts anyone would have been more meticulous about checking every bit of the halo system's positioning.

“If I could shake my head, I would. You’re wrong, something must be off. No medical system sold commercially could possibly be designed to be this uncomfortable.”

John doesn't know what to tell him since he's obviously not going to change his mind, at least not before hearing some facts from Laura Arthur. He's glad she's due for a visit today. It'll be nice to have some backup with dealing with His Crankiness.

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Lunch is even worse than breakfast.

“Can’t.”

“Sherlock, you need to eat. Healing requires nutrients – you know that.”

“If I sit up, I get nauseous, and eating anything solid while lying down makes me feel like I’m going to choke. That wretched user manual said I shouldn’t eat like that anyway. If you don’t want me to vomit on Laura, then stop trying to fill up my stomach.”

John rummages around one of the kitchen drawers for the secret stash of chocolate bars he has reserved for taking to work to eat when he’s on call. He keeps the stash in a cardboard box of granola bars because Sherlock hates them, and thus won't go rummaging around in there. John places a Mars bar and a mug of sweetened tea on the table within easy reach of Sherlock. If he won't eat anything proper, then maybe appealing to his sweet tooth will work.
“What are you reading?” John asks.

Sherlock's laptop screen is now propped up high on John's cookbook stand that's been placed on the kitchen table; this way he can read without having to bend. He’s seated himself on a hard-backed dining chair instead of eating by the kitchen island on his regular bar stool, presumably for greater stability. “Something I should have read before I agreed to this wretched cage.”

John leans closer so he can see the text, and Sherlock scrolls back up to the top of the article.

“'The Journal of the Korean Neurological Society'. Hmmm.” John lets his scepticism show in his tone. "Hardly The Lancet, is it."

“Don’t sneer. It’s a ten-year study of sixty patients, comparing outcomes of halo vest immobilisation with surgical screw fixation.” Sherlock scrolls back down, then highlights a sentence, copies it and then reads it out loud: “The overall healing rate was 60% after HVI and 93.8% with surgical management. Patients treated with surgery showed a higher fusion rate and shorter time to callus formation than patients who received HVI.”

John sighs. “It’s one study, Sherlock, of a small cohort, and it was done in the nineties. I'm sure halo designs have improved since then, and there are thousands of dens type II fractures every year in the UK alone; if that article was ever going to change treatment guidelines, it would have happened already.”

Sherlock switches to an open email form, inserts the highlighted sentence and clicks on the send button.

John picks up his own tea mug and wanders back to his own chair, flopping down. He’s tired after waking up a dozen times throughout the night because Sherlock kept shifting around in bed even worse than usual. “Doctor Arthur won’t be amused.” It doesn't require a genius to have a guess that’s who the email was for.

“I don’t care. There is nothing even faintly amusing about this positively medieval contraption.”

“You could have told her in person instead of spamming her inbox. She’s due here in….” John consults his watch, “...about and three and a half hours.”

Sherlock ignores that. “Actually, I’m wrong. The sight will be highly amusing – to other people, who will inevitably snigger at how weird I look in this. Even that stupid guidebook says that people will stare. And comment.”

Here we go again. John sighs. There is something very specific about the halo vest that seems to be making Sherlock very preoccupied with the disruption it creates to his self-image. That, together with the physical discomfort, may well put him in a permanently angry and apprehensive mood.

John realises that maybe he should be looking forward to going back to work next week, after all.

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"John."

There's no reaction.
"John! Wake up!"

John's eyes fly open with a start. He is embarrassed to realise that he must have fallen asleep while reading the newspaper, which is now threatening to slide off his lap. He glances around, trying to understand why he suddenly feels so alarmed, and the reason quickly becomes apparent.

Sherlock is on his hands and knees, wedged between the sofa and the glass and chrome coffee table. His head is below the top of the table, forcing him to look straight down at the floor. He's trying to get his left arm up onto the coffee table in order to use that and his right arm that's still gripping the edge of the sofa to lever himself up.

“Don’t move!” It’s a command tone, hard and sharp, uttered as John launches himself to his feet.

“Sorry. Didn’t want to wake you, but I’ve managed to get stuck.”

And he has, too. John can see that the glass top of the table is caught between the halo and the highest bit of the left-hand side upright bar which juts out from the ring.

“It hurts.” A nervous whisper.

“Okay, just---- Just, don’t move. Let me get the table away. Can you bend from the waist to lower your head a bit more?”

“It hurts.” A nervous whisper.

“Okay, just---- Just, don’t move. Let me get the table away. Can you bend from the waist to lower your head a bit more?”

“I think I’m going to pass out.”

“No, you’re not.” John says it more in hope than in certainty, but the thought is enough to give him the strength to lift the side of the coffee table up and away, allowing Sherlock to straighten his back until it is parallel to the floor.

With more force than he had intended to use, John then shoves the table across the floor so that he has enough space to kneel down to Sherlock’s level.

It's obvious he's reluctant to move; afraid, even. Could he really faint?

"Talk to me," John commands.

"I’m bleeding. There are drops of blood on the floor.” Alarmed, almost at the edge of panic.

“Then let’s get you up and into a chair, so I can take a look.” John is not sure what the best thing to do is, but he crawls forward so that he's in front of Sherlock, then slides his hands under his chest to give him more support. “I’ll help you; just take hold of my upper arms and we’ll lift together so you can sit back on your heels. Then, I’ll help you bend slowly upright. It'll be just like when we were getting you out of the car,” John promises.

Nothing happens. “If I move my arms off the floor, I’m going to fall forward.” Sherlock sounds petrified and his breathing is fast and shallow.

“No, you’re not. Just trust me.” John decides to shift his position. He moves around to behind Sherlock's so he can put his arms around him, locking his hands together below the vest. “I’ve got you.” Somehow, John manages to get him onto his feet. "Better?"

Sherlock doesn't reply. His breathing is still off.

"You're not going to swoon on me, are you?” John asks.

"I want to lie down," Sherlock says. It's not exactly a no. "Head hurts."
John takes him a few steps forward, practically holding him up by the waist. Sherlock finally seems to rediscover how to walk, but he's even more shaky on his feet than before. John shifts to his side, and Sherlock grips onto his arm like a vice. They slowly make their way back to the kitchen, and Sherlock elects to drop back into the same hard-backed chair that he’d been in before.

“Did you fall? Did you hit your head or the rods?” John can see now see what Sherlock had been talking about: there is a bit of blood dripping down from the skull pin on the front left side of the halo ring.

John grabs a piece of kitchen paper off the roll and dabs at the blood before reaches the side of Sherlock’s eye.

Colour has returned to Sherlock's face. “No and no. I was doing what the manual instructs – rolling off the sofa, dropping my legs and using my elbow and hand to push sideways. I nearly made it but then my left knee wouldn’t cooperate. I decided that being on all fours was safer. That’s when I felt nauseous and lowered my head a bit.”

John’s still trying to figure out how the rod had managed to lodge the side of his head under the coffee table, but decides that it doesn’t really matter. He checks the pins behind Sherlock’s ears, pushing the curls aside to peer at the spots where the ceramic rods pierce through the skin to see if they are bleeding as well. Thankfully, they look fine.

“Okay, nothing serious going on here as far as I can tell, but we’ll make sure Laura checks it out. She’s due here any minute. Is it still hurting, and if so, where?”

Sherlock closes his eyes, probably to help him concentrate on what his body is telling him. “I think it was a cramp in my calf that caused my knee problem; that seems to have eased, but my knee aches now, instead. Maybe it hit the floor a bit when I dropped down. The back of my neck hurts.”

John takes a breath and hopes that this is not a sign of the fracture destabilising. “Let me check the muscles?” He knows that Sherlock doesn’t like to be touched without warning, not even by him. Being given permission to do so is perhaps one of the most important ways that the two of them have bonded; John knows how much greater a sign of trust it is for Sherlock than the average person.

“Go ahead.”

John keeps well clear of the bony structures as he probes the left trapezius muscle at the point near the base of Sherlock’s neck where it joins the shoulders. “What does that feel like?”

“That's fine. If there's an issue, I think it might be with one of the deeper muscles, up higher; maybe the splenius capitis.”

Even with the immobilisation traction of the vest, muscles that exert significant forces on vertebrae are a worry. John is wondering what sort of neck pain would constitute a reason to call an ambulance, when the doorbell goes. His shoulders sag in relief. “That'll be Laura; she’ll be able to tell whether there's anything to worry about.”

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“Trust the two of you to turn a quick house call into a full-blown consultation.” The orthopaedist is not amused, but doesn't sound angry, either. “Halo problems are common for children; the last time I looked you were old enough to practice medicine, which suggests that you should have enough
sense to avoid most misadventures. What did you say happened exactly?"

"He got sort of wedged between a table and the sofa," John says.

Doctor Arthur raises a brow at him. "I trusted you to make him behave."

John has never been able to tell when she's being serious and when she may just be teasing gently.

"Any tingling, numbness in your hands or fingers?" she asks Sherlock while checking that the pins haven't shifted.

“No.”

The orthopaedist tuts, and then continues her examination. “Nothing disastrous, lucky for you.”

“It feels wrong. Are you sure that it’s been put on appropriately?”

She crosses her arms and leans back against the stove. “Are you questioning my skills?”

“I don’t know what it is supposed to feel like, do I?” Sherlock's sarcasm is clear. “I felt every bump and bloody pothole in the road on the way home yesterday. I just know it feels awful. How is it even possible it’s causing leg cramps?”

“Without most of the back muscles in play, the gastrocnemius is the only thing keeping your heels from rising and you don’t need me to tell you that would lead you to fall flat on your face. There will be lots of odd things; give your body time to adjust.

"You sound like John," Sherlock scoffs.

"Good. That means at least one of you has done their homework. Please tell me you at least read the manual?"

“Yes, of course, for all its tedious generalities. It’s aimed at the layman, just like all the other similar texts I found online.” Sherlock draws a deep, careful breath and shifts on the chair so that he’s face to face with Doctor Arthur. "I want to know why you were so quick to assume that this is going to work better than surgery."

“Because it does. And if you need the proof, I will be promptly sending you the literature to reassure you.” She looks up at John. “Do his patients interrogate him about his brain surgery techniques?”

“They wouldn’t dare.”

“Trust me – I have poured over a thousand pages of data for my PhD. Some of the discomfort you are feeling is because the pins already need tightening just like they always do within the first 48 hours of insertion. As counter-intuitive as it may sound, most patients say that the first tightening in particular makes them feel much more comfortable. I will see you on Friday at King’s for the next one and your control CT, and a few times next week. After two weeks, things settle down and you won’t have to put up with me so often.” She pulls out what looks like a screwdriver from a bike repair kit. “This may feel a bit odd.”

Sherlock's eyes widen a little at the sight and he involuntarily presses his back against the chair.

Doctor Arthur watches him carefully, then tucks her hands behind her back for a moment so that the instrument is out of sight. "Like I said, this needs to be done to every patient at 48 hours."
From where he is standing, John can’t hear Sherlock's muttered reply well enough to distinguish the words.

Whatever it had been, it makes Laura smile. “It's hardly news that you think of us orthopods as mechanics; for once, it’s a justified description, and you should be glad. As for the *brainless* bit---”

Sherlock pinches his eyes closed and she takes it as an invitation. She uses the tool in each of two front skull pins, turning it very delicately. “The left one feels a little looser – it may have taken a bit of the bump.”

"That's the one that bled a little," John points out. "And he may have banged up his knee a bit."

Laura shakes her head with slightly amused incredulity. "That pin site needs to be watched extra carefully, but the one on the right looks just fine." She circles the chair and starts trying to part the curls in the back of Sherlock’s head, before turning to John. “Give me a hand here, John? We really should cut your hair to make this easier and to reduce the risk of infection.”

“No.” There is something in that single negative that tells John it’s the sound of a Sherlock pushed to the edge of his tolerance.

Doctor Arthur looks up at John and explains, still picking through Sherlock's curls: “I'm sure you've already started doing so, but just a reminder that you'll need to clean these for him, twice a day. Use a different swab on each site to avoid the risk of spreading an infection from one pin to another. Let the scabs form and don’t you dare scratch at them.”

She is now looking at Sherlock, whose eyes are still closed. "Hands *off*, Holmes, you hear me?” This is delivered with the force that would make a sergeant major proud.

She addresses John again; “There are Youtube videos on how to wash his hair; I’ll send you some links. It’s a bit tricky at first, but once you practice, it becomes easier. It’s definitely a two-person job.”

She tightens the last two pin screws, then pats Sherlock's bicep. "That's done. Did you want me to have a look at that knee?"

"If you must."

"According to John I do." She hikes up Sherlock's trouser leg, feels the different parts of the joint and finally goes through a set of tests designed to bring out ligament injuries. "It'll be a bruise at most. I'm not feeling anything that would require a further look." She lets go of the limb. "Next, I'll need your shirt up, please."

Sherlock gives her an indignant glare.

“I need to check the vest. Are you ticklish?”

She gets a sullen, monosyllabic denial in reply, and John smirks at hearing such a blatant lie. Not only is Sherlock ticklish, he is insanely sensitive in many other ways, some of which make sex with him a spectacle John will never, ever get tired of, even if it’s been ages since he’d felt so inclined. Since Afghanistan, their lovemaking has been... circumspect and infrequent.

Sherlock unbuttons his oversized dress shirt and lets it drop to his waist. Laura runs a couple of glove-lined fingers between him and the edges of the wool-lined plastic vest, then digs out a pocket torch from her handbag and uses it to peer into the gaps between the vest and Sherlock’s skin. She pays particular attention to his collar bones. “Sore?”
“How can you guess?” His sarcasm is clear.

“The halo weight rides just here, which is why the first bit of chafing usually shows up in that area. John, check twice a day to make sure there are no pressure sores. He’s not got a lot of flesh on these bones. Try to feed him up,” she orders bluntly.

Sherlock’s lip curls into a sneer. “Feed me up? I’m not a pig going for slaughter.”

“Hmmm.” She ignores the comment, poking and prodding at different points, using the torch to peer in some more. “You have sensitive skin.”

“Yes.”

“Might develop some prickly heat eventually. Does it itch under the vest?”

“Constantly.”

“No lotions or salves of any kind and no talc, either. You need to watch that irritation like a hawk, John. It might be an allergy; won’t know for sure for a day or so. If that's the case then we can swap the lining for fibre fleece, though that will definitely stink up much worse than wool.” She looks sternly at her patient. “And don’t you dare think of inserting something underneath the vest to scratch. Not even a finger. You know what happens to folks who stick knitting needles underneath plaster casts, don't you? And, those straps are tensioned correctly, so don’t muck about with them. Promise?”

Sherlock huffs indignantly.

“If it gets too bad, ask John to try threading silk or soft cotton between the wool and your skin. That can cool things down a bit, ease the itching. I'll give you a prescription for an oral antihistamine just in case.”

She tugs the dress shirt back onto Sherlock's shoulders. He wastes no time in wrapping himself up in it and fumbling at the buttons, unable to see what he is doing. John is very tempted to step in to help, but eventually, Sherlock manages.

Doctor Arthur grabs a chair and sits down in front of him, so she’s in his direct eye line. “Now, listen to me, Doctor Holmes. Give yourself a break; this is going to take time, and the first week is usually the hardest. I know it's difficult when your balance, your centre of gravity and your co-ordination are different. You are training your body to deal with something very intrusive and all I can tell you is that it gets better over time. On Friday, I'll see you back at King's; don't hesitate to pick up the phone earlier if there's anything that's worrying you.” Her tone moderates. “If you continue to have a balance issue, I can get a walker delivered. Or, you might consider using a cane for a little while. Sometimes the extra point of stability in the front is useful.”

John thinks about the cane Sherlock had gifted to him in Islamabad. John had left it behind at the hotel, accidentally on purpose. That cane would have come in handy now.

Doctor Arthur stands up and grabs her handbag from the counter. "The most useful thing, however, is having someone close by.” She glances at John and then gives Sherlock another stern look. "Don't drive him nuts, Sherlock. He gets enough of that from you at work.”

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John is running down the corridor again, the one that leads from the Critical Care Unit on the second floor of the Golden Jubilee wing to the stairwell of the Ruskin building. From there, he’d normally take the lift, but with a gunman chasing behind him, he can’t risk heading for a populated area. He’s halfway up the second flight of stairs when he passes a door that shouldn’t be there. And, there is a doorbell ringing.

He’s afraid to answer it, because knowing his luck, Sherlock will be on the other side, and he will have led the killer straight to him. But, the bell is insistent.

That’s when John wakes up.

A quick glance at the twilight in the room grounds him; it’s early evening and he has finally managed to catch the tail end of a proper nap. The night from hell has been followed by a daytime of interrupted sleep, but at least three hours have passed since Sherlock has had need of him. Even in the dim light, John can see the carbon fibre frame of the halo vest on the opposite side of the bed.

He scrambles out of bed, hastily wraps himself in a bathrobe and is halfway to the stairs when a sound registers in his ears: Sherlock, snoring. He hadn’t even woken up to the sound of the buzzer. Maybe the melatonin he had taken last night has done something, after all. The guidebook had said that even such a small broken bone together with the stress of adjusting to the halo vest will exhaust most patients. John practically tiptoes down the hallway, wanting to give Sherlock his rest. He grimaces when the bell rings again, and jogs to the end of the hallway to open the door.

A stealthy yawn escapes just as he meets the gaze of Allen Baxter, the owner of the flat. John realises he hasn’t even checked if the man had replied to his text but it has certainly been received, since Baxter has arrived precisely at the time John now remembers suggesting.

The wiry, ginger-bearded Yorkshireman had retired from the position of head of urology at The Wellington in St John’s Wood a few years back and seems to be now devoting his time to golf and the fancy pedigree greyhound dogs he owns. He has been persistently trying to invite John and Sherlock to watch the dog races with him, and John has been running out of excuses. He has always felt a bit sorry for the man – Baxter had lost the wife he had obviously worshiped to a bureaucratic medical mishap some years earlier. Maybe it wouldn’t be such a terrible night out to go and see some greyhounds chasing a fake rabbit, especially since their rent for a flat this size in West Brompton is obscenely cheap. The modern, glass-and-chrome decor Sherlock had chosen is in quite a stark contrast to the general atmosphere of the area and really not anything John would have picked, but what Sherlock wants, he gets – especially if he pays for all of it himself.

"I got your message. It did say six o’clock, didn’t it? Was I not supposed to come until later?" Baxter inquires politely as he follows John to the kitchen.

"No, sorry, I was asleep and didn’t set an alarm. Both our internal clocks are shot from being on-call; you know how it is."

John pats a chair as an invitation for the man and begins rummaging around the cupboards trying to work out where Sherlock may have hidden the coffee beans.

Baxter takes a seat and opens the buttons of his tweed jacket. "What can I do for you, then, John? Is everything in working order?" The man seems to take it as a personal failure if something in the flat isn’t functioning perfectly; John sometimes suspects this might be because he still feels guilty for dragging Sherlock through the gauntlet of a GMC fitness-to-practice hearing because he was
convinced his wife's death had been the young surgeon's fault. As a doctor, Baxter had had a reputation of being very old-fashioned in his ideas of hierarchy and proper behaviour, so John had been relieved that he hadn't even batted an eyelid at the fact that the two men weren't moving in as just flatmates.

"That is very modern, isn't it, this gay business," Baxter had said, put on his glasses and scrutinised John with an amicable curiosity. "Although, I do recall many young men like yourselves from my university years. It was very hush-hush back then, but all turned out quite alright, many of them fine, fine doctors now."

Sherlock had stood behind the man, packing his bag for weekend trip to a conference in Brussels, and rolled his eyes.

John tugs the lapels of his bathrobe straight and leans on the kitchen island across from Baxter. "The thing is, Sherlock's on sick leave for an injury that makes some things rather difficult. Would you mind if I had a railing installed on the steps between the hallway and the bedroom, a couple of handlebars in the toilet and the bathroom and anything else that would help?"

"Of course. I shall call my handyman."

John raises up a hand. "No, no, I'll sort it. I can probably do most of it myself." He leans down to stick his head into the kettle carousel in the corner. The coffee turns out to have been shoved into a frying pan. Sherlock must've been distracted. John makes a mental note to go through the kitchen and the bathroom cabinets to put everything Sherlock might need above waist height.

"But John, surely you have many matters to tend to. Allow me to help."

John pours beans into the grinder and allows himself to be mesmerised by the sight of the whirling brown granules growing ever smaller in texture. Why wouldn't he take the man up on his offer? It's true; he's got plenty enough to handle in just keeping Sherlock company. "Alright. Thank you. I didn't even ask if you want coffee," he admits.

"I have a long drive ahead of me tonight, so it would be quite welcome. You and Holmes always serve an excellent coffee," Baxter compliments.

"Sherlock insists we buy these ridiculously posh beans, and I do admit there is a difference to the sludge they serve at King's."

"Stryker donated a cappuccino maker to the OR unit at The Wellington. Perhaps they might consider doing that for King's as well," Baxter suggests.

"We could park it in Sherlock's office and it would probably run out of beans five times a week. I'm sorry he's not out to say hi; he's finally asleep," John says, nodding towards the bedroom.

"Oh, that is quite alright. May I enquire as to what sort of an injury---?"


"Oh," Baxter says and it's probably a reaction to both a steaming cup of coffee delivered in front of him and to the news. "Poor lad. Wife had a broken ankle once; even that made life highly impractical."

John's reply is a distracted hum. He glances towards the closed bedroom door, secretly hoping that their landlord would be on his way once he's done with coffee. He worries that their talking will wake Sherlock up.
They commiserate for some time over recent doctors' work contract politics. Baxter can’t resist the occasional dig at the tightening NHS budget, given that the Wellington is the largest independent hospital in the UK. Then, the retired urologist makes his excuses and bids good evening.

As he puts their mugs in the dishwasher, John decides that there's no point in dressing in anything beyond what he's already wearing. He'd bought this cheap, green and brown-striped bathrobe on his meagre medical college budget, and it has admirably withstood countless washes and lot of wear. Sherlock hates it, making a point of picking it up by pinching a sleeve between his thumb and forefinger and dropping it ceremoniously into the laundry bin whenever he sees it draped over a chair. He's always threatening to buy John a new, posh one but he never really seems to get around to it. Christmas presents purchased by Sherlock tend to be embarrassingly extravagant – partly because he can't gauge proper social conduct, but also because he obviously likes giving John such tokens of appreciation. 'I'm not good with--- words,' he had said to John once, and then shoved into his hand a printed receipt of payment for a trip for two to Mauritius. Sherlock does express things even if he may not realise doing so. John has learned how to read between the lines, and look at behaviours more than words.

Sherlock had dropped everything, endured a long, uncomfortable military flight without even packing any belongings to take with him, just to join John in Afghanistan. The thought should fill him with pride, make him feel infinitely loved, but what John feels is guilt and emptiness and unease, the precise nature he doesn't know how to define. Why?

He takes over one of the bar stools behind the kitchen island, opens his laptop and thumbs through his calendar markings for the next few days to give himself something else to think about. Why has he left an empty slot in his work calendar at one in the afternoon next Tuesday, simply designating it 'not available'?

Looking at his phone, the calendar that contains his more private entries solves the mystery: it contains a time and an address he has never visited before: 13 Harley Street. It's the psychiatrist he had been referred to by the trauma specialist at Camp Bastion. He's put this off so many times before now – hadn't even reserved the appointment until Greg had pushed him to do so.

He wonders if he will end up using Sherlock’s injury as yet another excuse not to go.
The morning is filled with the noise of the handyman bashing nails and driving screws in for the new handrails and bathroom safety features.

To escape the noise, Sherlock relocates to the sofa, realising that his headache has changed. The good news is that his forehead doesn’t hurt unless he touches it and the pin sites don't bother him half as much as they had the day before. But, part of his scalp is now starting to drive him crazy: on one side of his head it seems to be numb, while on the other an almost a burning sensation smoulders. Every movement of his hair feels like he is being scalded. It doesn't exactly help that his hair is getting greasy and matted; normally, he washes it once a day and keeps to a meticulous haircare routine that never fails to amuse John. His back, shoulder and leg muscles are also complaining, which means he can’t get comfortable.

Yesterday evening, John had helped him try almost every conceivable sitting and sleeping arrangement: different chairs, the sofa, alternative configurations of pillows and cushions on the bed drafted in to try to brace and provide support. Every time he had thought he’d finally found something that worked, twenty minutes later he had been in pain and forced to move. The only thing he still hasn't tried is that terrifyingly ugly reclining chair in the living room John had bought against his protestations. He's not *that* desperate yet.

When he tries to get up from the sofa, vertigo hits so intensely that he is forced to drop back down. John just rolls his eyes. “I think it would be better for you to just to lie down in bed for a while, maybe try to not be such a bloody princess with a pea as last night, yeah?”

The thought of returning to the scene of last night’s total inability to sleep horrifies Sherlock. He had ended up feeling like a turtle which had been flipped over onto its hard shell – vulnerable, completely unable to right itself. John had suggested that they design some sort of a lifting device he could hold on to so that he could pull himself up to a sitting position, but the numerous handbooks for halo vest wearers Sherlock has been surveying online all say the same thing: the patient should roll onto their side and use their arms to lever themselves into an upright position on the edge of the bed, because sitting up directly puts a lot of strain on the vest. Sherlock had pointed this out, which seemed to have put John in a bad mood.

Sherlock isn't sure why John keeps getting tetchy at very random moments. He wonders if it might be because this isn’t the first time they’ve been through the exercise of one of them being incapacitated, and John is trying to avoid being reminded of it. When they’d come back from Afghanistan, it had taken John almost a week to find a way of sitting in a chair with cushions to support his back and shoulder so the muscles wouldn't seize up. Now, three months later, he’s recovered enough to have rediscovered the most useful of any doctor’s habits – the ability to fall asleep almost anywhere, in any position. Sherlock feels envious, but also guilty that he’d woken
John up so many times during the last two nights. He needs to work on how to get in and out of bed to make it less likely that a bladder full of urine will destroy both their rests. Maybe he can manage tonight on his own; let sleeping doctors lie. The handrail beside the steps up from the living room will make it easier to manage moving around the flat. He should be able to manage by the time John goes back to work next week. He *has* to.

-o-0-o-0-0-0-0-0-

In the evening, Sherlock expects John to accost him with the antiseptic and the Q-tips again when he goes to the toilet. Instead, after a dinner of soup he downs only a few ladles of, John extends an arm to him so that he'd get up from his chair in the kitchen.

"Shall we give bathing a try?" John asks.

Sherlock heaves himself to his feet, and has to plant a palm on the kitchen island to avoid losing his balance. It is something that has always been affected whenever there's too much sensory input; it's not just a halo vest-related thing. Yesterday, a coat hanger had swung against the lower part of one of the vertical bars – not hard, just a tap, really, but the sound had been conducted straight into his inner ear since the back pins stick into the nearby bony structures. It had felt like someone was shoving a steel rod through his eardrum and given him a bout of vertigo that had nearly made him retch.

"Alright?" John asks.

Without thinking, Sherlock tries to nod. His head doesn't move an inch, but there's a tiny amount of extra pressure put on the front pins, and that shoots a line of pain down towards his jaw. He closes his eyes, focuses on breathing, tries to isolate and to pick apart everything his body is telling him to turn chaos into a neatly ordered list of items.

*Lower back – aching.* *Tight band of tension on head.* *Palm on the cool stone countertop.* *John's warm hand gripping forearm.* *The label of the shirt tickling neck.* *A stinging, constant, dim pain emanating from where the vest has chafed on right collarbone and broken the skin.*

John hasn't noticed that last one yet. He will, if Sherlock agrees to this suggestion, but he still definitely wants to take off his clothes as soon as possible. He wants to rip off the vest and heave it away, unscrew the pins on the halo and fling it through a window. There had been an emergency wrench taped to the back of it in case he somehow ended up needing CPR, but John has taken it out and carries it in his own pocket instead. What will John do with it when he goes back to work? Won't he trust Sherlock's judgment enough to leave it at home?

Anger has now focused what remains of Sherlock's drained mental resources and the world has realigned to something bearable instead of an impending sensory explosion. That means he can open his eyes. "How do you propose we do this?"

"I had a look at some of those videos Laura sent links to. I put a chair in front of the bathtub where you can sit and lean on the rim. We'll wrap your neck in towels – won't need plastic since it doesn't matter if we get water on the floor. The guidebook says we should blow-dry your hair."

Sherlock tries to avoid doing so, since it can his curls into a cloud of frizzle instead of preserving the ringlets. But, it's not like he's going to go outside for the time being, so does it matter if he
looks like he'd tried to create an afro?

Yes, it does. He won't put up with further irritants. "Why can't I sit in the tub and wash my hair?"

"We can't get the vest wet, so water can't run down your back," John says.

Sherlock curses in his head; he should have realised this without asking. The damned halo is completely decimating his ability and concentrate and, by extension, think.

They start making their way towards the four steps that lead to their bedroom and the adjoined bathroom. While moving around helps keep his muscles from getting achy, every step rattles the halo; minuscule reverberations that can easily make the pins throb for minutes afterwards.

He could remove his own clothes – the shirt is easy, socks only take a bit of leg gymnastics, trousers can simply be dropped down along with his pants – but he lets John do all this for him, wrap him in a towel and lead him to the bathroom. He has been doing practically nothing of worth for three days, but all he wants to do is let someone else handle everything that has suddenly become complicated and impractical. Sleep is the only thing he really wants right now, but this wretched Iron Maiden he's been locked into won't let him have even that.

John has placed a folded towel on the rim of the large, claw-foot tub that sits in the middle of their bathroom. Sherlock takes a seat in the chair in front of it, and John threads another towel between his neck and the halo. With John’s help, he bends forward until the vest rests on the edge of the tub and his head is over the bath. It’s cumbersome, not being able to see anything other than the bottom of the tub, but what John does next is the best thing that has happened to Sherlock after he fell off that damned chair in the on-call room: the warm water flowing over his scalp drowns out the dull pain from the pins, and John's fingers slowly massaging the shampoo in practically puts him under a spell. John knows his follicles are terribly sensitive – a fact the man rarely fails to make use of in bed.

Sherlock may have groaned. Twice even, before pleading: "Don't stop. Ever."

John laughs, and that sound dissipates some of the awkwardness of the past few days. He also grants Sherlock's wish and takes his time. The guidebooks say that warm water and mild soap are not harmful to the pin sites as long as the soap is thoroughly rinsed out. The videos had said to use neutral baby shampoo, but John is being naughty and using the Sherlock's usual brand.

"The guidebooks say that we should avoid conditioner," John reminds him.

"You may skip it, but just this once," Sherlock warns him. He uses both a regular conditioner – silicone-free, obviously – and a formula he spritzes in when his hair is mostly dry. The latter is definitely not allowed, now, and it wouldn't even work without the former. He also uses a hair serum after call shifts since they mean that his hair is often being crunched up inside an OR cap for nearly an entire day. Some of these routines he has concealed from John, whose own haircare routine tends to consist of supermarket shampoo and a carelessly applied comb.

Sherlock mentally prepares for the discomfiture of the baby wipes shoved underneath the vest for the rest of his wash, and after his hair is done but still wet, John does bring out the packet. But, he also turns on the tap in the bathtub. In goes a bit of the lavender bath oil John had bought for him last Christmas, knowing it was one of the scents he likes.

The tub only gets filled a quarter.

"Right," John says, grabbing more fresh towels from the cupboard nearby. "We're going to do this
slowly." He helps Sherlock sit up and then wraps a thick towel over his shoulders to catch any drips from the wet hair. Then he wraps his arms around Sherlock from the back and helps him to move off the chair and sit on the rim of the bathtub with his feet in the water. Sherlock then grips the edges of the tub so hard his knuckles turn white and lowers himself down while John holds onto his arm and lets him lean the back bars of the halo against his other arm.

The water is almost too hot to be bearable but that's good – it means he can stay in longer. Couldn't he stay like this for the rest of the twelve weeks? John arranges a towel under his head on the rim of the tub and another behind his back, then does his thing with the baby wipes. Sherlock keeps his eyes and his mouth shut, relishing the quiet sound of the water moving as it echoes against the tub.

He hisses and flinches when John threads the baby wipe through the shoulder of the halo and it suddenly touches the broken skin on his collarbone.

John peers into the gap between the strap and Sherlock’s skin. "When did this happen?"

"Yesterday. This morning. I don't know." He doesn't want to talk, doesn't want to hear John lecturing him. This is the first time that things have been bearable today, and damn if he's going to let anyone ruin it.

"Why didn't you tell me? If this gets infected and it spreads, I have no idea how you'll be able to wear the vest properly. You'd have to be admitted," John warns him.

"They'd probably have to remove the vest and operate," Sherlock muses. He probably sounds uncaring and distant right now. That would be good – having surgery and only needing a neck brace afterwards instead of--- this.

"This is exactly what Laura was talking about," John chides.

Sherlock opens his eyes, irritated at his tone that is ruining his relaxation.

"You have to look after yourself, better than you usually do." John stops trying to shove a baby wipe under the part of the vest that crosses under his right arm and looks at him sternly. "I can't stay home for twelve weeks to keep an eye on you. I need to be sure you'll be alright. There's always the option of hiring a nurse – you could easily afford it---"

"Christ," Sherlock snaps, "I'm not an invalid!"

John bites hard on his lip as though something terrible would escape unless he blocked the escape route. Something terrible has been said loud once, by him. He had meant well, but still. They had been discussing Sherlock's Asperger diagnosis, and John had used the word disabled. Sherlock doesn't like to think he's sensitised to a word, triggered by it somehow, refuses to accept that words could have such a power over him, but that particular one---

"Everything else looks fine," John relents. "Is the itching any better?"

"Maybe."

"I don't think it's an allergic reaction. You never wear wool unless it's cashmere. Do you think synthetic fleece would be a better lining for this thing?" 

"You could do what Laura said, get some silk underneath the shoulder straps," Sherlock suggests. "I think I've got some pocket handkerchiefs somewhere that I could sacrifice. Nothing else has been chafing so far besides the shoulder straps."
John accepts this with a nod. "I could dry your hair before you get out of there."

"It needs to be brushed first."

"You want it combed when it's wet?"

"Unless you want it to resemble a trimmed poodle, yes. And it's brushed, not combed. The only time I ever use a comb is if I need to sort out some tangles while rinsing out conditioner."

A flicker of a grin has appeared on John's features. It's not endearing, and it's not benignly amused. No, it's exactly the sort of thing Sherlock has been afraid of when it comes to John finding out more about his personal haircare. John would probably think it a bit... Sherlock decides he doesn't want to dwell on the pertinent vocabulary right now.

But, needs must, so John can grin all he bloody wants.

He tells John what they'll need, and in a minute his hard, wide-toothed brush has been located and John gets to work. The notion of his ridicule lingers and Sherlock bites his lip in annoyance. He could have enjoyed this, if he didn't feel like John is treating him like a girl child's comb head doll right now and thinking he's being ridiculous. Hasn't the man ever used a hairbrush, on his sister when they were young, or on one of his plentiful girlfriends? Sherlock wishes he could do this himself without having to worry about hitting the back pins with the brush.


"Over my dead body," Sherlock says. "Besides, didn't it warn that the pins could heat up?"

"Fair enough." John heads for the cupboard.

"No towels. Get that thing from the highest shelf," Sherlock protests, gritting his teeth. This is yet another thing John probably doesn't know about.

"What's wrong with a towel?"

"Trust me," Sherlock says pointedly.

John pulls out the flimsy piece of cloth. "What's this, then?"

"A microfiber hair towel. Much better for curls than the regular stuff."

"You're kidding."

"An old, clean T-shirt is also a good option. Just... not a regular, coarse towel."

Why is John being so incredulous about everything? After all, he has seen with his own eyes what happens if Sherlock's pillowcase isn't made of silk, or if he neglects to otherwise look after his hair properly: the frizz is horrid. He sleeps with one of the larger, hairnet-like, disposable OR hats when he's on call, since the synthetic hospital sheets are terrible for his hair with their build-up of static electricity. Initially, John had protested about the silk pillowcases Sherlock had bought for their home, but after coming face to face with the sight of Sherlock's hair after a winter night sleeping on cotton satin sheets, he had relented. *Evidence-based haircare.*

John starts crunching up his curls with the towel. At least he seems to remember Sherlock has told him that rubbing vigorously is a bad idea. Then again, it would be an inadvisable move considering the pins as well. Usually, Sherlock dries his hair only as much as is required to stop it
from dripping water on the floor, then lets it air dry while untangling the last knots with his fingers if he'd been careless with the brushing.

John isn’t done with the scepticism just yet. "Is all of this stuff that your posh hairdresser insists on? I read an article that most of women's face creams, no matter how expensive, could be replaced with a cheap pharmacist variety cream. Maybe it's the same with hair," he muses.

Sherlock wants to tell him that his parents possess a formidable collection of evidence of what his hair had looked like before he’d discovered ways in which to tame his Andre Walker Scale 3A curls. But, why is it his job to tell John these things, to educate him? Why is disparagement borne out of ignorance allowed, and why is it the victim's job to put in the work to make it stop?

Sherlock leans forward and wishes he could turn his head to give John a glare. "If you're not going to help, fine. My hair will turn into dreadlocks before the twelve weeks are up, but at least you'll be spared from participation in my useless, ridiculous habits that are clearly denigrating your masculinity."

John raises his arms, microfibre towel held in his right hand. "Sorry. Didn't mean to offend. All this is just... unfamiliar."

"Yes, well, not all of us swear by a bar of soap that looks like they found it behind a shed."

Sherlock hears a chuckle and then feels a set of lips being pressed to the top of his head. It melts away at least some of his ire.

"Fair enough," John relents; "You bought me all that nice cosmetics stuff for Christmas but I always forget to use. I already nick some of your shampoo on occasion, which you must’ve noticed. I like the smell."

"Sandalwood, pear and ginger," Sherlock confirms. "There was a black pepper and orchid one but that combination always felt a bit... clashing. Besides, the orchid scent was just very pungently artificial."

He touches a hand up to his hair now that John has stopped his ministrations. "Passable."
On day five – Friday – they leave home with a good margin of time to get to King’s College Hospital for Sherlock's check-up. At just over six miles between the flat and the hospital, it can take anywhere between forty minutes and an hour, provided that London traffic isn’t totally gridlocked.

On their normal commute, Sherlock tends to ignore all the traffic and keep his eyes fixed on his iPad. He’s usually looking through his schedule, mentally rehearsing the day's procedures, catching up on emails or reading up reports for his wretched admin duties which he often unsuccessfully tries to turf to the secretary he shares with three other consultants or John. He can’t do any of that now, because he can’t look at anything in his lap. The halo forces him to focus on what is happening directly in front of the car: the whirling colours, noises, and movements of the vehicle are inescapable.

Beside him, John is focusing hard, the way every London driver has to. Between the pedestrians, buses, taxis, delivery vans and cars, not to mention the bicycles, they are constantly under attack from all sides. Signs beside the road or painted on the road, sometimes even over the road on gantries, spill all demand attention: no right turn; bus lane, pedestrian crossings, school zones, no parking red routes. The information overloads even the most seasoned commuter.

Sherlock has never learned how to drive. He had thrown John some excuses over the years to explain, such as their family having had a chauffeur and that after he turned eighteen and moved to London, driving never seemed all that convenient.

That's not the whole truth.

Three years ago, when the first large patent royalty check had come in, he'd bought a high-spec car because people expected it of someone like him; it was supposed to be just as important a part of his professional camouflage as the tailor-made suits and the arrogance. Trouble was, he’d never got around to getting his license because not even his parents had thought it a good idea. It was unlikely that the average driving instructor would know how to take his... issues into account. Even on a good day, his sensory issues make all the confusion of sights and sounds in traffic problematic.

John had told him he'd learned to drive an old banger he'd bought from Harriet back in med school. Once John had moved in with him, Sherlock had insisted he drive the SUV gathering dust in the garage. Since it was Sherlock’s car, it meant that John was likely to feel obliged to drive them both around. Sherlock is a great fan of the London Underground in theory, but exposing himself to the noises and the smells and the onslaught of humanity in those subterranean tunnels always leaves him exhausted. Taxis are better but so much more expensive, and one never knows what one gets with the drivers. Being driven to work by John is, by far, the least exhausting manner for Sherlock to commute.

Today, he isn’t coping at all well. It doesn't surprise him, since the drive home five days ago had been equally horrible. They aren’t even out of sight of the flat before Sherlock is forced to close his eyes and hope that the odd sensations will stop. The vest seems to amplify vibrations and instead of being able to shut things out, he feels every tiny adjustment of the wheel that John is making. Why the hell does this thing bring nausea along with the pain it causes? He is certain this is not just due to his propensity for synaesthesia when experiencing pain, since even mild discomfort associated
with the halo seems to easily bring it on. His current theory is that the way it messes with his sense of balance is putting a constant strain on his inner ear and consequently the nausea centres of his brain.

Without prior warning, John takes a sharp right and Sherlock feels like he is in free-fall for the split second before his seat belt reacts and holds him firm. He gasps and opens his eyes to see that they are crossing the intersection of Brompton Road and Sloane Street. Once they get past the Carlton Tower hotel, Sherlock tries to use his peripheral vision to focus on the green shrubs in the little park beside the street, but the uprights on the harness keep getting in the way. When the black iron railings of the fence start to strobe in sympathy he has to close his eyes again. The second pothole that the SUV hits as they go through Sloane Square provokes forth a groan. It’s taken them nearly thirty minutes to get this far.


Sherlock might have taken this as a sympathetic response, but right now, he can’t do much more than close his eyes and hope that he doesn’t throw up. As John completes the circuit around Sloane Square and exits onto the Chelsea Bridge Road, he has to swerve and jam on the brakes as a bicycle courier darts out from where he’d been hidden by a bus. Sherlock is thrown against his seat belt and instinctively tries to duck. Ever since he got in the front seat, he’s been painfully aware just how close the upright rods of the halo vest are to the ceiling of the SUV. Designed to protect him, they project a good two inches above the top of his head, and are angled at 70 degrees from his shoulders so that at the top, sticking out away from his head by almost four inches. He has been having trouble estimating the space he needs from side to side and for headroom as a result, and managed to bump one of the uprights as he got into the car. His proprioception is shot to hell today. He’s still not sure which bothers him more: the sound of the metal reverberating through the bone into his ear, or the pain. Both had conspired to set the nausea off even before John had pulled away from the kerb.

Sherlock is suddenly aware of sweat dripping down the inside of the vest. He is wearing John’s old, oversized winter coat because it is just big enough around the shoulders to cope with the halo vest.

“Can you turn down the heat, please?”

“It’s not on. It’s freezing outside, so just open a window if you’re warm.”

He fumbles for the button that he knows is on the side panel of the door, but he can’t see it because he can’t look down. Finally, the electric window starts to come down, and he is treated to the olfactory horror that is London traffic. It takes only a few seconds before he’s frantically trying to get the window back up. It’s better to fry than to add the stink of diesel and the irritant of exhaust particulates to his already frazzled senses. For the sake of his struggling sense of balance, he tries to keep his eyes open as they emerge from the street shaded by the tall buildings on either side of Chelsea Bridge Road. John turns onto Grosvenor Road, the north embankment of the Thames, which will lead them to Vauxhall Bridge. Crossing the Thames should feel like a Rubicon; normally, it means they are half way to the hospital. Right now, it means he has to somehow avoid throwing up for just as much time as he’s already spent, and that is way too long. He bitterly regrets allowing John to bully him into eating breakfast.

He begins considering asking John to pull over to the kerb so he can open the door and lean over to throw up. The thought of trying to make the journey with the smell of vomit in the car is… just impossible to contemplate. But, no sooner does he think of how much better he’d feel, he knows what the conversation would be. (“Do you see anywhere to pull over? There is no such thing,
Sunlight streams into the car and Sherlock has to close his eyes again. *Too bright.*

Next, they get stuck in standing traffic at the Kensington Oval. Sherlock waits for John's inevitable fidgeting and then muttering. If there is one thing that gets the man worked up, it's a standstill behind the wheel. Lately, he has become willing to go miles out their way just to be able to keep the car in motion, going down endless side streets that seem to lead to nowhere. Here, along the cricket ground, there is no escape now, and Sherlock knows he can't bear a shouting match between John and the traffic. It's going to push him over the edge for sure, with his senses already this close to being overwhelmed.

John slams his hands down on the steering wheel in frustration.

"It’s probably just a fender bender ahead. It will clear soon enough. We have plenty of time," Sherlock tells him.

"You don’t understand."

"What is there to understand?"

"I *HATE* being stuck in standing traffic!"

"Why?"

John doesn’t answer. Three minutes pass with no forward motion; if it weren’t for John’s temper, Sherlock would have welcomed the respite. They are behind a white van and can see nothing of what might or might not be going on ahead.

“So, explain it to me; what’s so wrong with stationary traffic?”

John explodes, “It makes me feel like a *sitting duck!*”

*Oh!* Sherlock suddenly realises that John associates being stopped with vulnerability to insurgents and IEDs being detonated. It doesn't matter that they're in London – the unease can't be shaken so easily. The thought momentarily purges all concerns about Sherlock's own sensory issues; the sudden wrench in his guts is not about him now, but from remembering the sight of John lying helpless and in pain in the Camp Bastion hospital.

He says nothing more. The traffic clears in another five minutes and they never find out why it stopped in the first place.

Arriving at the hospital, John finds himself calming down. He relishes the thought that there's only one drive across town left before the weekend. He hadn't meant to admit to Sherlock that he was more severely bothered by standstill traffic than the average London commuter, but he had been so on edge that it had just tumbled out. It had practically shocked Sherlock to silence, which probably isn't helping the man's infectively miserable mood of this morning. At home, Sherlock had taken absurdly long to get ready, and John had busted him finger-combing in a bit of his usual hair cream to try to beat his curls into submission, even though he's not supposed to be putting any products into his hair as long as the halo pins are in.
"It's no use," Sherlock had finally concluded. "I look a mess."

"You look lovely," John had told him half-heartedly, glancing at his phone to see if they should be going already.

"Nobody looks lovely in this thing."

Sherlock had agreed to sit in the front seat instead of hiding in the back behind tinted windows, but he had seemed to be very relieved to get out of the car. The walk from the car park to the staff entrance had turned the nauseated, greyish tinge on his face into a healthier colour. The sights and sounds of the hospital are familiar to him, so his senses must be inured to them by now.

The CT gets done in a timely manner at the surprisingly quiet radiology unit, so John suggests that they grab some lunch at the hospital cafeteria.

Sherlock wastes no time in throwing cold water on the idea: "You can fetch something from wherever and we'll go to your office. Not that I'm even hungry."

To John it seems understandable that he isn't enjoying having to leave the house since walking, getting into the car and getting out of it are a logistical challenge and being up for hours without resting tires him out, but this is their workplace – Sherlock shouldn't be this uneasy about being here. Dealing with him in a halo is hard enough; does he have to make such a big deal out of every bloody thing?

They're now heading down the corridor from radiology to the main entrance. John notices one of the neurosurgery registrars heading in the opposite direction and towards them. Sherlock stops in his tracks, makes a sharp left and starts heading towards a stairwell. The sudden determination is making him faster on his feet; he isn't taking every step as though a trapdoor might open underneath like he has done at home.

John jogs a few steps to catch up with him. "I don't think we can get to the admin floor through here, and there's no elevator."

"I'm perfectly aware," Sherlock snarls from between clenched teeth. He turns, since he can't glance behind him. The sliver of main corridor visible from this side entrance is empty. Sherlock waits a few seconds, then heads back towards it.

"This is ridiculous," John mutters. "We'll be bound to run into at least someone we know. This is a bloody hospital; nobody's going to laugh at you."

"Assuming they already know about this."

They're now in the main lobby, and Sherlock wastes no time in heading towards the administrative wing where John's office is located. "Anderson has probably told everyone."

"You broke your neck and this is the treatment. Nothing embarrassing about that. It was an accident – could happen to anyone." John isn't sure why he's saying all these self-evident things which Sherlock will invariably dismiss as talking down to him. What else could he do? "Think about all the silly things people do at office Christmas parties. Somehow, their reputations survive all that."

"I don't go to Christmas parties," Sherlock points out and jams his finger on the elevator button.

It's true that Sherlock will try to avoid any and every social gathering that has to do with work. He never acts deliberately silly, never sticks his neck out in any way when it comes to interacting with
others. He seems so very afraid of making a fool of himself that he inevitable comes across as a humourless hard-ass. The only times John has seen him relaxed and truly being himself are when it's just the two of them at home, or when Sherlock is talking to his brother, or in the presence of a very select group of colleagues including Greg Lestrade.

For lunch, John ends up getting sushi from a so-so place two blocks from the hospital. It's a small relief that Sherlock actually eats most of his portion, albeit slowly. They throw the containers in the bin in John's office five minutes before Sherlock's scheduled outpatient appointment at the orthopaedics outpatient unit, leaving them just enough time to make their way to the Golden Jubilee Wing.

Once there, they wait.

And wait.

And wait some more.

After thirty minutes, Sherlock starts pacing because he says that sitting in the waiting area is making his backache worse.

After an hour has passed, John goes to the sign-in desk to ask what's taking so long.

"We're really short-staffed today, sorry, Doctor Watson," the desk clerk tells him.

"Any idea when Doctor Arthur might become available?"

"She's still in theatre with a patient from a three-car pile-up on the South Circular."

John goes to deliver the news to Sherlock, who huffs with annoyance. "We could have gone home an hour ago, then. Can't she just email us the scan results?"

"You know as well as I do that if there's something wrong and they need to refit the vest or do something to the pins, we'd have to do this whole transport show all over again," John explains, trying to sound patient. He wants to go home, too, but he isn't going to moan about it – complaining is hardly going to affect how long Laura will be needed in the OR.

"Can't they send someone else to do the appointment? It's hardly rocket science!" Sherlock scoffs.

"As though you would accept some registrar's opinion. Consultants must be in short supply today if they'd pulled Laura from her outpatient clinic."

"I will accept even your opinion on the scans if it gets me out of this hellhole," Sherlock says and continues pacing, palms pressed on the small of his back a bit like pregnant women often walk.

Anger rises in John. "Why do you always have to do this?"

Sherlock stops and turns stiffly. "Do what?"

"Maximise the level of arsehole you're being whenever someone dares to inconvenience you. Lord knows your outpatient clinic doesn't always run on schedule."

"I'm not being inconvenienced, I'm being tortured."

"All you need to do---" John's tone is sharp and loud but he doesn't care – the corridor is empty and if Sherlock is allowed to lose patience at the slightest annoyance, then he is, too; "---is to sit tight for twelve weeks while I cater to your every bloody whim, and you think you still have the right to
be a drama queen? Couldn't you behave like a bloody adult once in your fucking life, hmm? Have a little patience, do what an expert who isn't you tells you is best? Everyone bends over backwards to serve your precious arse, mostly because you bully them into submission, so how about you learn to accept the help you're getting and be a little bit grateful?"

Sherlock's gaze narrows. "You're one to talk," he says. The calm frost in his voice is a carefully constructed front to conceal that he's very, very angry. "At least I'm not emptying the liquor cabinet and telling both my physical therapist and the only person willing to put up with me to fuck off."

Fury drowns John like a tidal wave. He digs his fingernails into his palms, shaking with rage. "How dare you. What the fuck do you think you know about any of that?!"

Sherlock knows nothing. He has no idea. He doesn't understand anything. It's not the same, not comparable at all, what the two of them have gone through, and he has trusted Sherlock with everything – trusted him with the truth that he doesn't always know how to cope. He has let Sherlock see him at his worst, and he thinks he has the right to throw that in John's face just because he's a little cranky about having to wait?! John steps closer, forefinger raised, his gaze nailing Sherlock's so hard he's actually taking a step back---

--- but before his brain manages to scramble together the perfect verbal summation of how much he wants to hurt Sherlock right now, footsteps hurry down the corridor and a familiar voice calls out their names.

"Sorry about that. We're snowed under," Doctor Arthur says after walking up to them.

John lets his hand drop and exhales. "Finally."

Sherlock is already heading for the appointment room.

It takes a few moments for Doctor Arthur to sign in to the electronic patient records and to bring up Sherlock's CT images. She turns to face the two men in the chairs across her desk. Her eyes zigzag between the two of them before she retraces the route with her finger. "What's going on here?" she asks, amusement barely concealed in her tone.

Sherlock and John don't even glance at each other. Neither replies.

She scrutinises the CT images on the screen. "This is virtually identical to what we started with."

Sherlock folds his hands on his lap, worry his lip. “And?”

"It's good news, of course. It means that the fracture is still nicely stabilised by the halo. How's it going at home?"

John opens his mouth to say something, but then snaps it shut. Let Doctor Holmes sort himself out, since he thinks he's entitled to pass judgment on the way other people deal with their problems and injuries.

Laura raises her brows at the silence in the room. "That well, huh?" She digs a pen out of her pocket and turns her monitor so that Sherlock can see it. "Instead of putting in a foreign metal object and subjecting you to the risks of surgery and the associated hospital stay, we're letting your perfectly capable body fix the vertebra. You've had the halo for five days – I can promise that the worst is over, but in order for us to cushion your way, you need to talk to me. Or John."

"Oh, he talks," John snaps. "Whines, complains, bitches, what have you."
"John." Her tone is a warning, and her frown lingers as she watches him for a moment, but then seems to decide to let it go.

"Any skin issues?" she asks Sherlock.

"Right collarbone, but it looks better today. We put a silk handkerchief underneath and John readjusted some of the wool lining, since it kept bunching up on my side."

"Good. What about sleeping?"

"What you'd expect, I suppose," Sherlock says dismissively. "I sleep for about three hours in bed before I have to get up to move into the living room and then John's recliner. Another three hours there, and then it happens in reverse."

“And I get woken up at the start of every cycle,” John mutters. He thinks it probably drives Sherlock nuts not being able to shoot snide sideways glances at him.

"That's normal. Your muscles need to work, so just keep at it.”

She looks at John. “Think about another bed in that second bedroom of yours if you want uninterrupted sleep.”

Sherlock looks slightly alarmed at the suggestion and John wonders why. Is he worried about not being able to call out to him? It seems logical, but John's empathy is a well run dry right now.

"It's full of his junk," John dismisses and cocks his head towards Sherlock.

Doctor Arthur has now lost interest in their sleeping arrangements. “We'll do tightening first thing next week, and we'll book you for another CT next Friday. The pins only need tightening every two weeks after that unless you bump yourself hard on something or the halo starts to bother you differently to the way it does now. I know you can work out most things by yourselves, but get in touch if there's anything you need."

She stands up, grabs a penlight from a desk drawer and repeats the check-up she'd given Sherlock at their flat. After finding nothing more to intervene with, she shakes the hands of both men. "Don't be a stranger," she jokes as they head out of the appointment room.

Not a single word is spoken on the drive home.
Happy International Fanworks Day! In celebration of it, here is a loooong chapter ahead of our usual posting schedule.

"Why are you so hell bent on dragging me out of the house?" Sherlock asks at around three in the afternoon on Saturday, not making a move to reach out for the coat John is holding up so that he could more easily slip into it.

Laura had promised him things would get easier, but clearly that is going to take more time, assuming it ever happens. The constant itch and the fact that Sherlock cannot ever stop thinking about the metal bars might well ensure that. He is living with a weird form of claustrophobia – wanting to move his head and to bend his neck and yet not being able to do so.

Why would John want to add to all that sensory distress by suggesting they leave the flat?

“Come on,” John grouses, "they say the cemetery we've been living close to is lovely to walk in – practically a nature reserve. A bit of fresh air will be good for you. We all need it every once in a while," John says, enticingly shaking the coat still hanging from his fingers. It's that hideous old thing of John's again; a worn, olive-green parka that's slightly too big even for its owner. John must've had it as a student. He never throws old things like this away – frugal family or downright destitute childhood?

"That's an old wives' saying, not evidence based medicine. Besides, that thing will make me look like an exhibitionist."

"In a graveyard?"

"There's no limit to human depravity. As an anaesthetist who must have helped remove a fair number of strange objects out of human rear ends you should be seasoned to this fact."

“Don’t try to distract me. Let’s go.”

Begrudgingly, Sherlock turns and slides his arms into the sleeves and John lifts the coat up to the height of his shoulders. Sherlock buttons it up as high as it will go and hopes that it won't slide down the support bars of the halo. John threads his scarf through the bars and around his neck. Usually, the cashmere causes him no problems, but at the moment the feel of any cloth, no matter how soft, on his skin is yet another irritant.

John sniggers. "Admittedly that plastic Santa Claus table ornament was a surprise. Usually, people put those on, well, tables, not shove them up their bums."

"Is that the one from two months ago?"
"No, that was the beer bottle." John slips into his own coat. "The Santa was last summer."

"Ah. Even the season was confusing, then."

"Yeah, I guess it wasn't in use."

The share a chuckle as they make their way out the door.

They've lived here long enough that it is, indeed, odd that they haven't explored the nearby neighbourhood.

John is chatting cheerily about things from work as they walk at a leisurely pace. Something about his upbeat mood seems a bit off to Sherlock; it seems that he's trying terribly hard to be encouraging and perky today, which is a stark contrast to his bristling demeanour of last night. Perhaps this has to do with their row in front of Laura? John had embarrassed Sherlock during that appointment but most of all, he'd embarrassed himself. It's not in their habit to bring their private issues to the workplace.

Whatever the reason, John is now acting like a bloody tour guide, and Sherlock still isn't sure why exactly he's humouring him by agreeing to venture outside. Certainly, the view is different compared to staring at the walls of their flat, but Sherlock can’t help but feel that people passing them on the pavement are all gawking at him. John appears to be oblivious to their looks, or perhaps he's ignoring them because he’s the one getting stir-crazy cooped up in the flat. If that is the case, then it is definitely a good enough reason for Sherlock to put up with the kaleidoscope of colours, sounds and scents that assault him as Lillie Street becomes Old Brompton Road once they cross the bridge over the train tracks.

A visitor's guide signposted at the front gates of Brompton Cemetery informs them that its area is 39 acres, it's a public burial ground instead of a Church of England one and a designated Grade I on the English Heritage Register of Parks and Gardens, and even has nature conservation importance. Sherlock is sceptical that they'll see anything more spectacular than a few ducks, but he has always liked cemeteries.

The outer wall looks like a small aqueduct, and the cemetery itself turns out to be pleasant indeed – not too strictly maintained. More of a park than a typical London garden or burial ground.

John tells him there shouldn't be too many people around, since there is some major sports event on television. Sherlock has already forgotten which particular sport it was supposed to be, but if the noise emerging from the nearby football stadium is anything to go by, Chelsea football club may be what is keeping people indoors. It’s one of the reasons why this area of West London is not quite as popular as West Kensington or Chelsea itself; the traffic on match days is a nightmare.

They wander down the main avenue lined with impressive mausoleums and Victorian angel statues. The larger paths in the cemetery and the main avenue have been paved, presumably to allow access for the hearses and funeral corteges. Sherlock would prefer to stay off the footpaths, anyway, since they might pose a trip hazard with tree roots and he would probably feel the vibrations in the pins from the uneven ground even worse than he does from walking on tarmac.

John now has his phone out, and he shows the screen to Sherlock; he had snapped a photo of the cemetery map posted at the entrance. "There are even catacombs here, but they're not usually open to the public."

Even if they were, climbing down and negotiating stairs with the halo vest would be madness. Trying not to ruminate further on his infirmity, Sherlock shoves his hands into the coat pockets and
follows John towards a smaller but wide path towards what appears to be an older part of the cemetery.

"This isn't so bad, is it?" John asks, sounding like he's offering some important truth.

"Every single person walking past has had their eyes fixed on me."

"You'd look, too, if someone walked past you with a halo. It doesn't mean anything. They're just curious."

"And very put off."

"That's laypeople for you. They get put off so much more easily."

"You think I shouldn't be bothered, since I'm not one of them? That I shouldn't mind being a freak?" Sherlock can't keep anger out of his voice.

What John fails to realise is that the halo vest, in the grander scheme of things that make him stand out from the crowd in unpleasant ways, is a small problem. It's a thing that will end, but all the other things he has been teased, taunted and singled out for will remain. John must have always been the poster boy for normal and average and likeable – how could he possibly understand?

"Not what I meant. I just think you've been overreacting a little."

"This coming from a man who left his cane behind in a hotel room because he didn’t want to be seen with it. Let's have this thing put on your head, see how you'll not overreact."

John opens his mouth, about to say something, but then refrains. It's not often he leaves the last word to Sherlock. Maybe this has something to do with their argument yesterday – clearly a very careful thing between them still. He can sense John is trying to avoid antagonising him today.

There is an old woman leaning on a cane beside one of the headstones; presumably a relative of the deceased. Thankfully, she ignores the two of them.

"It's normal to use a cane; no one would have looked at you twice," Sherlock comments once she's out of earshot; "only you and I knew it was for a psychosomatic injury. And your shoulder, the scar you hide even from me; no one out here can see your injuries. In my case, it's different. Completely obvious and just plain weird, so people stare."

"You shouldn't be so fixated on that stuff, and I don't mean just the halo."

"I don't look naturally disarming and pleasant like you, because I am neither of those things."

"You like looking posh, unattainable and too much to handle," John teases but there's an accusation there somewhere, too.

Sherlock is not interested in being picked apart right now. John has no idea of the scale of bullying and harassment that he went through as a child whose behaviours did not fit in. And with John already hounding him like this, he is not about to reveal any of that right now.

He quickens his steps before stopping in front of a small mausoleum adorned with Egyptian-style lotus-engraved columns. A large quote has been carved into the stone.

"In media vitae in morte summus," Sherlock reads out loud, aware that John knows plenty enough Latin to translate – in the midst of life we are in death. He turns in a semicircle to have a glance
around. "It's a wonder the council hasn't turned this place into housing."

"Lucky for us it hasn't." John stops beside an old pair of graves, kneeling down to scrape a bit of moss off the dates with his gloved finger. "The sign out front said that Dr John Snow and Dr Benjamin Golding are buried around here somewhere."

"Golding… The founder of Charing Cross Hospital?"

"Yes, according to the sign outside – which you couldn’t be bothered to read."

"Who’s Snow?"

John sighs. “Yeah, it figures you wouldn’t have heard of him – he was an anaesthetist. He is also credited with discovering the cause of cholera and halting an outbreak.”

Sherlock is barely listening because he’s looking at another grave off the side. Careful to feel the ground with his feet before putting his full weight onto the uneven mound, he steps onto the grass to get closer to it. For a moment, his balance feels wrong, and the scent of moulds and decaying leaves threatens to make him gag.

The name carved on the gravestone is not an uncommon one, but it's startling nonetheless: John Henry Watson, Beloved husband.

John joins him by the graveside and frowns at the name. "That's a grim co-incidence."

"Not a rare surname. And, your first name is positively pedestrian." Sherlock narrows his gaze. "You've never explained to me what the H stands for. It's not Henry, I assume."

"Nope, and you're not ever to find out, if I have any say in it." John sounds like he's only half joking. Sometimes, when he signs important documents, he uses J. H. Watson. Sherlock curses himself for never having a look at his passport when they've been traveling together.

He decides that John's taunt-like statement bothers him. Of course he will find out eventually what his partner's whole name is. He could just dig out some of John's personal documents or his passport from the junk drawer and the mystery would be solved. "W. S. S. Holmes," he announces.

John's brows climb high. "Really? Sounds like a bloody ship – The WSS Holmes, sailing out of London. How is it possible I didn't know your initials, either?"

"You never asked and I certainly didn't volunteer, either. The lease is the only document we've jointly signed, and I use S. Holmes whenever I can."

"So, what's the W for, then?" John sounds like he's certain Sherlock will freely share this bit of information.

*Double standards.* "William."

"You don't look like a William."

"This coming from a John." Sherlock doesn’t like to remember how many times his first name had been mangled to taunt him; Billy and Willy are both terms of abuse in the mouth of school boys who wanted to bully him. Willy the nancy boy.

The first time he had signed anything as Sherlock, it had been his application for medical college. He had hoped this career would give him a chance to leave behind a past in which he was always
the odd one out, but that had turned out to be a terribly naive pipe dream.

"The second S is for Scott; almost as boring as William. I prefer Sherlock."

"Of course you would," John says with a slight edge of sarcasm. "Come on," he prompts, tugging at Sherlock's sleeve.

However, something makes Sherlock linger, and finally, even his over-taxed brain makes the obvious connection: the cemetery is still in use, and since it's a public one anyone can apply to be buried here.

This could have been John's resting place, if things had gone differently in Afghanistan.

He stands there, eyes drawn to the wilted, browned flowers in a stained vase. This grave is not often visited.

"Come on," John says sternly. "I know what you're thinking and it's pointless."

"You brought me here. You've spent our time here by accusing me of being vain and trying to avoid thinking what this place is really for." He turns to face John. Something makes him want to prick that mood a bit, to burst the balloon of John pretending to be in control of what's going on. "You don't like thinking about what almost happened. You'd prefer to believe it wasn't even possible."

"I'm not naive enough not to realise what army service means. I'd done a tour of duty before and seen tons of casualties first-hand."

"Doesn't joining the army require a suspension of disbelief? Keeping sane in that sort of an environment means you have to suppress your own personal anxiety, doesn't it? You can't sit around meditating on how you could get killed practically at any moment, can you?"

"The attitude required isn't that different from our work here in London, or from simply being alive. We could keep thinking about everything that could go wrong at any time, but we don't." John's tone is dismissive.

He takes a step towards where the path continues, but Sherlock stubbornly stays in front of his namesake's grave. "Did you even care what could have happened to you out there?"

He doesn't say it, but the logical extension is: did you even care what would happen to me if you didn't come back?

"You're one to talk," John says in a biting tone. "If we're talking about recklessness, then what about your self-destructive streak?"

"Excuse me?" Sherlock has a hunch what John may be referring to, but he needs confirmation.

"You said 'substance abuse issues' when you came to talk to me after we met. Then you tell me in the OR that a normal dose of Rapifen isn't going to do much for you. Your brother says he sent you to rehab twice."

"That's more his interpretation than mine. Controlled usage is not usually fatal and abstinence is not immortality." They have never discussed this, and Sherlock doesn't like how John seems to be wielding the subject matter as a weapon right now.

"That's bullshit. What age were you?"
"Fifteen when I started; the last years of school were… challenging."

"At that age, you must've already been planning on studying medicine. You should have known better. I'm still having a hard time believing some of it. You shot up?"

Sherlock is hating this interrogation more and more. He says nothing, because he doesn't want to lie.

"You don't have that many scars on your arms," John points out.

Sherlock elects not to mention he rarely used his arms. As John had pointed out, he knew better. Better spots, that is. Spots that wouldn't make him stand out if someone saw him without long sleeves. Recollections of their argument yesterday slither in, and he just can't resist to reference them: “Unlike you, who wears a T shirt to hide the scar of your own risk-taking behaviour.”

"At least joining the army serves the good of society and is a calculated risk compared to that shit."

Sherlock takes his hands out of his pockets and crosses his arms. "How exactly is it different? How do you calculate your personal risk of being hit by an IED and getting shot at on a daily basis?"

"You were hardly making risk assessments before messing your head up with whatever you were using."

How is this suddenly about Sherlock? It's John's name – well, almost – on that grave. Why do they both keep taking the bait to bicker? Why is John constantly berating him for something? John is picking fights, utterly in denial that he might have any faults of his own.

The conversation seems to have arrived at an impasse, and they start walking again. Sherlock is tired and his head hurts but he's not going to ask John to cut short the walk. It will only give him more ammunition to complain that he's overreacting.

Someone has dropped a bit of bread on the path, and a raven is chasing crows off to get to it. John stops to watch them. "Do you want to start heading back?"

Sherlock's neck feels stiff, his hands are cold and a man raking leaves is looking at him. Suddenly, it's all too much. He shoves his hands into his pockets and refuses to look at anyone they pass on the paths. "Please."

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After helping Sherlock out of his coat, John glances at the wall clock in the kitchen. "Shit. We have to change if we want to avoid being late."

Sherlock frowns. "Late for what?"

John's head snaps up from his phone. "Don't you dare tell me you forgot."

"I---"

"You did. You forgot. Did you even put it down in your calendar?"

"You know I use event alerts. If I had put something down, it would have notified me."
"I definitely showed you the invite. I put it on the bloody fridge!" John points at the light blue card pinned under a magnet on the door.

"You mostly put bills there. I don't look at them."

"Whatever. You can wear one of those oversized white dress shirts. I think there's one still in the package."

Sherlock's eyes go wide. "I am not wearing those hideous things anywhere in public unless I have to."

John straightens his back and is looking at him with cold determination. "We're going. The walk was fine, you haven't complained that you're too tired, and we're going."

Sherlock goes to the fridge, slips out the card from underneath the magnet and reads it out loud. "Dr Andrew Taverner and Miss Sonya Qaisrani request the pleasure of your company..." He puts the invite on the kitchen island. "I don't know these people."

"I do. Andrew's one of my best mates from my first Afghan tour; he's now an ophthalmologist. I want him to meet you."

"People don't want to meet me." He'd look ridiculous and alien in the halo and an ill-fitting shirt, and he doesn't know how to talk to John's friends.

"When you behave, they sometimes do. We have to get a move on," John prompts, heading for the bedroom. "The restaurant's downtown. We should probably take a cab."

Sherlock scrambles for something to say. John isn't even asking him if he wants to go. John doesn't care if he wants to meet these people or if he even feels up to it. He'd say no to both.

Since he hasn't moved an inch from the kitchen, John stops on the second step to the bedroom to glare at him. "Sherlock," he warns, "you drag me to all your bloody charity galas and networking cocktails and award ceremonies."

Because you can make people put up with me so I can go to these things without being terrified by them.

"This once, I'd like you to come to something I want to go to. Is that too much to ask?"

This must be the reason why John had been trying to educate him on his supposed vanity at the cemetery: he had been trying to ensure he gets to drag Sherlock to some party looking like Frankenstein's monster. John had been testing him, proving to them both that Sherlock could manage so that they could attend some pointless social function. Sherlock now regrets concealing how badly the walk had drained him.

Yes, it bloody well is too much to ask.

"Look," John says, pinching the bridge of his nose, "nobody's going to care you've got the halo. These are medical colleagues; they're not going to be shocked or stare. Andy called me three days ago to make sure we were coming, I think he's looking forward to meeting up as much as I have."

"Then you should go," Sherlock says. "I'll be fine on my own for the evening. I can meet them another time."

"They live in Singapore," John says. "His parents are throwing the party and they're having the
wedding here next year. I wanted us to get together before that; I know how stupid it feels to meet someone for the first time at their wedding."

Sherlock wants to go to a wedding as little as he wants to attend a party.

"So, it's too much to ask, then? Even if we can leave early since you'll probably tire fast?" John is trying hard to sound like it doesn't matter, but it obviously does. Even Sherlock can see that, but his unease and embarrassment swirling together with how rotten he feels physically ensure that he really doesn't want to leave. What good would it do for him to agree to go, if he won't be able to relax and be himself and enjoy it? That never happens to him at parties, not even with John.

"First you don't even remember that I asked you to go, and now you won't even consider it. Nice. Just---brilliant," John snaps. "Thanks for the fucking support, once again. At least make sure you let in the Ocado deliveryman. I was going to message them to reschedule, but since you're going to be in---"

"Why haven't you rescheduled earlier?"

"When I made the booking on Thursday, I wasn't sure you'd be given the all clear by Laura at the appointment. But, now that you've been told it's okay, and you've just proven you're up to it by the walk, I don't understand why you're reacting like this."

"Like what?"

John gives him a dirty look that says 'really'?

Sherlock drops down onto the sofa and turns on the television, tempted to turn up the volume so high it will drown out whatever further venom Johns sees fit to fling at him.

"The delivery slot is at six thirty," John hollers from the bedroom.

It's always at six thirty on a Saturday. Sherlock is perfectly aware of that. That is something he does have marked up on his calendar. John always tells him which Saturday it is, and sorts it all out.

Fifteen minutes later, John hurries out the door in his best suit. He doesn't say goodbye.

-the next morning, like most arguments, it starts over something trivial.

John has managed to chase away the slight hang-over from the engagement party, and is now watching the rugby international – Wales versus Australia. It is a close match: at half-time, the scores are even at 13 all. In the break, he realises lunch is overdue. He ends up only having to prepare one portion, since Sherlock declines, waving off his suggestion without even looking at him. He's reading something on his laptop, which has again been perched on the music stand.

John is not surprised at his refusal to eat, nor is he in the mood to try to get him to see reason. Let him starve for all I care.

John decides on bacon, lettuce and tomato on toast – one of his favourites – and a great way to deal with the slight queasiness that is now the only effect still lingering from last night’s indulgence. He
had enjoyed seeing Andrew again, and three glasses of champagne had soothed the embarrassment of showing up without Sherlock. Everyone had understood, of course, when John had told them in a roundabout manner that Sherlock had taken ill, but he knew how things really were. Before that copious amount of bubbly, he must have appeared tense enough for Andrew to ask if he was alright.

Unsurprisingly, he hadn't known most of the people at the party, since he and Andrew have not really shared a social circle for years. Some old school and college friends had been present and they had naturally posed the usual questions about work and dating and children. John finds it's easier to reveal that he's in a relationship with a man, if said man is standing right next to him looking as amazing as Sherlock always does at parties. Perfect. Unattainable. Cold. Uncaring.

The toast pops up and John butters it, slips the tomato slices on, then the bacon from the frying pan, followed by a turn of the pepper mill. When he reaches into the fridge for the mayonnaise, it’s not in its the usual shelf place in a door receptacle. A quick scan of the rest of the fridge does not reveal the missing crucial ingredient. All in all, the fridge isn't half as well-stocked as he would have expected.

He goes to the cupboard to find the unopened jar that should be there. The cupboard is bare, at least of the expected condiment. He closes the cupboard, frowning, hands on hips. The match is about to begin again, so he'll have to hurry if he doesn't want to miss any of it.

“What’ve you done with the mayonnaise?” he calls out towards the sitting room.

No reply. So, John turns around and looks over the breakfast bar into where he had last seen Sherlock. Sherlock has his earbuds in, sitting in a chair facing the sliding doors to the balcony, with his back to the kitchen. The chair, dragged in from the kitchen, is surrounded by scattered papers and old medical journals.

Annoyed that his bacon is going cold, John marches into the living room and realises that not only can Sherlock not hear him, his eyes are closed and he cannot see him even though he is now standing right beside him.

He taps on Sherlock’s shoulder to get his attention.

Sherlock jerks violently, yelps what sounds like an 'ow', and struggles to catch his balance before he falls out of his seat, then scrunches up his eyes in pain.

John, startled as well, jumps back and throws his hands up. “Jesus! I hardly even touched you!”

Sherlock is breathing fast, and takes a moment before opening his eyes. “Tell that to my neck. Next time announce yourself without scaring me half to death.”

In annoyance, John’s hands migrate to his hips again, elbows akimbo. “Maybe if you didn’t have the music on so loud that might be possible.”

That earns him a glare. “No need to tea-pot at me. You might have noticed that I can’t wear my noise-cancelling headphones because of this damned cage. So, if I’m going to drown out the sound of your television, I have to have it up loud.”

“What did you do with the mayonnaise?”

“I ate it with tuna salad last night. What’s it to you?”

John abhors tinned tuna, and he has no idea why Sherlock had requested that mushy stuff when
John had last gone to the shops. A can of tuna with mayonnaise on top, which is what Sherlock has eaten several times during the past week instead of what John had actually been trying to serve for dinner, is *not* a proper salad. “It was on the Ocado list for yesterday. Why isn’t there a new one in the cupboard?”

Sherlock tries to shrug and then winces when the halo vest fights back. “Nothing was delivered last night.”

John can hear over his shoulder that the match has resumed. “I ordered a whole lot of things because you can never be bothered to. You know that I’m going back to work tomorrow, so I put an order in since I won’t be here to answer your every whim. I told you about it before I went to the party, but clearly you have more important things to do than to listen to me. Just like you’d rather stay home and sulk about what you look like rather than be my other half when I need you.”

He stalks off, smacks the now cold piece of toast onto the sandwich and then returns to his place in front of the flat screen. Annoyed, he turns up the volume.

At one point, Sherlock appears next to the sofa as though there's something he wants to say, but when John doesn't shift his gaze a single inch away from the match to acknowledge him, he retreats to the study.

When the match ends, John is still angry, and not just because yet another British team had caved into the Aussie onslaught; the final score is 38-13.

After turning off the television, he flips open his laptop. Rather than indulging his habit of looking at the online commentary following every international face-off between a British and a commonwealth team, he logs on to their joint Ocado account.

**Saturday 18.30-18.45 delivery slot reserved. Unable to deliver; no response at door or to SMS. Please re-book delivery. You will be charged a second delivery fee.**

Now furious, John marches into the study with the laptop and shoves it into Sherlock’s lap, pointing at the text on the screen. He tugs the earbuds out of Sherlock’s ears and says tersely: “I asked you to be ready to buzz the guy up; I even paid extra to have a specific fifteen-minute time slot so that you’d have plenty of time to be able to get to the door buzzer. I even gave them your phone number so they could text. We discussed this before I left.”

Sherlock looks perplexed. “I didn’t hear the phone or the doorbell. Must’ve been listening to music.”

"You're not even going to say you're sorry you forgot, like you usually do? Not even going to bother trying to come up with an excuse?"

He hates the way Sherlock is looking at him right now, pretending he doesn't understand what's got John so riled up. He doesn't look embarrassed, doesn't look apologetic. He just... fucking *sits there.*

John just loses it. “You couldn’t be *bothered, in other words, because nothing I want or need or say matters! You’re the one who decided you didn’t want to go to the party, but you won’t even listen when I ask you to do something when you decided to stay behind. Fifteen *bloody* minutes — that’s all I asked of you. It’s not like I was expecting you to sort out the order or go buy and carry the fucking food; just to *let the bugger in. You couldn’t even manage that, and I'm an idiot for ever having my hopes up you would.***

Sherlock doesn't put his earbuds back in. He seems, for lack of a better word, frozen on the spot,
waiting what John will do or say next.

John grabs his laptop out of Sherlock’s lap, slams it shut and storms back to the kitchen. He opens the dishwasher and jams his sandwich plate and glass in, then goes to the sink to clean the frying pan. He hears footsteps in the hallway, and they stop close to the kitchen, but Sherlock doesn't join him there. He must be standing in the hall, unsure of what to do. *Serves him right.*

As he scrubs viciously, John is muttering, aware that Sherlock will be able to hear him. “I have to bloody cook, wash and clean up after you, do the grocery shopping, practically wipe the bloody arse of a grown man. God, they are so right; you are one hell of a high maintenance man.”

“Who are they, and what are they saying?”

John turns the tap off and turns to see Sherlock standing at the breakfast bar.

“Just about everyone who has ever come across you.”

The temperature in the room seems to drop ten degrees.

Sherlock snaps out, “Not good enough. Be specific. If that is what you think, then have the courtesy to tell me that rather than putting words in other people’s mouths and hiding behind them.”

“Courtesy? COURTESY?! You don't have the first clue what that word means. If you did, then you might pay just the slightest bit of attention to what I ask of you. Hateful, isn't it, how other people insist you need to acknowledge their existence? Instead of a little co-operation in making your life easier, you’re moping around here like some diva, making a bloody mountain out of a molehill. I know that thing is awkward and inconvenient, but you’re not dying or in agony. So, just for once, act your bloody age and pull your weight, if that isn’t beneath you!”

Sherlock breaks eye contact by turning, then walks out of the kitchen. Because the posture that the halo vest gives him is so stiff and artificial, John can’t tell from body language what the exact reaction to his outburst is, and that fact is like a red rag to a bull.

It takes a lot to get him this angry, but when it finally happens, he wants the fight.

He steps to the doorway between the hall and the kitchen and calls after Sherlock: “That’s right. Run away,” he taunts, "pretend this isn’t happening. It’s always your reaction to criticism, isn’t it? Ignore it and hope it goes away.”

His provocation doesn't falter Sherlock's steps at all. He's still headed for the bedroom stairs.

"Don’t you dare walk away from me!” John shouts, pointing at the floor. "It’s about bloody time we had this conversation – that we have at least one conversation that I need to have, regardless of what you think is convenient or interesting!"

Sherlock steps back down from the first stair and turns slowly to face him. “You’re too angry with me right now. Whatever I say is just going to upset you even more, simply because I’m the one who is saying it.” His words are quiet, and his hand is still gripped on the recently installed rail.

“What’s that supposed to mean? Care to translate for those of us not as intellectually gifted? You think I'm being unfair or childish or irrational just because I'm fucking livid with you, when you're those things twenty-four seven? Go on, words of one syllable since that’s all you seem to think I am good for!”
Sherlock’s fingers curl more tightly around the rail and he turns to face the steps again. “I don’t want to argue with you when you are like this,” he pleads, sounding tired and defeated.

John doesn't care. “Well, I do, so we’re going to do this. This is a relationship, Sherlock, why don't you google around for what that means. It’s supposed to take two.”

He marches to the sitting room, steps around the papers and the medical journals on the floor and takes in the sight of the violin, the music stand, the piles of sheet music on top of the cabinet with the CD player in it and the no less than three used teacups scattered around various surfaces. He picks up the bow from the floor and puts it next to the violin on a low bookcase. "This place has been a mess since your accident; it's not like you're going to be playing anytime soon, but could you be bothered to put this away so no one could accidentally trip over it? No, of course the hell not."

He picks up one of the half-drunk mugs of tea Sherlock has left behind. "See? What do you think would happen to this if I wasn't here? You think it would magically vanish into thin air and plop back into the cupboard washed? I am not your housekeeper!"

He slams the mug on top of the vinyl cabinet and heads towards Sherlock. He’s so pissed off that he isn’t looking where he's walking, and catches his shin on the corner of the glass top of the coffee table. "Shit!"

He hops for a stride, then glares down at the offending furniture. “Bloody typical – even the furniture is on your side; hard and uncomfortable; suits you, it really does.”

Sherlock appears at the doorway between the hall and sitting room, looking resigned. His withdrawn calm does nothing to temper John's ire – if Sherlock cared, shouldn't he be expected to get angry in return? Typical him, just waiting for this to blow over so he can pretend nothing's wrong.

Finally, Sherlock speaks up. “Make up your mind; first you insult me by saying I’m whining and moaning about nothing at all, but now I’m cold, hard and uncaring. Which is it?”

“That’s the problem with you. Both! You’re all cold and logical when it suits you at work. The above-it-all-genius who can’t be bothered to consort with mere mortals, and then here at home you’re auditioning for a bloody Oscar for the poor-me role.”

“You already blew the competition out of the water when you got back from Afghanistan,” Sherlock says, but the venom John would have expected is lacking. He had sounded as though halfway through he had still been trying to decide if he actually wants to say such a thing.

Sherlock never pulls his punches, but John is not in the mood to try to analyse the oddity of it, when there are more pressing matters to deal with. “This isn’t about me, you fucking prick; it’s about you,” John tells him. “This is about the fact that you don’t bother to compromise at all. Everything in this flat, everything in our life, is about you. It’s like I don’t exist.” He looks around the flat. “There is nothing of me in this place, everything is covered in a mess you've made, and the one time I want to share something of my life with you, you can’t be bothered.”

“You’re still angry, then, about me not coming with you to that party – to meet people I don’t know nor ever will want to know.” It's not a question, just a statement.

The surprise finally cuts through that Sherlock’s usually sharp temperament isn't showing up at all. The realisation drains some of John's anger, but he still has some hard truths he wants to get out. “Yeah, I am. And that proves my bloody point, doesn’t it ever. I wanted you to be there, with me.
Was that so much to ask? Sometimes, just sometimes, it would be good of you to think about what I need and want rather than just what is convenient for you. No, there wasn’t a networking opportunity in sight. It wasn’t an OR performance to be written up, or an award dinner where everyone would be fawning all over you. Just a simple party for some of my old friends, but that’s obviously not good enough for you.”

Sherlock swallows. “That’s not the reason why I didn’t go.”

He looks so thoroughly and strangely defeated and even embarrassed, now, that John has to battle hard the sense that he’s being the villain here. He reminds himself that Sherlock is quite good at playing the martyr when he so chooses.

John refuses to yield to that tonight. He has the right to say his bit. He has the right to feel the way he does.

He crosses his arms. “Then, by all means, enlighten me.”

Sherlock leans his left arm against the door frame, hiding his hands behind his back. John can guess there’s some heavy nervous fidgeting going on that he wants to hide.

“You insisted we go for that walk, when I was struggling to deal with this torture. I gave in, because you really wanted to go.”

“Torture? What, the halo? For Christ’s sake, Sherlock, it’s just a frame to hold your neck stable while a small bone heals. It’s not the Iron Maiden or any of the other medieval things you’ve been calling it.”

A subtle disappointment washes over Sherlock’s features. “Maybe not to you or to other people. I’m not other people; I process sensory data differently. As you once so crudely put it, I’m disabled, remember? I spent half that walk trying not to let it all overwhelm me. I didn’t want to go to the party, because I was sure I’d embarrass us both by having a meltdown. Do you even know what that word means, John? I doubt it, because you’re normal, which you’re certainly not failing to flaunt in my face right now. You’ve never seen that happen to me, and I don’t intend to ever let you. It hasn’t happened in years, but the halo is making me constantly acknowledge that risk. You know how you adapt to and forget about a chafing label in your new shirts, a dripping faucet, a resonating hum from the air conditioning, the smell of those abhorrent vanillin-scented disposable tubes you use on the arms of infectious patients to bring out the veins? Well, I don’t.”

John recalls playfully teasing Sherlock when he’d insisted those scented tubes needed to be removed instantly from the closed cupboard in the theatre where he was doing a procedure. John had genuinely thought Sherlock was just being deliberately difficult.

A prima donna. That’s what Anderson calls Sherlock at work sometimes.

"I don't adapt to something like this," Sherlock tells him, touching his fingertips to the halo ring. "I'm constantly, painfully aware of it, and the fact that I can't even manage my regular hygiene routine because of it is certainly not making me jump at the chance to attend a party where I'm expected to be presentable and to behave myself."

'Can't you just shut up, if you have nothing nice to say to anyone?' John remembers snapping at Sherlock once when they were leaving a birthday party.

"I'm sorry I couldn't be there to fill your need for arm candy or for someone to stare down any latent homophobes among your old acquaintances. I assure you I would not have been the sort of
company yesterday your friend would have enjoyed meeting.”

Before John can even begin to protest the picture that has just been painted of him, Sherlock sticks a hand into his pocket and pulls out a blister pack, which he tosses at John. “That’s the reason why I didn’t hear the doorbell. After you left, I put earplugs in and a sleeping mask on. I took two of those and lay down on the recliner, hoping to hell that the room would stop spinning and that the synaesthesia would stop.”

John tries to catch the package, but misses. When he recovers it from the floor, he sees it contains two milligram tablets of lorazepam – a benzodiazepine used for anxiety and as a sedative premedication for surgical patients. His eyes widen in shock. “Where did you get these?”

Sherlock rolls his eyes. “Turn it over.”

The packet has been legally prescribed to Sherlock, by a doctor whose name John doesn’t recognise. He looks for the date. “But.... these are three months old?”

“Yes. I had… some problems dealing with the risks you were so happily embracing out there in Afghanistan. Insomnia eventually began to interfere with my ability to work. I don't adapt to changes in home routines easily, and you disappearing from them altogether was----” he trails out, his gaze shifting to the floor.

John turns the blister packet over in his hand again, staring incredulously at the printed text. Why is he only hearing about this now? Didn't it occur to Sherlock that this might, again, be one of those things that should be shared with a partner?

Then again, as Sherlock has just pointed out, he wasn't here. “Jesus, Sherlock. Have you been operating while on this stuff?”

Sherlock’s eyes snap up to look directly at John again. He looks insulted, now. “Of course not, you idiot. That would lose me my license. It’s all above board; Lestrade knows. The doctor he referred me to works in the Trust's vocational health unit.”

John counts the empty blisters; only four have been taken. He wonders how big the package had originally been – it could have contained several of these metal sheets.

Sherlock answers his unspoken question: "there was another sheet, an empty one. Once you were shot, well, I didn’t need the prescription anymore, did I, because nearly the worst had already happened? I needed to be there for you, so I stopped taking them.”

“Why didn’t you tell me?”

John isn't angry. He doesn't know what he is, after such a rug pull.

Sherlock had needed... this to cope in London, but he’d stopped taking them, just like that, and gone to Afghanistan at the drop of a hat? John has no idea how to negotiate that reality with what Sherlock has just shared about how his everyday life here now is so difficult, halo vest or no halo vest.

“I told Doctor Arthur, who is the only one who needed to know. She advised against taking any of them now, since they may increase the risk of a fall. Then again so do the vertigo and sensory overload associated with SPD. That's sensory processing disorder; or, as Anderson and apparently you and everyone else like to call it, being a bloody high-maintenance prima donna.” He exhales. “I hadn’t taken a single one since you’d got back, so I didn’t see the need to mention it to you. It was obvious you had enough on your mind. That you still do.”
John would prefer to forget about the couple of weeks when he’d crawled up into a whisky bottle rather than deal with what getting shot meant. He likes to think that's all sorted out now, that things are better, but Sherlock is insinuating he still has--- what?

"Why didn’t you tell me now?" John asks, because the pills and the grocery order are the only concrete thing he seems to be able to hold on to right now.

“I’d rather you thought that I was being overly dramatic than draw your attention to the fact that I am *defective.*”

“That’s not… that’s not what I think. That’s not fair. I’ve never called you that.”

John is forced to wonder how big a difference there is between *defective* and *disabled* in Sherlock's world.

Sherlock walks up to the kitchen island, retrieves the blister packet dropped there by John and slips it into his trouser pocket while retreating back to the doorway. “Life isn’t fair. If it were, then I wouldn’t have had to put up with this all my life. It's not like pneumonia; you can prescribe an antibiotic for that and be done with it; it's not cancer which other people would think you brave for enduring and where there could be a cure. It's all relative – if I was one of the lucky ones whose ASD interferes less with their life, I might never have been diagnosed.”

John knows very little about the process, since Sherlock has not shared his experiences with him. How could he be expected to empathize and understand if he doesn't know anything?

"This is *me,* neatly labelled, managed, counselled, stereotyped – until you came along, and seemed to think it wasn't all that I am,” Sherlock points out. "I can't deal with things that other people can just laugh off. You don’t know what it’s like to be me, to have these inadequacies thrown in my face by everyone. I’m not just talking about classmates or colleagues; my family, too. Mycroft never thought I'd manage a medical career, and most of our colleagues would be glad to see the back of me, regardless of my surgical skills. On a good day, it doesn't seem to bother you, having to put up with what you call sorting out my messes, but right now you have too many difficult things on your plate. I am one of those things. I can see it on your face these days.”

He turns away from John and heads towards the bedroom. “It’s one of the reasons you went to Afghanistan. To get away from the strain of living with me. Well, I won’t blame you for wanting more space now; my--- issues have never intruded on our shared life so intensely before. It’s surprising that your patience has lasted as long as it has.”

He starts climbing the stairs.

John jogs after him, grabs his shoulder – gently, this time. They stand there, halted, John staring at Sherlock's back. He lets his hand drop when he's certain Sherlock isn't about to continue his tactical retreat.

"You're wrong," John tells him. "You're putting words in *my* mouth, now. How am I supposed to react when you dump all this on me so suddenly?"

"It's been there. You just haven't looked," Sherlock mutters. "You see, but you don't observe."

John lets out an uncomfortable laugh. "Maybe we've both been a bit wrapped up in ourselves, lately?" he offers. "You, with the halo since I haven't realised how much it bothers you. Me--- well, I thought we were doing alright again, so I’m not exactly sure---" he starts backtracking, regretting that he’d insinuated they both have some significant issues to deal with.
"Yes, John, do share what it is you should be so occupied with, and how you intend to fix it, since you're the one who actually has a snowball's chance of doing so?" Sherlock does now make his way up the steps, then turns to look down at John. "Why don't you turn your scrutiny to yourself, and consider which one of us really is running from their problems? That’s right. Run away," he icily throws John's own words back, "pretend this isn’t happening. Pretend you don't have nightmares. Keep trying to convince yourself that you don't explode at the smallest provocation. Pretend that it doesn’t bother you to be being reminded that people do, in fact, get injured and ill. Explain away the panic attacks. Ignore the fact that your unhappiness with the life we share took you to Afghanistan and that you’ve only come back because you got shot. That’s why you’re really angry; you won’t ever know if this is actually something you want, or just a consolation prize.”

“Now just hold on a minute… I never said that!”

“You didn’t need to. There are many things you're not saying for reasons I can't even begin to guess at. I've lived with my problems all my life, John, and will have to until the day I die. You won't even accept yours exist.”

John is so stunned that he can only watch the bedroom door close in Sherlock's wake.

Chapter End Notes

If anybody fancies a visual aid to trying to imagine their flat, we posted a blueprint in the comments section of chapter 6.
It's a quarter past six in the morning and John is having a hurried breakfast; he'd nearly overslept after hitting the snooze button. Sherlock's night had been restless, leading to abysmal quality of sleep for both of them. After waking up, worry had washed over John before he had even left the bed; the fight last night is making him deeply uneasy about leaving the flat. Who knows what Sherlock will come up with in the strop he's bound to still be in?

After Sherlock had retreated to the bedroom last night, John had sat on the sofa for a long time with the blister packet in his hands. He had fished them out of Sherlock’s trousers, and then racked his brain trying to decide which of his complaints about the state of their relationship and Sherlock, if any, were unfair based on what he had just learned. Now, after a badly slept night, he's still angry about some of them, but most of all he feels at a loss about what to do. Staying home won't help him talk to a non-communicative Sherlock, and his mountain of paperwork is growing by the minute.

Maybe they will both benefit from a time-out, from having some time to think without the other one constantly hovering close by. The thought is uncomfortable, but it may just be what at least John needs. He wonders if he should wake Sherlock up and help him relocate to the sitting room. Then again, the new safety railing has been working well enough. Sherlock has also mastered the guidebook-advised method of pushing himself sideways up into a sitting position and out of bed, so John is actually more nervous about him getting on the bed, since he's still doing that by dropping backwards down from a sitting position. He worries that if Sherlock doesn't have the patience to carefully check that he's sitting in the right spot on the bed, he might bang the halo against the back wall or the bed frame. All in all, there are countless things that could go wrong and get him hurt.

John goes to the bedroom to grab his briefcase, lingers for a moment by the bed, then leans in to plant a kiss on Sherlock's bare shoulder.

This brings forth a sleepy hum. Slowly, lids drag open. Sherlock blinks a few times before the gaze in his blue-green eyes focuses. "What time is it?" he mutters.

"Half-past six, so I have to get going."

Sherlock yawns. John has a hard time deciding whether he looks just tired or if the resigned expression could signal something else. "Do you want to get to the sitting room before I go?"

"No."

"I've taped the safety wrench to the halo on the fridge door, so if there is an emergency, an EMT can find it. Please leave it there. Keep your phone with you in a pocket and call me or Laura if there's anything. I talked to Martha yesterday, she says she can also come over if you need any help."

Martha Hudson is the former Director of Operative Services and John's former boss. She had
retired around the time Sherlock had been recruited to King's College. In many ways, she'd been John's mentor and a mother figure to all who had trained under her. Lestrade and she keep in touch, so John had not been entirely surprised to receive an email from her two days after Sherlock’s accident, offering her sympathies for the situation and saying she'd love to help since she lived only a five-minute drive away.

John hesitates in the doorway. "Are you sure you'll be alright?" he asks Sherlock.

"I will be at home doing nothing, apparently with half of London at my beck and call. What's the worst that could happen?"

John tries to gauge in his tone how things are between them, but the confounding factor continues to be that Sherlock is not a morning person.

John leaves the flat and makes his way to the garage, thoughts still firmly anchored to Sherlock. Before the revelations of last night, John had not found it difficult at all to make generalisations about the man: *Sherlock is this, Sherlock is that, Sherlock always or Sherlock never.* Now, all those expressions make him think back to Sherlock's words about him being the only one who had seen *him* instead of his difficulties or his diagnosis. Sherlock's accusation that John doesn't understand or have enough patience to be with him seems to contradict that statement, confusing John even further. He’s damned if he does, damned if he doesn’t.

He’s not the only one, it seems. What Sherlock had said about being surprised that John has put up with him for this long speaks volumes about what he seems to believe his own life is destined to be: lonely.

John had liked to think he didn't have any problem putting up with Sherlock's.... particular habits, not even when he's under the weather. Sherlock had trusted him – and him only – to disclose some of those things right at the very start of their acquaintance; John has liked to think he had accepted them without batting an eyelid. Hasn't Sherlock changed, since they got together? Hasn't he learned lots of things about dealing with people and making an effort? At least John thinks so. So why had he kept silent about the rest of it? About things that were particularly hard about the halo? Doesn't he have the right to demand that they both make an effort in their relationship? What can he expect, and what can't he? What helps Sherlock, and what constitutes an unfair demand to pretend he is someone he's not? How can he take such things into account, if Sherlock doesn't want to talk to him about them or doesn't even know how to do so?

They had both said some horrible things last night – regrettable things thrown around in anger. Still, they've fought before and made it through; John tries to tell himself he shouldn't put too much stock on last night.

It will blow over. They're sensible people – well, sort of.

It *will* blow over.

Before starting the car, he tilts his head back and closes his eyes, frustration overflowing.

*If it doesn't blow over, what the hell should I do?*

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knows it will take for John to get down to the garage and drive away. Twelve minutes later, he
decides that the chances of him changing his mind and returning to the flat are slim – John should
now be caught in the tidal flow of London commuter traffic.

At last, it’s safe.

Sherlock had been waiting for this moment in the hope that he can finally break the runaway train
of his thoughts. All night long, they’ve been clanking along in his brain, hitting the broken rails of
his distress in an endless loop on a circle line. Round and round, he’s replayed every word, every
gesture, every emotion of their fight. There are things he should have said, things he should have
concealed, responses he could have given, steps he ought to have taken to avoid such a disastrous
confrontation. He still cringes every time the replay gets to that moment when he tells John about
the lorazepam and reveals that his ability to withstand this constant barrage of sensory information
is crumbling.

John's estimate had been right and he knows it, now – that Sherlock was never cut out to withstand
his Afghanistan deployment. That he couldn't even do that much for his partner, regardless of how
important it had been for John to be able to go. All the good work that he had done to build John’s
trust in him has been decimated in one argument. His attempts to project ability to cope with John's
absence, all his support of John’s rehabilitation after being shot in the form of not burdening his
partner with his troubles? All shot to hell by one moment of weakness.

Fights like the one last night tend to rob Sherlock of all of his sense of emotional equilibrium. He
is unbalanced, thrown off course, wandering down a dark maze. ‘Ruminative thoughts’ is what one
therapist or other at one of the Mycroft-issued rehabs had called it. It means that he repetitively
goes over thoughts and problems, twists them around, unable to decide on a course of action or an
interpretation and utterly incapable of stopping such a neurotic loop of worry. Many of those
thoughts are judgments he passes on himself. They are the fuel to the machine that drags his mood
down and raises his anxiety levels.

He should have kept the prescription secret, but it seemed unlikely that John would have stopped
yelling at him unless he revealed the truth. Sherlock had learned, before he’d even become of age,
that when it comes to others being exposed to the contents of his head, the price of understanding
is pity. He'd rather conceal things than face that reaction, especially if coming from John. He
should have just accepted the anger, let John blame him for being whatever he wants to argue
about, because it would be better than the truth about the medication and why he had needed it.

He had told Laura Arthur about the prescription, because it's never fair to force another physician
to handle a case without all the pertinent information about a patient's medical history. She had
asked about recent medications, and he had concealed nothing. Her bedside manner is professional
enough not to judge him outright for any of it; she is not like John in that respect.

Every individual surely has the right to define the parameters within which they're willing to stay in
a relationship, and John shouldn't feel compelled to stay out of pity, now. Having been pushed to
the extremes of honesty, Sherlock may have gone too far, admitting to John that the things he
found so objectionable are nothing but aspects of his brain’s wiring rather than something that
could be changed. Yesterday may well have removed the willing suspension of disbelief that had
allowed John to consider a relationship with him. This will seal, in John's eyes, the notion that
Sherlock can't cope with things John wants him to be able to handle: a normal social life; being
separated for some time; a halo vest. ‘One hell of a high maintenance man.’

John can do things to remedy his own issues, to re-adjust to his old life. He can quit and go work
somewhere else. He could reinvent himself, unencumbered by Sherlock. He can move on.
Sherlock trying to do those things would change nothing, because he will always remain who and what he is.

He checks the time on his phone: it's now eight in the morning – he has, again, fallen so deep into his own head that an hour has slipped by. Despite such a habit the hours, days and weeks ahead feel endless.

He should be looking forward to the moment when John comes home, but who knows what mood he'll be in after yesterday. *Life isn't fair*, he had told John. It's not fair, the cards he has been dealt, but dragging his mood even further down by lamenting that fact will change nothing.

Sherlock gets up warily, carefully applying the lessons he has learned about getting out of bed. He turns to his side, shoving the pillow sideways so that it's still under the halo. He bends his hips, sticks his legs out from under the duvet so that they dangle over the side of the bed. Then, he heaves himself up by shoving sideways. The worst part is always rising to his feet from a sitting position – his cramping, stiff neck muscles give him vertigo, and the weight of the halo threatens to tip him over.

Last night, he'd been forced to move to the accursed recliner early when his back had begun complaining in bed. After two hours in the sitting room, wanting to be closer to John had won over the unease over their fight, so he had made his way back to bed again. He had to admit defeat again two hours later and retreat back to the living room because there didn't seem to be any position in which he could relax. After staring out of the balcony windows for another two hours, it was back to the bedroom again. He can't have slept for more than an hour before the alarm clock and John crawling out of bed had roused him. He hopes that John might have slept through his nocturnal vacillation; he needs the man to go to work today and stay there so that he could get some breathing space.

On his feet now, he angrily fixes his gaze on a spot on the opposite wall to force his balance to readjust to the halo. He's actually glad for the distraction of the physical demands right now; at least it's a welcome relief from the drumbeat of defeat in his head.

He has no socks on, and John had told him off about wearing slippers, so the tiled bathroom floor feels punishingly cold. Not even urinating works the way it's supposed to – not being able to look down while doing it is disconcerting. John had just laughed when he'd complained a few days ago that he can't even see his own cock properly for twelve weeks.

He washes his hands and surveys the wreckage in the mirror. Trying to ignore the metal bars, he focuses on the sallow skin, the stubble, the bags under his eyes. The disaster area of his hair is just beyond hope. His nose can detect the tell-tale aroma of bromhidrosis, osmidrosis, or ozochrotia; it doesn't matter what he calls it because they all mean the same disgusting thing: the bacteria that live on his skin are having a field day in the micro-climate under the vest. Sweat from his nighttime wrestling with anxiety has been converted to acids that make his nose wrinkle in disgust. Baby wipes clean skin to some degree but they cannot remove the stink that is now impregnating the woollen lining of the vest.

*Eleven more weeks.* He cannot conceive of how rank and foul he will feel by then. Would John want to go mingle at a cocktail party feeling like this? Sherlock thinks not.

By the time he makes it into the kitchen, Sherlock admits to himself that his state of mind is more than a bit not good. Staring at the wrench taped to the fridge door makes him wish that he could shed his mood as easily as he could the halo. Not that he will use the wrench. To do so now would be to admit that he is incapable of withstanding something that had been dismissed by John as *'just a wire frame to support your neck'*. Shedding the shame of that failure would be a feat much harder
than unscrewing the bolts.

For years, he had stumbled around in the dark of his own head. It had been a year before applying to medical school that he went out of his way to start learning more about what the hell his brain was doing that was obviously different to how other people functioned. He’s never really told anyone that his own peculiar brain is the reason why neuroscience had caught his attention. Terms such as Asperger's syndrome, Autism spectrum, Development difficulties or Addiction had been thrown around all his life, but they explain very little on their own even after he had academically begun to explore their meaning.

After discovering the neurosciences, the bigger picture of medicine began to interest him. He had always assumed he would be headed for a career in natural sciences, and he had repeatedly been counselled against even considering becoming a doctor. But, after a lifetime of channelling his excess energy into building things and experimenting on them, he discovered the worlds of medical engineering and neurosurgery and it had all clicked. It had consoled him – and still does – the thought of being able to take a scalpel and heal and repair a brain, even if he cannot do the same to his own which has been deemed defective by the rest of humanity. Choosing surgery also solved some problems he would have faced in a more conservative field of medicine: his struggles in interacting with patients. In the OR, he works with a team with well-defined roles and tasks instead of having to deal with legions of patient appointments. He does have his outpatient clinic – bringing in a steady stream of complaints about his bedside manner – but at least people expect less of a touchy-feely approach from a surgeon than they do from, say, a paediatrician or a neurologist.

His stubbornness at battling his way through medical training instead of heading for a more research-oriented career or sticking to the pure natural sciences had, in part, been an act of bravado. Most of all, it had been a two-fingered salute to Mycroft, who never failed to broadcast his opinion that Sherlock wasn’t suited for medical work ("too much contact with people, Sherlock – you know, those idiots you can’t stand being around"). Even his parents seemed to just be waiting for him to realise he was beating his head against a wall. To their open astonishment, he somehow muddled through the first years after medical college, spending as much time finding his foothold in research as possible. It was easier to have his shortcomings ignored when he could flaunt an already stellar track record in academia.

Perhaps the biggest surprise was that he turned out to be quite good at dealing with children. They are honest, direct and do not care for social conventions; all these are things Sherlock can relate to. He doesn't talk to them as though they are idiots, because he had hated being talked down to as a child. He talks to them, not their idiot parents. Children have a very open and curious approach to subjects such as death, which he finds delightfully rational as compared to adult laypersons' desire to hide such things away because they make them feel uncomfortable.

The first, tedious years of post-graduation NHS servitude went by quickly. Short placements ensured that any arising interpersonal conflicts would not be long-lived. And, once Sherlock was accepted into neurosurgical training proper, things improved. Patients on the table did not talk back; he was in control. All his peers hated him, but at least they envied him, too. His eidetic memory made it easy to memorise all the pertinent theory about effective management of urgent scenarios, and he found he enjoyed the high-risk, high-stakes environment of acute neurosurgery as well as the finesse required by long, demanding elective cases. Dexterity and outstanding fine motor control aided by years of meticulous violin practice finalised the package when it came to securing specialty training.

Still, there were always those opposed to his career choice, even if his family's opinion had been changed. Plenty of professors at medical school had felt that he was ill-equipped for the career of a
doctor, but he had defenders, too, prominent figures who saw his outstanding academic aptitude and his raw surgical talent. Those people believed that the medical community cannot afford to let him fall by the wayside, as one of them had put it.

Still, John has been the first one who has believed in him not because of his potential as a physician, but in other things – in things that could make him happy instead of just successful. Things that he could learn to get by with people and not just the science. Those who had supported him during his time as a medical student and as a registrar had merely helped him circumnavigate the demands for social skills; John had been the first one who had real faith in him being able to deal with such things. No one had believed in him in quite the same way that John had, and that faith has made his interactions with other people much less stressful and he is now treated quite amicably at the hospital. He likes working at King's College, largely because of what he calls The John Effect. Everyone likes John, so they're willing to give Sherlock a bit more benefit of the doubt. He likes to think John has taught him quite a bit about avoiding conflicts, but if the man is removed from the picture, Sherlock is convinced he'll eventually slip back into being the loner who is merely tolerated and never liked.

On Saturday, he had accused John of doing dangerous things without considering their potential consequences. Maybe a relationship with him is such a thing, too, and entirely in-character for John who thought going to war twice is a good idea.

The situation is as dire as it is acute: if he fails to keep his relationship with John then he knows that there will never, ever be a way to recover. He will never meet someone like John again – it must be a mathematical impossibility. He should be doing something to fix things; this is not going to go away. A flailing sense of urgency is somewhere in the back of his mind, if only he could come up with a plan and the initiative to execute it.

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It doesn't surprise John that his email box is overflowing, and the latest message is from the IT department warning him about his disk space being nearly full. It's already noon, and he has done little else than answered the phone and tried to clear his inbox. Taking five days off had really stacked up the paperwork, but at least Greg had done an admirable job getting the NHS folks off their back. The audit report will come in within a month, announcing whether the Trust retains its highest star status. Four people had called him first thing in the morning, wanting to see him as soon as possible, their issues ranging from a cardiologist losing patient with a patient who is demanding magnetic field-free ward placement to three out of four gastro-surgical registrars wanting to apply for less-than-full-time-work and an OR surgical lamp breaking down and causing a short in the wiring. From the sublime to the ridiculous; it’s all here at the hospital.

This is a battlefield, too, of sorts. John won't get shot, but he will get shouted at, accosted in the hallway, his lunches and coffee breaks always interrupted by phone calls, texts and emails. Today, he feels even more overwhelmed and distracted than usual but knows that this will pass once he's surveyed all the tasks he has and manages to make a plan on when to address them. Triage skills work in management just as well as they do in a trauma room.

There's a knock at the door, and Laura Arthur pops her head into his office. She tosses John a granola bar. "You looked like you haven't had any breaks today."

"Thanks," John says and cards his fingers through his hair, realising he needs a haircut on top of everything else. "Damned GE rep is on holidays so we're not getting the spare part for the table in
trauma theatre four anytime soon."

"Thom will be furious," Laura sighs. "He's already letting the nurses hear it about the replacement theatre being too small." Thom Carlson, head of orthopaedics, would probably be voted by OR staff as the second-worst prima donna of a surgeon in the hospital. As for the worst, well....

"Isn't it great to be back?" Laura chuckles with a knowing grin. "How is the patient doing?"

"Exactly as you'd imagine."

"I have a trainee appraisal at two in the afternoon, then I'm heading across town again and I thought I might sort Sherlock's tightening out en route."

John looks up from the screen. Five new emails have arrived in the last ten minutes, but at least two of them are junk mail. "$That'd be great, thanks."

"I'll leave you to it," Laura says and disappears down the hall.

Before John realises, another hour has gone past with his head buried in work that has sat undone since last week. He stretches his neck by lolling his head to both sides, then yawns. He's not getting enough sleep, but there's probably little he can do about that.

He wonders if Sherlock had fallen asleep again after he'd left for work. John thinks he should text him to make sure he's doing alright, but suddenly he's second-guessing everything he does or doesn't do against the backdrop of their conversation yesterday. What does Sherlock want from him right now? It's obvious he'd appreciate acknowledgement of his difficulties with the halo, but he had also made it perfectly clear he has never enjoyed the mollycoddling and management he has been subjected to because of his autism.

No wonder Sherlock keeps all that secret. It does affect what people think about and react to him. After all, after last night's shock therapy, it's certainly making John re-evaluate most of what he knows about his partner.

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It's one in the afternoon, and Sherlock is back in bed. What would change, if he stayed up? Nothing beckons, nothing breaks the train of his recurring thoughts whether he is in the recliner or in the bedroom. Sleep is impossible in either place.

He still feels exposed, flayed open by last night's row with John. He had practically vivisected himself in front of the man, spread out for him to see all the things he hoped would not matter when it came to the two of them, but John had forced his hand. Fear of the consequences of his revelations yesterday is paralysing him, and despite thinking of little else all morning, he still has no plan how to remedy things.

A week ago, Sherlock hadn't even wanted John to find out about the fall that had broken his neck, mostly because a thing John had said to him some time ago was burning on his mind: 'If you did something idiotic like that – put yourself in danger, I'd be so fucking mad'. Laura had relented when Sherlock had told her that there was no need to summon his partner, but apparently that Trinidadian oaf had felt differently and took matters into his own hands.

When his phone beside the bed rings, it confuses Sherlock at first. John would text, and his texts have been assigned their own signal tone – the opening bars of Elgar's Salut D'Amour. Sherlock is tempted to ignore the incessant noise, but then it to him that it might be someone else calling about
John. Perhaps he’s had another incident at work – something that has triggered another panic attack. He’s been so on edge, and yesterday’s argument might just have tipped the balance. Sherlock will take the responsibility; it’s his fault if such a thing has happened.

He fumbles blindly for the phone, and manages to bring it to eye-level: unknown number, visible on the screen. If someone from the hospital calls, the number tends to be suspended, only announcing itself as unknown caller.

Oh, sod it. It's not like he has better things to do. “Hello?”

“Mister Holmes? Oh, I am so glad to have reached you instead of your voice mail service. It’s Jay Gorman here, and I have good news about the cabinets you ordered from us. They’re finally ready and I can install them this week. When would be suitable for you?”

Sherlock is startled right out of his reverie. Due to everything that has happened, he has managed to forget the order he’d placed all those months ago – back when John had only been gone for a couple of weeks. Sherlock had wanted to surprise him by making some changes in the flat with the aim of making it more of a home that John would appreciate – a worthy welcome gift for his Captain Watson. It had given him something to do during the first week of their separation besides sitting alone at home, worrying.

An idea is now forming in Sherlock's head, sweeping away the debris of the argument. He grabs it like a lifeline and answers with a new-found certainty: "Thursday. First thing, and it has to be done within the day."

By three in the afternoon, the surge of energy brought by Sherlock’s idea fizzles out, and he forces himself to open the fridge. Nothing there entices; most of the offerings only bring about a vague sense of nausea. Maybe he has somehow inadvertently managed to condition himself to hate food, since eating feels neither good nor easy with the halo.

The buzzer to the building's front door goes off, and Sherlock starts the walk to the door to use the unlock button, but he turns too quickly by the fridge and is hit by a sudden vertigo that forces him to grip the edge of the sink for stability. His palm trailing against the hallway wall, he manages to grunt himself to the door, press the buzzer and unlock the door to their apartment and then return to the kitchen and slump down on one of the hard-backed chairs. He wants to lie down, but since there's a visitor it's not an option.

Laura Arthur had texted him earlier, saying she'd come by to do the next tightening. Just what I need, Sherlock thinks with an eye roll nobody is even witnessing, and leans his bicep against the kitchen island.

Soon, he hears hesitant steps at the door, then it closes. Judging by the sound, Laura next hangs up her coat. She joins him in the kitchen and spends a silent moment taking in the sight of the halo guidebooks strewn about, Sherlock's breakfast sitting uneaten at the kitchen table and the sight of the man himself wearing an oversize T-shirt, the lower half of ratty, old pyjamas and a dressing gown without a sash. "I left John buried under a mound of paperwork."

"A week's absence in his position must be disastrous." Sherlock closes his eyes for a moment when black dots threaten to take over his visual field. Cold sweat has kicked in.
"You look pale."

He feels pale. And tired. And thoroughly, miserably pathetic. Maybe his plan will be for nought. Maybe John won't even like it. Maybe he shouldn't even try. He's useless in this state, but there will be things he'll need to do – finishing touches to the whole thing – but how will he manage those when he can hardly even stand up.

Laura spots the wrench taped to the fridge and smiles. “Good idea; EMTs are trained to look at the fridge for notifications about medicines and DNRs. She gives Sherlock a smile which he doesn't return, and something about his expression makes her get closer. Soon, she is frowning, pushing him against the chair back by his shoulder so that she can see his face better. Sherlock expects her scrutiny to feel intrusive and disturbing, but it doesn't. Truth be told, it's a relief to have someone else in the flat with him. Disgustingly comforting, even.

"Have you been up at all today? Rest is great, but if you feel the way you look, we have to make sure there isn't anything worrying going on, such as an infection."

"I am up. Simply got a bit dizzy while answering the door." He wraps the dressing gown tighter around himself. "Just get it over with." He doesn't want her to fuss, doesn't want her to make a big thing out of nothing. Normal people who get halos would have accustomed to it by now. This is just... him.

"Are you alright being on your own? Should I call John?"

"No!" Over his dead body will he allow John to be inconvenienced more than he already has. The events of the weekend had made it perfectly clear how much he detests this whole thing. Sherlock swallows, and even if it's just saliva it feels like a golf ball. "I'll be fine once I've had some lunch."

Laura checks her sports watch. "Lunch? It's four thirty." Her mouth tightens, but not into anything signalling annoyance. Instead, it's apprehension and worry mixed into one.

She grabs one of the barstools and sits next to him. "What the hell am I going to do with you? At some point, you'll have to accept that you can't do this alone. It's fine to need some help, and it's fine to admit you're having a bad day. You should especially be talking to John---"

"I keep him up to date."

"I don't pretend to know anything about the two of you, but you need to be talking to someone if you're not feeling well. John has my number, but I'm putting it up on the fridge." She digs out a stack of post-it notes and a pen from her handbag. "If there's anything you want to ask, anything that's worrying you, call me. You don't have to go through John, or think that you have to know everything yourself. Not your specialty," she reminds him and slaps the green post-it on the fridge door.

"Don't lecture me."

"I wish someone had lectured me a few years ago when I thought I could first ignore and then sort out a pneumonia myself. Ended up at a ward with a bloody oxygen mask. It's not just a stereotype that doctors are the worst patients of all."

Sherlock is suddenly reminded of John at Bastion, telling his PT flat-out to fuck off and watching him down his oxycodone pills with whiskey at home. John had certainly not been an obedient, docile patient but surely, he'd had more reason to grieve and act up than Sherlock does right now? John isn't bothered by the sorts of small things that Sherlock is, since his injury had been very
painful and caused a significant loss of motor function. Sherlock is expected to make a full recovery and, as John would point out, all Sherlock can't do is move his head.

Listening to a colleague trying to validate his defectiveness isn't helping at all. Sherlock sits up by straightening his lower back, since the rest of his torso is already being forced up ramrod straight by the vest. He hopes Laura will think of it as an invitation to do the tightening and to leave him be.

Not that he really wants her to leave. Right now, her presence feels much less guilt-inducing and unsettling than John's. Sherlock would simply prefer for the interrogation and mollycoddling to cease.

Laura stands up and peers into Sherlock's full mug of coffee gone cold at the breakfast bar, made by John this morning. Perhaps she can somehow guess that he hasn't had anything else to drink today, either. She starts rummaging around the kitchen cabinets. "Where do you keep the tea?"

"PG Tips one cabinet to the right, loose leaf in the corner one." Sherlock watches her go through the motions: putting the kettle on, dropping teabags and spoons into mugs, snatching a straw from the plastic container John has put on the window sill.

His eyes flit to the wall clock. "It's nearly five p.m. Aren't you on child pickup duty?" While he doesn't put much effort into learning the minutiae of his colleagues' lives, he had once heard her making a call to her husband from A&E explaining that he had to go pick up their children from nursery since they were short-staffed and there was a pile-up from where several critically injured patients were expected to arrive at King's at any minute.

She deposits a steaming mug in front of Sherlock. "I have an alumni board meeting at Imperial College at six so no. Theo's taking the girls swimming." She sips her tea while standing by the stove, then digs out her halo wrench from her purse.

It's probably just a placebo effect, but the warm liquid does improve how Sherlock feels. Laura sets to work tightening the pins, and against his expectations it doesn't worsen his nausea. Sitting down has stopped the vertigo, and the headache is mild enough that it could be sorted with paracetamol. Laura watches appreciatively when he opens the junk drawer in the kitchen island and retrieves a bottle of Panadol.

After downing the last of her tea, Laura surveys the pins sites and does the already familiar check-up under Sherlock's vest with her flashlight. "Your shoulders look better. Pin-wise, I think we could get away with not doing a tightening before your appointment on Friday, assuming you skip acrobatics. Did John clean the pins this morning?"

He hadn't, probably because he'd snoozed his alarm clock three times which had resulted in a hurried morning routine. It's just as well, because Sherlock had fully intended to take over doing so anyway. Sherlock had meant to do it before the orthopaedist was due to arrive, but he'd forgot. "It's sorted."

"I could do it now so you could skip this evening?" Laura suggests.

If she does it, John will think Sherlock has been complaining to her about him not doing what he's supposed to. "No, John will see to it," he insists.

He should message John, tell him he can manage the cleaning. He's a surgeon, for God's sake, not an invalid!
"Alright. I'll let you get some rest."

He doesn't want rest, he wants the halo off and to go back to work. He wants the accident never to have happened, the fight with John never to have occurred. He wants things to be the way they were before John went to Afghanistan.

He expects Laura to leave, but she lingers by the entryway to kitchen.

"You can talk to him about this, can't you? About how much this is stressing you out? If I can see it then he can, too, I'm sure," she suggests.

There's nothing he could say that she would probably believe, now that she has convinced herself something is wrong. "John is---"

"Sherlock, this is about you, not him. You're allowed to feel rubbish and to say so out loud. You're not on sick leave for nothing."

"You're creating an issue where there is none. All your imbecilic guidebooks say that mood issues are to be expected, as is exhaustion."

"Knowing that doesn't fix it."

Sherlock snorts derisively. "There's no fixing me. If you have any sense of self-preservation, you'll stick to bones and screws. John would be the first to tell you how little good will come out of poking your nose into anything else."

She hides it well, but the hostility surprises her. "I'll see you on Friday, then. Don't get into trouble."

Sherlock sighs, but makes the effort of walking her to the door. He knows it must seem ungrateful to dismiss her attempts at helping since she is already being extraordinarily accommodating by making house calls, but Sherlock can't muster up the energy to care what she thinks of him. What's one more staff member at King's who'd prefer not to deal with him?

He doubts anyone is really on his side except for John and Lestrade, and not even their support should be taken for granted.

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Late in the afternoon, John's presence is expected at the neurosurgery and ORL clinics' joint M&M meeting.

There aren't too many cases to discuss, so after the proceedings Lestrade steals him away for coffee on the helicopter landing site on top of the building. Their cups cool down fast, and it soon becomes evident that Greg had chosen the spot so he could smoke. "Don't want the juniors to see."

"Believe me: they know," John replies dryly. "Have you noticed how nosy they are about us? They think that sort of knowledge is going to help them forward after they reach consultancy. They've been watching too many TV soap operas where healthcare staff do little else than sleep around with each other."

"Information as currency. This Generation X or whatever makes me lose hope."
"Don't you just hate those bright young things?" John jokes. "It's easy to forget we were once like them."

Greg gives him a dirty look and he chuckles.

They sip their coffees, watching the traffic down below. John wonders if this would be a good time to address the fact that Sherlock had talked to Greg when he'd been in Afghanistan. Should he thank the man? He really doesn't want to remind Greg about the Saturday morning he'd come to their flat and told John off, so maybe it's best he lets it slide. Sherlock had turned to him in confidence, and John is forced to admit that the notion grates on him a little. He's the one Sherlock should be telling these things, and their fight last night was excellent proof on what happens when things are allowed to fester.

Lestrade glances at his watch. "Shouldn't you be heading out?"

"It's only four p.m. Sherlock will be fine for a few hours more."

The surgeon frowns, stumping his cigarette into the wall of an aluminium air vent. "Didn't you have your appointment today?"

John is utterly confused for a moment, until the fact that it's Greg asking connects with a vague memory in his head. He nearly drops his phone digging it out of his pocket.

Shit.

Greg had sat right there, that Saturday morning, when he'd made the call to schedule an appointment with the army-recommended psychiatrist.

John checks his calendar, and is relieved to see that Greg has remembered the date wrong. "I thought so. It's tomorrow, not today. I booked it before all this happened with Sherlock's neck. I should cancel, really," John says, buttoning up his suit jacket since the brisk wind is flapping his lapels around.

"Well, it's a bit late for that. They'll charge you full price," Greg points out, sounding like it isn't the real reason John should keep the booking.

"I think they'll understand when I explain that things have been a bit messy lately."

"Or, they will put two and two together and realise you just don't want to go there."

John nearly snaps at the man that it's none of his business, but he owes Lestrade more than that. "It doesn't feel right to go tomorrow, to focus on me like that right now."

"There's never going to be a good time. The more time passes, the better you'll get at pretending nothing's wrong," Greg says bluntly. On the Saturday morning when he'd come for a visit, he had shared with John his own story of getting into a car accident after medical college and having to fear never being able to pursue a surgical career. He'd been drinking, and well on his way to getting addicted to codeine, and – in his words – hell-bent on convincing everyone that there was nothing wrong with him even when his attempts to do so were the very things raising all the alarm bells. 'Not getting help earlier cost me a relationship and nearly my career,' Greg had told John that day; 'people who get into extraordinarily stressful situations and need help to cope afterwards aren't weak. What they are is an idiot if they keep on pretending they can fix everything themselves even when things are already going to hell.'

John doesn't think he and Sherlock are doing quite that badly; surely this could still just be a hitch
brought on by the halo? Of course, John isn't delighted by having such a constant reminder that people can quite easily get hurt after being injured recently himself. Of course, it'll take him time to adjust back to civilian life.

He hadn't needed a bloody psychiatrist the last time he came home from Afghanistan, had he? He'd been fine.

"If His Royal Highness is being his usual charming self, I'd say you need more backup than ever," Greg suggests. "What's the worst that could happen, if you just go check out if those appointments could be useful? It can't hurt," he promises.

The hard sell and the optimistic tone are beginning to annoy John. "I'm sorry Sherlock dragged you into a private matter when things were much fresher. Everything has been better, lately. I'm really not sure I need that appointment, now." John tells him, squinting in the bright light as the sun slipped out from behind the cloud cover and sipping his coffee. He's already had six cups today, which isn't doing his stomach acids any favour.

It would be easy to convince himself that he doesn't need a psychiatrist, if it wasn't for Sherlock's stinging accusation from last night – that he runs away from his problems. What problem is there to solve, exactly? He survived, he came home. He's got a job, a relationship, a roof over his head. Admittedly, his mood had been low for a while, but now he has put all that behind him. What else can he do than to simply let time pass? It's not surprising that Sherlock doesn't have the patience for such an approach.

"Well, at least go once to prove that you don't need it," Greg suggests.

"Prove it to whom?"

"Yourself," Greg says plainly.

"Bloody busybody," John jibes him, only half-joking. What right did Sherlock have to drag a senior colleague into this in the first place?

"I think it'll also put Sherlock at ease if you go at least once."

"Here we go again; everyone thinks the purpose of my life is to ease the way for him."

"I've never seen him like that before, John. He was really worried about you, and I was worried, too, after what you said---"

"I know what I said." He'd had four whiskies under his belt when Greg had visited, but John is pretty sure he remembers the entire conversation. Things are most certainly not that bad anymore but sometimes, John can't help wondering why he should bother with anything. When work makes him feel old and stale and things aren't much better at home, what the hell does he have to motivate him?

He's grateful for Greg for not being shocked, for not calling in some psych crisis team. Instead, he had helped John save face but telling him simply that he was being a selfish arsehole who should stop drowning himself in scotch and continue physical therapy and to return to work. Somehow, those harsh words had made John feel like less like a fuck-up, because they contained the assumption that he was perfectly capable of picking himself up, dusting himself off and getting the hell on with it.

Still, those words hadn't changed anything concrete. Maybe he had gotten back on track with his recovery just because he wanted to avoid having more embarrassing conversations. Thank God
Sherlock has not initiated any more of those since the one they'd had after Greg's visit.

John knows that Sherlock is not really one of his problems per se, but he's somehow permanently attached to each and every one of them. Talking to some psychiatrist will likely do little to fix that.

"Can't be easy, trying to keep him happy while he's got that thing on."

Happy? What a joke. Does he even know how to do that anymore, to make either of them happy? And is it really always his job, and his job alone?

Yes, John decides – he should attend one appointment, if only to prove to Sherlock that what he'd said isn't true. That he doesn't run from his problems – that it's Sherlock who refuses to face how others feel about his behaviour, and who doesn't understand that some things should be left well enough alone.

John digs out his phone and skims the entry on the calendar about his appointment. It had been created automatically by the electronic reservation system the one-doctor-practice is using. There's a link to the clinic website, and John taps on it. The details of the only psychiatrist working there appear on screen:

*Dr Molly Hooper; MA (Oxon), MSc, MB, BCh, FRCPsych.*

To hell with it, John decides. *It won't kill me, and it might just shut other people up about things that aren't their business.*

Chapter End Notes

Could the comments section be more epic? (<=rhetorical question)

It bears repeating that we love this fandom.
As he watches Sherlock struggle with his trousers on Tuesday morning, John realises that he really hasn’t appreciated how much spinal mobility even putting on just pants requires.

Sherlock had grumbled about being cold while still buried under the duvet despite having slept in one of John's old, oversized T-shirts, so John digs around his dresser and finds a worn, old jumper baggy enough that it fits over the vest. The stretched sleeves of the jumper reach well below Sherlock's fingertips when he drops his hands. John stifles a chuckle, because his partner looks so forlornly put-upon, standing sideways to John in front of the wardrobe John's hand-me-downs and trying to keep the sleeves out of the way as he rummages around a shelf for socks. Sherlock had once remarked that he likes clothes with a very snug fit because fabric moving and brushing up against his skin is highly distracting; he must be hating his new utilitarian, loose-fitting style with a vengeance.

John is tempted to give him a playful pat on the bum to lighten the mood but refrains – what if that were to dip his balance? He offers an arm instead, and after some timid hesitation Sherlock grips it tightly, pressing it between his side and his own arm as they make their way to the kitchen. John has noticed that he's more unsteady on his feet in the mornings; by the evening, he manages stairs much better.

While John makes coffee, Sherlock keeps a constant refrain going about how cold his neck is. John pops to the foyer, grabs one of Sherlock's cashmere scarves and threads it through the halo bars.

"You can scrum the ends up in the back; it'll create a sort of cushion similar to that towel you’ve been using when you lean back against the headboard in bed."

Sherlock waves off an offer of breakfast but does accept a cup of coffee. He perches his laptop on his music stand in the sitting room and starts cleaning up his ever-overflowing email box. His patient load has naturally been re-assigned, but there is still some annual bureaucratic paperwork he needs to turn in, and there's always the burden of his numerous research projects to keep up with.

John drinks two cups while – yet again – considering cancelling his psychiatrist appointment on the pretence that he doesn't want to leave Sherlock alone for any longer than what work requires. Halo vest or no halo vest, he might have ended up not going anyway, citing an extremely busy administrative schedule. It's just that Greg seems to have decided to make damned sure he goes at least once.

It's hard to shake the notion that seeing a psychiatrist would be overkill, especially if this ends up being just a jump-through-hoops thing to prove that John is fine. He wants to believe that the fight they’d had on Sunday could still be due to an adjustment period to their predicament. Besides, Sherlock seems to have put it behind him, or has decided to pretend it never happened, judging by how yesterday evening had gone. After John had returned home they had watched TV, eaten dinner, gone to bed. Nothing out of the ordinary. Sherlock had acted quite normal last night, if a little distant.

John would very much like to follow suit in forgetting that the row never happened, but Sherlock’s words about him running from his problems still stings. John may be willing to admit that one thing might warrant an outsider's opinion: he'd had an... incident at work during the week before Sherlock’s accident. A sudden bang created by an instrument tray falling on the floor had startled
him and triggered some sort of a panic attack. He doesn't like calling it as such, but there doesn't seem to be a better term for it. All he knows is that he'd felt an irresistible impulse to flee, his hands had been shaking and his heart pounding so hard it had felt as if it was about to leap out of his chest. The operation had been well underway, so he was able to exit the theatre and retreat to the men's room.

A scrub nurse on break, one John has known for years, had seen him in the hall, and apparently she'd been worried enough to seek out Sherlock who had been on the OR floor but not currently scrubbed in. Sherlock had barged into the room, locked the door behind him and then somehow talked John into getting his breathing back under control and his heart rate back down to something approaching normal. He hadn't said anything about the incident itself, hadn't addressed John directly, hadn't even asked him a single question; he had simply hopped onto the counter and yammered on about his plans for his afternoon case. John is sure he had realised what had been going on, and decided that distraction was the best tactic.

Thinking back to what had happened, he vacillates between being grateful for Sherlock's presence and being deeply embarrassed by it all. They never spoke about it – until the row two days ago. He has wondered if there a big difference between what he'd experienced and what Sherlock had alluded to during their argument – the 'meltdown' he is terrified of suffering again. The fear, the sense of losing control of himself and an overwhelming feeling of impending disaster is something he really doesn't want to experience again. It had been very similar to the fragmented memories he has of the moments following the piercing pain of the bullet hitting his shoulder.

Where is the line between the normal aftermath of experiencing something as intense as being injured in a war zone, and getting traumatised by such an experience? Not all people who have gone through what he has end up hiding in bathrooms at work, do they?

**Why me?**

Sherlock had listed some other things during their fight as well. The nightmares John keeps having are, admittedly, intrusive, and he can’t really deny that there are strange, sudden associations which make him suddenly remember things about Afghanistan. A good example is an ABBA song that had been playing from a scratchy cassette in the car when their envoy had been hit: it can now easily become an irritating earworm that puts him on edge. Another example is that the smell of cauterised skin has started to make him nauseous and uneasy in the OR – it has never bothered him before.

At Bastion, everything had seemed so precise and organised in his head – the memories a film he could rewind in his mind’s eye to watch the IED & ambush scene unfold over and over and over again. Now, at home, many of the recollections have gained a distorted, dream-like tint, and he finds himself intensely trying to avoid being reminded of any of it. For the most part, he is able to keep those recollections at bay when he’s busy at work, but during evenings and weekends – especially when Sherlock had been out of the house – he finds himself dwelling on disturbing details and what-ifs. The whisky had been good in stopping that vicious circle, but only if he drank enough to stop caring, enough to pass out on the sofa. It dulled the edges of those memories and helped him sleep, but it also kept dragging his mood down. Eventually, it began making everything worse, and John is glad that Greg’s stern words had made him reconsider if drowning himself in a bottle so that he could get at least some peace and quiet from his own head was a viable long-term plan. Won’t talking about all these pointless things of the past just remind him of them more, practically ensuring that these things continue to happen? Nobody likes having their nose ground in their darker moments and stupid decisions. He knows he had made Sherlock worried with some of his behaviour, but he wants to believe it's best for the both of them to just forget and move on.

Sherlock seems to be perfectly capable of doing so; John knows it's him who's stuck. He needs to
get past all that, if only to be able to focus on what Sherlock will be going through over the next three months. It’s going to take a lot to keep him in that vest, and then there will be physio and a slow return to work. If surgery becomes necessary, then the timetable will extend even more.

The thought of juggling all that and his work and being on call and being in charge of every aspect of their home life makes him want to pour himself a stiff drink, but he can't. He needs to be the sensible and responsible one, even though he feels completely overwhelmed with frustration. Against the backdrop of all the balls he needs to be juggling, the thought of seeing a psychiatrist feels selfish and attention-seeking. The more time passes, the thicker a cushion it will become between him and Afghanistan.

On the other hand, Greg will ask him about it and he doesn't want to lie. And, he doesn't want to prove Sherlock's point.

He will go see this Molly Hooper once. If she happens to have some practical advice on how to stop himself from overreacting when something reminds him of Afghanistan, then good. If not, then they shall come to an agreement that he doesn't really need a mental health intervention. Everyone will be happy that he's done what’s necessary to tick off that particular box.

He texts Sherlock:

13:05 Is it alright if I stay in a bit past office hours?

John doesn't want to state where he's going, although Sherlock snoops on his calendar all the time and has probably spotted the pertinent entry ages ago. It wouldn't require a private detective to google the address he'd put in the notes section of the calendar entry and put two and two together.

13:12 Bring home some printer paper. We’ve run out, Sherlock replies.

John refrains from asking whether there's any food he'd prefer for dinner. He’ll pick something simple up from wherever he'll end up getting the printer paper Sherlock apparently needs. John makes a mental note to pick up some calcium supplements as well; the MRI done just before Sherlock's vest was installed had not shown any signs of osteoporosis, but it probably won't hurt to play it safe with the building blocks needed for the tiny bit of bone floating loose bridging itself back to mainland. Sherlock will probably argue that the merits of mineral supplements are not very strongly proven by research but they can't hurt, can they? Wouldn't they want to maximise the chances of the fracture healing quickly?

Most likely, Sherlock will dismiss this attempt at helping like he has dismissed everything else, but at least it will make John feel like he has put in the effort.

-o-0-o-0-0-o-0-o-0-o-

The psychiatrist's office is exactly what John had expected: pastel colours, bland art, uncomfortable chairs in the waiting room. There is no receptionist, since a separate secretarial service handles appointment reservations by phone. A sign instructs patients to have a seat and wait to be called. The hallway is empty; John wonders if the psychiatrist had reserved the slot before his for lunch.

He runs himself a plastic cup of water from a fountain, sits down, then gets back up again. If this is a formality, why is he getting nervous again? Why does he already feel scrutinised and chastised –
as though being here is a punishment? After walking the length of the hallway to hang up his coat in the rack near the entrance, he forces himself to sit back down. He grabs an issue of Men's Health from the table and tries to distract himself with an article bearing the title *Want a Better Night's Sleep? Sex Before Bed May Be the Answer*. That is certainly true for Sherlock, but probably less so when he's got his head screwed into a metal frame.

John is startled when he hears the door open and his name being called. Bouncing up from his chair, he quickly and sternly reminds himself that this will most likely just be a formality. He'll jump through the hoops, tick the boxes and be on his way. It's his choice, coming here, and he's a free man to walk out if this is useless and intrusive.

Standing in the doorway, is a woman slightly shorter than John. Her long, brown hair is arranged into a neat ponytail, and she's wearing a form-fitting floral cardigan and black trousers paired with a pair of ballet flats. She looks young, and her smile is infectious.

She extends her hand. "John, hello. Nice to meet you."

Her fierce grip is a surprise.

"Hello, Doctor Hooper."

"Call me Molly, please. Colleagues and all." She steps aside from the door and nods towards the middle of the appointment room. "Have a seat."

Apart from the handshake, she isn't at all what John would have expected from an army-appointed therapist. Mousy is the word that comes to mind, looking at her. Could she be an inexperienced, recent graduate who couldn't get work elsewhere? Then again, Harley Street is expensive and prestigious to practice in. He'd googled her, of course, but very few search results had come up. Maybe she gets enough patients referred to her by the armed services that she doesn't see a lot of civilians who would comment on her online.

He parks himself in an armchair, and Doctor Hooper – *Molly* – takes a seat in a similar chair arranged diagonally. It all seems very cliché. He glances at the nearby wall, spotting a Cambridge medical certificate. He's surprised to learn that she had graduated only a year after he had gotten his degree from King's College. He hadn't thought he was that bad at estimating people's ages.

"What can I do for you, John?" Molly asks, reaching out to a mahogany desk off to the side to pick up a pencil and a pad.

"You tell me," he counters. "I guess it's a routine thing, these sorts of referrals, after an incident. A sort of a debriefing?"

"The traditional idea has been that a debriefing should take place very soon after a traumatising event."

"Well, I was in hospital." The first time that counselling had even been mentioned to him was when Sherlock had dragged him back into Bastion's emergency department because of his limp, and the idiot orthopaedist on call there had told him, flat-out, that it was psychosomatic. Sherlock didn't seem to think so back then. Why would he have bought John a cane if he did?

He doesn't even have that limp anymore. All he suffers from is a frayed set of nerves and having too bloody much on his plate, and that hardly requires the help of a psychiatrist.

He doesn't want Molly to ask again why he's here, because he doesn't want to start explaining anything to her, doesn't want to give her a reason to make a mountain out of a molehill. "No, I
haven't had any counselling before. I got your contact information when I was discharged; there hasn't been any need for this before."

"Your service record says you were discharged and flown home three months ago. This isn't a compulsory assessment, so what has changed?"

"I don't know." John glances out the window.

"Let me rephrase: why did you wait three months? I'm not saying it's unusual, but it could be useful to consider why there's been such a delay after being recommended to contact a psychiatrist."

"It was a misdiagnosis. That prick at Bastion didn't want to have a proper look at my leg, so he chalked it up to malingering. Called it a psychosomatic limp. I don't even have an issue with the leg anymore; it's just the shoulder, now."

"A psychosomatic limp is not the same as malingering."

He laughs humourlessly, it sounds hollow and pretentious. "I didn't think it would going to be very useful, talking to someone about what happened who hasn't actually been there. Been in a place like that. Been in service."

He takes another good look at Doctor Hooper. What can she offer but bog-standard empathy and a listening ear? If he wants to talk, he could probably go to a pub with Greg. Or, talk to Sherlock – not that he could ever understand why someone would want to enlist in the medical corps. It is so not Sherlock's world. Posh boy likes his endless hot showers, his morning espresso, his crisply pressed trousers and his legions of medical student fans watching him operate in a well-lit, perfectly climate-controlled Western world theatre with his poncey playlists blaring in the background and every possible surgical toy at his disposal.

To John's surprise, an almost mischievous expression creeps onto Doctor Hooper's features. "Well, perhaps you'll be glad to hear that I do know what it's like. I spent three years in Baghdad and Fallujah with the RAMC after reaching consultancy."

John gapes, then realises that his blatant surprise is probably insulting. If it is, then Hooper is good at concealing it.

Looks can be so deceiving. Sherlock, for instance, definitely isn't the bull shark he emulates at work, not at all. He just doesn't let many people see the real person underneath the snark and the animosity. Sometimes, at home, John feels like an elephant in a china shop trying to deal with him.

"Fallujah must have been tough," John offers.

"Not going to argue that one."

He feels slightly more relaxed, now. Thinking about this woman more like as a fellow soldier and a fellow army doctor is much less disconcerting than thinking of her as a psychiatrist passing judgment on whether he's fit to be either of those things. This revelation means that she does understand that it's part of army life that sometimes things go south and people die. She will be able to put into perspective what John has gone through and not overreact like everyone else has. She will understand that of course it hits people hard when they almost get killed or when they see their fellow soldiers die. There's nothing unusual about that, nothing that would warrant therapy.

*So, why the hell am I sitting here, then?*
This person, Molly Hooper, who hardly looks like a battle-hardened soldier, has served in Iraq and is not sitting in a colleague's office complaining about it. A flash of anger at himself makes John want to walk out and slam the door.

He just needs time. It'll get easier. The dreams will stop. He's only had a couple of panic attacks. They will stop. He shouldn't have let Greg talk him into this.

"So, let me ask you again," Molly starts, "anything in particular that made you pick up the phone after having decided against it at first? Am I right in guessing that it wasn't easy for you, booking this appointment?"

John's lips tighten into a wordless agreement. "Things weren't great after I came home. I promised a friend I'd look into this. He tried to talk some sense into me, I guess."

"Did it work?"

"I suppose so. I went back to work. I can do it like I used to."

"Would you describe yourself as recovered?"

He shrugs. "Yeah, I guess. The shoulder's not going to be exactly the same, but it doesn't bother me much anymore. Probably won't ever take up golf or rugby, but it's good enough for work. I haven't needed anything for the pain for weeks. Initially, they thought there might be severe damage to the nerves, but it turned out to be just the soft tissue swelling pressing on the plexus." It's a relief, talking about concrete, physical things.

"I'm glad to hear it. Anything else?"

"What do you mean?"

"If everything is going well and you're back to work, then why did your friend encourage you to seek help? If everything is fine, shouldn't he agree that the need for talking to someone may have passed?"

"I haven't talked to Greg about any of it after. I don't know what he thinks, now."

"After what?" Molly shifts in his chair, leaning slightly more towards John and crossing her legs.

"After I stopped drinking." Why is he talking about this? He stopped doing it, so it's irrelevant.

He expects Molly to focus on such an admission, to grab it by the tail and start digging deeper. Isn't it exactly the sort of thing psychiatrists are supposed to assign too much meaning to?

If he's really honest with himself, quitting drinking hadn't made him feel all that different.

"So, you're here because a friend was worried about you, but they might not have reason to feel that way anymore. You define yourself as recovered, and to me you sound quite realistic about your current situation."

John is certain there's a question in there somewhere. He really should get up, thank Molly for her time, maybe apologise for wasting it, but something stops him, suspends him in the chair.

What does he want?

Does he want someone to tell him it's fine if he feels the way he does every day, not knowing which way is up and which way is down? Or, maybe he wants someone to tell him to get a grip
and stop moaning about himself because Sherlock needs him now, not the other way around? Does he want someone to promise him things will fix themselves if he just has the patience to wait?

Maybe he wants someone to promise him that his life will change for the better even if he does nothing to change it, since his last attempt nearly killed him.

Maybe he wants someone to tell him that he hasn't ruined everything. That he isn't hurting Sherlock because he doesn't even know how to deal with himself right now.

_Fuck._

"John?" Molly looks slightly concerned as he watches him stagnating in strained silence. Maybe some of what had just gone through his head had shown in his expression.

"I'm here---" John grits his teeth, "I'm here because of--- not, not because -- for? About? Yeah, let's go with that. I'm here about Sherlock."

"Alright," Molly accepts gently. "Is he the friend you were talking about?"

John clears his throat, smooths a crease on his trouser leg. "No, he's my partner. Boyfriend, though he always snorts if I call him that." A pang of affection hits, making him suddenly feel warm as though Sherlock were close by. His smile is brief but genuine. "He was hit hard by what happened to me – I only found out two days ago how hard. He hides it well. He'd never talk to someone about it, even though it's probably he who really should be sitting here. He barely talks to me; he's even worse at talking about how he feels than I am," John explains. "And, he’s just been injured himself – a C2 fracture that is going to take months to heal. I don’t know if he has the patience to deal with it. Actually, I do know – he’s going to go crazy trying to deal with this on his own. And I don’t know if I can be what he needs me to be right now."

"So, you would like to find out how to help him, is that right?"

Greg had said something to John which he hates thinking about. When the senior surgeon had come over that Saturday morning, Sherlock had retreated to the bedroom as though trying to conceal the fact that he may have invited the man over. Greg had told John off for being a selfish idiot, told him that he was not just hurting himself but everybody else in the process, and it was bloody stupid, what he was doing. _'You're not seeing what's right in front of you,'_ Greg had pointed out, and John still doesn't know why that particular thing had felt like such a punch in the gut. The memory of that Saturday floods him with annoyance and embarrassment – as though it had happened yesterday.

"I keep getting angry at Sherlock, and I don't know why. He's on sick leave and will probably get pretty bloody miserable since the halo vest he's in is making him pretty reliant on other people. That's me, by the way, and I’m finding sympathy in short supply these days."

"Sometimes, when we need all our strength to look after ourselves and to keep ourselves together, there isn't a lot of energy or patience we can spare for the troubles of others."

Even though Molly is saying essentially the same that he's been thinking regarding how much he has going on right now, it still rubs him up the wrong way to hear someone else say it. It feels belittling. It makes him sound weak. "I don't have time to sit here yammering about myself right now! He can't even turn his bloody head to make sure he isn't going to get hit by a damned car!"

Molly is unperturbed by his outburst. "You're worried about him."
It should be a stupid, obvious thing to say but it doesn't feel like that to John right now. "I am worried about him. I'm always worried about him. I'm worried that I'm not really there for him, right now, because I don't know how. I used to. I really bloody used to know how to deal with him."

Or, did he really? He hadn't even known Sherlock's full name until a few days ago! And, would it not have made things much better and easier if Sherlock had fully disclosed to him much earlier all the things he'd said out loud two days ago? What the hell is it that Sherlock fears so much that he feels the need to hide such important things?

"I guess I don't know him as well as I like to think," he finally admits.

Would knowing all of it have changed how he behaves towards Sherlock? He realises that the answer is maybe. He might have treated Sherlock differently, and not in a good way. He has known about the ASD from the start, but really hearing what his daily life is like and how the halo makes it even worse is nothing short of a revelation.

"Off the top of your head: what is the worst-case scenario right now? What would happen if he was completely left to his own devices?" Molly asks, looking expectant. "What's the worst that could happen, realistically speaking?"

"That he gets careless. He has no sense of self-preservation. He jumped on a plane to Afghanistan without even thinking! I hate that he scuba dives when we travel, because I don't know where that'll go. Shark cage diving, cave diving, whatever’s more dangerous, I'm sure all that’s going to be on the list soon. What happened was just a stupid accident at work, but one he brought on himself by taking risks he didn’t even realise existed. Now, I’m worried that something goes wrong again and he'll hurt himself worse. Need surgery. End up tetraplegic. His brother has obviously looked after him before, but he's distant now, doesn't even live in England. So, it’s all down to me. I want to go back to the way we were. I want to find the patience to help him through this."

"What is draining away that patience?"

"He thinks I'm so pre-occupied with other stuff that he doesn't fit in. Maybe he's right. He was right, after I got discharged. I don't know what the situation is now."

"Even accepting that possibility shows a lot of self-reflection, John. That's very good. When we're not doing well, we can be so wrapped up in our own problems that the issue of others may add too much weight on top and we can't carry all of it anymore."

He does feel like there's an immense weight stacked on top of him to get on with his life, but he doesn't know how.

"How old is Sherlock? What does he do for a living?"

"Thirty-five. He's a neurosurgeon. Consultant. We both work at King's."

Molly considers this for a moment. "So, we're talking about an independent, highly educated adult," she confirms with a slightly bewildered frown. "Have you been together long?"

"Three years."

"And he managed on his own up until then?"

John's grin in mirthful. "By the skin of his teeth, I'd say. Brother bailed him out, somehow, when he got into drugs some time before medical school. He got nearly kicked out of his previous Deanery
before King's because he didn't get along with anybody. He has Asperger's," John admits hesitantly and instantly feels guilty, even though this is a confidential conversation. Sherlock guards this secret so very carefully. "Or, that's what they called it back then. I don't know what precise diagnosis on the autism spectrum he'd get nowadays."

John has heard some people say they are on the spectrum, while some say they have some form of the syndrome. Is that rhetorical difference important?

'This is me,' Sherlock had said to him. 'You thought I was more.'

Molly interrupts his train of thought: "You are not his designated caretaker in any way, are you?"

"No."

"But you still feel a high degree of responsibility for him."

"I love him. He's the greatest thing that's happened to me," John says without hesitation. "Nothing much actually happens to me, apart from him and Afghanistan. He could have had anyone, and he chose me."

"You're being a bit harsh to yourself," Molly says.

John scoffs. "You haven't seen him. By the time he retires he'll probably be lauded as one of the greatest neurosurgeons in history. He's ridiculous and accidentally funny and gorgeous."

And so out of my league.

Not that John had even known he was playing in the same series. It had been a bit of a surprise, of course, waking up at the age of 39 and realising he was falling in love with a man. He likes to think that coming to terms with that identity shift had actually been easier than he could ever have imagined; he had long been aware of being capable of being attracted to men, of course, but never acted on it before. He likes to think that regular helpings of the sight of a naked Sherlock in his bed had helped. Some things simply feel right.

He's proud of how well he has handled it, really. Sherlock had been overreacting when he'd thought John was trying to conceal their relationship during the early days. There's no problem there. No problem at all. It's all fine.

"Do you feel professionally competitive when it comes to him?"

John shakes his head. "Nope, because no one can compete with Sherlock bloody Holmes. Only an idiot would even try. He'll eat you for breakfast and pick his teeth with your bones."

He knows it's an exaggeration, and reflective only of the personality Sherlock projects at work, but he feels duty-bound to protect that illusion.

"I find it very interesting, the way in which you describe him."

Surprised, John's brows assume the shape of a plough.

"There's a huge contrast there. You're very protective of him, and you think he isn't good at looking after himself. Yet, when it comes to your professional lives, it seems that.... How should I say this... you seem a bit bitter about being an underdog?"

"Sherlock hasn't done anything wrong. He's just himself. He hasn't changed in any way that would
have made me unhappy – quite the contrary.” John knows he's sugar-coating things, but since he's the one sitting here it won't sound very mature if he blames everything on Sherlock.

"Are you unhappy?"

John glances at the clock. They're nearly out of time. Thank God.

Molly is looking at him patiently but sternly, fixing him in place with her gaze. He doesn't like the way she seems to see something he probably wouldn't want anyone to be looking at. Maybe he's just being paranoid, but she had looked sceptical after hearing his answer.

Finally, she leans back and taps her fingers on her notepad. "I usually see prospective patients two times before we make a mutual decision whether to continue further. How would that sound for you? It might be good for you to have a think on your reasons for contacting me, and what you might want out of this."

He should go. He should decide this is pointless, that whining to a stranger about the downsides of his job or bourgeois relationship issues is going isn't going to change anything.

Yet, he feels a strange need to come back and counter whatever negative assumptions Molly may have formulated about him based on just this one conversation. He also feels a bit lighter, somehow. It isn't because he had admitted to having problems. It isn't because he has been cured or fixed or liberated in any way. What is this, then?

Somehow, he feels better than he had this morning, because telling this person about Sherlock has made him suddenly remember a great many good things. Things he wouldn't give up for the world. Things that are more important than the fact that he doesn't clock as many OR hours as he'd like, or that NHS bureaucracy drives him round the bend on a daily basis. Maybe it's nice to say it out loud that things aren't alright, not really, without having to fear that the other person will go to pieces over such a statement.

He can't talk about these sorts of things at home, because he has the nagging sense that questioning anything about their relationship will end up hurting Sherlock, somehow. Why?

Molly stands up and leans over her desk to have a look at her calendar. "I have an opening next Wednesday at the same time. Shall I see you, then?"

John claps his palms on the arm rests, shoves himself into a standing position and starts buttoning up his jacket. "I'll think about it. Maybe you could pencil me in?"
Two days later, John is on a short break after having spent the morning tackling a mound of paperwork and interviewing prospective ear, nose and throat registrars with the chief of that unit. He’s stuffing a late lunch down, grateful that he isn’t responsible for getting anyone else to eat or making the effort of preparing something only to have it spurned. That is the norm these days with Sherlock. Why does he have to fight John over every single bit of needing help with daily routines? Last night, he had even tried to protest that he was capable of managing with the baby wipes himself, but John knows better: even if his upper body wasn’t immobilised, cleaning his back with the wipes would require contortionism that would be exceptional even from Sherlock.

‘Laura said I’m to keep an eye on that broken skin under your left collarbone,’ John had told him last night during the wash-up.

‘It’s healing, so it hardly counts as an issue,’ Sherlock had dismissed him.

The atmosphere in the flat is still somewhat heavy with the aftermath of their colossal row on Sunday. An uneasy truce reigns; neither of them wants to provoke that kind of conflagration again. After his first therapy session, John had wanted to distance himself from the whole mess for a moment, and thankfully Tuesday evening and Wednesday had passed in an amicable but stiltedly courteous atmosphere.

It’s a relief that work is keeping his mind on other things. The audit last week had gone well, but the budget calculations for next year are due, and so is the semi-annual drug acquisitions paperwork. John hates the mounds of documentation his position involves, but the people issues he knows he can solve and even enjoys doing so. Yesterday, he had defused things when a unit chief of colorectal cancer surgery had been throwing their toys out of the pram because some of their OR time was being divided between King’s and one of its satellite units. At least the parties concerned are no longer arguing, and the service is running smoothly again without anyone threatening to quit. The truce had taken John quite a lot of sweet talking the various parties into a compromise, but it is working.

He puts down his fork, and types up a text to Sherlock:

14:23: How are you doing?

While he chews through the Lancashire hot pot and mashed potato, he has his tablet open so that he can check his afternoon schedule. He has promised to give a lecture to a group of surgical registrars about theatre unit logistics, which will be a nice change from staring at the computer screen. While waiting for a reply to his text, he scans his latest emails and manages to delete half of them without needing to even look at the contents. As Sherlock has often declared, the Trust's spam filters are deplorable.

Once he's done with his lunch, John checks his phone again. No reply yet to his text. He sighs. Maybe Sherlock is asleep. He hopes so, because neither of them is getting much rest at night. Between Sherlock going walkabout at least twice a night and John's own periodic nightmares, he feels the pull of exhaustion dragging him down; on three of the four nights since their argument, John reckons he only managed three hours of shuteye.

Sherlock's sleep seems to have settled into a routine that’s even worse than when too frequent on-call nights mess up their cycles. He’s tired enough to go to bed by ten, but gets up before two to go
to the loo and retreat to the recliner in the living room. He’s now got a duvet and a collection of pillows there to make himself comfortable for a couple of hours. John has to listen carefully to make sure he gets into and out of the bathroom and down the stairs and across the hall to the chair without falling. Since he has to worry about Sherlock, it takes him ages to get back to sleep, and it seems that no sooner than his eyes finally drift shut, Sherlock arrives back in the bedroom. Every time he pulls the duvet open he lets all cold air in, and his icy feet often brush up against John's. He has tried telling Sherlock to turn on the lights, only to be told that the idea is 'ridiculous, because increased light levels will be even less conducive to falling asleep again'. Of course, Sherlock didn't appreciate it when John had retorted to 'falling over in the dark and being taken to the hospital is going to wake both of us a damn sight more'.

Even if he’s going on adrenaline, at work he doesn’t have to walk on eggshells, watch everything he says or does that can be taken as criticism. With Sherlock at home, he’s also not firefighting or cleaning up after the man's work-related messes. John knows that Sherlock’s had a lifetime of being criticised for what he does and says, but just once he'd appreciate the man recognising that he is not always right, and that bullying other people into submission is not good work culture.

He grabs his phone again, tired of trying to guess whether everything is alright at home or not.

14.40: You alive? Or should I send someone around to check you're still breathing?

This time the answer comes back almost immediately:

14.41: Fine. Your text woke me up.

To the point, and almost blunt. But, at least John knows that if their positions were reversed, he’d be grumpy, too. He had turned the sound volume up to maximum on Sherlock's phone so that he would hear it even if he'd forgot to take it with him, so his waking up is John's fault in more ways than one.

Before he can respond with an apology, his phone pings again from a message from Sherlock:

14.42: Go back to work

John almost sends him a snarky reply, thanking his Royal Highness for this generous permission, but his desire for peace prevails. Besides, his office landline begins ringing. The caller is one of their anaesthesia consultants, a single father who apologetically explains to John that he was due to be on call today but his seven-year old has fallen off a tree at school and taken to Great Ormond Street Hospital. John tells him to go there and not to worry about work; he'll find a replacement.

After they ring off, John sighs. Nearly all of their juniors are at an AAGBI Core Topics meeting and some of the other consultants have been stricken by a stomach flu that's been going around.

He checks the rotas. Nearly all anaesthesia consultants have had several shifts during the past few weeks apart from him, and the two who have not are either pregnant or still recovering from knee surgery and thus released from having to do call.

It'll have to be him. He can't excuse being let off the roster because of Sherlock. Even if his co-workers would probably understand, he is not going to risk someone teasing Sherlock about needing a minder. He will need a backup system, though. Martha Hudson had already extended that kind offer for help, and John calls her to ask if she's available if there's anything Sherlock needs help with. She says she has nothing planned, and John is relieved. He's not going to tell Sherlock about calling her; he would consider it mollycoddling.
He does, however, need to tell Sherlock about not coming home for the night, so he picks up his mobile and hits speed dial.

Sherlock doesn't answer until the sixth ring. Is he not keeping the phone on him like John had told him to? He can make out the sound of wind traffic at the other end of the line. "You've not gone outside on your own, have you?"

"On the balcony," Sherlock replies curtly. "New neighbours are making a racket hanging up some art."

John wonders how he could have deduced so accurately what they're doing, but refrains. This is Sherlock, so either he has just used his superhuman brain in some way that's obvious to him but not to anybody else, or he has rung the neighbours' doorbell to voice his disapproval.

John explains about the call shift. Sherlock tells him it's fine. John finds it hard to discern from his tone if that really is the case.

The sixteen hours of duty starting from when office hours end turn out to be nightmarish. It's as though every idiot in their neck of the woods has decided to overdose, break their femur while stumbling home drunk or get a brain bleed at the same time due to some other booze-related mishap. If John had been hoping for a bit of good karma after taking on an extra shift so that his subordinates wouldn't have to, the night had truly taught him that there is no justice in the universe.

By the time he gets home on Friday morning, he's exhausted and in urgent need of sleep. The adrenaline of driving through morning rush hour is enough to get him back to West Brompton, but the moment he parks the SUV he knows that he's running on borrowed time before his eyelids droop down. An internist from another major London teaching hospital had crashed their car last year while driving home in the morning, contracting severe injuries. It had prompted some letters in medical journals calling for a cap to how many hours a doctor could be assigned to work consecutively.

John drops the keys in the dish on the foyer table and wanders down the hall. A quick glance to the left shows the kitchen is empty, so he heads up the stairs and pops his head around the open bedroom door. The sight of the metal uprights still catches him by surprise. He's relieved that Sherlock seems to be sound asleep.

It's when he emerges from the bathroom after a much-needed shower and takes a more thorough glance around the bedroom that he realises things have changed. The chest of drawers that has his clothes in it is just not there. Looking around, his eyes see more vacant spaces that are missing his things.

For a moment; he's outraged – it's like he's been deleted out of the room.

Is this Sherlock's final answer, then, to their fight? Is John going to find his old suitcase full of his stuff, waiting for him to clear out? Or, could the heartless bastard have just thrown his stuff down into the basement lock-up in a fit of pique? The thought twists a knife.

John stalks over to the bed and kicks the mattress. “Sherlock. Wake up. Have you thrown out all of my stuff?”

Those startling blue-green eyes snap open. “Of course not. Look in the study.”
Seething, John storms out of the bedroom, stomping down the four stairs and into the hall. He looks first into the living room and realises that there’ve been changes there, too. His reclining chair is gone, for one thing. He should have bloody known Sherlock would come up with some excuse to chuck out the only piece of furniture John had selected.

He’s now too pissed off to examine the sitting room any further; he wants to find his things first. Sherlock must have simply pushed everything that is John’s into the study – just like he’s done with all the other rubbish that he doesn’t want to look at. It’s been more of a junk room than a study, even before John came back from Afghanistan.

He throws open the study door, crosses the threshold and just stops.

Where is all the junk? The stacks of files, the chaos of scientific journals strewn across the floor, the bookcase bulging with Sherlock’s medical books? Normally, they can’t see the floor for all the stuff; now, John takes in dark polished floorboards, with not one but two oriental carpets he’s sure he has never seen before. There had been a tatty, old, faded wall-to-wall carpet under all the junk the last time he looked in here.

He stares in amazement. That’s his chest of drawers over against the wall, next to a beautiful oak wardrobe John’s never seen before. He takes a couple of steps into the room, trying to square what he’s seeing with what he remembers of the room. Instead of the space being totally overwhelmed by Sherlock’s huge desk with its three screens and computer, there is now a slim-line desk made from dark wood in its place. On it sits John’s docking station for his laptop, and his pencil mug – a horrid, misshapen blob that his sister Harriet had made him at her school art class when she was fifteen.

The cheap sofa bed which had been hemmed in by all the crates of Sherlock’s print-offs is gone. In its place is a wooden bed that looks antique or at least distressed to appear so. It has been made up with fresh sheets, there's a duvet covered with some ethnic print – and that’s his pillow, if he’s not mistaken, since the pillow case hasn't been changed. The duvet is turned down, as if inviting him to collapse into a post-call nap.

John is stunned. The bookcase against the wall is still there, but he recognises it now has his books, and more. He realises that Sherlock’s must have found the cardboard boxes that he had stored in the basement when they first moved in. There are things out on the shelves that he’s almost forgotten about: his chipped RAMC mug, a Buzkashi riding whip that he’d brought back as a souvenir from his first tour of duty in Afghanistan. The recliner chair that had disappeared from the sitting room is now in the corner of the study, and a new cushion that matches the carpet on the floor has joined his favourite union jack one. The soft throw John had kept in the sitting room has been slung over the back of the chair; sometimes he likes to wrap himself up when he’s feeling the cold while reading. There are two bedside cabinets he’s never seen before and a matching side table at the end of the bed. Something about their shapes feels familiar: the heavy turned wood legs and the metal brackets holding them onto the top. From the look of the carved wood, John deduces that they aren’t new. He runs a hand across the carvings; this must be antique Afghan work. On one of the dressers sits his alarm clock radio; the other has a new reading lamp. On the wall above the bed, where Sherlock used to have his white board with strange scrawls relating to the shunt design, there is now a carved wooden window frame that has a mirror set into it, catching the light from the windows opposite. Instead of the blinding sun that used to come through in the mornings, it’s now filtering through wooden, slatted shutters which have replaced the grotty, faded curtains that Sherlock never bothered to close.

The dust and debris are all gone. In their place is a cosy, quiet haven—one that is unmistakably John. Sherlock must have remembered every single complaint or grumble that he had ever made
over the three years they’d been together about how the modernist cool and design-driven urban look just didn’t really suit him.

From the doorway into the hall, Sherlock clears his throat. “If you want to change things – different furniture, carpets, whatever – it can be done. I told the suppliers that you might not like it and they have all offered store credit or a refund for returns if we want to alter something.”

John looks around again, his eye catching all the lovely details: the wood, the soft colours, textures that have turned his old chair from being an eye sore in the middle of cosmopolitan chic into the expression of comfort that John had always appreciated. “Not like it? Are you out of your mind?” he turns to look at Sherlock. “It’s amazing… when did this happen?” Before Sherlock can fit in an answer, a more worrying thought cuts through: “and how the hell did you do this? You’re not supposed to carry anything heavier than a bag of flour!”

Sherlock rolls his eyes. “I had help, obviously. The Polish handyman and a friend of his were outside waiting in their van when you drove off yesterday morning. Turns out he has a sister who runs a cleaning company and she did the blitz once the room was clear. I bought the furniture online. It was serendipity that you took the call shift, because the guy installing the shutters was late arriving and didn’t finish until almost midnight. I didn’t hear the phone when you texted last night because of the sound of his drilling and hammering.”

John is still trying to take everything in. “What did you do with your books?”

“Donated them to the King's medical student association; they're downstairs in the lock-in and will be picked up next week. Most of what I need these days I can get as frequently updated online versions.”

John looks around the room again, still stunned by the change. “What about your papers, the files, all those blasted printouts?”

“I sent them away to be digitised and professionally archived.”

John walks over to the beautiful wooden desk. “And your desk?”

“It’s always been too big for this flat; come see what I did.”

Sherlock leads the way in through the kitchen, past the breakfast bar and into the sitting room.

On either side of the sliding doors to the balcony, the old bookcases are gone. In their place are matching, curved fitted cupboards from the floor to the ceiling, made of black wood and gleaming chrome. There are two new chairs; the one on the left has wheels, the one on the right is a recliner that has legs, but otherwise they match.

“You always complain about the mess I make. This keeps it all tidy and out of sight.” Sherlock touches the middle cabinet on the left and the doors open to reveal a computer screen on each side hinged so that it can be pulled out to bracket the one in the middle. Sherlock sits on the wheeled chair and pulls out the keyboard shelf. “The printer/scanner is in the next cabinet over. The one to my left has all the data printouts that I’m using at the moment.”

John is still trying to get his head around the transformation when Sherlock rolls the chair over to the matching cupboards on the other side of the room. “This is the music centre. I can keep the CDs, my violin and music stand and the sheet music in here until I need them.”

John is trying not to gape. “When? I mean this would have to be made to order…”
Sherlock hums in agreement. “I started designing it when you were away in Afghanistan; I had to find something to occupy my time when you weren’t here to force crap telly on me. It took the carpentry company a couple of months, but it all came together at the right time.”

“You did all this, changed the study, sorted this out, what… just because I complained that you’re messy and that I wanted some space of my own?” That’s not all that he had complained about during their flight, but he is glad Sherlock had taken at least some of it to heart.

John knows he has to say something about the bed because he doesn’t want Sherlock to misunderstand. “I don’t want to sleep apart from you; that’s not what I meant.” A post-call bed in the study was Laura’s idea, not his.

Sherlock looks away. "You’ve not had the choice of where to sleep before now, because I didn’t make any effort to accommodate you. You know I’m not good with this sort of thing. Before, I didn’t understand the process of what it would be like for you returning from Afghanistan. As you made quite clear, there wasn’t much of you here to come home to; I wanted to change that. But, when you got back, you didn’t seem to be in the mood, and then this stupid accident of mine got in the way, and well, I need to learn to listen to you better and change before something makes you so mad that you have to yell at me about it.” These last sentences tumble out in haste, as though Sherlock is trying to force them out before he loses courage.

Guilt washes over John. "I’m sorry; I really am. I didn’t mean to make such a big deal about things. It’s not about the furniture or how much space I have; my home is where you are."

Sherlock runs his palm along the backrest of the new recliner, still not looking at John. "I don't want to sleep apart from you, either, but we can't have your work performance suffer because I keep you awake."

"You have to promise me you'll still wake me up if you need something even if I kip in the study sometimes."

"I think I've found ways to manage most of the practicalities with the halo already," Sherlock answers.

It's not the same as a promise.

John places his palm on top of Sherlock's on the backrest, arches his fingers so that he can grip it gently. There is an image in his head now: Sherlock, alone in this flat, planning a book cabinet to get his mind off the fact that John had left him behind.

"It's lovely. All of it. I don't want to change a single thing."
The Third Monday

The flat is quiet when John gets home at around six in the evening. It shouldn't worry him – Sherlock could be napping or sitting with headphones on, but something about it is making him uneasy in a way he can't pinpoint. He shouldn't believe in a sixth sense, but Sherlock had once told him that intuition may well be human brains processing existing data subconsciously and thus not supernatural at all.

Sherlock had texted him about some article drafts he wanted emailed from his work computer at around noon, but that had been their only communication during what had turned out to be a busy day for John. He'd been glad to hear that Sherlock was doing research; all in all, his mood seemed to have improved over the weekend.

John admires his creativity in circumventing his current limitations. Sherlock has done extensive research on assistive devices, and consequently Amazon Primed himself something that looks a bit like a trash-picking pincer to more easily manage his socks, trousers and pants and to recover things he has dropped on the floor.

John hangs up his coat and scarf, relieves himself in the toilet and then goes to the bedroom, assuming that's where he'd find Sherlock, catching up on the sleep that eludes him at night.

Sherlock is, indeed, in the bedroom, but instead of the bed, he's on his back on the floor.

John drops instinctively to his knees beside him. He shakes a shoulder, calls out his partner's name and prepares to check for a carotid pulse, when Sherlock's bloodshot eyes flutter open. Before John manages to even react, Sherlock scrunches them tight again, panting as he tries to straighten his legs and then bends his knees again, swaying them back and forth.

"Did you fall?" John demands. "Sherlock, did you fall?"

The carpet underneath is soft but if he's hit it halo-first, then there's a severe risk there's been further damage to his neck. John's heart pounds against his ribs and a wave of adrenaline hit his blood like rocket fuel. His own breathing speeds up and he realises that he is starting to panic.

A momentary sense of déjà vu floods over like a tidal wave: he's leaning over the driver of the vehicle in the dusty ground. Any second now, the sniper’s bullet is going to rip through his shoulder. He tenses up, closes his eyes in reflex, waiting for the agony.

But, it's not the whistle of a bullet that cuts through his flashback, it's a whisper from Sherlock.

"It's my back."

John's eyes fly open, as he grabs onto that voice like a lifeline.

*Home*, he reminds himself.

*Not in Afghanistan*.

He forces himself to focus to the sight of Sherlock grimacing, eyes clenched shut.
"I didn't fall. I was just trying to stand up," Sherlock explains with his voice strained, quiet and wavering from pain. "I didn't hit the halo on anything."

John shoves a flattened palm under the small of his back; Sherlock grunts and tries to breathe properly but only manages shallow gasps. John plants his other palm on Sherlock's knee, trying to keep it still.

*Stay calm and help. Don't be the idiot you were when----*

John physically shakes his head to shove himself out of his thoughts, grabs a pillow that has fallen on the floor and shoves it under Sherlock's knees.

"Christ," Sherlock exhales and very carefully lets his lower limbs relax. "This never happened before. My back's been stiff, but this thing hit like a bloody lightning bolt."

"So, you haven't hit your head or the halo?" John asks. He must sound like a broken record, but he has to be sure the pins can't have shifted.

Sherlock looks up at him, appearing a little calmer now. "I stood up, shifted to the side, planted my feet on the floor, but when I stood up it felt like someone stabbed me in the back. I didn't hit myself on anything, this came on by itself."

"Lower back, upper back? Where? How long have you been on the floor?"

"Don't know – maybe thirty minutes? It's the lumbar area; the whole thing feels like it's in a spasm. If I try to move or don't keep my knees bent, it's--- I'm afraid to even try."

"Why didn't you call me?" John asks.

Sherlock points under the bed. "Phone slid out of my pocket to the opposite side."

John curses inwardly that he hadn't paid more attention during medical school orthopaedics lecturers. Did they even teach anything specific about a halo vest? He can't remember.

He leans back on his haunches, bites the inside of his cheek.

Since he doesn't know what to do, there's only one option. After digging out his own mobile from his trouser pocket, he calls Laura Arthur. He desperately hopes she'll hear the ringtone – he recalls hearing that her unit is putting on a wine-and-cheese thing tonight in honour of for two newly minted orthopaedics consultants moving on to jobs in other hospitals.

John's shoulders sag in relief, when Laura picks up on the third ring. He explains the situation and is deeply grateful for her calmness; he doesn't feel calm at all, even though he should. He needs to stop panicking and help, but with Sherlock in pain, he doesn't feel entirely professional and objective. He tries to rationalise; who the hell would be when it's the most important person in their lives? He doesn't want to think about how close he'd come to a complete panic attack. It really hadn't helped, those memories intruding on----

"The halo puts a lot of strain on the lower back; developing lumbago isn't uncommon," Laura tells him, accompanied by the ambient sounds of conversation and glasses clinking together. "Get a heat pack, maybe a warm bath. Has he been taking the paracetamol and the diclofenac?"

"Mostly just the paracetamol, since he read some paper about non-steroidal anti-inflammatories potentially affecting bone retrabeculation."
"He might need something stronger than those for a few days. We'd better skip codeine and oxy, but I could get you tramadol. It at least acts a little differently to the stronger stuff and might be enough, combined with the milder meds."

John knows all this – he's probably more of an expert on opioid pharmacology than any ortho, but right now he can't seem to come up with any sensible ideas.

"Is he lying down?" Laura asks.

"Yeah, on the bloody floor."

"That might actually be better than a soft bed or a sofa. I'd vote for a heat pack, and don't try getting him up right away. Might want to consider putting some sort of a board under the mattress on his side of the bed for a few nights to make it firmer."

John wants to thank her, ring off and start getting organised, but somehow, he doesn't want to stop talking to her just yet. He doesn't want to be the one in charge, the one responsible for anything. His heart is hammering against his ribcage, and he doesn't understand why he can't shake the sense of impending disaster.

Laura seems to pick up on the unease in his silence. "John, if he hasn't fallen or hit himself on anything, it's just a muscle cramp. It happens, and it's not dangerous."

John knows he should have realised this, that he should have been able to examine Sherlock properly and to come to a diagnosis. He should have been more useful.

He asks Laura some more questions – things he, as a doctor and an anaesthetist, should know like the back of his hand – but all the facts he keep trying to dig out of his memory seem to have escaped, leaving behind a jumble of panic and erratic, useless fragments of unrelated knowledge.

Finally, he thanks the orthopaedist, ends the call, then goes to rummage around a cupboard in the hallway to find the chemical glove warmer packs they'd bought for a ski trip. He also fetches a hand towel, thoroughly rinses it with hot water and wrings it dry.

Once back in the bedroom, he then spends five minutes trying to convince Sherlock to let him try to jostle what he has brought underneath his back. Sherlock is understandably reluctant to try to move, but Laura had said that this needs to be dealt with promptly, lest the muscles get cramped up even worse. John ends up shoving his own feet under Sherlock's bottom so that his back will move as little as possible but still be raised from the carpet just enough that he can get the heat packs into position. Once everything is ready, he sits close by, hand on Sherlock's thigh, and he recounts what Laura had said. Sherlock listens without a word, likely considering the sobering possibility that this might be a recurrent thing during his convalescence.

Once the warmth begins to work, there's a positively obscene groan from Sherlock, and he finally shifts his hips a bit. After fifteen minutes, he lets John log-roll him and place a palm on the small of his back. John can feel and even see a tight cord of a paravertebral muscle that is still wound up tight. When he starts kneading it gently with the heel of his hand, Sherlock tenses up and tries to roll onto his back again.

"Want to try a bath?"

"I'll try anything," Sherlock says, sounding more like himself now, instead of being petrified with pain.

Hands clasped around John's neck, he manages to drag himself into a sitting position. Then, slowly,
using John as a support, he stands up and breathes a sigh of relief.

Getting in and out of the bath proves harder than either of them had anticipated, and it doesn't seem to make a very big difference to the pain. John throws two more heat packs in the microwave to use after the bath, and returns to the bathroom carrying a Nurofen and a paracetamol with a glass of water. He had also shoved some Digestives into his pockets.

“Useless,” Sherlock mutters.

John refuses to help him out of the bath before he has eaten something. “Anti-inflammatories on an empty stomach are a recipe for gastric distress. You know that. Having heartburn all night won’t let you rest.”

“I’ve still got lorazepam left. Don’t need food for that.”

“No, Sherlock. Laura was specific. She said she would phone through a tramadol prescription to complement the other pain meds, and I’ve arranged the chemist to deliver; it should be here soon.”

Sherlock sniffs. "Tramadol's going to be like pissing on a house fire. Oxycodone or morphine are the only things that would even begin to tackle this kind of pain."

"Not going there unless this gets so bad you need to be admitted."

"Lorazepam might at least get me to fall asleep. Benzos are prescribed all the time for back spasms."

"There's very little research evidence to back up that practice, and a sleeping pill is still something you shouldn't be needing."

Sherlock removes his hand from under the water and slaps it angrily on the edge of the bathtub. "What do you suggest, then? Grin and bear it? Stiffen up the fucking lip?"

"Not giving you benzos or considering strong opioids until you've some food and that prescription gets here." John hands over the biscuits. “Go on. The waters going cold."

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A banana eaten after the bath, a hundred milligrams of tramadol and a warm duvet seem to eventually do the job: with John sitting up on the bed beside him, Sherlock finally falls asleep. His legs are elevated slightly by two pillows that are keeping his knees bent. Just about every other pillow and cushion in the flat has been commandeered to bolster and protect his position. On his back, Sherlock can’t help but snore, and it makes John smile ruefully.

When Sherlock had first had his accident, why hadn't John felt as nervous as he had this evening? He should have quickly realised the back pain wasn't anything dangerous, yet the sense of unease and helplessness had nearly overwhelmed him.

Truth be told: when he had dropped down to his knees next to Sherlock, he had felt exactly as he had right after the explosion in Kabul. All patterns and protocols and sense had completely evaporated from his head. He knows he'd panicked in Kabul; he had been useless. What the hell kind of a medical professional falls to pieces like that?
He can't sit around in the dark thinking about this a second longer.

He quietly makes his way to the kitchen, wondering if he has the energy to cook himself something to eat. Normally, he grabs something right after coming home. Opening the fridge, he considers the possibilities. An omelette, perhaps? No, he can't muster the motivation for even that simple a meal.

He takes a beer out and goes into the living room, where Sherlock’s laptop sits open on the coffee table. He opens a fresh tab and clicks on Just Eat, opting for the Lahore Grill; they do a great lamb biryani. He adds an order of chicken tikka masala for Sherlock. Maybe he could be coaxed into eating it in a few hours when he'll inevitably wake up.

Once the order is placed, John notices that there are several tabs in another browser window. The first one is a medical article, which John first assumes relates to something Sherlock is working on. But, when he brings it up, he is surprised to find it is a 2012 article called 'The biochemistry of love: an oxytocin hypothesis', written by two American neuroscientists. A quick scan of the text suggests this is a serious piece of research, despite the deceptively abstract subject matter.

John’s curiosity is piqued. Why would Sherlock be looking at this?

A glance at the other tabs and the browser history shows that this isn’t the only article on the subject of emotions and neurotransmitters he has surveyed today; there must be at least a dozen more. John is halfway through another dense article when the doorbell rings, making him leap up in the hope of getting to the intercom before it goes again and risks waking Sherlock.

All through the routine of buzzing the delivery into the building, then collecting and paying for the meals, John’s brain is trying to process what he’s just been reading. The articles may cloak it all in medical jargon, but what it boils down to is the hypothesis that anyone on the autism spectrum is going to have difficulties forming and sustaining long term relationships because of their particular brain biochemistry. While he puts Sherlock’s meal into fridge and dishes out his own, John struggles to stave off the sadness and guilt, because the question is inevitable: is this research Sherlock seeking reasons for their recent difficulties, and assuming he's somehow at fault? He had told John something a bit similar during their fight, but John had chalked it up to the sort of exaggeration everyone is guilty of when enraged. Now, he can't shrug it off anymore.

It's like a kick to the solar plexus: John has done this to him. Afghanistan and the mood John has been in are now being interpreted as a consequence of who Sherlock has always been. This puts a bitter taste on even his redecorating of the flat. It seems likely that Sherlock had done it to try to prove to John that he isn't as hopeless a case as John may have signalled during their argument or, worse still, what he might have assumed were John’s motives for going to Afghanistan.

After everything that has happened he can't fix this by telling Sherlock, flat-out, that he's wrong – that he's made the wrong deduction, that the way things have been lately can't all be his fault. What reason would Sherlock have to believe him?

That conversation would very likely just lead back to the one question John still doesn't know how to answer: if nothing was wrong with Sherlock and their life together, then why did he leave?
"How are you, John?" Molly asks at the start of their second session.

It's just a polite thing to say, something to which one is supposed to give a simple reply. Yet, John feels as though there are things about to tumble out of him at the softest of prompts. Is it because he's sitting in the office of a psychotherapist, and inbuilt into Molly's role is the assumption that patients are going to bare their souls in these sessions? It feels almost insulting that he could be so easily conditioned – after all, he has only met Molly once before.

No, he's probably tempted to talk to her because he can't work out what to say to Sherlock. There's something he thinks he should be saying, or doing, or solving, or working out, but he can't come up with what that could be. He has no answers, because he's not even certain what the questions are.

What he wants to say to Molly is 'fine, thank you' — the ultimate British fall-back and knee-jerk response to anyone who asks: “how are things?” He also hasn't stopped wanting to leave this room and never to come back. But, yesterday had made John realise that retreating from therapy would only be a stalling tactic, and waiting for things to get better is no longer an option. He had assumed things would stay the same if he just let time pass and the Afghanistan dust settle, but he knows now that it doesn't work that way. If he does nothing, things with Sherlock will get worse. If he does nothing, Sherlock will continue amassing evidence to support the only theory he probably has as to why things aren't great – that it's because of who he is. Who he's always been. If John doesn't work out how to—— be with him, again, the way they used to be, things are going to go to hell. The certainty John feels over that frightening notion is enough to make him want to be here, to be able to answer Molly's simple, polite question with a truth.

"Well, there's been a... development," he stammers. That's a good word. A solid word. A harmless enough word.

He bites his lip, disappointed at himself for this reticence. For this bloody cowardice. What's the worst that could happen, if he tells Molly things? What would be the worst consequence of talking about things he doesn't want to talk about?

It would probably be.... to go to pieces. It would be to surrender to feeling helpless and useless and not in control of his life anymore.

But, doesn't he already feel like that, every damned day?

Molly nods, and her curious gaze beckons John to continue. He licks his dry, now slightly sore lower lip and ignores the gnawing sensation at the pit of his stomach – anxiety, too much coffee.

Thinking about what he'd found on the laptop feels too raw to explain out loud, at least for now. But, he has to start somewhere, so he starts with the re-decoration: "Sherlock surprised me. Turns out he's actually been putting a lot of thought into stuff I've been complaining about. He redid our study – it used to be full of his stuff but now there's a bed in there, and everything is decorated the way he thinks I'd prefer over the really modern style of the rest of the flat. He's right, by the way.
And, he has put a lot of my things there – army mementos, for instance."

"How does that make you feel?"

"It was... unexpected. He was very up front about wanting to prove that he could be accommodating. For a moment I thought he did it because of our fight, but it turns out that he has been planning this for some time already. He's put a lot of effort into it. It's just that---" John trails out, a pang of guilt stalling his tongue.

Molly picks up on his hesitation instantly. "It's fine to say it here, John, if there was something about it you didn't like. Sherlock isn't here; there's no need to feel guilty or censor yourself."

"Even if he never hears it, I'll still have thought those things," John argues. "He did all that, made a huge effort, so I’m not complaining. The fact that he'd started planning it months ago nullified a lot of what I accused him of during our fight. But..." He runs out of words.

"If things we think about were grounds for punishment, we'd all be in jail. They're just thoughts – our brains trying out different emotions and scenarios. Only the ones that stick, the ones that feel really important, the ones that we act upon which matter in the long run."

"That's nice," John says sarcastically. Cat's out of the bag so he might as well say it, then: "It's just that it was very him, again. A surprise is a nice idea and all, but he never consults me in decision-making when it comes to our home, where we travel to, how we spend a holiday and so on. It doesn't occur to him that he should ask. He took out my stuff and thought that he, single-handedly, could decide what should be on display and what shouldn't."

"Do you actively try to participate in such decision-making? Have you taken initiative in organising your shared life?"

"No, not really, I just---" He suddenly realises that if it weren't for Sherlock, it probably would have taken them a long time to move in together and to get a car. They also would probably not have travelled much if holiday-planning had been a shared effort; John has loved their joint trips, but he isn't good at taking that sort of an initiative, at suggesting anything like that. On a smaller scale, he certainly plans things, but Sherlock is the brave one who leaps into all the big decisions and makes it look easy. They've been talking about redoing the toilet in the hallway ever since they'd moved in, and Sherlock had actually been trying to get John to make some colour and material choices, but it doesn't interest him, and he never gets around to that sort of stuff.

The marriage proposal has been the only big thing John has initiated, no wonder it had left them both mostly just... baffled. Now, it feels as though it had never even happened. Partner, he said said to Molly when she'd asked about who Sherlock was. Boyfriend.


"You said that Sherlock put on display some things connected to your military service," Molly reminds him. "You sounded as though you were not entirely pleased with that."

"Well, I'm not angry about it," John counters, "It actually felt kind of nice that he didn't throw them out instead – that's what I would have assumed he'd do. Why would he want to look at that stuff? He should hate it, shouldn't he?"

"By displaying them, he may be trying to signal that he accepts it as part of your life. Or, that he is trying to do so."

"Wouldn't it be the same if I put his halo up on a shelf in the sitting room after he gets out of it?"
John clearly surprises them both with his suddenly biting tone.

"How did you initially react to what he did with the room, and how did your reaction affect the two of you afterwards?"

"I thought I was really positively surprised and let him know exactly that. I got home on a bad mood; hadn't slept at all. He'd bought a spare bed for the study not just for visitors but because he thought that I needed a choice in where to sleep. I thought he meant somewhere to crash post-call, but in hindsight, such an expensive, fancy bed was an odd move. We don't get houseguests, so why invest so much in it unless he assumed someone would be sleeping there often? Why would I want to sleep someplace else than where he is?" Why had Sherlock thought John wanted and needed a space without any trace of him in it?

Sherlock's words come to mind: 'You know I'm not any good with this sort of stuff. I need to learn to listen to you better and change before something makes you so mad that you have to yell at me about it.'

Molly interrupts his worrying train of thought again: "Does he need your help at night due to the halo vest?"

"It takes about five minutes trying to make him comfortable with all the pillows and rolled-up towels under his neck. He can sort all that out for himself if he wakes up at night, but he's taken to sleeping half of the night in a new TV chair – one of those adjustable reclining things. He used to hate my old one, said that it proved I have no sense of design, but instead of throwing it away he put even that in the study. That was nice."

"So, the redecoration was a good experience, even though it has left you wondering why he doesn't engage you in decision-making?"

"Yeah, I guess, if you look at the big picture. The room is lovely. He has good taste. I wouldn't have gotten around to doing stuff like that," he admits. Helping with sneaking into another hospital to look at some patient files, and dragging Sherlock's drugged-up arse out of a club once is not exactly the same, is it?

"It sounds like you have decided that gratitude should be the topmost impression on your mind, but something tells me there's still something bothering you about it?"

"I didn't know how much I wanted it until I saw it. I've been complaining about the flat for a long time, but I never did anything to change it. It was all Sherlock."

"Why do you think that is?"

"I've let him call the shots on a lot of things. He basically announced that we were going to move in together."

"Sometimes, when we're unsure about our choices, we are tempted to let other people make them for us so that there is someone else to blame if those choices don't turn out to be good ones."

Something about that really grates on John's nerves. "I did actually want to move in with him. Very much so."

"Were you ready for all the other aspects of a budding relationship at that time, John?"

They had moved fast. Really fast. Maybe he could have used a bit of time to get his head on straight; for John it was his first relationship with a man. It hadn't exactly helped that even though
for Sherlock, it was his first relationship, period – and he still sailed into it with no trouble at all. It's as though he'd seen John, said yes, and never looked back. No doubts, no regrets, no adjustment period, nothing, ever.

*He's so bloody perfect, even at this,* John thinks bitterly. Even if Sherlock is quite rubbish at many other aspects of a relationship, John has never doubted his dedication. Or his love.

John has liked to think that he has achieved a similar mind set of being happy with his choice of partner pretty fast, and that it has lasted. Hasn't it? He's mildly irritated at Molly digging around for all this; they should be talking about Afghanistan. On the other hand, he can only blame himself since this redecoration thing is he had offered up on a proverbial gold plate right after walking into the session.

"Would you say that moving in together has been the most significant step of commitment in your relationship?" Molly asks.

"Well, there are the rings."

Molly's brows rise. "*The rings?*

"We got engaged. After a year and a half, things were good, so I tried to get into a similar devil-may-care-let's-do-this attitude to Sherlock's. Or, maybe he did care, a whole lot more than I thought. He made it look so easy, committing. I didn't want to look like I wasn't doing that. I proposed during a trip to Italy. He said yes." Nothing more to it. John always feels like he should have some spectacular story to tell about it when someone asks, and it had been a very nice evening, and Sherlock had been exactly as flustered and happy and surprised as he had hoped, but something about it just isn't---- he doesn't even know what word he's looking for. *Long ago and far away,* maybe.

"You described him as your partner or boyfriend during our first session. You did not use the word fiancé. Is there a particular reason for that?"

*Damn it.* "Sherlock doesn't seem to care about all that stuff, about being like everyone else. I don't know if he even wants a wedding, or actually to get married. We never talked about that."

"You got engaged but did not discuss marriage?"

"Well, we did talk about---- that, a bit. Names, mostly, and decided we should keep our own. It felt anticlimactic, to be honest. I mean, he was shocked – in a good way – and it was great that he said yes, and I love him, but I expected it to feel more special, in some way. Afterwards, we just continued like before. We can't wear the rings at work, so I guess we sort of forgot about them. Sherlock wore his in a necklace for a while but kept forgetting it at home and getting annoyed by that, so I told him it didn't matter."

"*Did* it matter to you?"

"I don't know. I don't really want to think about it that much."

"How much do you think it means to him?"

"We aren't in a hurry. Maybe it was just a gesture, you know – a commitment, like you said. Who says you have to get married, anyway?"

Molly gives him a brief, strange look, and scribbles something down on her pad. John can read writing upside down, but not her small, squiggly freehand.
"Any other new developments with regards to Sherlock?" Molly asks.

"He researches things. That's always his solution when he doesn't understand something. He's been looking into stuff about Asperger's and long-term relationships. I'm worried that now that he's got so much time on his hands, he'll start cooking up theories about what's been going on."

"And what is that?" Molly sounds effortlessly neutral, but John can tell that it's a calculated effort in trying not to sound prying.

"Well, things," John says petulantly, "he isn't very confident when it comes to relationships. Or, dealing with other people in general. I don't know. Maybe he just keeps up with that stuff out of interest. Who the hell knows about Sherlock Holmes? I get tired, sometimes, trying to decipher him."

"Well, could you ask him about it?"

John stares at Molly. She can't really think people sit around talking about this stuff, just like that, can she? "Look, I find it... difficult. This sort of stuff. I'm having a hard time believing what I'm actually willing to tell you, and you're a ruddy therapist--- sorry."

Molly lifts up a hand. "No offence taken. I understood what you meant. You're right – it's not easy to initiate these kinds of conversations, especially with a romantic partner."

"I liked to think I didn't even have to, with him. One of my old girlfriends used to love analysing her friends' marriages with them and was constantly on my case about this and that, 'how do you feel about our relationship', that sort of rubbish. I hated it. Sherlock isn't like that at all, which is honestly a bloody relief. It used to feel like we didn't need to say important things out loud; we just knew."

"How is he coping with the halo, now that he's had it for a few weeks?"

"Counting the minutes, probably, to the day he gets rid of that contraption. He's cranky, he's uncomfortable, he's restless and he's getting stir-crazy cooped up in the flat. So, not much different to how he sometimes gets anyway, halo or no halo." John’s smile is rueful. "Shoving baby wipes under someone's shoulder straps cannot be turned into anything romantic. Believe me, I've tried."

"He still won't leave the flat? I thought it was allowed and even encouraged to keep up normal routines, do some light exercise such as going for walks?"

"I keep telling him exactly that, but he's so damned embarrassed to be seen with the halo. I'm not surprised; he always governs every damned lock of hair on his head so neurotically that it doesn't surprise me that such a big thing in his appearance would upset him this much."

John suddenly realises that it must have been a major thing for Sherlock to allow the renovations crew to see him in his current state. It may explain why he'd sounded so cranky in his text messages on Thursday.

"Would you describe him as vain, as opposed to yourself?"

"That sounds so... petty. I think there's some sort of a reason for it. He's never been good with people, probably was bullied a lot in school. Didn't get along with his peers at uni. Got along with no one at The National where he did a lot of his registrar training. He clearly protects himself by acting like a prick, by creating this invincible, unapproachable, distant, perfect personality that nothing can touch. Sometimes I think the way he looks and how much effort he puts into that might be a part of the act. He wants control. He wants to be so formidable that nobody dares to
give him any grief – offence is the best defence type of thing. Breaks my heart, because he really
isn't like that. I'm the only one who's allowed to see the real him, I think, if you don't count his
family."

John remembers the look on Sherlock's face when Anderson had appeared in the OR recovery area.
He should have kept that idiot away but instead, he had dismissed all of Sherlock's attempts at
trying to communicate how difficult everything was for him that morning.

Molly prompts him to continue with an upturned palm.

"I remember when I saw him the first time – he slammed open the OR doors, yelled at a nurse and
stormed out. I remember thinking: who is this prick who thinks he can behave like that even
though he's just a registrar, you know? He had balls, I'll give you that. I just didn't realise what he
was trying to hide. I thought he was a genuine arsehole."

"What changed your opinion?"

"I chewed him out – for good reason, mind you – in theatre. I thought he was going to hate me for
that forever, but then he walks into my office and tells me things I don't think he's voluntarily told a
single soul. Somehow, me daring to take him on, to demand that he should try harder to do better,
made him think I cared. I did, even though I didn't know why. Everyone else just left him to his
own devices, thought that he could never do things any other way. It was like they wanted to see
him fail. After he told me stuff about himself, I got mad. I wouldn't accept the way people treated
him, because I realised how damned hard he tries. He's amazing. He never gives up, if he gets a bit
of encouragement. He also confused me the hell out of me back then; *God*, it was so weird to
realise what was actually going on between us." John shakes his head.

He remembers it so clearly, the moment the two of them had become an *us*. It wasn't typical of him
at all, what he'd done: kissed Sherlock, at work, in broad daylight. Even when he'd dated
colleagues before he'd always taken care to act very proper during office hours.

He'd even shagged Sherlock in the anaesthesia on-call room. Repeatedly.

Sherlock surprises him, but also makes John surprise *himself*.

He loves that.

Again, John thinks that it's not fair – him, sitting here complaining about things and giving such a
one-sided account of their history when Sherlock isn't here to defend himself and to offer his side
of the story. "He wouldn't want me to discuss any of this with you. He did a fantastic thing for me
by redecorating that room. I should be grateful, not overanalyse it, and him, to bits. Can we talk
about something else? It makes me feel kind of shitty, talking about him behind his back," John
pleads. "In fact, I’d like a break to go use the washroom; I won’t be long."

"Of course. I have a cancellation after this, so we can take our time. It would be good to get some
basics covered today, since we've only started the process, and wanted to give you an opportunity
to explore what was on your mind when you came in."

"Fine," John relents. The thought of an extended session does not entice, but if that's what Molly
thinks is necessary, then so be it.
Chapter End Notes

Fret not: we shall give you part 2 of this chapter tomorrow.

Also: if the mention of an engagement made you go "what the flaming fuckburns???, don't worry – that whole thing has only been mentioned once (in "Blood Thicker Than Water"). There are reasons for it being such an odd non-issue. All will be explored in good time.
After John has spent ten minutes mostly staring out the small window in the washroom, trying to empty his head, Molly restarts the session by asking him to describe his career.

"I never really planned it, I just sort of... tried to keep all possible options open. I was never that passionate about the science itself – not like Sherlock is. I was more into what you could do with a medical education. Anaesthesia seemed like a good fit: skills you could take anywhere, little paperwork, concrete stuff you did with your hands – a well-rounded thing. During foundation training, I hated the packed minute schedules of GP work, the routine stuff at wards when I was a House Officer and having to wait months to see if something I'd prescribed had helped. I like seeing instant results of my work, I enjoy the teamwork aspect of being in the OR and the camaraderie, even though the surgeons sometimes treat us gas people like janitors." He shifts in his chair. "I like change and variety. I didn't mind the part of the training that required moving from job to job. I'm not a person who enjoys routines."

"Do you think you may have decided to enlist in RAMC because unpredictability and change are important to your work satisfaction?" Molly asks.

It feels like a reasonable question. "No, not really – I didn't examine that choice too carefully. To be honest, maybe part of why I did it was Natalie. I was never a steady relationship person – maybe I'm still not. She was dropping hints about engagement, but something just wasn't clicking. Nothing ever really clicked with anyone. I had a bunch of girlfriends during uni and before that, and like Nat they tended to read more into things than me – I mostly just wanted to have a bit of fun. I let them think I was interested in more because the attention was flattering. Nat was more persistent than most, and we weren't in our twenties anymore; it was a reasonable assumption on her part that things would start to get more serious. I should have just called it quits with her. I don't know why I didn't. It was a relief to leave, and I was hoping she'd take the hint and move on if I stayed away long enough. She did."

"Were you in contact with her after you returned from your first deployment?"

"Yeah, she worked at King's up until recently. It wasn't a problem, because our thing fizzled out, died a natural death. I just thought that was how it was always going to go, and we didn't need some big conversation about going our separate ways. Didn't even live together. After uni, I've dated mostly other doctors. We tend to be so married to our work that it's kind of unfair to force anyone else to adapt to that. Weirdly enough, even though I meet so many of them, Sherlock's the only surgeon I've been with."

"There are many successful marriages with only one doctor. As there are ones consisting of two physicians."

"I like the fact that Sherlock's a surgeon. I love working together in theatre, and it's a huge convenience that he understands what the job's like. I understand the hours he has to put in and the frustrations he has sometimes."

"You said it never clicked with anyone, before. What about with Sherlock?"
"It definitely did. It was confusing and surprising and exciting to realise that's how things should have felt like with all those other people; that the feeling that I was waiting for – something better, something more, wasn't just me being too picky and thinking the grass would always be greener on the other side. Finally, I had it and it was real instead of just wishful thinking."

"You fell in love with him," Molly concludes.

"God, yes," John laughs. "Though it took me a while to catch on to the fact that the way I felt had a name. I guess it was the him-being-a-bloke thing that threw me a bit. I keep surprising myself with him: it didn't bother me at all, things turning serious enough for us to move in together, and then the marriage proposal. The long haul," John's adds, and his grin turns into a thoughtful crunch of his brows. "How is that even logical – that out of all the people I've been with, he'd be the one to get me to settle down without wanting to instantly run for the hills? He's the most counter-intuitive person to be in a relationship I've ever met, and yet it works, it always has."

Here he is, yammering on about Sherlock again, even though he'd told Molly to change the subject.

"Is that what happened to you, before – that you 'ran for the hills' when things got serious?"

"It just felt fair, ending things before they went beyond what I was prepared for."

"How should a person prepare for things getting serious?"

John spreads his palms. "How the hell should I know? It just happened with Sherlock in a way that could never have happened between me and Natalie."

"You described yourself as relationship-averse," Molly points out. "Could it be that Sherlock didn't come with the usual sorts of assumptions and expectations people have of how a relationship works? That the usual roles assigned to a man in a heterosexual partnership didn't apply?"

John mulls on this for a moment. "That does make sense."

"You said that he has got you to settle down. But, you still looked for a change and chose redeployment. Do you see wanting to go to Afghanistan for the second time as a mostly career-related thing, as opposed to what happened with Natalie?"

"I think so. I think it was different."

"Did your decision to re-enlist impact your relationship with Sherlock before you left?"

"I thought it was fine. Well, he didn't stand in the way of my going. Like I said, before I left, things tended to go the way he wants. It's all about his award ceremonies, his choices for a holiday, his research. I don't have those commitments, and I usually don't have very strong opinions about holidays, but it was nice to say for once that I have a thing, now, too, to which he has to adapt to. It wasn't revenge, I wasn't trying to spite him. It just felt good to have a... John Watson thing."

"You were asserting your independence?"

He shrugs. "Maybe. Lot of good that did me."

"So, Sherlock was not opposed to your departure?"

"No. Not then. Now, after everything, I think he just didn't know what to make of it. I thought he would have protested at least a little. Maybe I would have liked that."
'It would have been proof of his attachment to you?'

'I don't need proof. I know. I don't know what I wanted, but it sure as hell wasn't for him to throw a strop and tell me not to go. I don't think I could have left if he'd seemed miserable about it. I sure as hell wouldn't have left if I knew what a mess it would turn out to be. I just want to get on with my life. Our life," he pleads no one and nothing in particular. “Even if just the nightmares stopped, that would be a huge improvement.” He looks at a wall, unconvinced that all this talking is getting him any closer to that happening.

'Would you have expected them to stop by now?'

'I don't know. Should they have?'

'Nightmares about a traumatic event are often thought of as the brain processing things, reorganising information. They can't really be regulated or willed away. You can't stop a bullet with just your will any more than you can stop dreams from appearing, it seems. What you can do is to be patient, try to manage the stress level in your life while you're processing your experiences and to use certain techniques to stop emotions from overwhelming you when you're awake. Those we can work on during these sessions."

John really doesn't want to tell Molly about the panic attacks at work. He's not sure why, since he has already discussed much more intimate things with her. It's all just so bloody embarrassing: he's a soldier, an army doctor used to blood and gore and death and risky situations.

He shouldn't be here. He thought he was better than this. He thought he was better in a crisis than he is, now. Yesterday, what had happened with Sherlock's back had shattered the last of what must have been an overblown sense of his own abilities in a crisis.

Molly shuffles the papers on her clipboard. 'I'd like to go over a survey. You don't have to volunteer details, just say yes or no. It's called a TSQ – Trauma Screening Questionnaire.'

'Whatever.' John wearily sighs. He supposes she feels she has to do this; another box to be ticked off.

'Have you had upsetting thoughts or memories about Afghanistan coming into your consciousness against your will?'

'I don't like thinking about it, but I don't suddenly get uncontrollably upset if something reminds me of it. No.'

A lie. He's lying to a bloody psychiatrist and he doesn't even know why. Christ.

'You've had upsetting dreams about it, though?'

'Yes.'

'Have you felt momentarily as though it's happening again, after memories were triggered by something?'

Loud noises. News programs he catches a glimpse of. When he had knelt by Sherlock on the floor, he had barely been able to stop himself from tumbling right into panic. "Yes. I guess it also counts as upsetting thoughts appearing against my will. It happens."

Molly's expression is full of understanding and acceptance, and John knows that all the shame is in his head, that it's probably not how others view him. He's the one who creates that shame and holds
on to it, nobody else. But, awareness of its subjectivity doesn't make it go away. It doesn't change what he is – a has-been, invalided home, someone who will most likely only be remembered for whose spouse he was. Partner. Boyfriend. Whatever. "Can that----" John starts before he even has a question formulated in his head.

"Can what?" Molly asks.

"The things--- replaying in my head," John describes, rolling his wrist in the air to emphasize his point, "if they affect my work performance, will I ever get back to my old skill level if it doesn’t stop happening?"

"What skills have suffered lately, do you think?"

Of course, she'd ask. "I used to sort of enjoy emergencies: the challenge of having to work with lots of distractions, to make quick decision, to work together with others according to a rehearsed protocol. Now, I get---- I panic, alright?" his tone is accusatory.

He's challenging Molly to judge him, to tell him that yes, he is the failure he fears being since he's here.

"What you described are situations that require extreme levels of confidence, cognitive processing abilities and emotional fortitude. Anything that drains your energy, makes you question your competency and your tenacity can greatly affect your performance in such scenarios. But, if whatever is dragging you down is addressed in therapy, your performance is very likely to improve, even become better than before because you'll be more aware of your personal challenges and the way you react in stressful situations."

"Well, great." John is still sceptical, generally, towards therapy, but what Molly has said does offer some consolation.

"You want this therapy to fix your work performance," Molly repeats.

"Yeah."

"Is that your most important goal?"

"Excuse me?"

"During our first session, you told me you're here for Sherlock. Today, your focus seems to be on making your symptoms stop so that you could go back to business as usual."

"Are those not good goals?" John's tone is slightly biting. What the hell does Molly want from him? "Or are you trying to tell me what I’m supposed to be aiming for here?"

"I'd like to propose an alternate route: what if your first priority was to get better? To feel good about yourself?"

John decides he doesn't like her phrasing because it insinuates that he's not well. No, he's certainly not fond of himself right now, but it's hardly his fault.

When he doesn't reply, Molly ploughs on with the questionnaire: "Have you had any physical symptoms connected to intrusive thoughts or triggering events? Racing heart, shaking hands, sweating palms, that sort of thing?"

"Yeah, but they don’t last long, and I can control my reactions afterwards." Well, there had been
that one time at the hotel in Islamabad... John sternly shoves that thought away, only to have it replaced with the memory of the pan of instruments hitting the floor with a bang in theatre, and him ending up hyperventilating in the loo because of it. He knows his reaction to Sherlock on the floor in pain two days ago had not been that of a calm and collected medical professional. Still, it's hard for him to estimate which part of it would have been normal and acceptable since Sherlock isn't his patient but his partner.

Is forty minutes of utter uselessness after the incident at work a long time or a short time?

"Has Sherlock witnessed these events?" Molly asks.

"Is that on the questionnaire?" John snaps back. He doesn't want Molly to start digging too deep. He doesn't want to think about his own hands around Sherlock's throat in that hotel room in flashback-induced panic.

*It happened.* That's all the acknowledgement it deserves. At least it has only happened once.

"Besides the dreams, has it been difficult to fall asleep or maintain sleep?"

"It was worse at first. Now, I'm deprived enough that I'd fall asleep even if Sherlock didn't keep both of us up. I hate waking up nowadays, though – you know that short moment when you sometimes don't know where you are? I tend to think I'm back in Afghanistan and that's..." he trails out, not finding the right words.

Molly lets him off the hook, probably because they're approaching the end of the session and there are questions left: "Have you been irritable or snapped at people more than before?"

John sighs. "Yeah; mostly at Sherlock. I try to maintain a professional image at the hospital."

It doesn't sound fair, does it, that it all gets channelled towards one person? He searches for judgment or disapproval in Molly's expression, but finds nothing else than her usual, neutral demeanour.

"Have you had difficulty concentrating?"

It's hard to say whether it had been the copious amount of scotch or something connected to Afghanistan that had caused this after he'd come home. Thankfully, the problem had resolved itself after he went back to work. “No. Not anymore.”

"What about heightened awareness to potential dangers to yourself and others? When you came in for your first appointment, you were very worried about Sherlock. Do you think part of that worry may have been excessive?"

"You sure like your fishing expeditions," John points out coldly. “I like to think I'm entitled to be worried about someone who's important to me.”

"Yes, of course," Molly confirms, then smirks: "still, this is what they pay me for – digging around for things that might mean something. Is that a yes to the question?"

"Maybe. How many more are there?"

"Just one: have you been more easily startled than before, jumpy, that sort of thing?"

"Yeah. Loud noises that sound like gunfire are particularly annoying. How many points did I get, then? Certified nut job?"
"Going through something that would test anyone's mental and emotional limits does not make you a nut job, John."

"I know. It's just that.... I'm sitting here, and so many of my army colleagues aren't."

Molly looks thoughtful. "Do you think that is because they don't have issues that might benefit from a consultation, or because they are good at concealing them?"

"I don't know! I can't even tell what's going on in Sherlock's head when I'm supposed to be so damned close to him, so am I really supposed to read everybody else's mind as well?!"

John regrets the outburst as soon as it has happened and wonders what Molly will make of it. She looks unfazed.

"Is it not understanding Sherlock that is most upsetting to you?"

"It matters more to me than what other people think, yes, which is why I need to get past all this Afghanistan crap and focus on the here and now."

"You sound frustrated."

This is yet another statement by Molly which should feel irritatingly obvious, but instead, John finds himself oddly relieved. It feels good that someone is acknowledging how difficult it is to communicate about these things. He needs to sort through all this on his own or with someone else than Sherlock first, because if John tried to talk to him and ended up saying something half-cooked, something he was unsure about, it could lead to disaster since Sherlock takes everything so seriously and so literally when it comes to their relationship. And, he doesn't exactly open up in return, since he's someone who guards himself even more fiercely as John does. Besides, he seems to get so worried and so nervous if John is visibly upset, as though there's something he thinks he ought to be doing that he isn't. He hides things he thinks will upset John. Neither of them is a person who would openly blather about their emotions, but the stuff Sherlock conceals from him... Jesus. The lorazepam thing had just blown his mind.

Why won't Sherlock trust him?

"John?"

"You asked me why I'm here: to be honest, part of that was wanting to prove that I don't need this. Maybe I do; maybe I don't. Jury's still out. But, I did mean it when I said I need to know what to do about Sherlock. I'm the only one he tells certain kinds of things. But, turns out he only tells me some of them. I don't know why. I don't know what that has to do with Afghanistan. Probably nothing, but it's not helping."

"I'm at your disposal with any and all things that are troubling you."

"I think he hides things from me that have to do with--- he hides things that he thinks will change my opinion of him."

"You think he's keeping up appearances? Building a facade?"

"He never told me how hard a time he was having when I was away until we had a massive fight and it all came out. He didn't explain why the halo is a particularly big deal for him until we were arguing, and the reason we got into that fight was that I didn't have that information. Why won't he trust me?"
"Trust you to do what?"

"What do you mean?"

"What is the purpose of the trust you're seeking? Why is that required in your relationship?"

Is Molly being deliberately obtuse? Isn't trust supposed to be a feature of every healthy relationship? "I want him to trust me so that he can be himself around me. I want him to know that it won't change the way I feel about him if he reveals those things."

"It sounds like he fears rejection – of his person, his needs, or perhaps he fears the end of a relationship. Most of us have those fears sometimes, John. You, feeling like you're out of his league, is the same thing – it's you fearing that he will find someone who better fits the criteria you imagine someone like him should adhere to when selecting a partner. If he conceals things from you, he may well be worrying that those things could be some sort of a deal-breaker."

"He chewed me out for not understanding what it's like to be him. How could I, if he never tells me? If it's such a bloody unique experience, then it's unfair assuming anyone could, even if they tried. He makes it sound like an impossible task, then chews me up for not being able to do it. How the hell is that fair?"

"Is there a particular thing he might worry about? Something that may have led to interpersonal conflicts before?"

"I told you about his autism diagnosis. I admit I never looked into it much – Sherlock is Sherlock, you know, I didn't want to start labelling him and it never was a big deal for me. I guess it didn't really sink in what it really means before we had that massive fight. He's done so well; I mean, he's not exactly what people usually think about when someone mentions autism or Asperger's. And, I really didn't get what it means to have that thing that's connected to it – he had some abbreviation for it, makes him unusually sensitive to stuff?"

"Sensory processing disorder? It's a common feature of ASD."

"That's the one. Usually he's such a whiny drama queen when he's ill and it's obvious he's been miserable with the halo, but until he told me I had no idea why it was such a particularly massive deal for him. That processing thing explains a lot, now that I've done some googling. I knew that he had issues with clothing and light and noise and all that, but I didn't really understand where those things come from. Why the hell has he been hiding all that?" John thinks he must sound like a broken record. What chance does he have of fixing things when they're both so rubbish at opening their mouths?

"There may not be just one answer to that, but let's go back to what you said during our first session: you're here because you feel like you aren't currently providing him the support he needs. It sounded tremendously self-aware of you, and I think it may provide a partial answer to your question. Like I said, when we feel that someone is not receptive to our needs, we often conceal those needs to protect ourselves. We do it to avoid feeling rejected and ridiculed."

"I'd never make fun of him about those things or not believe him! I'd never treat him badly if he came to me with those issues! He's punishing me for not acting on information I never received."

"Your injury and its aftermath must have been very stressful and novel experiences for him. Do you think he feels responsible for your recovery?"

"Why would he think that? That's ridiculous. He didn’t even want me to go to Afghanistan. It was
"Bear with me, John. He's a doctor, and judging by what you've told me about him and his diagnosis, he may well attempt to solve emotional problems and relationship challenges in very concrete ways. Your recovery has been very much in the limelight of your relationship lately; do you think he might feel like it still is?"

"He told me I hide from my problems, pretend they don't exist. Pot, kettle."

"What I'm saying is that maybe he doesn't feel that this is the right time to communicate his needs, if you seem preoccupied with your own."

John is still chewing over that last comment when Molly drops a bomb: "I'd like you to bring Sherlock along for our next session."

"What? Why?" John is tempted to laugh out loud at the notion; Sherlock would never agree. Judging by what John has now learned about his past, he has probably had enough of therapists and other mental health professionals and of neurologists and paediatricians, too, for a lifetime. If he won't talk to John, why the hell would he talk to a stranger?

"You feel guilty about discussing him, so you might feel better if you opened up to him what we do here. While this is not couples' therapy, it is already obvious that your relationship with him is central to your motivation for seeking help in the first place, and thus it will also play a big role in navigating through your recovery."

John is tempted to protest that he considers himself quite recovered from the shoulder wound, but that would probably lead to the therapist forcing him to once again own up to the fact that there are other things he needs to recover from. "I can ask him, but don't expect him to show up."

"Why is that? Do you think he wouldn't be willing to support you by coming?"

"It's not that. He's been... amazingly supportive, in some ways. He put up with a lot in Afghanistan and after I came home," John admits. "It's just that he will probably feel like he's being put on the spot and he's obviously had bad experiences with others forcing help down his throat."

"It may help if you explain to him that it's still your therapy session; that this is for your benefit and not a covert plan to dig up things from his past. I will do my best to put him at ease," Molly promises.

John sighs. Pigs will fly before Sherlock Holmes is found sitting in this office. "I'll ask him, but don't get your hopes up."

"I'd like you do two things at home with him. First of all, invite him along. Second – call it homework, if you want – I'd like you to sit Sherlock down tonight and ask him how he's doing. Then, you listen. You just listen. Don't rephrase him, don't put words in his mouth, don't turn the conversation to yourself. Just listen, and have a think on what he says and especially what he doesn't say. He may be suspicious or surprised at you asking him such a question if your communications have been strained lately, so don't expect too much, but give it a try."

"I've probably heard most of it already. He'll complain about the halo."

"You've already heard him do that, yes, but have you listened properly, without instantly icing it all with your own assumptions and misgivings and annoyances?"

John curls his fingers around the armrests. His gut tells him Molly is right.
John puts the paper bag of Chinese takeaway on the kitchen island, digs out plates and cutlery and creates two servings from the contents of the cartons. He takes the plates to the coffee table; Sherlock is sitting on the sofa, a pillow fort built behind his back. He had hummed in reply to John's hello, seemingly engrossed in a documentary about the human genome.

John sits down next to him, lifts a leg up on a footstool and lets his thoughts wander while keeping an eye on the images flickering on the TV screen. After the documentary ends, he puts down his empty plate and places his palm on Sherlock's knee. The other plate on the coffee table has been pecked at, at least. Don't nag him about eating right now.

Sherlock's eyes flit towards him but because of the halo, he has to shift slightly sideways under John's hand so that he can actually see his partner.

"What have you been up to today?" John asks.

Sherlock spreads his arms, indicating the sofa and the television.

John strokes his thigh with his thumb. "How are things?"

Sherlock's eyes narrow in suspicion. "Why?" He sounds defensive, along the lines of what have I done now?

"Just asking."

"Did that therapist of yours put you up to this?"

Of course, the bloody genius would see right through this. Anger stirs, but John keeps it from spilling over. "You'd like her. She was an army doctor, too."


John bites his tongue for a moment. He knows he's been doing this, too: throwing sarcasm and dismissal at Sherlock at every turn. Pot and kettle.

The news comes on and Sherlock retreats slightly, eyes fixed on the TV screen. He never really watches the news, so he must be seeking a distraction.

"How are you feeling?" John asks again, and it sounds so fake he wants to quit trying. He feels like a fraud, sitting here demanding attention.

"Nothing's wrong. I haven't fallen over, I haven't done anything dangerous; there are no new developments you need to worry about. I know how taxing that is."

Now that John is making an effort to see past his own anger, Sherlock's hedgehog-like defence tactic is actually quite amusing: he's so prickly and curled up tight that no one can get through. No one, except for John, assuming he puts in the effort. He just might be the only one whose resilience sometimes pays off. He wonders if he should raise the subject of Sherlock picking up his research again. He finds himself a little reluctant to do that, fearing it might sound like nagging. But, there aren't that many ways in which to ask someone how they are doing. He feels like he's already run out.
Time to change tack. "How did last night go – I don't think I heard you get up as many times as you usually do? I do appreciate what you did for me with the redecorated study, but I don't know if I'll be any good at sleeping alone. I only do that during call nowadays."

During the early stages of their relationship, if they happened to be on call at the same time, Sherlock sometimes showed up at the anaesthesia call room and curled up next to John, instead of going to the separate room reserved for the neurosurgeon on call. He eventually stopped doing it after deciding that the frequent phone calls John got from A&E during the early hours of the morning were too annoying.

John notices that Sherlock's left thumb is quickly flicking across his other fingertips. He looks slightly distressed while still keeping his eyes fixed forward on the television. John recognises this look – it's when he doesn't know what the person he's forced to interact wants of him, making him panic a bit. John removes his hand from his leg to give him some space. Since asking about sleep isn't making Sherlock talk, he needs to find yet another angle to try.

Laura Arthur had texted John at ten this morning; she had stopped by to tighten the pins on her way home. Her message had been short: 'everything's fine'. John had wondered if she'd been only referring to the pins. She knows he worries. If the control CT on Friday looks good, the pins will only have to be tightened every two weeks instead of several times a week. Being spared of weekly trips to King's College will be a huge relief for Sherlock and this morning, he had been able to get out of bed without complaining of back pain, so that must be getting better, too.

"Did the tightening help with your neck? I remember Laura saying that patients sometimes feel better after it's done," John suggests. He almost adds the explanation that it's probably because there's less motion in the neck muscles, but decides against it, because Sherlock hates people educating him on stuff he's already aware of.

Sherlock runs his fingers along the back of his neck. "It's better. Still feels stiff, which is illogical, considering I can't move it." He turns back to face John a bit more again, studying his expression. It seems that he's waiting for something, or perhaps preparing for something from John – maybe some nagging, maybe a dismissive comment about him complaining about things.

All John does in reply is to nod a bit. Here to listen, he reminds himself.

"I didn’t want to sleep this afternoon, because the sheet music for the polyphonic motets of Lassus arrived," Sherlock says hesitantly. "I've been meaning to have a listen on a Mariner-conducted performance while following them."

"Well, you've definitely got the time for it now," John prompts. He's worried that referring to the sick leave might not go down well, but Sherlock's expression doesn't harden from the tentative caution that has taken over.

He wants to encourage Sherlock to talk more, so he prompts again, "Polyphonic. That's---"

"When all the voice groups or instruments have separate main themes or melodies which are performed simultaneously. Bach's Toccata and Fugue in D minor is an example most people are familiar with." Sherlock seems to relax a bit now that he's no longer the topic of conversation.

"Right." Think of something think of something don't let him drift out of reach--- "Well, I have a suggestion for something else, if that turns out to be a bore, or if you don't feel like taking up your research. I know we never got around to having a look at colour schemes for renovating the loo. You could have a go at it since you did such a great job on the study."
Neither of them can usually spare the time to contact potential contractors during office hours, but Sherlock could easily do that now. It would be good if he had another project, because John is convinced that the polyphonic motets of what’s-his-face will not keep him entertained for long. Besides, listening to music will probably remind Sherlock of not being able to play his violin until the halo comes off. John has seen him hold it in his lap and pluck it a few days ago – *pizzicato*, John thinks that technique is called, but it's hardly the same as being able to lift it up on his shoulder and play properly with a bow, is it?

"Maybe."

"And, it would be handy if you could do the Ocado list for the usual Saturday delivery? See what we need and order it?" John suggests. "Maybe slip in a few treats for the weekend?" On the rare occasions when Sherlock has done their order, John has discovered an unholy number of cartons of luxury ice cream and some odd, not even edible stuff in the delivery bags. It's probably best that he doesn't even know what Sherlock had done with all that blue tack, bamboo skewers, superglue, beef jerky and dried peas.

"Alright." Sherlock clearly isn't thrilled by the idea. Perhaps such a routine domestic chore merely reminds him of his inability to do things he really values.

John scrambles to come up with something better to suggest. Then again, why does he have a desperate need to come up with entertainment? What does he fear will happen if Sherlock gets terminally bored?

Silence lingers on before Sherlock speaks up again. He looks thoughtful, almost timid. "Before Saturday, could you get us yoghurt or a soft cereal? Toast is hard to swallow," he admits quietly.

John glances at his plate of Chinese food on the table, of which only about a quarter has disappeared. He realises Sherlock has left all the larger bits uneaten, mostly going for the rice. His usual favourite—the crispy, fried cashews—sit on the side of the plate, carefully shoved aside.

Since Sherlock had already said that there are no new developments, is this swallowing thing something that's been bothering him from the start? Molly's words about him perhaps feeling like there's no space in their relationship for his problems comes to mind. Has John been nagging so much about the eating that Sherlock has decided to hide this, too, in order not to provoke him? All the guidebooks say that the halo vest can make it surprisingly cumbersome to swallow larger bits of food.

*No wonder he's losing weight.* John had realised this when helping Sherlock into the bath two nights ago. He had been very slim to start with, and can't afford to lose much before ribs really start to show.

John wants to grab his coat right now, jog to the nearest Tesco Metro and fill their freezer with ice cream and their fridge with everything he can possibly come up with that'll go down easily, but he realises he needs to avoid overreacting.

He needs to tread carefully right now. "Absolutely," he promises. "It'd be nice to have a bit of change to our usual breakfast. I'll pop out later tonight."

He thinks he can spot barely concealed relief in the way Sherlock exhales and leans back against the sofa. They’re *talking*, instead of being at each other's throats. Why on Earth has this seemed too impossible lately? He realises that Sherlock has been treating him like he treats people at work: as though he's someone who might hurt him if he doesn't chase them off first.
"God, how did we end up like this?"

"What do you talk about, with her?" Sherlock suddenly asks.

John instantly realises he must be referring to Molly. There’s an unspoken question hidden there: do you talk about me? At first, he wants to refrain from answering because the question feels intrusive, but John reminds himself that everything that's bothering him is impacting them both. While he doesn't have to share all the details, Sherlock does have the right to ask about the therapy sessions.

"It depends on the day. We talk surprisingly little about Afghanistan – well, so far, at least. It's becoming more important that we focus on why I wanted to go there. What I was looking for. Maybe I didn't know exactly what that was. Still don't."

Sherlock is looking at him expectantly, but right now John doesn't feel comfortable explaining further. It's too complicated – it's still all a huge mess – and John understands infuriatingly little of it himself at this point.

"Do you think it's useful, talking to her?" Sherlock asks.

"I think so, yeah." John is surprised at how readily he offers the answer. "Can't do much harm, can it?"

Sherlock opens his mouth, then determinedly closes it, as though he had considered disagreeing. John knows he had received his Asperger diagnosis at a young age and he has sometimes wondered what sorts of help or support Sherlock had received to get him through his studies. Judging by the information John has been able to glean from his brother and his parents, Sherlock's childhood had been quite ordinary, and his parents seem as though they must have been very attentive still to their two boys, but Sherlock doesn't talk about any of it voluntarily. John knows that not long ago, children with developmental difficulties did not receive all that much understanding from professionals. They were forced to conform, and school can be brutal to kids who are even a little bit different, let alone like Sherlock.

To be fair, John doesn't advertise his own childhood much, either. He likes to think that those experiences don't matter, that they have little bearing in his life now, but he acknowledges the potential naiveté in such thinking.

He decides they’ve both had enough of this conversation. Molly's suggestion that he should invite Sherlock along for the next therapy session remains undiscussed – something tells John that taking that up right now would be too much. It would also make their whole talk feel like a prelude to the request.

"Movie?" he suggests. He rarely manages to find one that will retain Sherlock's interest, even though he always defers to John to make the decision – probably because he knows as little about pop culture and current entertainment as John does about polyphonic motets.

"We could continue Planet Earth." Documentaries are something that Sherlock generally prefers to fictional films.

John had forgotten that they were halfway through the box set of the first season. "Sure."
Many of you have been worried about what's going on inside the formidable brain of our favourite consulting neurosurgeon, and the next chapter will let you slip into his noggin again.
John has gone to fetch their dry cleaning and has forgotten his phone on the kitchen counter. Sherlock glares at the offending item, angry at himself for being slightly unnerved by the fact that he has no way to reach John for at least fifteen minutes. They haven't communicated much during John's workdays, but the back pain debacle has made him appreciate being able to reach someone if he needs to.

Although doing so for the duration of the halo treatment is highly tempting, he knows that becoming a recluse would not be good for him. He had surprised himself by actually having looked forward to yesterday's visit by his personal torturer. Without prompting, as though it was a standard part of a house call, Laura Arthur had made tea again and they'd sat by the kitchen table discussing the emergency management of traumatic subdural and epidural haematomas. It had felt good, talking about work; it made him feel less like a patient. He and Laura had even ended up throwing around ideas for joint teaching sessions for orthopaedics registrars on back injuries – a territory shared and sometimes even argued over by Laura's field and neurosurgery. Not that Sherlock would be running any such sessions; teaching is very much not his forte. He quickly loses patience with idiots and in theatre he likes to keep his concentration on the task at hand instead of dividing it between the surgical field and a registrar or a medical student. He knows students draw straws on who's forced to sit in at his outpatient clinic instead of some other surgeon's sessions.

At least he has ideas to offer someone like Laura who clearly excels teaching. John seems to enjoy it as well but then again, John likes people, and people like him.

The subject matter of his conversation with the orthopaedist had reminded Sherlock of his brother, who he has not yet informed about the halo. He hasn't contacted any other family members, either, because there is little they can do: the acute danger is being managed, and most likely there will be no lasting consequences to this injury. Trying to explain how it happened would require an admission that he struggles with sensory overload at work, and that's something his parents most likely do not want to be reminded about. They'd probably comment that choosing such a career was always going to be difficult, which he should have realised – as though he had not been painfully aware of the fact all his life. If he tries only to tell Mycroft, then his brother would inevitably tattle to their parents as well, based on some illogical and pointless social convention.

Fortunately, it doesn't seem to have occurred to John to wonder about his family's awareness, or lack thereof. The likely explanation for this is that John does not have any immediate family to consider, apart from his sister whose alcoholism clearly causes great strain in their sibling relationship.

Sherlock is startled when the phone left on the table starts ringing. He shoves it backwards with his forefinger when the vibration threatens to rattle it off the table.

'Andrew', the caller ID says. Since no surname has been programmed in, this must be the only person by that first name who is significant to John. Thus, he must be the same person whose engagement party Sherlock had opted out of attending.

He realises this is a chance to mend some bridges. Would John appreciate the gesture if he apologised for not being able to attend? He grabs the phone and presses the green receiver, likely just before the call would have gone to the message service. "Hello?"
"John?" the voice at the other end asks suspiciously.

Sherlock is aware that their normal speaking voices have a very differing register. "This is Sherlock Holmes answering John Watson's phone."

"Well--- hello. Nice to have caught you instead; John's been telling us all about you."

"He has a tendency for cliché and hyperbole."

There's a slight, confounded pause, before Andrew asks: "Is he there?"

"He'll be back shortly," Sherlock explains, then clears his throat in preparation for addressing the matter of the missed party. It's always a leap of faith for him, attempting something like this; he often gets something wrong and the whole thing implodes in his face. "Apologies for missing your event. I'm glad John was able to attend, at least."

"It's alright; he explained why you couldn't come. That thing must be awful, and for twelve bloody weeks?" Andrew whistles.

He sounds empathetic; perhaps Sherlock has chosen his words correctly. He would be curious to know what exactly John had told the others at the party, considering the state of anger in which he'd left the flat. Sherlock refrains from asking about it, since the damage is already done. What is he supposed to say now, since placations have already been made and this person and he are complete strangers, their only connection a mutual acquaintance? "You know John from Afghanistan, then?" Sherlock suggests.

"Yeah, mostly. We did some of our foundation training together as well before that – used to have a pint regularly to commiserate over our rubbish placements and arsehole consultants. I haven't seen him since he left Afghanistan," Andrew laments.

Sherlock almost protests that John leaving Afghanistan behind didn't happen a very long time ago and that their social life hasn't been very active altogether afterwards, but then he realises that Andrew is probably speaking about the first time John signed up for the army. Maybe Andrew doesn't even know about John's second tour. It would seem likely, since John wouldn't want the conversation to then turn to why it was cut short. "I didn't know him back then."

Andrew laughs. "I feel like I don't know him now. Big boss at King's, eh, and dating a bloke! No offence," he hastens to add. "It's just surprising, is all."

Sherlock grits his teeth. Why does it surprise even medical professionals that relatively few people are at the extreme ends of the Kinsey scale?

"He says you've been together for three years already. Must be a really good sign; our Johnny's girlfriends never stuck around for that long. That last one I met, what was her name now? Right, Natalie – I think part of him running into the open arms of Her Majesty's Armed Services was that she thought their thing was getting way more serious than our Three Continents Watson wanted."

Natalie? As in Natalie Temple? She had been working at King's College still when Sherlock had joined the hospital's ranks, but had since moved to Wales. He had not paid her much attention since she wasn't a neuroanaesthetist.

He has no idea how to reply to any of what Andrew has just said.

"I'm here for another month as a visiting teacher before heading back to Singapore. It would be great to meet up before we come back in the spring for the wedding. The two of you should come
to dinner sometime so we could catch up. You know how parties are; you can't really talk to anyone properly," Andrew complains.

Sherlock can't say he really knows about parties, because he tries to avoid attending them. He won't be out of the halo by the time Andrew leaves London, and attending a dinner is the last thing he wants to do. He may have to, since declining would very likely cause another row with John. "I will pass on the invitation when I tell John you called. Is there another message you'd like me to convey?"

"Nah. Nothing important. Just wanted to thank him for the engagement present."

Sherlock refrains from asking what John had purchased for the couple, since he doesn't give a toss. They exchange pointless farewells and ring off. Sherlock drops to perch on a bar stool, John's phone still in hand, trying to sift through the puzzles pieces he has just been handed.

He isn't alarmed that John had dated a co-worker. He is also well aware that John has not been openly involved with a man prior to meeting him. But, what on Earth does 'three continents' mean? It is not an idiom he recognises. A quick analysis leaves only one feasible option: that John's friends view his romantic past as characterised by short, casual relationships, even downright promiscuity, which in Andrew's books seems to be a badge of honour instead of something to be frowned upon. Andrew had also signalled that the current version of John, the one residing with a man in a long-term relationship, does not match the real one he thinks he knows very well.

The most alarming thing is this: it appears that, once before, John had left for Afghanistan because he wanted to get away from a relationship he wasn't interested in advancing to the next stage.

Sherlock doesn't often think about the ring that sits gathering dust in the middle drawer of his wardrobe in the bedroom. They had both worn theirs at first, but since they weren't allowed to wear them at the hospital for hygiene reasons, John began to leave his at home. Gradually, he began forgetting to wear it there, too. Sherlock followed suit because he wasn't certain if it was proper for him to continue to wear it when John wasn't. It was just a symbol – of what, Sherlock isn't certain of, never has been. Apart from the night of the proposal, they haven't discussed a wedding or marriage. It doesn't seem as though John had regretted his proposal, since he hadn't acted any different during the months after it. Things had been somewhat good, mostly, before Afghanistan, but there had been a certain sense of being in limbo.

A promise of forever had been made, but there is no timeline. There are no plans. Has that forever turned into a reluctant for the time being?

Sherlock doesn't care about wedding ceremonies. He doesn't care about flowers, or speeches or champagne. All he wants are answers. Did John ever give Natalie Templeton a ring, and did that ring sit in a bedroom drawer after a few months?

He counts sixteen beats of silence, and every one of them seems to increase the death grip Andrew's words have on his heart. He can't ask John about any of it because the answer – even if it's nothing worse than a hasty dismissal of his worries or an 'I don't know' – might make the bottom drop from his entire universe. That might happen, eventually, anyway, but Sherlock wants to delay it as long as he can.

What if the rings were a delaying tactic, a token that never meant any real commitment at all, at least not to John? To Sherlock, they had meant everything, and it's worse, having had that moment during which all doubt over whether John wanted him was wiped away. He can’t help it but now he needs to question whether it had all been wishful thinking on his part. Instead of a sense of security, there is now a stagnant, creeping, suffocating dread that a mistake has been made, and
John is expecting him to realise that. Natalie Templeton obviously had. Or, had John had the guts to tell it to her face? Judging by what Andrew had told him the answer is: no, he hadn't.

They have never really talked about why John had wanted to leave, and yesterday he had told Sherlock he didn't even know the reason, himself. One night after they'd come back from Afghanistan, he had claimed – drunk and through the bathroom door – that he hadn't signed up for another tour because he wanted to get away from Sherlock. Wouldn't John be highly motivated to want to believe so, since getting shot meant that he had no choice but to return? In hindsight, the way John had behaved after returning seems quite logical. It must have been horrible: dealing with recovery from the gunshot wound, facing its potential consequences to his ability to work, and to have to face everything he may have wanted to get away from.

If John had finished his stint in Afghanistan without getting injured, what would have happened next? Would he have come home to the job he seems to have grown to hate, or signed up for something else that would have taken him away to something more interesting and motivating?

Best case scenario: John had just wanted a bit of change, and there is nothing he would permanently want to alter in their working lives or their relationship. The more Sherlock thinks about this version, the more naively optimistic it seems.

Intermediate risk case scenario: John is fed up with his job but not fed up with their relationship and thus he would have wanted to return to London. The issues in such a bigger picture would be difficult to solve without changing jobs, but they are in London, after all: there should be options available for an anaesthesia consultant of John's calibre. This option is possible, but does not rule out other possibilities.

Worst case scenario: John had wanted to escape both his job and their relationship. He may have been planning to follow up Afghanistan with something else that would have taken him out of London. After having once made such an escape, repeating this behavioural pattern wouldn't have been uncharacteristic. In this scenario, having to return with his tail between his legs could easily lead to exactly the sort of bitterness that might be acted out by drinking. Faced with no choice but the one John had tried to discard, it would be easy to lose sympathy for a partner those needs have always been more challenging than his own. Is this the likeliest scenario? Perhaps, because it's the only one that would explain everything.

A part of Sherlock has always believed that he is incapable of having a normal, healthy relationship with anyone. A much smaller part has hoped that his scepticism could be unfounded. John has proven extraordinarily accommodating and patient, but have his own troubles of late drained his willingness to put up with Sherlock-related things he had been willing to endure before?

He can't raise this subject with John; won't he just deny everything, just like he has denied having any sorts of issues after he came back? Agreeing to see a psychiatrist is a good sign, but it is no guarantee that it will lead John to a conclusion that what he wants is for things to be the way they were before he left.

Sherlock realises that he can't be sure of any of this. He's no good at assessing the emotions of others. Is there any way he could glean more information, or coax John into honesty? Should he, could he ask John for further details about the therapy? What John says during those sessions is between him and the therapist, not for Sherlock, but it has been established that they discuss him and their relationship.

Is there something he should have done, before Afghanistan, or something he should have not done? He isn't naive enough to think that love is a universal fix for every problem. It may be a glue to hold pieces together, but if the pieces are too broken and half of them have always been missing-
A sudden dizziness hits – he had thought that it had stopped, but today he has been feeling even more wretched than usual; constantly chilled to the bone, with a lingering headache to which paracetamol does very little. He has no idea where John has put the Nurofen. Every bit of him aches, as though he were at the start of a head cold. He hadn't wanted to get out of bed in the morning, so had lingered there until noon, tossing and turning as much as the halo allowed. Then, he'd tried to clean the pins but abandoned the effort half-way through because touching his scalp had made him nauseous, and not even an hour in the recliner with a bag of frozen peas on his forehead had eased the overwhelming malaise.

He abandons the phone on the breakfast bar and goes to sit on the sofa, thoughts still firmly stuck on John. He tries to shove away the dread that threatens to take over, tries to convince himself that things are not that bad yet – that John isn't slipping away without there being anything he could do about it.

What if he has completely missed the fact that their relationship had been going downhill in John’s eyes for a long time? Sherlock would have no idea what signs even to look for, and it's entirely possible that he may have been entirely oblivious to even a major downturn. He has noticed that they have been having sex less than before, and other things are have occasionally taken up more of their enthusiasm and attention than spending time with each other. Is this stagnation – the beginning of an end? What do successful long-term relationships feel like? None of his research has been helpful in discerning that. Is John capable or willing for long-term commitment, or is he a chronic serial dater, for whom Sherlock has just been an experiment, a transient thing? He would have expected John to have a bigger crisis about his sexual identity at the start of their courtship. The man had been hesitant to tell people about the two of them, and that had caused some strain, but Sherlock had assumed that was all in the past. Did John circumvent that crisis because he has always thought he'd eventually go back to women, that he'd return to being normal, straight, and reassuringly similar to everybody else?

Sherlock's fingers curl around the hand rest of the sofa, and fear shoves a fist down his throat.

Is he just a phase for John?

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John puts the dry-cleaning bags on the kitchen island, careful not to crumple the suits and dress shirts inside. He'd dropped in to Tesco Metro on his walk home, and the carton of milk he's happy for having remembered to purchase goes into the fridge.

The last time he'd gone to the shops, he had forgotten about the milk in his quest to stock their fridge with anything and everything that Sherlock might find easier to eat than their usual snacks and breakfast fare. He's happy to notice that at least one of the single-portion yoghurts has disappeared from the middle shelf.

He runs himself a glass of water and downs it. It'll stave off his hunger at least for a while. Maybe they should order in; Sherlock could do that.

"Any thoughts on dinner?" John asks, turning around to face his partner who is standing near the sofa in the sitting room, typing feverishly on his laptop.

There's no reaction. "Sherlock?" he tries again.
Sherlock's eyes widen with startled alarm. He slams the lid of his laptop down so fast it nearly slides off the music stand, but he catches it at the last minute. "Yes?" he asks as though being given an order.

"What's up with you? You look like you've seen a ghost," John asks, turning to the sink to rinse his glass.

"Don't be ridiculous," comes the reply that's too quick and too hastily spoken.

John briefly wonders if Sherlock had been looking at porn or something else he might consider embarrassing. He still has some strange hang-ups sometimes, especially considering that they've been having sex for almost three years. In general, Sherlock has little interest in such materials, saying that he finds John quite sufficiently stimulating. When he catches John having a private moment watching it, he does sometimes sneak up to offer scientifically-minded criticism of what's happening on screen.

John realises he won't be able to relax until he gets Molly's suggestion of a joint appointment out of the way. He'll ask, the answer will be no, and that's that. Best to just get it over with. "Look, my therapist said that she'd like to see both of us at the next session. I don't suppose you'd be amenable---"

"Yes," Sherlock instantly snaps. "When?" he then presses.

"You didn't even listen through to the end," John says, frowning deeply.

What is up with Sherlock? Why isn't he being highly suspicious and dismissive, like he usually is, when John wants to drag him somewhere? Is this still about their fight a week and a half ago? Had he been so harsh that Sherlock now thinks he is obligated to concede to John's next request to go somewhere, regardless of what it entails? Or, has he said something during their last talk that has thrown Sherlock for a loop? "Like I said, she wants you to come with me to my next therapy session. The session is not for you, and not about you, but she does thinks that whatever is--- going on with me," John phrases with gritted teeth, "--- is affecting the both of us."

"So, this was her suggestion and not yours?" Sherlock now sounds a little more characteristically cautious.

John shrugs. "Basically, she just wants to meet you since we talk about you. I don't know if that's something she does with every patient. Maybe she thinks we'll be able to talk about some stuff with her as a neutral observer." This isn't how Molly had described her plan, but John hopes it might happen.

"You discuss me, then?" Sherlock asks carefully.

"Does that really surprise you? You're a huge part of my life. Why wouldn't we talk about you?"

"I assumed you would be focusing on Afghanistan by now."

John stretches his neck. "We sort of are. Like I said, I think she's trying to understand the big picture before really digging up details about my tours there. Besides, it's all connected."

"I'm connected to Afghanistan?" Sherlock asks, and he sounds as though he is confirming what he had already suspected. His hand creeps up to his hair as though he's about to scratch it, but then swiftly retreats.

"Is everything alright?" John can't help inquiring. Something seems to have upset Sherlock. Could
it be that he's just being moody because of the halo again? If John paid attention to every turn in
the seemingly constant churn of his tumultuous emotions that is all he would ever have time for.

Sherlock counters his question with one of his own: "What were you asking earlier?"

"We could order in dinner?" There are a couple of takeaway menus on the coffee table; maybe
they could pick together.

Sherlock doesn't reply, but doesn't grab the TV remote either, nor does he reach out for the medical
journal open on the coffee table.

John thinks that he still looks, for lack of better word, shell-shocked. He sits down next to
Sherlock, and still has no idea how to try to coax out the truth about what is wrong.

"Andrew called," Sherlock suddenly announces. He seems to finally have noticed the menus and
grabs the stack.

"Oh," John says. "Did he say why?"

"No particular message, except that he’d like to get together before he has to go back to Singapore.
I apologised for not making it to their party." Sherlock says pointedly.

"I already apologised for you and everyone understood. Don't worry about it," John says. He's not
entirely sure if he isn’t the one who should apologise, but he doesn’t want to bring up the fight
they’d had. His self-righteous anger over Sherlock's refusal to go has well and truly evaporated – if
anything, he feels embarrassed about his own role in their fight. He doesn't like himself when he
gets angry like that, and he has never known how to stop the rage from tumbling over the point of
no return into a territory where he wants to hurt others. It’s one of the reasons why he won’t let
himself lose his temper too often.

"Saying I shouldn't worry about something often means the opposite: it signals that there is
something to be worried about," Sherlock analyses with a disgruntled frown.

It's not usual for Sherlock to care so much about what one of John's old acquaintances might think
of his behaviour. It makes John wonder what exactly had been said during that phone call.

"Did he insult you, somehow?" he asks, even though he can't think of any way in which his old
friend could have managed to unnerve Sherlock this much. Sherlock is usually the one who upsets
people, not the other way around, and Andrew's not a bully, never has been. He's a good made, a
loyal one, and John has been through a lot with him, both good times and bad times.

"That is stupidly vague. No, he was quite polite, and our conversation was short. He will call again
later."

"Right." John accepts the pile of menus Sherlock thrusts at him. "Were you serious about coming
to see Molly with me?"

"Who's Molly?"

John almost snaps at Sherlock for not listening to him, then realises that he may not even have
mentioned her name before.

Why the hell is he so bloody volatile these days, and why does Sherlock bring it out in him? It's a
side of him he has never wanted to accept or address. Yet, it's there, and John is forced to admit to
himself that he fears Molly may latch onto it at some point. The ensuing questions are ones he
doesn't want to answer, because he worries about how much respect he'll have left for himself afterwards.

"Molly's the therapist."

"I said I would come, didn't I? You know I detest repeating myself. Please not that Thai one; they use far too much coriander."
The Third Friday

Chapter Notes

Get well soon, Alexaprilgarden! Here's something to make the boring hospital hours pass more quickly.

See the end of the chapter for more notes

It festers – Andrew’s throwaway comment about John’s first Afghanistan tour, that is. It burns a hole through the flesh of Sherlock’s composure, and he’s still thinking about it a day later as John delivers them to the staff parking garage at King's. John is working regular office hours today whereas Sherlock has ninety minutes to kill before he’s due for an outpatient appointment at the fracture clinic. He's due for the 'thumbscrew' again, as he has come to think of the regular pin check-up and tightening sessions. The thought may actually disturb him more than the reality, but it's still not pleasant. After today it can likely be done fortnightly; a week ago Laura had insisted on seeing him today due to the chafing on his collarbone.

At the staff entrance, John tells him he's due to oversee an inventory of laparoscopy tower units but it's something that he can easily blow off for an hour. He tries to get Sherlock to go for breakfast in the staff canteen since they hadn't had any at home, but Sherlock makes it clear that he would rather be put on the rack. He will not subject himself to the risk and subsequent torture of colleagues seeing him in the halo. After finally dropping the subject after they arrive at the staff entrance, John tries to get Sherlock to agree to meet up with him just before the appointment.

"Piss off," Sherlock tells him, aiming for playful but ending up sounding mostly just irritated; "I don’t need my hand held for something so boring; at least one of us should go do something useful."

Eventually, after some obvious hemming and hawing over whether it's a good idea to leave Sherlock to his own devices, John disappears in the direction of the surgical floor and Sherlock breathes a sigh of relief.

He makes his way to his locker in the basement dressing room, retrieves the bottle of paracetamol he keeps there and takes one. He had woken up exhausted, cold and vaguely nauseous even before he had even got out of bed. His appetite is gone, his head is throbbing in the rhythm of his pulse, and he wishes the appointment was already over and done with. This isn't the first time his confused senses come up with new tricks when he is tired and overwhelmed due to the halo, but today he's having a hard time mustering up the energy to cope with this appointment.

He leans his head against the metal door of his locker and tries to wrap the coat tighter around himself, but John's oversize parka is not as warm as his own Belstaff. It's stupid, longing for a piece of clothing, but right now he can't help it. He longs for things he used to have, such as confidence in that fact that John wants to be with him instead of doing so because he has no better options.

The notion that John went to Afghanistan to escape a commitment to a girlfriend won’t leave him
alone; the thought is now infecting his very bones with anxiety. Of course, he doesn’t think John has been lying when he says that Sherlock is not the reason why he wanted to sign up for that three-month tour. He knows John too well to think that. But, does John even really know why he left? He’s not been able to explain it very well, at least not to Sherlock. Maybe he’s not really being honest with himself, either. Perhaps the real reason is too deeply buried in his subconscious that he needs the help of some therapist to dig it out. Maybe John will never know what he would have actually wanted, because getting shot put an end to his attempt at finding out, and now Sherlock has jeopardised everything by being careless enough to break his neck just as some hope had emerged their relationship might be repairing itself.

Then again, that things have gone so badly shouldn't surprise Sherlock: he has always been good at self-sabotage when it comes to relationships or even interacting with others in less meaningful ways.

He still isn't sure why John wants him to meet this therapist of his. It certainly may have been her idea, but Sherlock cannot be sure of that. What good would a joint appointment do, especially since John had seemed reluctant to attend such sessions himself? Sherlock has had his fill of therapy and psychiatry and counselling and patronising, so-called support years ago. He doesn’t want to discuss himself or their relationship with anyone but John. Could John and the therapist have come to some sort of a solution already? John and this---intruder? Does she think drastic measures are needed for John to move forward in his life? What are those measures, and why do they involve her meeting Sherlock?

He sits in the quiet of the locker room for half an hour with his eyes closed, his back still protesting the long, arduous drive in morning traffic. When the paracetamol starts showing the first signs of kicking in, he makes his way to the admin wing and to Lestrade's office. John had mentioned that the man has a full OR schedule today so won’t be needing the space. At least in here, there is no one to see him wearing a misshapen sweatshirt with the collar slashed so it can fit over the halo bars instead of his usual suits or scrubs. At least this sweatshirt, ordered online, is better than the M&S shirts that John had bought; it’s not his fault that Sherlock’s skin can’t deal with low thread counts.

Sherlock's own office, shared with another consultant, has been temporarily passed to a third party – a locum paediatric surgeon. Space is at such a premium at the hospital that nothing can remain idle for more than a couple of weeks. 'Just for the duration,' Lestrade had told him. His choice of words had felt apt: it's almost like a prison sentence, this halo. Even after it, there will be a parole: a neck brace, physio and assorted follow-up appointments which will keep Sherlock in a limbo of not-quite-back-to-normal for months.

He can’t voice his frustrations at home any more. For all the good it would do him, which is nothing, it just isn’t worth risking right now. Sherlock is utterly, completely, one hundred percent determined not to let this neck injury be the final straw that breaks their relationship. That final straw may well be something related to him, but not this. Not something so ridiculous. Not after everything that has happened.

He commandeers Lestrade's chair, surprised at how bone-weary the short walk from the locker room to the elevator has made him. He feels more under the weather than he would like to admit. The back of the right side of his head keeps itching, which is driving him mad, as is the state of his hair in general. Since he doesn't want to keep asking John for favours, it's not been washed for the past three days. He wonders if he might really have to cut his hair; after managing to reassign pin hole cleaning duty to himself ('I'm a surgeon, John; I know how to clean a small puncture wound'), he is forced to admit that his curls do greatly interfere with the task. The front is manageable since he can see the sites in the mirror if he pins up his fringe. It's the back ones that are problematic,
since he has to do everything by feel, and the cotton buds are hard to manoeuvre through the curls without accidentally shoving hair into the wounds or getting the cotton buds contaminated by whatever might be in the hair that gets in the way.

At least he isn't cold anymore. If anything, he's getting sweaty and increasingly warm, so he sheds his scarf and his coat. Lestrade must have the radiator in his office set to a ridiculous level. So much for NHS's quest for austerity – the hospital’s heating bills must be astronomical.

He picks up a ruler from the desk and reaches behind him. Something on his back is itching like mad; it’s just under the vest and its fleece. He remembers Laura's warnings about not shoving anything sharp underneath, so he resists the urge to gouge at whatever is causing the sensation. He does use the ruler to scratch the skin just outside the vest. The whole of his back feels prickly, over-sensitised and clammy.

His patience runs out, and he goes to the toilet in the hallway just outside the office. Someone – perhaps John and Lestrade's secretary – has left a handheld mirror there, and Sherlock uses it in combination with the larger mirror to have a look at his back. There's a red rash visible just outside the margins of the vest, and it must be continuing underneath. This easily explains the itch. He turns and lifts the sweatshirt again to check the front – no sign of redness. There's only one option to what could have caused this, and thankfully Sherlock has already dropped the culprit into the bathroom bin at home. They’d run out of the brand of wet wipes he prefers, so John had dropped by the chemist on his way home and grabbed what he thought would be suitable. It’s not his fault that Sherlock’s skin often reacts badly to scented products and even aloe vera; he needs to have the hypoallergenic versions. The pungent, artificial lily scent of the new wipes had made him nearly retch after they'd only cleaned his back, and he had stopped the proceedings right then and there; that explains the localisation of the rash.

There is little available to treat this problem, except for time and an antihistamine tablet for the itching. He's not supposed to get the lining of the vest wet or remove it, can't clean under the vest with anything but the wipes, can't shove corticosterone cream underneath. The misery just keeps on piling up, but at least the order for the right brand of unscented wipes has been placed with Ocado for tomorrow.

He checks the time. There is just enough time to walk the nearest pharmacy to stock up on Benadryl – he needs to do it himself, because he's sure as hell not going to tell John about this. If only he wasn't swimming in sweat and feeling like death warmed over.

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John's ears pick out Sherlock's voice from the cacophony of the orthopaedics outpatient clinic, and he folds away his newspaper. He wonders which route Sherlock has taken; before coming down here, he had stopped by at Lestrade's office where Sherlock had told him he would be heading but Sherlock hadn't been there.

He watches as Sherlock checks in with the receptionist nurse. When he steps away from the desk and spots John, he does not look pleasantly surprised.

"I'm not a child, so there's no need for you to be here," Sherlock points out instantly after marching over to him.
"It's okay; the Thunderbeat rep's grilling the surgeons now, so I'm not needed on the floor until the Ligasure guy arrives. Wanted to make sure you made the appointment, and I want to know what Laura thinks."

Sherlock scowls at him. "That's not necessary; no need for you to come in."

Why does Sherlock sound like a broken record today? "What are you on about? Of course, I'm going to come with you."

"It's not as if I have the requisite medical training to report back to you afterwards," Sherlock counters snidely. "I'm perfectly capable of handling this."

"No one is saying you aren't. Partner, remember?" John waves his hand between the two of them. "Sharing and sticking together and all that stuff you think is sentimental rubbish?" What crawled up his arse today? John is very tempted to think Sherlock is just being himself: moody, cryptic and difficult for difficulty's sake.

"I don't want you in there, complaining," Sherlock specifies petulantly.

"Complaining about what?"

"About everything," Sherlock says austerely. "Or whatever it is today that I've done wrong. There's always something."

Usually his protestations about John's behaviour – or about anything, really – are much more specific. It almost seems like he's trying to pick a fight to ensure that that John will stay in the waiting room. Granted, the last time they'd been here Laura had end up chastising him for arguing with Sherlock, but this is still strange, this deflective urgency in the way Sherlock is trying to discourage him from coming into the appointment room.

"Why are you being like this?" John asks, trying to sound disarming. He doesn't want to play guessing games; if something is bothering Sherlock, couldn't he just spit it out? He glances at his watch – the appointment's a few minutes overdue now. He rises to his feet and grabs his coat from the hand rest of the chair. Now standing closer to the man, he realises Sherlock looks outstandingly tired. His eyes are also a little bit bright – the way febrile patients look.

When John's alarm clock had gone off he had discovered that Sherlock had dragged a throw from the living room and was asleep under both it and his duvet. Usually he kicks the bedding off in the early hours of the morning, complaining that he gets hot.

John reaches out a hand to touch his forehead below the pins with the side of his palm; Sherlock tries to shift away from him, but John is persistent. Sherlock blinks and inhales sharply when John's hand makes contact with his unusually warm, clammy skin.

"You're burning up," he accuses.

"No, I'm not! Lestrade keeps his office like a bloody oven."

John prepares to protest, but at that moment, the door opens and Laura's assistant nurse calls out Sherlock's name. They won't call him Doctor Holmes within earshot of the clinic's other patients. Then again, as a senior surgeon, he also often gets reverently called Mister Holmes at the hospital anyway, thanks to an archaic habit that doesn't apply to any other medical specialties.

John straightens his tie, and marches into the appointment room before Sherlock to make sure his access won't be blocked. He shakes Laura's hand and they then expectantly turn their attention to
Sherlock, who looks petulant as he commandeers the chair reserved for the patient opposite the examining orthopaedist.

"He's got a fever," John tells Laura with a told-you-so tone.

Her brows are raised. "When did this happen?"

"I do not have a fever," Sherlock dismisses. "I’m hot and bothered by being here."

"There’s an answer to that,” Laura says, circling the desk to get closer to her patient. “You don’t sound like it’s a cold. Any congestion? Swollen glands?” She sweeps aside Sherlock’s curls across his forehead and peers at the pinholes. “These are okay.”

The nurse appears with an ear thermometer. Sherlock rolls his eyes.

In a few seconds, the device beeps, and the nurse glances at it before showing the reading around: 38.8. "Something's cooking."

"I took paracetamol; it's coming down already,” Sherlock counters, as though that somehow makes anything better. It takes every bit of John’s willpower to restrain himself from getting angry; he knows he ought to stay silent and let Laura spearhead this appointment since apparently Sherlock won't ever listen to reason when it's John trying to deliver the message.

Laura steps behind the chair, parts Sherlock’s hair and then bends in closer, frowning. She grabs a pair of gloves and starts pressing down around the pin. When she frowns and sniffs, John stands up and joins her.

“Looks like the right back pinhole is properly infected. Smells like it, too,” she announces. She shifts a bit to the side, keeping locks of hair raised away from the pin so that John can see. True enough: the skin around the pin is swollen and red and looks tender; when Laura presses down at the base of the pin, a bit of thick, yellowish fluid seeps out. And, the problem isn’t just around the point of entry. Laura parts the curls to the side, and John can see the swelling and redness extending from the pin all the way to the ear.

Laura leans away and bins her gloves. “When did this start?”

Sherlock mutters, "It wasn’t that sore last night."

"How was it last night, then?” she interrogates.

Sherlock glowers at her. "What the hell does it matter? It is what it is, now. Sort it out."

"Please don't tell me you're trying to do this on your own, Sherlock?"

“I’m perfectly able to use a Q-tip without supervision by an anaesthetist."

Laura looks at John incredulously. "You let him sort himself out?"

John sighs. “You heard him. Good luck convincing him to let me do it.”

She moves the wheeled chair around in front of Sherlock and puts her hands on the arms of his chair. In a tight, no-nonsense tone, she announces: "You’re a bloody idiot. You, of all people, should know better. This is not a case of physician, heal thyself. You will let John do this, twice a day. No, make that four times a day until we get whatever you’ve now let take residence under control."
She looks up at John. "You're a bloody moron, too, for letting him get away with this. A right pair of idiots."

Sherlock scratches the nape of his neck between the vertical rods. "You know as well as I do that over fifty percent of all halo wearers get a pinhole infection. No drama here; just tighten the pins, whack me an antibiotics prescription and give me an appointment in two weeks."

"I'll be seeing you no later than Monday," Laura counters sharply, "but I can come by at your place for that on my way across town. Now, Maud here's going to give you a proper cleaning after I tighten the pins, plus I think we need to cut a bit more of your hair around them."

"John managed fine before with the current level of shearing," Sherlock argues.

"And you made him redundant," Laura quips back. "You need to do better, both of you. I do not want to find you at A&E with either sepsis or skull osteomyelitis – haven't seen the latter in years and I'm not having a bloody colleague be the next one." She reaches for the wrench on the table. "It’s going to hurt doing this to an infected site, but we can’t risk movement at any stage."

Sherlock manages to look stoic enough during the proceedings, but John can read him better than Laura does. He is barely concealing his nervous ticks, his breathing is strained and he wipes his sweaty palms twice on his trouser legs.

Finally, Laura is done with the tightening. Sherlock starts rising from his chair, but she claps a hand on his shoulder. "Not so fast. Shirt down. And, after the usual once-over, it'll be Maud's turn." She nods towards the nurse, who has already assembled a formidable set of q-tips, swabs and cleaning solutions on a tray table. There's also a tube into which a sterile q-tip will be slipped into; it will be cultivated to see which bacterium has caused the infection.

Sherlock sighs, and slides the shirt down to the lower edge of the vest. Laura inspects his shoulders and all the other borders of the vest, save for what is still concealed under the oversized dress shirt bundled up at his waist. Once she rolls her chair back, Sherlock wastes no time in slipping his shirt back up.

Laura looks thoughtful. "I'll also want to see your c-reactive protein and leucocyte counts, before I write you that prescription. If there's anything worrying in the lab results, I'll give you a call."

The nurse is now assembling a tray for what is needed to draw bloods. They could go to the lab department, but likely Laura has decided it's faster and less fuss if she does this herself.

John notices that Sherlock is making no move to roll up his sleeves. He even looks openly apprehensive – caught unawares by the need for a blood sample?

"Don't tell me you're afraid of needles. That combined with dating an anaesthesiologist would be pretty ridiculous," Laura says with a conciliatory smile.

"I'm not phobic. I'd simply prefer John to do it. My veins easily disappear from view."

"Like those?" Laura asks sardonically as she points to the nearly pencil-thick veins on the back of his hand.

Sherlock crosses his arms. "I absolve you from the responsibility of ordering any labs. Write me that antibiotic."

John takes a stand by Laura. "Let me do it. It'll be faster than arguing with him."
Laura sighs and passes him the tray. John ties the tourniquet halfway up Sherlock's right forearm instead of the usual spot above his elbow, then uses a major vein on the radial side of his wrist instead of the crook of his arm to take the samples. John realises that every time Sherlock has dropped his shirt down for Laura to see the vest, he has always kept his hands in the sleeves. John can't come up with any other explanations to Sherlock's reticence than the fact that he doesn't want Laura and her nurse to see the puncture scars. The orthopaedist must have had a full view of the scars when the vest was being installed – Sherlock had been naked from the waist up.

"Nothing she hasn't already seen at the OR," John whispers, while Laura and the nurse are discussing something on the opposite side of the room.

Sherlock watches the last glass vial filling up. When John presses a wad of gauze on the puncture site, Sherlock slides his fingers on top, pressing down gently on John’s fingers before allowing him to retreat.

Is it a thank-you?

-o-o-o-o-o-o-o-o-o-o-o-o-

After the appointment, Sherlock hopes and assumes that he can now make haste back home, but John tells him in no uncertain terms after the appointment that they are going to his office. John has even shut the door behind them; a clear sign that he has something to say he doesn't want broadcast to the entire department.

Sherlock drops into the chair in front of John's desk. He tries to relax his neck and back as best he can but the sleepless nights, the strain from the halo and the all-encompassing achiness from the fever are doing a fine job making him feel like a tightly wound string.

A glance at John tells him what's about to happen. Sherlock bites his lip and makes a stern decision not to argue or talk back – he'll simply let John fume and get everything off his chest; then they'll go home and Sherlock will mark this up as yet another one of his inevitable failures. He should have anticipated that John wouldn't stay away from the appointment.

"You knew," John accuses; "this morning, burying yourself under the duvet and the throw--- you must have known you had a fever, maybe even that the pin site was infected and you didn’t tell me. Why the hell not?" John is standing with his palms open and upwards, demanding and expectant. His gaze feels unrelenting.

"I had it all under control. Took a paracetamol, so the fever was already going down when it was measured."

"Meaning that it was even higher. Bloody hell---" John shakes his head.

"I knew the appointment was as soon as today, so there was no need to contact Laura before it. If there was an issue, she'd sort it out," Sherlock hastens to explain.

"And then?"

"And then what?" Sherlock's head is throbbing from the pin tightening, and fighting the urge to grab a sharpened pencil to give the smarting skin on his back a proper scratching is getting nearly impossible. He tries to look attentive, but is having a hard time keeping his gaze from getting glassed over. A shred of skin at the small of his back gives an unbearable twinge of singeing itch,
and he slaps his hand reflexively on top of the shirt there.

John spots the gesture. Brows are raised, suspicion setting it. After a moment of strained silence, he exhales as though willing to let it go and focus on what they had been talking about, but Sherlock decides that concealing this will carry too big a risk of John completely losing patience with him if he finds out later. "There's more," he admits resignedly.

"What?"

Sherlock shifts in the chair, tugs the dress shirt out of the waistline of his trousers, and closes his eyes when John shifts to standing behind him. "Christ. Sherlock, Laura needs to know about this."

"No, she doesn't. It's just prickly heat, I think, a bit inflamed but not infected. I have antihistamine, I've sorted it. If it gets worse, I'll show her on Monday. I promise," he adds, but why would John believe him?

He has messed up, well and truly.

John seems to agree: "And you still even tried to continue to do the pin cleaning yourself, even after you must have realised you'd already bollocked it up?"

"Over fifty percent---"

"Fuck those fifty percent. You don't think it's a bit embarrassing that a bloody neurosurgeon would end up in that group?"

Sherlock doesn't want to be here getting yelled at. He's been embarrassed badly enough already. He wants to get home, take another paracetamol and an antihistamine and sleep. He'll still have to endure that wretched drive back home, possibly in a cab, the driver of which will not take into account his current predicament in their traffic habits. Still, the drive home will be little more than one more drop in this ocean of torture.

John opens his mouth, his expression still severe, but then he drops his chin and exhales. Finally, he crinkles his nose thoughtfully. "I'll ask this once, and then shut up, and you should think carefully about the consequences of not answering: why would you rather risk a complication than let me help or talk to me?"

Why doesn't John sound angrier? Why isn't he storming off after deciding Sherlock must be utterly useless?

"I didn't think the back pin was worthy of fussing. All it requires is a course of antibiotics."

"And you would have hidden from me the fact that you were taking them?" John's voice is quiet. Sherlock tries to find disappointment in it, resignation as well, but mostly he just sounds sad and bewildered.

"I would have informed you after the appointment."

"I'm having a hard time believing that, and I'm still not hearing a reason."

"I'm sorry," Sherlock offers, because what else is there? Apologies never fix anything, but maybe that's what John is expecting from him.

He'd make a thousand apologies, if in exchange he'd have a guarantee that he'd never mess things up between them again.
"Don't apologise to me. You would have been the one to suffer the consequences, if this got worse before Laura saw it. Are you absolutely sure that rash doesn't need to be looked at?"

"You can check it daily if you want," Sherlock offers resignedly. It's just as well – he can't see it very easily, not even with an extra mirror, since he can't turn his head.

"I will." John sits down on the edge of his desk right in front of Sherlock. "Is this about what you said a week and a half ago? That I have so much on my mind you don't think it's a good idea to tell me things?" The way his brows are now bumped together in a scowl usually means that he has already decided what he thinks, and anything contradictory Sherlock might have to say will only be dismissed. Yet, his eyes tell a different story. They're pleading, and openly curious.

Sherlock doesn't want to talk about this, now. Not with the therapist appointment looming ahead, not when he's this exhausted. He never knows what the right answers are to these sorts of questions – answers that won't make others leave. "I made a mistake. I underestimated how hard it was going to be to clean the back pins. I made a mistake, John, and Laura's already chewed both of us up about it. Please stop twisting the blade."

He wants to go home. He wants to kiss John, trace the man’s laugh lines with his fingertips, chase away the novel veil of hostility between them, to hold hands like ruddy teenagers, to press himself naked against John in the shower, to rediscover and go mad with the lust that the halo is currently keeping at bay and which John has seemed to have misplaced on a roadside somewhere in the desert. He wants to watch John sleeping next to him without a care in the world, to go back to when it all started and it was new and wonderful and neither of them had ruined it.

To go back.

To go back and stop John before he goes to Afghanistan. To go back and be different, somehow, in a way that would be acceptable to John, in a way that would keep them both whole and safe and happy enough not to go look elsewhere for a life that was worth something. To go back before John became angry and Sherlock became a liability and everything between them got old and sour and not enough anymore.

John bites down on the inside of his cheek for a moment, then stands up, offering a hand to help Sherlock up from his chair. The assistance is unnecessary, but he accepts the offer.

The grip on his arm doesn't let go as soon as he's safely on his feet. Instead, John leans closer, studies his face. "I'm just worried, is all. You heard Laura; you have to let me help. I don't want to twist the blade – I'd never want to do something like that to you."

That's what so confusing: Sherlock has never thought John wants to deliberately hurt him, but he still ends up doing so.

John picks up his coat which has slipped to the floor and helps him into it. "I'll come with you to get a cab. Unless you'd prefer Martha to come get you?"

"No. A car is a car," Sherlock dismisses.

"We need to get you well. That's the first and only priority," John tells him once they're in the lift. He sounds like he's making a battle plan.

He sounds terribly determined, but not encouraging at all.

"I really don't mind helping with all that the halo entails," John reminds him when the doors open to reveal the sunlit main hallway. "If you think I'm bothered by the sights or the smells or anything
like that, you're wrong; it's nothing compared to stuff we both see at work all the time. It's also not going to affect the way I think about you after this whole thing's over."

What the hell is any of that supposed to mean? What does he mean, 'over'? Sherlock follows him wordlessly to the taxi stand close to the front entrance. Perhaps John has taken his silence as a confirmation that his assumption had been correct: that Sherlock doesn't want to burden him. But, that's only half the problem. Sherlock knows he needs help, and while that is annoying, it's not the biggest issue. He needs help, when he should be the one helping John. And, he has already proven to be utterly useless at it.

'We need to get you well'.

What if that determination stems from John just not wanting to end a relationship with someone while they're poorly?

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When John arrives home he finds Sherlock in the bedroom, burrowed under the duvet.

"Cold?" John asks and gets a nod. "You're probably still feverish. I'll get you the spare blanket I put back in the closet and a paracetamol." He pats a duvet-covered hip and leaves for the stairs, but ends up lingering in the doorway, watching Sherlock. He is facing the opposite direction, so all John can see is his silhouette under the thick duvet and his curls on the pillow.

The sight reminds John of the first time he'd even seen Sherlock ill. Two months into them living together he'd caught some seasonal flu, and John had practically had to sit on him to keep him from going to work in his then-state of a mound of blankets and used tissues and a brain half-delirious with fever. John had felt privileged, seeing such a thing – being permitted to look after this infuriating, lovely, odd, brilliant, intense creature – being allowed to see the Real Sherlock instead of the Perfect Sherlock who makes an appearance when they are at work and when they're socialising.

The Real Sherlock seems to be just for John, and attentive in a way John has never experienced with any partner. In the early days, to Sherlock intimacy seemed to be both daunting and an endless source of fascination, which for John had brought back memories of his first sexual experiences. Sherlock had not exactly been shy – he had been quite open in expressing what he liked and what he didn't – but he had been particularly wary of sounding disinhibited. It wasn't until John had informed him that his baritone went straight into John's cock in a most beneficial manner that Sherlock began to use it to his full advantage. John remembers the first time Sherlock had sucked him off with a hum that felt as though it vibrated straight down into John's bone marrow, rewriting his DNA into never wanting to touch anyone else, ever. He misses the Real Sherlock, because the Perfect one has been showing up a lot lately. The Real Sherlock's hands shake a little after an orgasm, and if he picks up the violin which he often does, the music is a little unpredictable, a little reckless. He could avoid playing but John loves that he doesn't, loves that it's a very particular sort of serenade just for him. You did this, John, it says. You did this, because I wanted you.

Had Sherlock played the violin in Afghanistan, those notes would not have wavered. No, they would have been without fault – sharp, cold and soulless, because it had been Perfect Sherlock who had hurried to John's bedside at the Camp Bastion hospital. John had hated him a little, then,
because he had been much less than himself and the comparison felt crushing. Now, he hates himself for feeling like that and hopes that such bitterness had not been broadcast in his behaviour.

Today has taught him one thing: Sherlock has grown to expect anger from him above all other things. John knows his worry tends to come out as fury, and it's not surprising that Sherlock would slam up his formidable emotional walls against such a reaction. Still, the determination with which Sherlock keeps pushing him away hurts, even if it's just self-protection. Maybe that's what stings John the most, after all – a suspicion that Sherlock needs to protect himself from him. John would prefer not to have to consider that he could be the cause of such a reaction, and he has no idea how to change things for the better. Wouldn't anyone be angry after the crap he's been through, lately?

Sometimes, the sense of defeat is crushing. The only flicker of consolation is that he can ask Molly about things to which he has no solutions. Perhaps she can't offer much else than just a keen ear, either, but it's better than nothing. It's clear that he can't continue unloading on Sherlock.

He walks down the steps, retrieves what he needs from the cabinet above the sink in the loo including the pin cleaning supplies, and then fills a glass with water from the filter can in the fridge. When he returns to the bedroom Sherlock pushes himself up to a sitting position and accepts the offerings without a word. John gently drops a palm on him shoulder – not because he needs the support, but because he really wants the contact right now. God, he wishes he could kiss Sherlock properly.

"My head is sore," Sherlock reminds him in a defeated tone. Ever since the appointment with Laura, he has seemed even more withdrawn than he has been for the last few days, now almost downcast for some reason. John had certainly been angry at him, but he had thought their conversation had ended in a constructive place. Then again, Sherlock hadn't really replied much to his reassurances.

He doesn't quite know what to do with Sherlock's statement about his head. Is this an argument against the kissing, a complaint he wants John to address, or a general call for sympathy? He chuckles a little. He's learning bad habits from Sherlock such as overanalysing everything. "We still need to clean the pin sites tonight before you go to bed."

"I already am in bed," Sherlock argues since he seems to be genetically compelled to always take everything literally.

John presses a kiss on the crown of his head, which earns him a raise of brows and a wince since that has probably moved the skin around the front pins. "Do your worst, then."

Something about the innocent quip twists John's innards. Lately, he certainly hasn't done his best.

Chapter End Notes

Thunderbeat and LigaSure are real surgical tools.
The Fourth Monday

Chapter Notes

We know we said the joint therapy appointment would be next, but then this happened. Blame our not-BakerStreetBoys.

See the end of the chapter for more notes.

John was supposed to be home forty minutes ago. Normally, the Battersea Bridge Road is among those bits of their commute which actually flows bearably even at rush hour, but the tearing down of two old commercial buildings between the A3220 and the Surrey Lane Estate has narrowed the road to just one lane, and a temporary traffic light has been set up. For some reason, his satnav hasn't updated itself with this fact – perhaps because it's not due to roadworks.

A glance into the rearview mirror reveals a sea of cars behind him, and the exhaust fumes are making the air close to the ground ripple. Dust swirls in the air from the construction, and the setting sun colours everything a warm yellow.

Some idiot honks their horn a few cars back, startling John. He wishes Sherlock was with him in the car, spouting out some irrelevant facts about London geography or one of his surgeries. He turns on the radio, and then turns it off again since all that seems to be on are ear-piercingly cheery commercials. He knows Sherlock has the classical channel programmed into one of the quick selections, but he's too irritated to cycle through them all.

The light turns green, but only long enough to let three cars pass through.

The digital clock on the dashboard says 17:12. He'd promised Sherlock to be home early; Laura was due for a visit to check on the infection and to decide whether they could swap to tightening the halo one every two weeks instead of weekly or even more often.

During the weekend, John had picked up the slack on pin maintenance. The antibiotics seemed to kick in after one and a half days, banishing the fever that made Sherlock spend most of his time in bed after no longer seeing a need to conceal it from John. This morning, the tissues around the infected pin had still been swollen, but no longer warm or tender. They're probably out of danger, but John had wanted to hurry home to hear what Laura had to say. Even though the home visits don't cause her much of a detour due to her capoeira classes happening nearby, John is terrible grateful for her willingness. Sherlock must be so much more comfortable with them as opposed to going to the outpatient clinic. He must be now feeling the full weight and stress of the twelve-week treatment, now. Depression is to be expected – that's what the guidebooks had all said. Still, the forms this resignation is taking are baffling. Yesterday, Sherlock had been asking John about his first Afghanistan tour. The purpose of the interrogation had been left a mystery to John. It seemed as though he was asking things very irrelevant to him, and it isn't like Sherlock to do so just out of politeness. When John had asked where all that was coming from, he'd clammed up.

All in all, yesterday had been... alright. Sherlock had risen half an hour after John, and appeared in the kitchen, wrapping his arms around John from behind. Due to their height difference, this often
felt to John like he was being Heimliched, albeit gently.

"Hey, you. Want some eggs?" John had asked and received a noncommittal hum as a reply. He'd thrown in an extra one into the pan, which had elicited no protest. Sherlock continued to hover very close by while John made breakfast, and in the process, John had managed to feed him bits and bobs of various things and coax him to drink a glass of orange juice with a straw.

At one point, while waiting for the kettle to boil, John carded his hand through Sherlock's back curls. A bath had been had two days prior, with Sherlock practically dozing off leaning against the bathtub while John rubbed in the shampoo, but after two days of sweating off his fever under blankets, Sherlock's hair was now both sticking up in a messy tangle and greasy and dull-looking. Together with his tired, bloodshot eyes and a general air of woe, he was a sorry sight. "We've got to do something about these," John had told him, giving his nape curl a gentle tug.

"Yes, please," came a weary reply with a sigh before Sherlock planted himself on one of the chairs by the kitchen table.

The rest of the day had gone by with John doing chores and watching TV. When Sherlock wasn't following him around, he was still keeping watch from the sitting room sofa, eyes homing in on John whenever he came into the visual field.

"I'm not going anywhere," John had joked; "you can stand down, private."

Sherlock didn't seem to find this funny.

John glances at the dashboard digital clock again. 17:20. Goddamnit. John rolls down a window to get some air; the air conditioning is on, but since the outside temperature has kicked on the heating, the air inside the car feels dry and stuffy. He peers behind the BMW; there's no use trying an alternate route because he's blocked on all sides by other cars. He knows it's safe, he knows this is London, but it still makes him antsy.

Another two cars are let out, leaving John still stuck far behind the traffic light. More horns are being employed, even though it's useless. The sound grinds his nerves.

Just as he's about to press the window button to bring it back up, a huge bang from the construction site immediately to his left sounds, making his eardrums feel as though they're about to burst. A shockwave from the impact of whatever piece of concrete had been dropped rocks the ground slightly, and John's heart leaps into his throat and he involuntarily ducks over the steering wheel, adrenaline making his fingertips tingle. He expects to smell smoke, to see the flames rising from the car in front of him. Expects yelling, gunfire, and though his ears and his nose pick up nothing, his brain is already there, painting with broad strokes things that aren't there into his emotional landscape.

Why is he in the front seat? Why is the windscreen still there?

He needs to get out. Right now. Right now.

He battles with the latch to the door, rips out his keys so hard that the keychain snaps violently against the dashboard. Cold sweat is forming drops in his neck, he's shaking and if he doesn't find himself in the open air in the next few seconds, he's going to choke because clearly, all the oxygen has been sucked out of the car. His lungs feel as though they're prickling with a smell of gasoline and scorched flesh, dust gritting in his teeth.

It feels impossible that he's seeing trees, concrete, English signs and a Tesco Metro when he half-
stumbles out of the SUV, accidentally banging the car door against the door of a van, whose drives yells something to him. He needs to help, needs to do something, but instead he leans down, not wanting to catch a bullet in the head. There are no body parts or metal scraps on the ground, and save for the dull sound of a sea of stationary cars everything sounds eerily silent – have his eardrums ruptured from the explosion?

He somehow gets to the sidewalk and collapses into sitting on a bench next to a garden wall. Everything looks wrong: too bright, too empty, too calm, too much like home, and he still can't tell which one is the lie: what he sees, or what he knows. Nausea hits, and he shoves his head between his legs. He feels hot and cold at the same time, and his erratic heartbeat is pounding in his ears.

Something is ringing. He drops his phone on the ground while trying to recover it from his pocket, and it lands screen-up. Someone is calling him, but he can't tell who, because his vision has turned into black dots. He's late, so terribly late, he realises and what he's late for seems like a dim memory – and he can't answer the call, not like this, when he's not even sure he can breathe. His fingers curl into his left jacket lapel – he had taken off his coat in the car. Then, he retreats his fingers, staring at them, expecting to find blood but they're clean and dry.

He's going insane. He knows he isn't, but the fear of losing it grips him like a vice. This isn't him, this doesn't happen to him.

He hunches down over his knees even further to grab the phone, then clutches it in his sweaty hands to his chest.

"You alright there?" a twentysomething man, probably a student, has stopped next to him and is tapping him on the shoulder. He flinches at the touch.

Someone had tried to grab him, drag him away, but he'd fought because he couldn't tell if they were trying to help or kidnap him.

John tries to wave the young man away, shaking his head. It must look like a blind man swatting flies.

"Do you need any help?" the youth asks again. "Can I call someone?"

John flinches when the phone starts ringing again. It's Sherlock calling him – he never calls, so John must be terribly late already. *Sherlock will be so worried.*

John straightens his back but struggles with the idea how to form words. "It's fine," he manages. "Just low blood sugar. I'm fine now."

"You sure?" the man asks. "I think I've got a Bournville, might be a bit squished--" he digs the chocolate bar out of the front pocket of his backpack.

John's first instinct is to protest, but then he realises that accepting the offering will probably send the man on his way quicker. "Thanks. This'll sort me out for the way home."

The young man leaves after giving him a final, worried once-over.

It seems that the distraction had been useful. He is now managing to hold onto the fact of where he is and forces himself to slow his breathing down even though he still feels like a fish thrown onto dry land. The queue of cars is now moving; they're all swerving around the BMW, the drivers shooting curious or annoyed glances at him.

The phone rings yet again. This time, it's Laura. "Where are you?" she asks, after John manages a
shaky hello.

"Stuck in traffic."

"Right. That explains it. Sherlock checked on his phone and you were stationary in Battersea. Someone was getting a bit worried, I think," she jokes.

John can hear Sherlock's voice at the other end, most likely protesting the description, judging by his tone. It's hard to make out individual words.

"I might be a while," John excuses circumspectly. He feels utterly spent, so much so that all he wants is to curl up on the bench and sleep.

"I need to head out, now," Laura says. "I'll see Sherlock in one and a half weeks. The infected pin's doing fine."

Another background comment from Sherlock along the lines of 'I could have told him that yesterday'.

To John, hearing his partner's voice in the background feels grounding; an anchor, a safe haven. Somehow, knowing that Sherlock is at home and that he's fine is almost as big a relief as establishing that they're not currently in Kabul.

When he should have been thinking about duty, and trying to focus on how to help others, that's what he had been thinking about: Sherlock. When pain had clenched his fingers, blood loss tunnelled his vision and he'd been certain he was about to draw his last breath, that's who he had been thinking about. That thought may have been his only clear memory of anything after the IED went off.

"John?" Laura asks. "I think the connection's bad," John hears her commenting to Sherlock.

"That's good, that he's alright," John breathes out. "I'll be home soon."

"Alright. See you at work," Laura suggests, and John gives her a hasty yes before ringing off.

He claps eyes on the car again; the door is open as though someone had dragged the driver out. He lets out a disbelieving chuckle that has absolutely no humour in it, but a whole lot of embarrassment. He needs to get back in and drive home, but he's not even sure he's steady enough on his feet yet. The corner of his mouth twitches a little in temptation of a hysterical laugh, but he leans against the bench, closes his eyes and draws a deep breath.

Going back to the car, pressing the ignition button and driving home as though nothing had happened feels as impossible as sprouting wings and flying there. How does he fix this, quickly and efficiently? How does he fix how he feels, so that he can go home and not make Sherlock worry more?

He's already bloody embarrassed. What's another thing to add to it?

He scrolls down the list of calls on the phone and finds the number he'd used to call Molly to inform her they were both coming to the next appointment. She hadn't seemed surprised.

She may not even answer. Maybe she's with a patient. That would actually be a relief, that she wouldn't answer, and John could escape with his self-worth intact.

Molly does eventually pick up, and John curses under his breath. He gives his name, and the
psychiatrist clearly picks up from his tone that something is wrong.

"Where are you, John? I can hear the traffic."

"Battersea Bridge Road. I just left my car in the middle of the bloody road." It's ridiculous, what he's done, and it suddenly seems logical that Molly is the only person he'd wanted to tell, because he doubts she'll laugh. She's paid not to laugh. She has trained for years and years not to laugh, just like John has trained years and years in order to handle any emergency his job entails.

It's a cruel joke, a kick in the stomach from fate, a middle finger from the universe that a bang from a construction site would render all that experience and training utterly useless.

Maybe that's the most useful thing about Molly – or perhaps any therapist – they're paid to not make a patient feel like an idiot even at their worst hour.

John needs that right now. "I think I've just had a panic attack."

Molly asks him to describe what has happened, which he does, finding some objectivity from somewhere to be able to explain it without sounding too idiotic. He knows he's had these before – there are no other words as befitting of what happened that one time in the OR, for instance – and he recognises the symptoms, but no amount of medical knowledge is of any damned use when it's happening.

"What have you used to stop one before?" Molly asks.

"Sherlock's been there. Or, I've been in the middle of something or somewhere that reminds me constantly where I am."

"The details of what happened to you were in your notes – your convoy was stopped by an IED, wasn't it?"

"Yeah."

"Being in the car would have been a powerful reminder of Afghanistan, when combined with a loud noise. It was an exceptionally powerful trigger, and it's unlikely you'll encounter such situations often."

"But, no one can promise that I'll never encounter them. How the bloody hell am I supposed to drive in London, if this happens again?"

"There are lots of things we can do to prevent it or cut its legs right after it's triggered."

"I know all that rubbish about mindfulness and breathing and anchor objects and stress balls and lavender oil and visualisation. I've heard people giving all that advice to other soldiers and they taught us all the basics in medical school. I know how these things are supposed to work, but it doesn't help."

"With time and effort, we'll find variations of those themes tailored for you. Don't beat yourself up over the fact that it happened. You managed the situation safely---"

John doesn't reply. Running across a road after abandoning his car is hardly safe.

"---you diagnosed yourself correctly, and you're already perfectly coherent and able to analyse it for me, which is a great testament to coping skills you already have, and which we can build on. Are you ready to accept yet that this is something we need to work on?" her tone isn't smug but
genuinely concerned.

John leans his forehead on his palm. "I guess. At least this proves that I can't fix my own fucking head."

"Your head has been conditioned to react in a certain way that's very understandable from an evolutionary standpoint. It's not a weakness, John. You've done nothing wrong."

"Except that I'll probably get ticketed if someone calls the police to say my car's blocking the only lane."

"Can you get home safely? Do you think you should get a cab?" Leave the car there, if you must; call a friend to come and move it if necessary."

"No, I----" he stands up, no longer feeling faint. The residual adrenaline is still making him a little shaky, but it's no worse than after a particularly trying night on call can leave him. He can deal with this; this is under control. He likes a bit of excitement, at work, always has. He was just caught by surprise. "I was just caught by surprise."

"The very definition of a trigger. We'll probably discuss this a bit on Wednesday, time permitting, if that's alright with you with Sherlock being there?"

"Fine." Sherlock has seen him like this, so the cat's already out of the bag. "Thank you," he adds. "It was good that you called."

"A bit unnecessary. I think it was passing, already."

"But you still felt like you needed a sounding board. Which is good. It means that instead of sweeping this under the carpet, you want to address it."

John decides he likes the term 'sounding board'. It's much better than condescending ones like 'help' and 'support' and 'therapy'.

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"There. I told you he was alright."

Laura slips her phone back in her bag and gives Sherlock a kindly look.

"He didn’t sound it. And why didn’t he answer my calls? He knows I prefer to text and that I only call him when I need to reach him right away."

She rolls her eyes. "How could you tell how he was from where you’re sitting? You couldn’t possibly hear his voice properly. Good on him if he was steering and decided not to answer the first rings. He sounded a bit peeved, to be honest. Maybe he was busy trying to keep calm in the hellish traffic? Give the guy a break, Sherlock; London is enough to try the soul of everyone who drives in it."

Her tone is slightly dismissive, and she’s studying his expression with mild curiosity. The orthopaedist had stopped by on her way home from work to check on the infection. She’d
inspected the wound site and pronounced it on the mend. After sternly telling him to keep taking
the antibiotics until the next outpatient clinic check-up, Laura had tightened the ceramic rods, as
the wrench still sitting on the breakfast bar counter attests.

She cleans it with an antiseptic wipe and then slips it into the sterile case. “I do need to get going
in a minute, or I will be late for my class. That said, this is an opportunity to ask you something
when John isn’t around. It’s not often I see people throwing daggers at each other in my
examination room, so what’s going on between you two?”

Sherlock glares at her. Hadn’t he already warned her off business that is not hers? “Nothing that
concerns you,” he snaps.

She crosses her arms and glares. “When it interferes with the recovery of my patient— that’s you,
by the way, in case you’d forgotten— it is my business. It’s just--- Look, I don’t know John that
well, but the image I have of him isn't what I’ve been seeing lately.”

“You just said that the infection is going and that the other sites are fine. I am recovering. And
John has cleaned them like clockwork.” The rash reaction to the baby wipe has also eased –
antihistamines have done the trick. No need to advertise that to Laura. Thankfully, he had managed
to conceal the last dregs of it from her prying eyes yet again.

She’s not convinced. “Plenty of patients don't feel comfortable letting family members help out
and the opposite can also apply. If something is interfering with your care routine here, then we
need to make alternative arrangements.”

He’s confused by that. What alternative arrangements could there be? Cautiously he asks, “Such
as?”

“If you don’t want the pin site cleaning or the baby-wipe routine to be done by John, I can get a
district nurse to drop in twice a day. Might be a good idea, anyway – John takes call, he isn't here
all the time. We arrange nurse visits all the time for people who live on their own.”

As much as he hates John having to help him out with daily routines, the thought of a stranger
doing those things is nothing short of horrible.

“I don’t live on my own.” Not yet, anyway. However, given how things have been going lately, he
may have to start preparing for the worst. If only the thought didn't make him feel like all the air is
knocked out of his lungs. It's unfathomable, the notion of John packing his bags and pulling the
doors closed after him and being---- *gone*. It's hard to believe such a cataclysmic thing could even
happen, but the most frightening part is how easy and possible it actually is. How had he not
realised this before – the brittleness of the life he has half-accidentally managed to construct for
himself?

John’s help over the weekend had been dutiful and determined, as if he had taken Laura’s reaction
to the infection as a personal affront. It’s all left Sherlock feeling uncomfortable – as though he's a
project, a patient to be sorted out. Their bathing procedure feels exposing and awkward; feeling so
dependent and inept is abhorrent. That’s probably why John had not answered his calls, only when
Laura had rung him. He probably thinks that Sherlock is just being needy and pathetic. He'd put up
with it yesterday, but the fact that he hadn't tried to advance the physical proximity Sherlock had
initiated into anything more intimate speaks volumes.

He says none of this to her; it would be disloyal – he very much feels obliged to defend John,
who's under a lot of pressure. “It’s lucky for me that I live with a doctor who is perfectly capable of
doing what is needed, without imposing any additional expense on an already overburdened NHS.”
Something in that statement of his amuses Laura. “Then why did you tell him to stop doing it? That you were capable of cleaning the sites yourself? After the first attempt you would have known that it wasn’t really possible to do this.”

She’s put him in a quandary. If he explains that John is going through a bad patch right now, dealing with issues left over from Afghanistan, then it will reflect badly on him. Laura’s a colleague of John’s; she needs to think well of him. He'd be furious is Sherlock told her private things. He's never been one for telling tales out of school, anyway; it’s just not his style.

He decides it’s better if she thinks badly of him than of John. It doesn’t matter what she thinks of him; no one apart from John has ever liked him, so her opinion of him is irrelevant. “It’s my fault. It’s all too embarrassing, not being able to do things myself.”

“In sickness and in health, Sherlock; it applies to both of you. I know you went off to Afghanistan to help him get back home and did your bit in his recovery. I talked to Greg the day he says you stormed his office, told him flat-out to reschedule your patients and announced that you were flying out to Kabul. Why is it easy for you to give but not to receive?”

Anger rises: why is it that nothing ever stays a secret among hospital staff? Then again, perhaps Lestrade had anticipated that the sudden disappearance of a surgeon would eventually stir up such a rumour mill that it was best to stick to the truth. And, it's not in any way embarrassing that Sherlock had gone to Afghanistan – all the embarrassing aspects of it are things only he and John are privy to.

There’s a photograph one of John's commanding officers had insisted be snapped of the two of them at the memorial service in Bastion. It had been sent to them along with John's honourable discharge papers and some belongings of his which had been left behind. They're standing between two command tents, Sherlock with his arm awkwardly around John since he didn't want to accidentally jostle his shoulder or his arm. In the picture, John is neither looking at the camera nor him. Sherlock hates the picture, because when he sees himself in it, he thinks he most decidedly does not look like someone who could be supportive and useful in any way. It's just as John had told him: he sticks out like a sore thumb in a place he doesn't belong in.

He averts his eyes from Laura, lest she see his discomfort. John clearly thinks that his injury is far more significant than Sherlock's, and he knows, deep down, that John is right. He can hardly tell her the truth —that the state of their relationship right now is so fragile that he is terrified to add anything to the burdens that John is already carrying. Laura's fussing is not helping – everything that draws attention to the halo consecutively draws attention into how defective he is.

Yet, he wants to say something. Just like he had wanted to say something out loud to Lestrade, when the man had found him sitting in John's office. “He’s got a lot on his plate, getting back into the swing of things at work. He is still recovering from his injury. This…” he waves a dismissive hand at his halo, “…is just a nuisance right now. I don’t want to be a nuisance. It’s…pathetic.”

“Sherlock. Look at me.”

It’s said kindly, but he knows what he will see in her eyes if he dares to look, and he can’t bear the thought of her pity. Seeing him like this will damage the reputation he has been trying to keep up at work. Of all the emotions he’s had directed at him, pity is the one he hates the most – he'd much rather by the target of anger, and of that he's had plenty of practice lately. Nine times out of ten, John's anger is justified; it shows when he is doing things wrong. It has been that way from the very beginning, when John had given him a piece of his mind in theatre. Anger has its own truth, and for that, Sherlock is almost grateful. When John is angry, he tends to be more honest than otherwise.
Anger is better than pitying him or giving up on him; anger implies that someone cares enough to
tell him that he’s fallen short and that he could and should try to do better. It’s very much
preferable to someone assuming that he can’t do something, that it is pointless for him to even try,
that he is too defective to understand, and so shouldn’t even attempt something. Anger makes him
try harder, at least until a point is reached when trying harder will change nothing.

How will he know when they’ve reached it?

He doesn’t lift his eyes. “You’d best go now. He’ll be home soon. I’m sorry I panicked a bit; it’s
just not like him to tell me when he’s going to be late, or if he’s held up in the car. He didn’t
advance an inch in twenty minutes, so I worried there could have been an accident – I’d say that’s a
perfectly reasonable concern. As a trauma surgeon you must be familiar with London traffic
statistics.”

Laura sighs, but he knows he has won a reprieve when she picks up her bag and gets up from the
chair.

“You do know you can call me—at any point. You do not have to go through this alone.”

“I’m not alone. I have John.”

She lets herself out, and some of the anxiety drains away from Sherlock. John should be home
soon, and after the fright he’s just had, Sherlock is eagerly waiting for the moment the front door
opens.

He can’t resist typing up a text: ‘Any updates?’ He knows John might not answer; it’s illegal to text
and drive, and they have both seen in theatre and at A&E what can easily happen when that law is
ignored.

A reply comes quickly, as though John had had his phone readily in hand: ‘Traffic’s clearing. See
you soon.’

Chapter End Notes

Thanks to the wonderful Cecilia G.F., that photograph exists.
The Fourth Wednesday

Molly extends her hand for shaking, and Sherlock hesitantly obliges. He is countering the therapist's smile with a tight, almost waxen one of his own that gets wiped off his features the very second Molly turns and leads them into her office.

After giving Sherlock what he hopes is an encouraging smile, John takes over his usual seat, noticing that another armchair has been shifted next to it. Sherlock stands beside it, his posture stiff and eyes darting around the room as though scouting for an escape route. At work, he sails through new and stressful situations with skilfully projected confidence and superiority, but this is about their relationship. John had been sure that coming to this appointment would make Sherlock nervous, but this level of apprehensive paralysis is surprising.

Molly points an upturned palm at the vacant chair and John pats its hand rest. Sherlock arranges himself into it primly.

"It's very good to meet you, Sherlock. I know it takes some organising for you to go places right now."

John breathes a sigh of relief over such a breaking of ice. He had been racking his brain whether to ask Molly to refrain from mentioning the halo at all, or to get it over with right away. In the end, he'd decided to leave the decision-making to her. She's the expert.

Sherlock replies nothing. John notices he has shoved his downturned palms underneath his thighs. Is he trying to stop himself from fidgeting?

"How has it been with the vest?" Molly asks pleasantly.

"Fine." Pause. "Thank you," Sherlock adds. It's almost as though there's a question mark at the end.

To John, such extreme politeness sounds odd and very forced.

Molly crosses her legs and leans forward a bit. "I have now met with John twice to discuss his experiences in Afghanistan and things that may be impacting how he's coping with adjusting back to civilian life."

"I assume I am here because you have analysed the situation and come to the conclusion that I am what is at fault when it comes to his recovery," is the thing that suddenly tumbles out of Sherlock's mouth.

John swiftly turns sideways in his chair to gape at his partner. "What?! That's not---"

Molly glances at him calmly but pointedly as if to say let me handle this. "The purpose of therapy is not to assign blame. You have both been impacted by John's experiences, and your own injury is currently adding stress to your relationship."

Sherlock does not look reassured. "You discuss me during the sessions," he accuses.

John wonders why this bothers or surprises Sherlock so much. It must mean that his reticence to talk about Sherlock during these sessions has been based on a sound hunch, after all.
"Yes, we do," Molly replies, "which is why I suggested to John that he might invite you along today. Isn't it fair that I meet you in person, instead of just relying on my imagination and what John tells me?

Sherlock still looks wholly unconvinced that this could be just a courtesy meeting. "Perhaps," he concedes politely. "I just thought---" he then snaps his mouth shut and it turns into an angry line. Angry at himself for letting something slip?

"What did you think, Sherlock?" Molly prompts gently.

Sherlock frowns, eyes flitting quickly to John and then back to Molly. "It would be sensible of John to make any important announcements in the presence of an outsider. We have had arguments lately, so the presence of a neutral observer might help all parties preserve face." He's speaking fast, and to John he sounds formal, stilted and even more nervous than before. It doesn't seem like Molly's attempts at defusing the situation are doing much. Sherlock's brain seems to be going its usual million miles an hour, leaving everyone else behind.

"What important announcements?" John asks.

Sherlock is ignoring him watching Molly carefully. "I don’t know, do I? That’s the whole point. Has John told you what this is about?"

John cuts in before she can reassure Sherlock. "Told her what? What important announcements?" he demands, then glances at Molly; "I'm allowed to ask him, aren't I?"

"Sherlock? Would you like to answer that?" she prompts gently.

Suddenly, Sherlock stands up. "I'm sorry," he mutters, strides to the door and disappears into the hallway.

John shoots a bewildered gaze at the therapist, then wastes no time in jogging after his partner. He gets into the hallway just in time to see the men's room door close. He hurries to it, almost hitting his knee on a chair on the way, and enters.

Save for the two of them, the space is empty, some of the stall doors left wide open. Sherlock is standing near the line-up of sinks along the back wall, pacing. He's flapping his left palm against his thigh and clenching and unclenching his right fist. He looks coiled like a spring; a human beacon radiating anxiety and distress. He spots John, stops in his tracks and John is reminded of a wild animal caught in headlights.

"Did you say sorry?" Sherlock demands, "It is customary to say sorry, you should have apologised to her, it is considered polite; you should have stayed, you always do those things so that they work when I don't know how to do them," he prattles distractedly. He paces past John, pivoting on his heel and then returning towards were he'd started next to the sinks.

"Could you stop that?" John asks, feeling increasingly restless himself as he watches Sherlock's flurry of movement.

"Can't. Won't. Not right now."

John steps into his path, reaching out for his wrist, but Sherlock's hands shoot up beyond his reach. "Don't touch me right now!" he snaps at John, taking a staggering step back. He lets out a forced, ragged breath, looking ready to bolt.
"We're not trying to put you on the spot, love," John says while retreating a bit himself. He feels thoroughly helpless at seeing Sherlock so terribly on edge, as though he's on the verge of some sort of a breakdown. "Like Molly said, she wanted to meet you, that's all. There's no agenda here," he promises.

"I can't be in there, John," Sherlock says and it sounds like he's having trouble picking the right words. John can practically feel the punctuation marks and the carefully arranged spaces between the syllables.

"I don't know the right answers," Sherlock adds pleadingly, and shoves his hands into his trousers pockets, presumable to curb the fidgeting he's doing with his fingers. He's shaking slightly.

John leans his right hip on a sink, trying to appear relaxed and to give Sherlock the space he obviously needs right now. It takes every ounce of his willpower not to reach out to him. "There aren't any right answers."

"There are always right and wrong answers and I can't prepare if I don't know the questions in advance. I can't pluck the right things to say out of thin air like everybody else. Without the right answers, I don't know what to say to stop it from happening."

"What are you afraid of happening? What do you think is going on?"

Sherlock turns to face the wall to escape scrutiny. His shoulders are curled forward slightly, and the front edges of the vest must be pressing painfully against his arms.

John opens his mouth to ask, again, what he means by the right answers, but suddenly a memory comes to mind: the two of them having dinner at Mycroft's Bayswater apartment last year, and the two brothers engaging in their typical banter. At one point, the conversation had turned to medical school. John had asked Sherlock something he had been wondering about – Sherlock had told him during one of their first meetings that his stellar academic achievements had helped compensate for his social difficulties when it came to the practical side of studying to be a doctor, but there are still parts of medical education that would have required him to try to use such skills.

"How did you manage OSCEs?" John had asked.

*Objective Structured Clinical Examinations* test not only a student's theoretical knowledge but also their bedside manner and their skills in interacting with, examining and interviewing patients.

"Those were easy;" Sherlock told him between forkfuls of roast potatoes; "All one needs to do is to learn the scripts. There's also a 2015 book written by an ex-CIA agent regarding interpretation of body language I have found moderately useful when dealing with patients."

John had reasoned that Sherlock probably uses the knowledge he'd picked up from the book with other people and not just patients. *The scripts'* must refer to lists of pertinent questions, and bookfuls of advice on how to behave with patients so one can pass the exam.

Is that what Sherlock means by right and wrong answers? That he doesn't have a pattern to follow; that he has no idea how to behave right now?

"Have you ever been at a psychiatrist appointment before? What about when you got that prescription?" John asks.

Sherlock lets his hands slither out of his pockets and flicks a dismissive wrist. He seems to have calmed down slightly – maybe it's relief that John isn't trying to drag him back to Molly by his ear. "Lestrade called someone for the prescription. No need for an appointment. Yes, I have seen
psychiatrists and psychologists and paediatric neurologists and therapists. A whole legion of them. I assure you that none of those appointments were voluntary."

Of course he has. John knows he should have realised. There is no way that parents the likes of the Holmeses wouldn't have sought every possible expert opinion regarding their son, and both Sherlock and Mycroft have insinuated as much. "I'm sorry. I should have realised. Still, this isn't about you."

Sherlock glances towards the door. "She seems to think this involves both of us."

John fears he's about to sound like a broken record. "She's my therapist. We're here for me. Like she says, it's not fair that we talk about you a lot and she hasn't even met you." The question is burning on his tongue again: what announcement had Sherlock been expecting?

Maybe he has a hunch. Maybe he doesn't. But, he really doesn't want to think about it, and judging by how upset Sherlock already is, how could it be a good idea to drag more difficult things into the limelight?

He decides to go for reassurance. “I don't have any big announcement, and there's nothing earth-shattering planned for the appointment – just a chance for you to understand what goes on in these sessions."

"Is she helping you?" Sherlock asks. "With your---- things," he adds.

"I think so, yeah," John says in earnest. He's surprised at his own lack of hesitation. Things have definitely not got worse after he started these appointments. Two days ago, Molly had felt like the best possible person to call out of only bad options, and it had turned out to be a good idea, even if she'd used it to wrench out an admission from him that he needs the help.

"Is she helping you with me?" Sherlock asks, and the question seems to be groaning under the weight of terrible, uncomfortable things laden on it.

"You're not the problem! I have no clue where you got that idea!"

"But I can't--- I've not been able to----"

John is so tired of not understanding, of having to try to defuse these things without having the faintest idea what goes on inside Sherlock's head. He's tempted to tell Sherlock to finally just spit it out, for Christ's sake, whatever he thinks is the big problem here, but looking at his partner John knows he can't say such a thing. It's obvious Sherlock wants to talk, but can't, somehow; doesn't know how? It's also clear that John pressuring him to do so is making things worse.

"If she's helping you, we need to go back in there," Sherlock announces.

It's the last thing John would have expected him to want right now, since he looks like he'd rather have a root canal without local anaesthetic than walk back into the appointment room.

"Let me talk to her first." John has no idea what he's going to say to her, but at least he needs to tell Molly how difficult this is all being for Sherlock, for reasons John wants to kick himself for not anticipating. Talk therapy is based on, well, talking about feelings. Could he have posed a bigger challenge for his partner? They're both rubbish at this – Molly has to forcibly drag stuff out of him, and with Sherlock it's probably a fool's errand to try.

Yet, Sherlock is trying – his agreeing to come to this appointment is a testament of that. And, sometimes he blows John away with how he deals with things. Such as after they'd returned home.
from Afghanistan and Sherlock had helped him pluck up the courage to go back to work. It seems that when dealing with concrete things that don't reflect on him, Sherlock's anxiety doesn't get the better of him.

This, whatever this is that's making him look like he's about to crawl out of his own skin, has to have more to do with Sherlock than it does with him.

"What do you want me to do?" John asks. "Should I tell her we're heading home?"

Sherlock says nothing but keeps tapping his fingertips against his thigh in the way John has noticed he often does when something is troubling him. Sherlock doesn't allow himself these other things in public – the pacing, the fidgeting. It must be astoundingly taxing to keep all that in check.

Sherlock catches him watching and stills his fingers.

"Will you be alright on your own in here if I talk to Molly?" John asks.

"Yes. Don’t let this…” Sherlock waves a flapping hand at himself, “---bother you. It helps. This is what it was like, sometimes, when you were away, there were too many things I should have seen to at home, and at work but you usually do all that; I couldn't keep it all in order the way you would have wanted me to, and then I couldn't sleep." All of this comes out now at breakneck speed, all in one breath.

"Is that why you talked to Greg? Which was good, by the way. I'm glad you did that."

"Don't be patronising."

"I'm not. I was really nervous talking to Molly for the first time. It's fucking embarrassing and really hard to admit that something is wrong."

"I didn't tell Lestrade. He saw."

"He saw what?"

"He saw me--- like this. I couldn't go into the OR," Sherlock admits; "I had to sit one out. My hands were shaking too much. I couldn't go in there."

Bloody hell. It had been bad enough, hearing Greg recount what had happened, but to hear Sherlock bluntly admitting that he couldn't even start an operation that would have been routine for him is hard to square with his usual work persona. John has seen him sail through the worst emergencies and disasters a neurosurgeon can encounter in theatre and at A&E with the grace and calm of a seasoned doctor even when he was still just a registrar. Sherlock knows and executes all the pertinent treatment guidelines like they were printed on the backs of his eyelids, and his medical judgment tends to be exceptionally sound and based on the latest scientific evidence. But, there obviously is no guidebook or roadmap for dealing with the emotional strain of the situation John had put him in, and Sherlock had obviously been terrified.

"Lestrade sent me home with that lorazepam prescription," Sherlock explains. "I thought my career was over because I suddenly couldn't operate but I didn't care – all I wanted was to know you were alright."

A blade twists in John's guts and he reaches out a hand before he's even aware of doing so. He can't watch Sherlock like this anymore – eyes wide in shock over his own admission and residual anxiety over remembering John's absence.
To his relief, Sherlock takes his hand and John laces their fingers tightly together.

"I was fine. It's alright," John tells him but it's useless because it's what Sherlock had needed to hear months ago, not now. "Greg understood, and he helped you." Because I wasn't there. "Anyone could have a rough patch and need a bit of help. It doesn't wreck your career."

John had thought that the shoulder injury had wrecked his career. Even when he'd regained enough functionality to be able to continue working as an anaesthetist, he'd felt like a failure.

"It hardly says good things about my ability to cope with stress or my judgment that I let it get to me," Sherlock says venomously.

John knows what he means – the ideals of the unemotional surgeon and army doctor do prevail. Every doctor would probably readily admit that's not how human minds work, but the stereotype still persists, somehow. Isn't that what has made John so bitter, too – comparing himself to other army medical personnel who didn't get shot, who didn't develop PTSD, who aren't wrecking their relationships because of what happened to them during deployment?

"Then, it turned out that I wasn't worried over nothing," Sherlock says, his hand listless and cold in John's grip. "You think I'm weak. You think I'm not like you. You think I can manage only as long as someone else paves the way and caters to my every whim. When I offend people, you're there to clean up the mess, and you've grown tired of that role."

"No!" John tells him sternly, gently pulling him closer by giving his hand a squeeze and a tug. "I saw you at Bastion. I can't even imagine how difficult that was for you, and you were a fucking star out there. You did good; you did better than I'm doing right now. Don't ever think that – don't ever think I see you as weak. I know what I said at the memorial service--- it's--- I didn't mean it that way. If you went to a war zone I'd be out of my mind with worry. I'd have bricked it long before you did."

"Why did you?" Sherlock asks quietly, eyes directed at the ground instead of John. "Why did you go?"

John bites his lip, jiggles their joined hands slightly. "I think that's what Molly's trying to help me work out."

Sherlock swallows and wets his lips. "Alright."

He doesn't sound entirely placated, more resigned than anything else, and John feels as though he owes him at least an attempt at explaining. "Maybe--- maybe I wanted a bit of control. Wanted to feel like I hadn't gotten stuck on some path I'd have to follow for the rest of my life. I just felt like I had to face uncertainty at least one more time. I couldn't know if things out there would be the way I wanted, if I'd enjoy any of it. Turns out, I really did. Well, until..."

"So, it was a dash for freedom? From some path you're stuck in?" It's clearly an accusation, but there is no muscle behind it, just sadness.

"No, not... that. Just, I needed to feel like I was in control, too."

"By going to a country where very little is under control?"

"Well, when you put it like that, it was a bit of an idiot move," John admits, and lets out a hollow chuckle that ends up just sounding morbid.

Sherlock doesn't join into his thin, forced amusement. It's obvious he's still too anxious.
"Can you give me a minute with Molly?" John asks. "You're free to decide whether you want to go back and finish the appointment or not; either way is fine. I'll come back in a moment and you can tell me."

Sherlock would probably have nodded if he could. John studies his expression and sees something flash in his eyes that isn't defeat and fear. It might just look like the very stubbornness that makes Sherlock a formidable foe to anyone at work whose opinion he thinks he needs to change. John plucks up the courage to wrap his hands around his torso, to give a brief squeeze. Sherlock doesn't resist but doesn't entirely relax in his arms, either. John can't help but think that the hard plastic vest he can feel is just another reminder to both of them that there are still barriers between them. "I'll be back in a minute," he promises, pats their joined hands, and extricates himself from the awkward embrace.

Molly is waiting in the doorway to her office. John is thankful that the hallway is empty of potential eavesdroppers.

"We have to stop asking him stuff directly. He's really upset," John says, because he doesn't know how else to summarise what he's just witnessed.

"You're aware what the likely answer would have been to your question?" Molly asks and there is no lightness in her tone.

John dips his head back in resignation, closes his eyes. Waits for Molly to say what he fears. "You better say it, since he obviously can't."

"I think he saw it as a possibility that you were about to end your relationship today," Molly says calmly. "Part of his reaction right now may be relief."

"That doesn't look like fucking relief to me. It's like he's still waiting to be marched to the gallows. I should have realised he's had therapists and doctors because of his autism. Clearly not a lot of good memories came from those experiences."

"Will he join us again?" Molly asks. "We can make him just a silent observer for the time being; that should take the pressure off."

"That sounds good. He did say he thinks we need to continue the session."

"The fact that he came here in the first place is a major gesture. He must have anticipated how much anxiety this could provoke, and he forced himself to take the risk."

John glances towards the men's room door. "I know. Or, at least I'm beginning to get that. I'm beginning to understand a lot of things."

Molly walks back into the appointment room, leaving the door open.

John returns to the bathroom. Sherlock has wet a tissue and is pressing it to his face. He looks pale as he slowly turns to face John when he hears the door open.

"It's fine if you just listen in," John says. "You don't have to say a single thing more if you don't want to. This is about me, after all. I'm going to talk with Molly and you can take over the sofa off to the side and just listen."

"What will you talk about?"

*He wants to prepare*, John realises. He should have asked Molly so that he'd have an answer. "I
don't know what she has planned, but if it turns out to be something that makes you uncomfortable, you can just go sit in the hallway. It's fine."

Sherlock throws the tissue into a bin and adjusts the cuffs of his oversized dress shirt.

John realises that there's something he can say to make things easier for Sherlock right now – to take something off the table. If there's any truth in Molly's guess as to what has upset Sherlock so much, John needs to make such fears go away. "Listen, I'm here and you're here because I want to make this work and you want to help me with that. To make it work like it used to? I'm here because the last thing I ever want to do is to end things between us. Do you understand?"

"It's still difficult for you."

*I'm still difficult for you,* is what John thinks he hears hidden in that vague statement. "I'm not trying to fix you; I'm trying to fix me. To fix us. To move on. You're sometimes cryptic and annoying but, as you helpfully pointed out on Friday, I can be a pain in the arse, too. Let's call it even."

His heart leaps with joy when the slightest hint of amusement visits Sherlock's features. The lingering anxiety soon squashes it like a gnat, but he does follow John back into the appointment room. Without being prompted, he sits down on the sofa off to the side.

Molly greets him with a curt nods and then quickly shifts her focus solely on John, who has retaken his usual chair.

"The last time you were here, we went through a structured trauma questionnaire. Any thoughts on that now that you've had some time to mull it over?" Molly asks, grabbing a pencil and her pad.

John has to stifle a groan. "Isn't it a bit early to talk about PTSD? It's only been a few months."

"As opposed to an acute stress reaction or acute stress disorder, as it is sometimes also called, PTSD's diagnostic criteria demand that symptoms persist beyond a month or that they start before six months have passed from the traumatic event."

"Shouldn't we be counting from when I got shot?" John asks. He then realises that it would naturally make the case for PTSD even stronger.

"You were not removed from that very stressful environment until you returned home, so the fact that part of your convalescence happened in the stressful environment where the incident happened may well have added to the cognitive load. Do I still have some convincing to do before you accept the notion?"

John rolls his eyes. "No, but---"

"Diagnoses are tools, as you must be well aware. In psychiatry in particular they cluster together patients with similar symptom profiles, but each case is still unique. You rarely have to fill all the criteria to fit a diagnosis."

"I know. It's still a label and I don't like it."

He glances at Sherlock. His arm is on the hand rest of the sofa he has taken over, fingers splayed in a relaxed manner and he's listening intently. He no longer looks like he's about to jump out of his skin.

"If you had a broken arm, it would be called by the fracture type. Granted, psychiatric disorders do
still carry a stigma that physical ones don’t have but discussing it does not have to leave this room. It's just something we can agree on to give a framework to what we do during these sessions."

"I just keep looking for some alternate explanation."

"John, what happened two days ago---"

He cringes. He'd wished that Molly wouldn't have brought this up, even though he'd given her permission to do so today.

He hadn't told Sherlock about what had happened. He should have.

"---as you realised yourself, you had a panic attack caused by a trigger logically connected to the circumstances of your injury."

"I knew it."

John's head snaps around to look at Sherlock, surprised at his interjection.

"Laura thought you were just annoyed by the traffic, but a moment later you answered my text when you should have already been driving, and what little I heard of your tone was not projecting annoyance."

*Bloody detective.*

"You didn't discuss this at home?" Molly asks.

"No," Sherlock replies. He doesn't sound judgmental at all. Clearly, he doesn't expect John to tell him about these things.

John desperately wants Sherlock to tell him things so that they could start sorting this mess out. Pot, kettle?

He clears his throat. "There was noise from a construction side; I had to leave the car. I called Molly."

"Alright," Sherlock accepts without asking for further details.

John turns to face Molly again. "Walk me through the criteria again," he prompts, mostly to shift the attention away from himself.

"First of all, the diagnostic criteria for PTSD require a patient to have been exposed to a significant stressor. The ICD-10 criteria differ somewhat from the DSM system, but the bigger picture is the same. The patient needs to be re-experiencing the trauma caused by it in at least one way: nightmares, intrusive thoughts and memories, flashbacks and other dissociative episodes, intense or prolonged distress after being reminded of those memories, marked physiologic response to being reminded of those events. Criterion C involves avoidance. Avoiding situations, people, places and thoughts and feelings that connect to the trauma."

"Avoiding thoughts? Who'd want to be reminded of unpleasant stuff? How is that a diagnostic criterion?"

Molly ploughs on. "Criterion D involves cognitive difficulties and mood issues. A patient may have some level of dissociative amnesia, although this is much rarer than people suspected of crimes seeking acquittal due to traumatic amnesia would like us to believe. There can be intense
black-and-white thinking about the world and similar patterns in the patient's self-image. There can be also be exaggerated self-blame."

Sherlock clears his throat. John decidedly keeps from looking at him.

"Then there's negative affect, decreased interested in hobbies and work, feelings of isolation and difficulties in enjoying things."

"Such as sex," Sherlock bluntly suggests.

"Christ," John says.

Molly keeps her cool. "Criterion E: alterations in arousal and reactivity. Irritability. Aggression. Hypervigilance. Risky or destructive behaviour. Difficulties concentrating and sleeping. The remaining criteria state that symptoms must persist beyond a month, create functional or social impairment and that they can't be explained by another illness or substance abuse."

"I would have assumed all this would have been agreed upon during your first session with him," Sherlock says. "It's all rather obvious, really. I could have told him he fills all the criteria, since he refuses to see it himself. He had a panic attack at work. I assumed these had abated, but clearly not."

John has a hard time keeping himself from reacting to Sherlock's snooty tone, but he knows that it's imperative that he keeps calm. He should be glad that Sherlock is participating instead of just wanting to escape.

If ganging up on him makes Sherlock feel better, so be it.

"Have you researched PTSD, Sherlock?" Molly asks.

"Yes. At Camp Bastion and after we returned to London," he says proudly. "The abysmal internet connectivity in Helmand made accessing the latest articles difficult."

"Do you feel that it's your duty to diagnose him?" Molly seems to be carefully keeping her tone neutral.

"No. I just like to be well-informed. How else am I supposed to help?"

"How do you see your role in helping John?"

"I am not a therapist. Psychiatry couldn't be further from my expertise. What I can do is keep the additional stress John experiences to a minimum. I need to help him avoid triggering things."

"It sounds like you have given this a lot of thought," Molly commends. "John, how do you think Sherlock has been keeping your stress level from escalating?"

John shakes his head. "I have no idea."

"Sherlock?" Molly prompts.

John realises what she's doing and it's clever: she's trying to get Sherlock to show off, when in reality she's obviously trying to get him to inadvertently say something important.

"I wanted to be there for John, provide stability, routine and support, encouragement. That's what all the therapeutic advice seems to agree is needed." He looks away from John, shifting his body to be able to see Molly better. "When I failed to make a difference to how he was coping with things,
a neutral outsider – a work colleague – stepped in, and he was able to help in a way I couldn’t. Clearly, others are better at this than me, which shouldn't have been a surprise. I've tried to spare John as much as I can from the minutiae of putting up with the halo. One could say I've kept him on a need-to-know basis. No point in adding to his burden by telling him things he cannot influence."

John is aghast. Sherlock clearly doesn't realise how many things he has done during the past months that have helped – immensely. Sherlock has even erased his own role at involving Greg, because he sees it as a failure.

"No point in adding to his burden." Molly had been right: Sherlock has been neglecting his own needs because he thinks John's issues have taken up all the space.

This is going to stop, right now.

He turns in his seat to face Sherlock. "It's not helping, you hiding things from me. It's making everything worse. I need to know when something's wrong. It makes me feel like shit when you say you can't tell me things because you think I'm too stressed out to care. You deserve better than that."

Sherlock blinks rapidly. John can practically feel him slamming up walls between them. Is he somehow interpreting John's statement as dismissing and belittling of his attempts at helping?

"Damned if I do, damned if I don’t," Sherlock mutters as he gets up and walks out.

John swiftly stands up to follow him, but Molly's hand on his arm drops him back into his chair. "Let him have a moment to calm down," she tells him, "remember how big a thing it was for him to return to the session."

There are only a few minutes left of the appointment, anyway. John barely listens to Molly during the dregs of it, frequently glancing nervously at the door. When he finally exits into the hallway, Sherlock isn't there.

He checks his phone and is relieved to find he has a text message: 'Gone home. Pick up some tea on your way, we've run out.'

John smiles. Sherlock thinking about tea is a Sherlock not completely beside himself. He shows the message to Molly who has appeared in the doorway, hoping for some advice.

She does deliver. "Give him time; he needs to process this a bit. Just try to be there for him tonight, instead of blaming him for not coming to you. You have to know that asking for help is probably as hard for him right now as it is for you, maybe even harder."

She smiles. “Seeing you two together has been really helpful, John. I realise how important this is for you both, to get it right."

They agree on the next appointment time, after which John heads out to hail a cab.

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When John gets back to the flat, he finds Sherlock in the reclining chair in the sitting room,
earbuds in, facing away from the door. John decides it's probably best not to mention the appointment or to try to gauge his mood. He needs to let Sherlock set the pace.

He brews a pot of tea from the packet he'd picked up at Tesco Metro, then sets cups and sundry on the sofa table.

Instead of touching Sherlock to get his attention, John knocks a knuckle on the coffee table.

Sherlock sits up in the chair, drags out his earbuds. "Oh," he acknowledges when John offers him a beaker of tea with a straw in.

"Do you want to swap your music to the stereo set?" John suggests. He rarely minds Sherlock's selections, the most modern and dissonant violin pieces notwithstanding.

Sherlock switches on the television instead, picking the evening news after flicking through channels, which must be for John's benefit. Soon, a story on the chairman of a prominent NHS Trust in London resigning over huge budget deficits and a crisis over A&E staff resources prompts a comment from John about King's at least having their things in order.

After their tea, John cleans the pins while Sherlock protests loudly at a documentary about a religious sect that shuns Western medicine. Then, on a whim, John pours himself a whisky and lifts his legs up on the coffee table. He hasn't had a drop of alcohol in weeks; not because he worries one will turn into many, but because he's been embarrassed to do so after Greg's visit. Even now, he worries what Sherlock might think of him doing so. Sherlock rarely drinks, save from having what he calls the requisite amount of champagne at parties and ceremonies. He says he doesn't like the way alcohol dulls his senses and dumbs him down.

When the whisky begins warming John all the way down to his toes, the worst edge over worrying about the afternoon's events melts away. He feels half-sleepy; maybe he should call it a night and go to work earlier than usual tomorrow. That would help him beat the traffic, and he might be able to hack off the top of some overdue paperwork. "I'm going to turn in," he tells Sherlock. "What about you?"

"I might read for a bit." Sherlock doesn't turn to look at him. John knows, of course, that it's the halo preventing him from doing so, but the lack of eye contact after a day such as this feels unnerving. John tempted to ask if things are alright – to inquire what Sherlock is thinking after the therapy session – but remembers Molly's words that this is not a good time to put him on the spot.

"You have your phone?" John asks as he rises from his seat, and Sherlock pats his trouser pocket while switching off the TV set. He tries to grab a journal from the coffee table which turns out to be just out of reach. John returns from the doorway to give it to him, then retreats to the bedroom.

The whisky turns out to have been the perfect soporific – John's head has barely hit the pillow before he drifts off. But, whatever dreams may have been in stock for tonight will have to wait: an hour later, the sound of a text message from Sherlock makes him stir.

It says: 'could you come here please'.

The politeness is unexpected, and the request unusual. John has insisted Sherlock should keep the phone with him, but Sherlock to actually use it makes John wonder if today's conversation has had some effect. Either that, or something big is going on.

He grabs a bathrobe, tying the sash as he jogs down the steps to the hallway. When he gets to the sitting room, he finds Sherlock half standing, half sitting on one of the tall stools by the breakfast
bar that separates the kitchen from the rest of the living room. He has his back to the door, so John can’t see his face.

"What’s up?" John asks, curling his toes on the cold floor and wishing he'd put slippers on.

"I wanted to come to bed, but my right calf keeps cramping every time I put weight on it." Sherlock lifts his leg so he can reach down to knead the offending body part, then grimaces and presses both his hands on his lower back, straightening his spine. Leaning forward must be troubling his back. "I got this far before I had to stop. I was afraid I’d fall."

"There was a cramp thing they taught us during the basic diving course," John suggests. If he remembers correctly, the diver is supposed to grab the edge of their fin to stretch the calf and to stop a cramp.

"Can't reach my toes, my hamstrings have gotten too stiff."

John kneels on the floor, grabs Sherlock's leg and bends the ankle by pressing his palm against his toes. He repeats this a few times, and Sherlock leans back on the stool. John then kneads the culprit – the gastrocnemius muscle – with his thumbs while taking cues from Sherlock's expression how much strength he should be using. After a few minutes, the muscle starts to yield and Sherlock stops tensing up when John presses harder into it. "We should probably start doing this regularly. Massage might help with your back, too," John offers.

"Because of the vest you'll only reach the lumbar region," Sherlock reasons, "but I'll take you up on that offer. You're no physical therapist, but instant availability is a huge plus."

John snorts and offers his arm, and Sherlock uses it to balance as he puts most of his weight on his opposite leg while slowly standing up.

John is tempted to say something about Sherlock asking for help like this – to tell him he's glad the request had been made, but it's probably best if he aims to normalise the whole thing by not drawing attention to it.

They reach the bedroom, and John helps Sherlock to sit down on the edge of the bed.

"I’m sorry. I didn’t want to wake you, but I was more afraid of what you would say if I fell trying to walk here while my leg was cramping so badly. It’s not fair that you’re the one whose sleep pays the price. Sorry," Sherlock repeats.

Molly’s comment about willingness to ask for help being a big thing for Sherlock right now comes to mind, and John bites his lip.

Sherlock shouldn't be asking for help because he's afraid of John's reaction if he doesn't. He should be asking for help because it's absolutely fine to do so.

Standing next to the bed, John puts a hand on his opposite shoulder and pulls him into a brief squeeze briefly against his hip. "No need to apologise. I promise you it's alright."

They get tucked in after John makes sure there's a bottle of water and a blister packet of paracetamol on the floor next to Sherlock's side of the bed where he can reach them if he turns to his side and extends an arm down.

John turns off the light on his side, then shoves his pillow next to Sherlock's and drapes an arm across his stomach. After today, he wonders if Sherlock wants a bit of proximity as much as he does. "This alright?"
"Why would it not be?" Sherlock sounds almost scandalised.

"Maybe you want a bit of space. After this afternoon."

"I never did," Sherlock replies quietly, grabs John's arm and tugs him even closer.
"Have you got a minute?" John asks Greg in the break room of the OR unit the next morning. The anaesthesia induction for a cervical spine fusion had lasted longer than usual due to the patient's blood vessels being difficult to cannulate after several rounds of cancer treatments. The delay means that most theatres are already in full swing and the break room is empty. John is glad of that, because his reason for talking to the senior neurosurgeon is personal and a bit awkward.

"Sure." Lestrade tops up his tea and they take over a tattered sofa near the windows. There's not much to look at outside – heavy streaks of rain are drenching the city and distorting the view.

"I need to know what went on here while I was in Afghanistan."

Lestrade doesn't look surprised. "I'll bet you're not referring to the mould they found in the paeds wing."

"Again? Didn't they finish the renovations already?" John thanks his lucky stars he's not the Hospital Trust's Head of Infrastructure.

"I'm starting to think that the construction company keeps deliberately growing some and sticking it into air vents so that they'd have a steady stream of work."

John doesn't laugh. Even though their evening had ended quite pleasantly, he hadn't slept much last night. The thought that Sherlock had been convinced he wanted to end their relationship had hovered at the periphery of his mind like an angry ghost. How could Sherlock think he wants to end this, what they had--- what they have? It's saddening that he has so little confidence in John's devotion. It seems that Sherlock wouldn't even try to fight for him because he thinks it wouldn't be of any use; that he believes that the dissolution of their relationship is somehow inevitable because of who he is. What else could all of Sherlock's research have lead him to believe?

When he had been in Afghanistan, John hadn't spared much thought to how it had been for Sherlock. He had seemed fine before John had left, and there were no complaints of loneliness or anything else negative in Sherlock's brief replies to his e-mails. John had thought he was keeping as busy as he usually was; that work was offering enough distraction that their months of separation would go quickly.

It had been a shock, seeing Sherlock at the therapist's office in what must have been at least a bit similar to the nervous breakdown he had apparently had while John was in Afghanistan, and a big part of what had kept John up most of the night had been guilt. Maybe it's self-flagellation, but he needs to learn what exactly had happened. "I know he came to you, and you got him those benzos."

"He didn't come to me, but I did call occupational health for him, and he talked to them on the phone. I told him to take at least two days off and to use what they prescribed him to catch up on sleep. As far as I know, they booked an appointment for follow-up."

"Which he never went to," John accuses. "At least I doubt it."

"Has he been using the benzos more than he should have?" Greg asks, alarmed.

"No. As far as I know they only gave him thirty pills and there is still half the pack left. He's not
using." Greg knows about Sherlock's past since he had supervised his specialty training. John elects not to mention that Sherlock had taken some of the lorazepam not a week ago. As far as John is concerned, Sherlock had been quite reasonable about it, except for not telling him shit about everything important, of course. "I'm not cross with you – or even him. I just want to know what the hell happened."

"I got a call on a Tuesday around noon that he wasn't answering his work phone. Told them to try his mobile, which rang until it went to the messenger service. He was due for a run-of-the-mill cerebellar biopsy and I'd seen him in scrubs not an hour earlier. No one had said anything about his performance and I hadn't seen him that much, so I couldn't really be sure. Maybe I should have gotten interested when his outpatient clinic nurse mentioned on Monday that he'd been a bit, well, quiet I think was the word? The nurses always gripe about him – except right after you two got together and everything was peachy for a while; he was on cloud nine, that boy, I tell you."

John gives him a nervous, tight smile.

"I go to his office, he isn't there. I go to that roof terrace where he used to smoke – he really has quit, hasn't he?"

"Yeah," John confirms urgently. He really doesn't care for these tangents.

"So, I go to the OR floor and finally, I find him in that back hallway that leads to some of the on-call rooms. He's pacing the length of it, talking to himself. You know how he sometimes goes through the operation in his head and doesn't notice that his lips start moving?"

John has seen this many times – Sherlock looking like he's reciting a mantra while scrubbing his fingernails above an OR sink, or walking the distance of the main theatre unit hallway, lost in thought.

"This time he's got his phone in his hand and it turns out that he's going through every bloody news agency website trying to track down if there's anything going on where you were, and he isn't finding anything. He's shaking like a bloody leaf, and he can't stay still. Takes a while to even get it out of him that nothing worse is going on than the fact that you simply hadn't e-mailed him for a couple of days. That was three weeks after you'd left, I think."

"That was the first week I spent on call at Bastion. Some of the electrical grid was down and they were regulating satellite communications – no phones and no internet. Besides, I was on duty for most of that week and it was even busier than usual. I thought I'd mentioned going to Bastion to him."

"Even if he knew, it was obviously a bit much for him, not knowing. He said that he always hated the moment when an email came in from you because it meant that he'd have the maximum time left to wait until the next one."

"Most of the time he didn't even reply," John argues. He feels deflated and a bit shocked – he'd had no idea those emails were so important. They'd been getting harder and harder to write when Sherlock didn't really even answer, except for a few uninteresting lines. It had felt pointless even sending them since Sherlock didn't seem to give a toss about anything he had to say.

"Anyway," Lestrade continues before swallowing down the last of his tea; he will be due in theatre soon. "I tried to calm him down, told him no news is good news and all that rubbish, but when I got a long hard look at him I realised he looked like shit. I asked him when he'd last slept or eaten, and this is what he asks me: 'what day is it'. Turns out he'd been awake for at least five days straight. I told him that I didn't think he was in any state to operate, and I expected him to argue – he's
Sherlock, for God's sake, you don't go around telling him he's not fit to do surgery. What worried me more than anything was that instead of going berserk, he just nodded and then sat right down on the bloody floor! That's when I called OH and they got him that prescription. I got Anderson assigned to the biopsy – the guy was actually happy to get out of his outpatient clinic session, and I gave Sherlock a ride home. He said that his brother was in town, so I made him promise to get in touch with the guy. I was flying out for that EANS postgrad education committee meeting in Toulouse that night, so I couldn't stick around."

John suspects that Sherlock had gone home, opened the blister packet and slept for days. He racks his brain about when he may have emailed Sherlock next; he's certain he had gotten some sort of a reply to his next email from Kabul, and, as far as he recalls, there hadn't been anything remarkable about it.

"He came back to work two days later, and seemed, well, if not alright, then at least functional," Lestrade continues. "I guess getting a bit of sleep with that prescription did him a world of good. I asked him if he'd contacted that brother of his and he said yes; apparently the man had managed to confirm that you were at Bastion and that there wasn't anything dodgy going on there."

It's hard for John to imagine Sherlock willingly turning to his brother in a crisis. If everything else Greg has just told him hadn't already confirmed how unhinged Sherlock must have been, this would have done the trick.

John makes a quick calculation in his head, with the result being that Sherlock must have been taking at least one tablet a night until their convoy had been hit. While supervised use of benzodiazepines for their intended purpose is not forbidden, it is more than a bit not good if a surgeon is using such stuff regularly.

'I thought my career was over, but I only cared about knowing that you were alright,' Sherlock had told him.

The responsibility hoisted on him by such a statement suddenly feels crushing. Sherlock's career is his bloody life – John is tempted to protest that Sherlock must have been overreacting, but, having looked in his eyes when he'd said it, John does not doubt a single syllable.

"How the hell did you or Mycroft get him to fly out? If being here was so hard, how the fuck could he go to Afghanistan?" John asks, astonished.

"He got the news just after finishing up a case. He stormed into my OR, told me in no uncertain terms he was taking off, and did so. No hesitation. I don't think anyone had to talk him round. What struck me was that he didn't even look shocked. He looked like he does when there's an emergency case going on – so focused and determined it's pretty bloody frightening."

John is glad he'd told Sherlock in no uncertain terms that he does not think him weak. What he'd done by getting on that plane, is just--- John is absolutely certain no one has ever done anything like that for him, ever.

Lestrade stands up and throws his disposable cup into a bin. "You know what seeing him in that state reminded me of when you were away?"

"Hmm?"

"All those birds, I think there are several kinds, but anyway – you know those ones that live quite a long life and they only ever take one mate and if they lose the one they've chosen they'll just sort of give up? Just sort of exist, resigned to loneliness?"
John tries to dismiss this as a stupid analogy, but he can't escape the sentiment behind it.

"Be careful with him, John. I don't think he'd survive losing you."

-Greg's words keep echoing around John’s head all the way home as he negotiates the total logjam of traffic between King's and home – it'll be a while since he'll be willing to tackle Battersea Bridge Road again, and alternate routes are slower.

He’s still trying to reconcile Sherlock being so anxious that he was unable to operate with the idea of Sherlock leaping onto a plane and coming out to Afghanistan. At the Camp hospital, he had acted every bit the sensible, calm and determined surgeon he is at King's, and it just won’t compute. Perfect Sherlock was consulting on acute brain injuries, reading MRIs and micromanaging his physio while John himself had been coming apart at the seams.

After he finally closes the front door to their flat behind him, John tosses the car keys into the glass ashtray on the hall table and heads into the kitchen, where he can see Sherlock sitting with his back to the door on one of the breakfast bar stools.

“Hey.”

There is a distracted hum in reply.

“You really shouldn’t sit on one of those stools; a bit precarious.”

That gets a derisory snort. “Sitting is how I live dangerously these days; pathetic, isn’t it?”

John comes around the counter so he could see what it is that Sherlock seems so focussed on.

At the end of the countertop, positioned far enough away so that Sherlock can see them without having to bend down from his waist, are three items: an opened packet of cigarettes, the half-full blister pack of lorazepam tablets that John recognises from the other night, and lastly, some sort of flat, square package that looks vaguely medicinal. John picks it up to read the label: nicotine patches. The packet has been opened and some of the patches are missing. Sherlock hadn't used them even when he was quitting. As far as John knows, he'd done it cold turkey, surprisingly effortlessly. “What’s going on?”

“I’m trying to decide which of those to use next.”

“Why?”

“Because the alternative is far worse. I need to exhaust all possibilities before considering options that aren’t on this table.”

John pulls another tall stool over to the end of the counter and parks himself in it, so that he, too, is in Sherlock’s line of sight. That bloody halo combined with Sherlock's considerable height make achieving eye contact challenging. That may well suit him when he aims for avoidance, but it doesn’t work for John.

He needs answers, and he needs them now. The fact that Sherlock has left all this in plain sight, aware that John would arrive home around this time, speaks volumes about the precariousness of his mental state.
John reaches out and swipes all three items into a pile and then puts his own hand on top of it. “None of these are a good idea, and I'm glad that you're at least having a good think on it before taking anything. Is this about the appointment with Moll---”

"I'm not going to discuss that," Sherlock cuts him short. "It is, and it's not. It's not just one thing. It's everything. Everything is too much."

What had Sherlock meant by options not on this table and a worse alternative? John can't say he actually wants to hear such a thing if it's what he suspects, but even if the thought curdles his blood, he needs to have this conversation. There are no guidelines or textbook recommendations to help him right now, unlike when there's an emergency at work; his heart is speeding itself into crisis mode, and cold sweat is making itself known. He's forced to admit to himself that this whole thing scares him; he's never really gotten to the bottom of Sherlock's history of drug abuse. He'd chalked it up as a folly of youth, something that belonged to a Sherlock he hadn't even known. A thing of the past. Nothing that should concern their life, now. "Why do you think you need something?"

Instead of making eye contact, Sherlock keeps his eyes on the pile under John’s hand. “I don’t think; I know.”

“Then explain it.”

Sherlock just sighs.

John glances at the blister pack, counts the pills and realises that there is one missing. “You took more lorazepam? When?” He tries to keep the tension out of his voice, but the idea of Sherlock using the drug when John isn't at home to help if it affects his balance and might cause a fall is highly alarming.

“This morning. I’m not an idiot; I stayed in bed, prone for the duration of when it should have had some sort of an effect. I wouldn’t risk walking when under the influence.”

“Why?” An accusatory tone is creeping in, but John can’t help it.

“Why did I take it, or why would I not risk walking?”

It is John’s turn to roll his eyes. Sherlock can sometimes lapse into extremely literal thinking. It can also be an attempt at deflection; sometimes it's hard to tell. “The former, obviously.”

“For the same reason I did when they were prescribed.”

John recalls their conversation and what Greg had told him. He realises it's not a good idea to pry further into Sherlock's recollections of the day when Greg had found him in the hallway; he'd likely be embarrassed and stop talking. “Insomnia?” John asks carefully. As far as he could tell, Sherlock had fallen asleep quite quickly last night. It had been John who had lain awake, blinking at the ceiling, arm draped around his quietly snoring partner.

Sherlock sniffs. “That’s just one symptom of the problem. And, taking a sleeping pill in the morning even if trying to catch up on sleep is highly counterproductive to fixing insomnia.”

“So, what’s the underlying diagnosis that you are trying to self-medicate here, doctor?”

“Me. I’m unable to manage my blood chemistry at the moment. I have elevated levels of cortisol, adrenaline and noradrenaline, and reduced levels of both serotonin and dopamine."
Sherlock has just listed the classic chemical markers of anxiety, but John is confused by the preciseness of the explanation. “You’ve had a blood test? How?”

“Don’t need to. I was born this way, John. I know when things are going out of kilter. Symptoms are indicative.”

John looks at the pile under his hand, curls his fingertips around the edge of the packet of nicotine patches. “So, how is any of this likely to help?”

“I don’t need to tell you the effects of a benzodiazepine, so I assume you are asking why I’d look to the stimulants.” Sherlock finally glances at John instead of focusing on the table in front of him. “The sedative and muscle relaxant effects of the lorazepam weren’t enough, and when that happens, I have to deal with the dopamine deficiency. Nicotine helps.”

“Where’d you get the cigs and the patches?”

“From the builders last week. I bought half a packet off of one of them when I caught him smoking on the balcony. Cadged the patches off another. Opportunist contingency planning.”

“So, you’ve had this… this stash in the flat, just waiting for… what? Why today?”

"Why any day? You know I can't withstand boredom. It's even worse when combined with something distracting and irritating. Sharks will die if they don't swim, and it’s been twenty-five days since I was in an OR. I need The Work; the adrenalin that cuts through everything, the fact that I know there's a place where things make sense and I'm in control. The complete focus required is intense enough to override my brain's more destructive tendencies, the physical performance gives stimulation intellectually comparable to exercise and when the operation is a success, I get the euphoria of achievement. It’s why I am the surgeon that I am: I found the one and only professional field that actually benefits from me being the way I am and not just from my knowledge base. I am literally addicted to the OR, John; it’s the only thing cerebrally comparable to drugs that's a vocation. This injury is enforcing a withdrawal that is excruciating, with no respite in sight for at least another fifty-eight days. Right now, I doubt my sobriety will survive that long."

John is speechless. He had no idea that Sherlock might attribute some of his skills and a lot of his motivation as a surgeon to his, well, affliction. It's the only word that John comes up with that isn’t as bad as disabled. And to hear it explained like that— he can imagine Sherlock sitting here for most of the day, formulating the explanation, refining it to perfection like he fine-tunes everything else.

And, Sherlock isn't even finished yet. "It’s the only way I have ever been able to deal with…” he grinds to a halt, takes a deep breath and the then continues, “…if there isn't enough to channel----" the fingers of his right hand curl into a fist on the countertop; with his left, he flaps the air, pointing erratically at everything and nothing, "---this. I can't sleep. I can't function. I can't stay clean."

John reaches across the counter to rest a palm on his arm, which elicits a shudder and a sharp intake of breath. Sherlock squeezes his eyes shut briefly, shifts his hips as though adjusting to the sensation. "The lorazepam didn't work. The nicotine isn't working."

"You've tried both already?"

A hum that John takes as assent, from a man who can’t nod his head. Sherlock holds his arm out, so he can see to unbutton the cuff, then pushes his sleeve up.

John’s eyes widen as he counts not one, not two, but three patches. “Jesus, Sherlock. Nicotine
poisoning is definitely not a solution."

"Won't happen. My brain has fewer nicotine receptors than…" John catches the slight hesitation, “…normal people."

"How many cigarettes have you smoked so far?"

"Six. It’s quicker across the blood-brain barrier than the patches."

John takes a deep breath. He can't put this off any longer. “Is there something that's not on the table but in the flat? Or something that you're considering---" what is the right word that wouldn't make John sound too clinical, too apprehensive, too... doctorly? "---buying?"

"There's nothing here. Besides, that whole thing isn't anything that need concern you."

"Don’t you dare! If you think that any kind of illegal drug is going to solve a problem---"

"Don’t get on your moral high horse, John. It’s not going to help. I can't think, and when I can't think, I may not realise all the options." Sherlock's eyes are fixed on the cigarettes again.

Suddenly, John realises what's going on – why Sherlock had let him see this, and why he's being surprisingly honest and making a tremendous effort to talk: he wants John to know that he's on the edge of an abyss and wants a second opinion. He wants to trust John enough to be willing and able to help.

“Worst case scenario?” John asks, attempting to sound as neutral as he possibly can.

“I call up a dealer who delivers, then go meet him somewhere other than the flat to avoid any risk to your reputation."

The frankness of the confession cuts into John like a knife. “What would he deliver, hypothetically speaking?”

Sherlock has never volunteered any of the sordid details, and John has never asked. For the first time, John wonders if he had kept on the straight and narrow during medical school and surgical training, or if he just hadn’t been caught. As far as John knows, drugs were not the reason he had moved from The National to King’s to finish his specialty training. It had been a court case, but any known history of drug abuse that the Deanery was aware of could have jeopardised the chances of his career surviving litigation. Before, John has let his past be just that – the past. Now, it's come to stare at them from the kitchen table.

Sherlock swallows. “Cocaine to ease the anxiety, and heroin to taper the comedown.”

John's eyes go wide. He's not sure what he'd expected; maybe benzos? A bit of speed, at most, to aid all-night study session? Not this. Not anything like this.

John knows about the track marks, he's seen them countless times, but still, a part of him has repelled what they could mean. Denied it. Long ago and far away. Whatever substances John would have ever considered, it wouldn't have been speed balling. Not something so insanely dangerous. It's Russian roulette in chemical form: the drugs' combined effect is devious in that users won't feel any warnings signs of an approaching a lethal dose of either of the ingredients.

Heroin doesn't come in tablet form. Cocaine is commonly snorted. Taking them together means injecting at least one substance intravenously----
He had known. He's seen the scars. He just hadn't wanted to believe it.

_Do not react. Stay absolutely calm._ John tries his best, but he realises he has let go of Sherlock's arm as if scalded, his palm hovering in mid-air. He quickly drops it below the level of the kitchen island surface. "You don't have that many scars."

"Excuse me?"

"On your arms. Your veins are mostly fine." _Tell me I've got it wrong. Tell me I heard you wrong!_" 

"_John,_" Sherlock berates, "I'm not stupid enough to want to broadcast such a habit to anyone who sees me without long sleeves. If you must dwell on such details then I'll lay it out: I only used my antecubital veins in the beginning, hence the very limited scarring. After that, I moved on to the femoral vein; easy to locate while keeping a fingertip on the accompanying artery. The vein is closest to the V, like the crude mnemonic goes. Sometimes, I used the veins on my feet or between the toes."

"You told me---" John starts, and he doesn't know how he can possibly choose between anger and whatever else is trying to push cold sweat out of his pores, "---you told me you fell off your bike and had a hernia operated twice." The strange scars and marks on Sherlock's left groin had been hard to miss, but John had no reason not to believe the explanation Sherlock had offered. _God, he's such an effortless liar._

John finds himself in awe that someone could have kicked a combined heroin and cocaine habit and built themselves a medical career.

"If it's any consolation, for some time I mostly did morphine in tablet form since it was more easily available and safer than heroin, and snorted cocaine on the side. But, once I tried the more intense alternative--- well, that phase didn't last that long. _Mycroft_ made sure of it," he says from between gritted teeth. "Well, there were some other things which made me want to re-evaluate my priorities."

"How long has it been since you've used?" John asks, struggling to get the words out because his mouth is as dry as the desert.

"Years."

"Don't throw away those years."

"Easily said, nearly impossible to do right now."

John rises to his feet. He doesn't even notice that he's practically standing in attention. His heart hammers within his chest so hard it feels as though his ribs are being bruised from the inside, but when he speaks, he does so calmly and sternly: "Tell me what to do, Sherlock. How can I help?"

Dark lashes flutter closed, and Sherlock's shoulders sag in exhaustion. It's as though he has used all his energy reserves to signal his situation to John, but the anxiety remains in his trembling hands, the way he's biting down hard on his lower lip and how he's purposelessly fingering the edge of his shirt cuff. "Don't make me talk anymore," he pleads quietly.

"It's fine. You've told me, now. We don't have to discuss this any further. But, I need to know what to do."

Sherlock's eyes snap open wide, as though startled, then narrow as he tries to concentrate. "I can't fix it, I can't stop it, I don't know how."
It's probably useless to tell Sherlock to calm down. "Is this... a meltdown? That's the word you used, isn't it?"

"No, you idiot! But that's definitely on the bloody table if you don't fix this!"

John is taken aback. "I don't know how! You've only just told me all this! You keep telling me I don't get it, because you're not like... people. How am I supposed to---"

_Think! For the love of all that's holy, think!_

He nearly bursts out in incredulous laughter, when one thing does come to mind. It's stupid, it's absolutely mad, and it sure as hell isn't cocaine. _It can't work._ He saw it in a bloody magazine, and because he's useless and over his head with someone like Sherlock, that's why it's the only idea that is now occurring to him.

He will be ridiculed. He will practically die of mortification within the next five seconds, once Sherlock hears this. There is no fucking way Sherlock will ever ask him for help if this is all he comes up with.

"John?" Sherlock asks. He sounds so hopeful despite John's frantic, shocked and likely utterly fruitless silence, that the thing, that stupid, stupid idea just tumbles out of John's mouth as though the word has a mind of its own and it has decided he can't reside inside such a vacuum of uselessness as John's brain-----

"Sex," is what John says. "Sorry," is what he says next, but Sherlock holds up a hand.

John knows that look. Sherlock is _thinking._

"It makes you sleepy," John reasons feebly. _It also makes you happy. It makes us happy._

Sherlock drops down from his chair, his eyes scanning what he can see of John while standing with his back straight. "Adrenaline, endorphins, vasopressin. You may have a point. We're going to try that." And, just like that, he starts unbuttoning his shirt.

"What, right _now_?"

"Did you have something more important to do?"

"No," John argues. "It's---- it's just---" Very sudden? A bit of a whiplash effect, having a serious conversation and then suddenly trying to fix a drug craving with an orgasm?

"It's hardly _sudden_. We've not indulged in 35 days."

_Bloody genius telepath!_ John rolls his eyes and leans his palm on the counter as he watches Sherlock divest his shirt and fold it on the chair. The plastic vest still covers his torso and will continue to do so during whatever is or isn't about to happen, and it's not exactly the most erotic sight in John's lifetime, nor is the way Sherlock looks more exhausted and irritated than aroused.

"Nice of you to keep a tally," John can't help commenting. Thirty-five days _does_ sound like a long time. Usually, one of them initiates something at least a few times a week – more, if they're on holidays. The mood at home after Afghanistan hasn't felt like it would be reasonable to start anything, so John has been sorting himself out quietly. Perhaps he had assumed that's what Sherlock has been doing, too, at least before the halo came along potentially to shut his libido down entirely. "You've tossed off, haven't you?" he asks sceptically.
Sherlock fixed him with his gaze – he's standing far off enough to be able to do so. "Too distracted," he snarls from behind clenched teeth. "Won't work. Too on edge."

John curses silently. Why does he assume these things about Sherlock? Hasn't he told John over and over again he's not other people whose heads work the way John's does? "God, no wonder you're wound up tighter than a bloody spring. You could have said something, love, rather than stealing nicotine patches off some builder." John can't help an incredulous half-chuckle escaping.

The shock of what Sherlock has just told him about the drugs hasn't evaporated entirely, not by a long shot, but he's finding some consolation in that it has been years since Sherlock has used, and even now, he had reached out instead of caving in. Rehab must've taught him at least something.

Sherlock looks a little offended now. And confounded. "But I am saying something, now."

"I know you are, and I'm glad."

"I assumed the halo would have thoroughly put you off." Sherlock takes a deep sniff and winces. "The smell alone is enough to disgust anyone."

"It would take much more than a halo to put me off you. I just wasn't sure how to go about it – didn't want to hurt you." John knows this is half a white lie – of course he thinks about sex, regularly. Often. But, lately it's been hard to imagine how the uneasiness between them could be transformed into intimacy.

He misses it. More than he has wanted to think about.

Sherlock's bare arms have goose-bumped. John decides that they can't stay in the draughty kitchen, locked into this impasse, so he takes off his jacket. "How about we christen that lovely new bed you got us for the study?" He holds out a hand.

Sherlock takes it, hesitating at the last moment. "Just don't aim for slow and romantic. That's too frustrating right now."

"Got it. No romance," John teases and pulls Sherlock closer so that he can coil an arm around his waist. "Can't kiss you properly with the halo, so I'm going to want to put my mouth on other things."

Soon enough, they're standing in the study.

"Take off what you can manage," John tells Sherlock and then hurries upstairs to their proper bedroom. He grabs a flannel he'd used the night before after his shower and left on the back of a chair to dry, and a half-full bottle of lube from the bedside cabinet on his side of the bed before he jogs back.

Sherlock has thrown off his socks to the floor, unbuckled his belt and unbuttoned his trousers and is now sitting on the bed, legs slightly spread, leaning back against his outstretched arms. The halo probably weighs down on his neck in this position, so John drops his loot on the bed next to him and quickly pulls off the trousers and pants together, nearly pulling Sherlock's bottom off the bed in the process. John raises one eyebrow at what greets him underneath. It seems that the mere promise of climax has lessened at least some of his partner's anxiety, and this isn't the first time when John taking charge a bit when Sherlock has been distracted and riled up has put things back on track with sex.

Sherlock notices his amusement. "I'm ready when you are." He's now straddling the corner of the
bed, eyeing the still-clothed figure of his partner with disapproval.

John gets rid of his dress shirt and trousers, leaving on a T-shirt and his pants. A sharp glance from Sherlock makes him discard his socks, though he usually prefers to keep them if there's any chance he'll be spending time on the floor. "How do you want to do this?" John asks. Trying not to disturb the pins, he cards his fingers gently across the very top of Sherlock's head, before sitting next to Sherlock on the edge of the bed.

"What do your imbecilic guidebooks and instructional leaflets say?"

John glances at the ceiling as he racks his memory. "You should be on your back or on your side. Or, on top."

"That's not what I prefer." Sherlock begins lowering himself onto his back.

John slides a hand underneath his shoulder blades to slow the descent and continues to recite from memory: "'As long as you don't bend or twist yourself, or lift anything, experimentation within reason is allowed'. One guidebook said that we should ask the orthopaedist which positions would not put too much stress on your spine."

This breaks the ice; John giggles and Sherlock flashes a grin as they both consider what it would be like to sit Laura Arthur down for some advice on medically-sound kama sutra for two men, one of whom is in a halo.

"'Do not pull or lean on the brace'," John adds verbatim.

Sherlock rolls his eyes and flops his arms down above his head. "You must have memorised that crap. I could have told you that one."

"'You may lie on your back and assume a passive role' is what the guidebook Maud gave us the last time says."

"Maybe lying there like a dead fish is her personal preference," Sherlock snorts; "it certainly isn't mine."

John gathers his right knee up onto the bed so that he can wrap an arm around it and watch Sherlock, taking a moment for himself to enjoy the sight. While the halo ring and the vest are difficult to ignore, those endless legs, sharp and lean pelvic lines, long delicate arms and relatively large hands that seem made for wrapping around a cock are not failing to cause a gentle but incessant warmth to be gathering at the base of his groin. The sight of Sherlock’s erection is adding urgency to his own.

Sherlock is watching him, too, and some more of the tension seems disappear from his posture.

John gathers the pillow from the headboard, "With the infection and the back pain we might want to err on the side of caution and try something a bit less intense."

"John," Sherlock says sternly, "anything we do at this point will be intense." It's a warning that he may be sensitive, and that he may easily get close to coming. In the past, on the rare occasions when they hadn't had sex for at least a week, John has had to severely limit foreplay unless he wants that to be the entire play.

"I'm just saying it might not be a good idea to, well, ram you against furniture or anything."

A tiny muscle at the side of Sherlock's mouth twitches. "Sounds like that's quite a concession for
"Berk." John spreads his arms in a welcoming gesture. "Anything you want, within common sense."

"And without ramming."

Sherlock slithers his bottom down towards the edge of the bed so that he can dangle his legs down. John grabs the pillow, bends it in two and shoves it underneath the halo. He still doesn't know what Sherlock wants. "Do you want me to prepare you?"

"No, it's--- I'd prefer just your mouth, please. And fingers."

John grabs the union jack cushion from the chair, putting it on the floor so that his knees won't get bruised, and snicks open the lube. "Feedback appreciated, as always. Just no calling me an idiot if I've still not developed telepathic skills."

Sherlock's answer is a hum. He has closed his eyes and smoothed his right hand against his thigh.

John blows on his lube-coated fingers to warm them up, but Sherlock still gasps and twists the duvet with his right hand when John gently trails the back of his knuckles upwards from his perineum to his cock, which bobs in response. Since John doesn't want too much lubricant in his mouth, he doesn't slide his hands upwards. Instead, he gently gathers Sherlock's balls on his palms; just to be held, not for squeezing. John knows from personal experience that anything more can be distractingly intense and cause an irresistible impulse to clamp thighs together.

Then, before Sherlock in his sexually frustrated impatience tells him to hurry the fuck up, John wets his lips and envelops his glans in his mouth, careful of using too much teeth. A bit of licking at the slit and across the fraenulum, a bit of squeezing with his lips around the entire girth, and he can feel Sherlock's hips shift in anticipation. His eyes are pinched shut and his breathing has deepened. It should be a sign of encouragement, as is the hand that reaches blindly towards John's head and gently grabs a fistful of hair, then lets go. John knows its meaning; Sherlock wants him not only to continue but to make it harder and more intense. This gesture is always brief; he never grabs John's head for any length of time while being sucked off; John had once did it do him, during the early stages of their relationship, which had ended in a stern order never to make that mistake again. Sherlock doesn't want to be held down, but usually doesn't want to take the lead, either; John always needs to be the one to find a balance for the both of them. Thankfully, he has already had plenty of practice to prepare for today's crisis management fellatio.

Flattening his tongue against the bottom of his mouth, he takes in the whole shaft now, and starts a steady rhythm with a wet lick to the slit at the end of every slide up. Sherlock drags his knees higher up, allowing him better access. John rearranges his elbows on the edge of the bed to get a better position between the thighs, hands splayed on Sherlock's groins. He continues until Sherlock's groans turn hoarse and he appears to have slipped into some altered state of consciousness where his massive intellect is offline and his communications only consist of John's name and 'yes'. His neck and torso – what John can see of it outside of the vest – are splotched with red. *Oxytocin causes the sex flush*, Sherlock had once announced out of the blue over breakfast, a medical journal in hand.

John quickly pours another helping of lube on his fingers, then slides his palm down Sherlock's opposite thigh and then presses the tip of his thumb down in the spot of his perineum where his prostate should lie underneath. It's a good test on how much Sherlock can take – this might well bring him over the edge if he's as sensitive right now as John had once seen after they'd been
separated by a two-week conference and John had playfully banned him from touching himself during the separation.

He isn't disappointed.

Sherlock whines desperately, followed by an impatient grunt. "More," he begs, and sounds so lost that John sinks his shaft down his throat again, presumable to ground him somehow. He always feels responsible and careful when doing this – almost treats Sherlock like a skittish animal when he's over-sensitised and frustrated because the wrong move might send him into storming off when John couldn't anticipate what he'd love and what he'd absolutely loathe for being overwhelming. The line between those two seems rather thin at times and doing the wrong thing can deflate his interest in an instant.

Sherlock's lungs are bellowing hard enough that John momentarily worries the vest will be too constricting. Still, there is not much ambiguity in 'more,' so John delivers it. Soon, Sherlock's thighs are trembling, and John likes his breathing even less, so he withdraws his mouth.

"John, please," the tone is slightly different.

John is quite certain that he knows what he's being asked for. "Alright, but you've got to calm down a bit first. I'm not having you hyperventilate and pass out on me."

"Close," Sherlock mutters, but obediently takes a deep, ragged breath, then holds it for a moment.

John doesn't doubt his statement; what he's about to do will probably take Sherlock right over. It's almost a shame; he loves watching this, loves watching what he and he alone is allowed to do, and it has taken him considerable willpower not to reach down to grab his cock and chase his own release. It's just that he can't afford to lose concentration right now.

He rises to his full kneeling height, curls his left hand around Sherlock's cock and leans slightly over his right thigh because his injured shoulder is complaining a little from having to keep his arm raised. He slides his right hand down – side of the palm first to avoid tickling – back over his scrotum. After a brief tease, he then breaches Sherlock with his still sufficiently slick middle finger.

The fingers that had been twisted into the sheet a moment earlier splay out as though electrocuted, and the rest of Sherlock tenses up briefly as well. "Alright?" John asks him and gets an affirmative hum in reply. He begins a slow stroke with his left hand, and before long, is able to add another digit of his right hand into play. After a few thrusts, he hooks up his fingers from the first joint and, with precision, finds the firm roundness of the prostate.

Unsurprisingly, the precision strike works: with a broken, half-swallowed shout, Sherlock comes. John gently strokes him through the spurts, keeping the fingers of his right hand absolutely still. He only withdraws them after Sherlock opens his eyes, boneless and sweaty and so beautiful John curses the halo to high heaven since he can't crawl up to spread himself over that expanse of warm skin to kiss until they both run out of oxygen. He had not assumed they'd do anything more, but a part of him had hoped they might. He had determinedly ignored his own arousal for Sherlock's benefit, so he's still quite hard – who wouldn't be, after such a sight?

"Tired?" John asks.

Sherlock closes his eyes with a mutter that sounds affirmative, gathering the sheet from underneath the blanket to wrap around most of himself and drags the duvet up to his shoulders as well.
John lets him be. If he falls asleep, what they set out to do here will definitely have been a success.
Sherlock used to jump at the chance to share his bath time with John. There have been long Sunday afternoon bubble baths, both of them with a journal or book in hand; impromptu duet showers post-call, leading to rutting against each other under the spray and then falling asleep in each other's arms after collapsing into bed; lounging in the tub on a Friday evening with the lights dimmed and faint music streaming in from the sitting room. Sometimes, when Sherlock bathes alone, opening his eyes leads to finding out John has been watching him from the doorway with love and desire darkening his gaze. Often, he ends up joining in the relaxation that might well turn into something intimate.

Sex used to be their thing. It used to be something through which they communicated when words failed or were inadequate. Now, Sherlock can't find that connection. Instead of arousal, a vague sense of unease taints what's going on in the bathroom. Today, foreplay consists of Sherlock sitting in a tepid bath for half an hour as John diligently sponges the bits of him not covered by the vest but still unreachable without getting the lining wet. He is beginning to feel like a car being washed, more out of a sense of duty than pleasure.

How does he know this bath is intended as a prelude? Because John had said so.

They never needed to say such things out loud before.

"Did it help? What we did yesterday, I mean?" John had asked him in the bedroom while helping him out of the oversize dress shirt. "If you're up for more, we could do that after," John had promised a few minutes later, while gathering things needed for washing Sherlock's hair.

Sherlock had stood by, shivering slightly in just a bathrobe that wouldn't even drape itself fully around him due to the halo. "Of course," he had said, trying to muster up a grateful smile and even a bit of enthusiasm.

Instead of innuendo, the things John has said today have sounded like a prize for good behaviour. In truth, his ‘solution’ last night had proven as short-lived as Sherlock had feared; not as fleeting as the cocaine hit it had been designed to replace, but hardly something that would carry him through the trials of more than one day. It had been conducive to falling sleep last night, but it’s never going to be a permanent solution; he can’t expect John to snap to attention every time his senses become overwhelmed and the anxiety takes hold. Sex on demand isn’t practical: it’s not a slap-on-patch that will fix his brain chemistry, nor is it a quick intravenous injection of lust, because it most decidedly is not very arousing when the motive is necessity. To fix it, to fix him, would require some of the anxiety to disappear. While John had reassured him that he had no intention of ending their relationship, Sherlock cannot shake the feeling that it may only be a matter of time.

John has, apparently, kept up some kind of a masturbation schedule since the halo vest came into their life. To Sherlock, whose head can easily be his own worst enemy when it comes to wanting sex, such a thing is a pipe dream while wearing this torture device on his head. Spontaneous arousal would require the autonomic nervous system to shift to parasympathetic dominance, a prerequisite for which is calmness and relaxation. To achieve that with the halo, the surprise
element of someone else touching him is imperative as a distraction from his own frustrations.

He had actually been surprised that he had managed yesterday; maybe John is right, and the long abstinence had added significantly to his restlessness and the ease with which his libido had jumped-started itself. There's no one else than John to whom he would have ever trusted himself in the mental state he'd been yesterday – John, who hadn't touched himself at all during last night's proceedings, despite telling Sherlock countless times before that nothing gets him off quicker than watching Sherlock unravelling under his hands.

'I love how I'm the one who gets to do this to you,' John had once whispered to him, then thrust deeper and brought both of them over the edge.

For sex to work today, Sherlock would need to be able to surrender to the moment like he had yesterday. To uncoil. To let go. Right now, that notion seems impossible. He can't decide whether it's a good thing or a bad thing that John's touch has remained downright clinical during the bath. Neither of them will want to associate such things as hypoallergenic baby wipes with sex, but if something is to happen once the bath is over, it will feel abrupt after such an unsensual experience. The sponge had been fine, since it's something that could plausibly be done by two lovers just for enjoyment, but the baby wipes inserted under the vest and pulled through have not lost their mortification value.

Last night, John had been determined and decisive, acting much closer to how they usually are when making love. It had helped immensely to find that dynamic again, even if just for a moment. After years of intimacy, neither of them is shy or apprehensive, but since everything else is now off kilter it shouldn't surprise Sherlock that sex is, too, save for that brief moment of lust that had managed to override his defences last night. John being dutiful and polite and caretaking right now is doing nothing to his libido; if anything, it makes him feel exposed.

In all honesty, he'd been so desperate for anything that promised time out of mind that he hadn't even made an effort to gauge John's state of arousal last night. Once he'd come, relief over the brief respite from feeling too much like himself had been so overwhelming that he had kept his eyes closed, gathered the bedding around himself and dozed off instead of returning the favour of what John had done for him. More than ten minutes couldn't have gone by before he'd woken up again, but John was no longer there. Sherlock had sat up and called out to him, realising that he must have slept through John dutifully cleaning up the consequences of his orgasm. Usually, neither of them bothered to fetch a flannel until a full bladder forced them to drag themselves out of bed.

"I'm putting stuff in the laundry basket," John had yelled in a disinterested-sounding reply from the direction of the bedroom. When he had briefly returned to retrieve the lube, he was already wearing a dressing gown. Whatever erection he may have had could well have been long gone by then.

It makes Sherlock feel terribly guilty, now, that he'd sunk down under the duvet instead of raising the issue; he'd not been sure that he would have had the energy to fulfil any sort of request. While chasing the tail end of more sleep, he had listened to John making noises in the kitchen, presumably rustling something up for dinner. He hadn't even returned to ask whether he should make a second portion. Sherlock had sat up and called out to him, realising that he must have slept through John dutifully cleaning up the consequences of his orgasm. Usually, neither of them bothered to fetch a flannel until a full bladder forced them to drag themselves out of bed.

"Sorry," John hastens to say, stretching his back straight since the wet wipe routine is finally done.
"You're quiet today."

"That isn't something you complain about very often," Sherlock replies dryly. He quickly realises that it would probably have been beneficial to have sounded more playful, but pillow talk is John's forte, not his. He would like to say something nice to John about last night but has no idea what.

"Fair enough," John replies, sounding vaguely amused.

The trouble with sexual favours being used as distraction therapy is being demonstrated this evening in John's hopes for a round two; he's had time to think about and to consequently get very keen on the idea, as demonstrated by all the touching and the kisses on various body parts when he helps Sherlock out of the bath, into a towel and out of the bathroom.

Sherlock’s forehead is throbbing a little; perhaps he'd strained against the halo pins last night without realising. It's distracting and makes him want to curl up in bed with his eyes closed. He desperately hopes that he'll feel less awkward when the scene of the crime moves to the bedroom, but instead, things get worse. Due to the halo, battle plan negotiations are in order and talking about such things is... always difficult. Doing is easier, always has been.

John stops him from wrapping himself in a larger towel from the cupboard by trailing a hand down his arm. "Are you up for another bit of massage that could lead onto something more interesting?"

“Yes, but you're getting something, too." Sherlock sternly sets aside his own reservations, determined to deliver what John might need.

It’s only fair. After returning from Afghanistan, John’s libido had been almost non-existent, and Sherlock had allowed him to set the pace. So, if John wants sex tonight, then he’ll get it, halo or no halo. They just need to get to it without breaking the spell with words and making everything sound like a medical procedure.

“Just not with your mouth, Sherlock; it won’t work right now," John tells him adamantly while running the tips of two fingers down the side of his face, flicking away a damp curl and studying his expression. He's looking at Sherlock like he always does when he's in the mood, and Sherlock can't fathom how this could be. Isn't he the least bit of put off by what they've just done?

Sherlock knows, of course, that giving John a blowjob is off the menu; he doesn't need to be lectured about his own safety. The metal struts supporting the halo make it next to impossible for him to get close enough to John’s groin, since any position where he has to lean forward will put a massive strain on his back and risk his balance tipping forward. John never normally declines such an act, so even though there's a perfectly valid reason for not doing it tonight, it still stings that he can't manage it.

Sherlock doesn't want John to put all his attention on him again; he doesn't want a massage but for John to feel as happy as he had felt for a fleeting moment when the screaming, distracting chaos in his head had been briefly silenced last night. He wants John to want him, but it's so hard to believe he could right now, when Sherlock feels more like a patient than a lover, and anything he tries to communicate needs to be shouted across the proverbial Afghan desert.

When he drapes his towel over the backrest of a chair, he catches a glimpse of himself in the mirror of the wardrobe door.

He looks ridiculous with the halo.

After a quick shower and before washing Sherlock's hair, John had slipped on a T-shirt and
wrapped a large towel around his hips, the end tucked inside the edge so that it wouldn't fall. Sherlock feels terribly self-aware of his own nudity, but he can hardly start covering up right now. That would signal the opposite of what he wants to achieve.

He goes to John, practically stalks him from behind as he wraps his arms around his waist. John drops the towel and Sherlock extends his arms as far around as he can without the halo interfering, fingers splayed across the warm skin on John's stomach. Doing so forces him to bend himself from his lower back in a way that makes the long cords of muscles next to his spine groan in agony, but he grits his teeth because the closeness is practically making his head swim with relief. This is what he needs, before there can be anything more.

Maybe John is feeling the same, because he gets them to lie down side by side on the bed facing the same direction, pressing gentle kisses on the back of Sherlock's shoulder next to the edge of the vest. Then, before giving Sherlock a chance to do it himself, he arranges supporting pillows under both their heads.

Sherlock shifts to keep his vest far enough away to avoid direct contact, laughing it off self-consciously. "Plastic isn’t exactly a turn-on, is it?" he offers. He needs to say it, needs to make the halo a scapegoat for things he can't consider right now.

"It's fine," John promises him. The easily offered, carefree dismissal helps a bit, even if it must be just empty words.

Being side by side may not be the best position for this, but once John starts kneading his back muscles below the vest, some of the nervous energy seems to drain away into those skilled hands. Instead of continuing to stare at a spot in the dark wooden wardrobe where a branch had been severed, Sherlock closes his eyes and lets his lungs empty with a long exhalation. He wishes John would say something, that he'd distract him with some pointless chatter about his day, but there's not much to tell, is there? John has just been here, looking after him. It occurs to Sherlock to wonder whether their position is deliberately chosen, since he can't see John's scar. On the rare occasions when he hasn't worn a shirt in Sherlock's presence after Afghanistan, John tends to face away as he dries his hair or puts on his clothes. Now, he has kept that damned T-shirt on even though the lights are dimmed and they're not even facing each other.

John never used to have any qualms about being gloriously naked in Sherlock's presence.

He gasps when John's fingers find a knot where his neck meets his shoulder, likely in the anterior or middle scalene muscles. The halo offers just enough space for John to press and pinch the muscle tightly with his fingertips, sending an electric jolt down to Sherlock's shoulder. The sensation is accompanied by a brief dizziness.

Sherlock wishes he could stretch his neck once the ache from the now much more relaxed muscle dissipates. He hates massages done by anyone else than John – the vertigo that hits after scrambling up from lying on his stomach after a session is nauseating and he doesn't trust anyone to be able to know his limits. Pain is not the problem – the unpredictability of touch is.

John shifts about a bit so that his thighs are now pressing against Sherlock's buttocks. He is clearly aware where the fine line between therapeutic and erotic is and he crosses it now, sliding his left hand first to Sherlock's waist, then down the glen of his groin. He starts his right hand working on Sherlock's buttock, slowly moving from a muscle massage to stroking down the line between his buttocks until he's teasing around the anus.

Painfully aware of his own still semi-flaccid state, Sherlock reaches behind him to shift the focus onto John and to shove his hand aside from exploring further. Whatever stirrings of arousal he is
feeling dissipate, when he realises that John isn’t fully hard yet. The situation is mildly promising but needs work. The vest chafes the back of his shoulder blade a little as he curls his fingers around John’s shaft and begins administering a slightly twisting, slow stroke. The position is challenging in terms of range of motion but it can’t be helped. He keeps going through the motions whilst wondering when, exactly, the intoxicating magnetism that used to pull them together in such passion may have begun to wane, and why. He's not sure at all about the timing. Before Afghanistan? During it? After it? It's not just because of the halo, that is plainly obvious. He'd most certainly felt it yesterday, but he has no way of knowing what John had been thinking. Or, what he’s thinking right now.

A warm hand settles on Sherlock's thigh as he continues the tight, slow upstroke that has always been received favourably. It doesn't fail, and John's heavy breathing into his neck and the feel of the now perfectly hard cock in his hand is finally making his own pay more attention.

"I've been thinking about you," John whispers.

It's a silly thing to say, of course, since they have both been here all day, but Sherlock can discern the sentiment behind it. Be it frustration for being left deprived yesterday, or the normal workings of a functional male libido, it means that John has been thinking of him in the context of arousal for a significant part of the day. That's good, unless John's statement is just the sort of habitual thing people think they are supposed to say at this moment. Sherlock doesn't know about such things. He keeps his communications short and to the point during sex, dreadfully afraid that he will say something inadvertently stupid.

"I can't help it, can I?" John muses, leaning his chin on the shoulder strap of the halo vest. He is obviously being careful not to disturb the pins as he starts running his fingertips along Sherlock's scalp, making Sherlock want to growl in frustration because what he'd actually want is for John to put just the tiniest edge of possessiveness into grabbing a handful of his hair.

He removes his hand since John is clearly ready for more, now. He levers himself up on his elbow, and slowly sits up. “Let me try what your leaflets say; I can be on top." Not his preferred position, but he knows John likes it very much.

"Yeah, okay. It'll let you participate."

Sherlock doesn't know how to parse the comment. Is this about yesterday being solely for his benefit, or a request? John has made it abundantly clear in the past that just ‘being done’ is not something he feels comfortable with – apparently, that level of passivity is not in his nature, nor is having sex with someone who isn't having as much fun as he is.

"But, first things first," John says and sits up himself. He leans towards his bedside cabinet, pulls open the first drawer and only barely manages to reach the bottle of lube he has returned there.

Sherlock drops down to lie on his back, and lets John open him up, hoping it will excite him to John's current level. His optimism is borne out; John is rather expert at knowing exactly what he likes. Due to the halo, Sherlock can't look down to assess their erections, but what he can feel with his hand seems satisfactory. An added bonus is that John seems amused by his thoughtful groping.

John moves to the other side of the bed to sit with his back against the headboard, arms invitingly held out so that he could help with the positioning. All Sherlock needs to do is to manoeuvre himself into straddling his thighs and then coordinate to find the right angle for penetration. This turns out to be a challenge until John scoots down so he's more on his back than sitting.

"Hold onto the headboard; I don’t want you tipping forward," he warns Sherlock.
It’s awkward at first; Sherlock is painfully tense despite John’s thoroughness in preparing him, and it takes time for them to find a rhythm since he keeps breaking their momentum by slowing the descent with his calf muscles. Were they both still sitting up, John could have held onto him better, helped him carry his weight a bit, but now, the strain is fully on his calves which have borne the brunt of life with a halo. Each thrust of John’s hips pushes him slightly off-balance and he does have to keep both hands on the headboard to hold himself in position. If he tries to relax, things get overwhelmingly intense as his prostate is hit with way too much pressure. Due to the vest, he can’t really glance down, so he has to hope that John has his eyes closed. Otherwise, his own withering interest in the proceedings will be painfully obvious.

The muscle aches and pains are becoming more and more distracting by the minute, but he’s determined to persevere, if it can bring John off. He unlocks his elbows so that he can bend from the waist to look at John’s face; he needs to gauge how far off that goal they are.

The shift in his weight turns out to be a mistake. His extended ankle is now having to take too much of his weight, and he's forced to quickly flex it to stop the calf on that side from cramping. In his peripheral vision Sherlock sees that the sudden movement makes John snap open his eyes. John's hands, which have gently been sitting on his hips, quickly shift up to harshly grip him from under his armpits, and their movement halts entirely. Sherlock swallows as John raises his head from the mattress, and he realises that John has to be witnessing his now completely flagged arousal.

After a moment of silence that feels like it’s reaching down his throat to crush his lungs, Sherlock can feel the collapse of John’s erection. He pries off John's hands, grips the headboard with his right hand, and manoeuvres himself off his position. He scrambles to sit on his own side of the bed, kneading his right calf.

John scrambles up to a sitting position. “I was afraid you were about to tip forward and hit yourself on the headboard,” he explains apologetically.

“Doesn’t matter. My calves were cramping. It made sense to end it. Let’s just chalk it up to another example of my incapacity,” Sherlock says bitterly, then realises that shouldn’t have said such a thing – he feels exposed and embarrassed enough as he is. Now, John will pity him, and knowledge of that combined with his failure will be hateful.

Despite his blanket statements to the contrary when it comes to their entire relationship, John doesn't really like honesty in the middle of sex unless something is causing pain. Sherlock had once told him, flat-out, that he hated the way he sometimes breathed hard right into his ear when on top. They'd finished that round, but John had seemed rather quiet – perhaps self-conscious? – during the rest of the proceedings and a bit moody afterwards.

"It’s only temporary, Sherlock. The halo isn’t forever." John doesn't sound angry, but his worried tone isn't much consolation. He crawls across the bed to sit next to Sherlock. He reaches out towards the offending limb. "Do you want me to---"

"It's fine, now," Sherlock dismisses and plants his foot on the floor next to the other.

John's thigh is warm against his own. "If you weren't feeling up to it, why didn't you tell me?" he asks.

Even from his peripheral vision, Sherlock can tell that a pair of blue eyes are fixed on him. John is expecting things, expecting a sensible explanation, but he doesn’t know how to offer one.

"Look, I appreciate the effort, but you're on sick leave. We have to keep that in mind," John chides,
clearly trying to sound supportive through disappointment. He reaches an arm around Sherlock's arm and back, which have broken out in goose bumps in the draughty air.

John's grip is almost uncomfortably tight, as though Sherlock couldn't hold himself up perfectly well. "There's nothing wrong with me from the neck down," he argues back. It will be two months before the halo is gone, and then there will be a neck brace. He wonders how he is going to survive the interim without losing his mind, and whether John will still be there by the time he might be fit enough to have uninhibited sex. Even after there will be nothing limiting him physically, they'll still be left with the fact that things haven't been the same as before. It had been good, what John had said at the therapist's office, but it's just one conversation, and John may still be fooling even himself.

"It's not that simple and I'm rusty at this, too – if it's not my shoulder or your neck…" John laughs, but it sounds a bit forced to Sherlock's ears, patting his bicep. "We're a pair of crocks at the moment. It will get better. Last night was alright," he suggests.

Sherlock scoots backwards on the bed and drops down, side-first. John moves to his own side. They lie awake, both clearly deep in thought. Sherlock would prefer the reassuring cover and warmth of his pyjamas underneath the duvet John spreads across them, but he worries about getting a cramp if he leaves the bed. Under the circumstances he doesn't want to ask John for a single favour more.

He waits, expects and then hopes in vain that John will come closer, that they could go back to the embrace they'd started with tonight, but it may be that John is trying to give him some space. Not wanting to appear greedy, Sherlock doesn't dare cross the expanse of the bed himself.

After two hours of getting irritated by various things – such as John eventually falling asleep and staying that way effortlessly, someone's dog barking, the neighbours on their left side watching late night TV and someone upstairs having an extended shower – Sherlock gives up and moves to the recliner in the living room, since he'd left his earplugs and the blister packet of lorazepam there.

The pills shouldn't be in the house. It's too easy a solution, taking one to curb this anxiety and sense of failure, but it's the only thing that's available right now that can make his existence bearable.

Chapter End Notes

Our comments section now has a spinoff, thanks to the brilliant shiplocks-of-love.

There is also a glimpse on offer it what it looks like behind the scenes of co-authoring some of these chapters.
“You all right?”

“Fine.” Sherlock resists eye contact in case John realises that his stock phrase is concealing the truth. He had actually managed some sleep last night after taking the lorazepam but woken up this morning a bit groggy. He returns the spoon to his still nearly full bowl of breakfast porridge; presumably John had made it because it's easier to swallow than toast, and Sherlock is not going to undermine his efforts by telling him he has never been able to stomach the congealed, gelatinous texture of porridge. Few things in his mouth have ever felt more off-putting, especially as a child.

He raises his newspaper just a little bit – it has to be high enough to be in his line of sight. John isn’t to know that the process also hides his expression.

Pity sex. That’s what Friday must have been about. John had been willing to relieve Sherlock’s agitation, but last night had proved that when it comes to having sex for the purpose of mutual enjoyment, something's broken. He hadn’t been able to satisfy John’s needs, and it will likely take a while before John will give him a chance to try again. How did that ridiculous American phrase go? Three strikes and you’re out. How many times will he be allowed to fail sexually – on top of his other failures – before John decides to go?

On his way to the table with a plate of eggs, John stops, and a quick glance in his direction reveals that he has noticed the lorazepam packet Sherlock had left on the kitchen island. "Did you take one last night?"

The newspaper is snapped up into it shielding position again. "Yes."

"I trust you're being responsible with them?"

"What does that even mean?" Sherlock replies from behind the paper.

John sits down opposite him. "Not hungry?" he asks, likely after surveying Sherlock's still mostly uneaten breakfast. For once, he doesn't sound like he's preparing for a lecture.

Sherlock replies by reaching a hand around the page he's skimming and shoving away his plate. "Would you like something else?"

He'll feel worse if he doesn't eat. He knows that. He doesn't want to but adding any misery to his current state of mind could be disastrous. "Yogurt."

Soon, a small pot of it with a spoon is delivered to the table from the fridge. Sherlock wonders what on Earth had possessed John to buy a variety called 'strawberry doughnut'. He forces himself to ignore the artificial smell – aromatic ester compounds manufactured in a laboratory instead of actual fruit or berries. He'll be lucky to find even one minuscule strawberry fragment in the pot.

Instead of perusing the morning paper like he usually does, John has brought in his laptop from the guest room and judging by his movements, is opening several windows or tabs. He appears slightly nervous, expectant – like someone preparing for a public speech.
John finally looks up when Sherlock is dabbing his lips clean with a piece from the kitchen roll. "Can I talk to you about something?"

"Giving informed consent entails knowing the subject matter," Sherlock points out. In his experience, people framing a conversational invitation with such trite politeness means that the ensuing conversation will be embarrassing to one of the parties. Most likely, to the one being addressed.

Is this about last night? Will there be an ultimatum? Will John want to drag him to see that therapist again?

"I've been reading up on things online, articles and some e-books, and I'd like to hear your opinion on how accurate they are," John says, sounding mildly nervous and alarmingly eager.

"Regarding what? Neurosurgery?"

"You."

Sherlock's heart accelerates into tachycardia when his head makes the inevitable connection to the only subject matter this could possibly be about. This has happened before: well-meaning people reading all sorts of rubbish and trying to apply it to him. Boxing him in. Only seeing the diagnosis.

Still, this is John, who has proven surprisingly resistant to the temptation to slot him into some stereotype. He has talked to John about a few of these things when it has been absolutely necessary, and some John has witnessed without being given an explanation. Is the fact that he has been doing research a good thing or a bad thing? Does Sherlock want him to even be interested, since it carries a risk that even he might start over-interpreting everything through the lens of a diagnosis number?

Sherlock wants to evade, wants to leave the kitchen, but he just can't tell whether anything could come out of this.

Then, he realises the staggering truth that, for the first time in his life when this has happened, he is flattered. Even with all the terrible risks talking to John about this carries, he finds himself impressed that John, of all people, would want to---

"I can see your brain is about to derail from all that thinking. Just--- hear me out, please?" John raises a palm as if to keep him from departing.

It sounds as though he has some sort of a speech prepared, and Sherlock most certainly wants to hear it before he makes a fool out of himself again by revealing more about the things he has always most wanted to hide.

John turns the screen towards him, and he skims the collection articles and books featured in the multitude of open tabs; it appears that John has been reading the books as online versions.

It's uncomfortable, looking at these things while John is watching him. It feels like taking his clothes off for a physical.

"Asperger's Syndrome Workplace Survival Guide – A Neurotypical's Secrets for Success" by Barbara Bissonnette.


"DSM-5 under-identifies PDDNOS: Diagnostic agreement between the DSM-5, DSM-IV, and Checklist for Autism Spectrum Disorder" by Mayes, Black and Tierney from the same journal.

"Corpus callosum area in children and adults with autism" by a formidable list of researchers; published, again, in Research in Autism Spectrum.

Not the worst resources John could have picked, apart from the smug, asinine volume about managing at the workplace written by someone who isn't even on the Spectrum and thus has no personal experience in the subject matter. Books aimed at laypeople had quickly turned out to be too simplistic for Sherlock's own hunger for knowledge when he had first discovered the possibilities that neuroscience might offer in answering some questions about himself he had been asking since the very first moment he realised he was different.

He waits for John to explain, to say something.

"I could read all of this, learn it by heart, but nearly all of it is still written by people who are not like you. People who don't have personal experience of these things. I don't want to hear about symptom lists, diagnostic criteria or statistics, because clearly, there are as many versions of this as they are people who have it. I want to understand you, because what I've learned reading all this is that sometimes, I probably make things worse for you, and sometimes I make things easier you, and I need to know the difference."

Sherlock turns the screen back towards John. "John, I--- This is not something I'm comfortable or good at discussing. With anyone. What I have told you, I have done because of a pressing issue at work, or because you have forced my hand. I know Mycroft has deemed it his business to tell you things, but I've never given him permission to do so."

John's expression changes from curious to apologetic. "I want you to be comfortable talking to me. I understand why you wouldn't want to, but it's important for me to know more."

"It's not just about you. I accept certain concepts, certain words, only because they provide a framework for others to recognise what is being discussed. I don't identify with the people who make all this the core of their identity and deem it their purpose in life to make others understand their experiences. Not accepting those concepts fully may be detrimental to some when it comes to getting support they might benefit from, but I decided a long time ago that I won't embrace these ideas the way you might be expecting. It's all so medicalised, labelled as a disease or illness to be fixed, a definition of normality governed by those who are average. I refuse to broadcast it so that people would give me a wider berth or expect less of me. You never have, and I don't want you to start doing so now. I am what I am, and I've made my choices. Others may do it differently, as is their right."

"What do you disagree with the most?"

"The usual assumptions which still haunt even more recent published works. That we--- I---" What word should he use so that he wouldn't feel so exposed? "---That autistic individuals lack emotional depth and that many are mostly unsuited for independent living if any of their symptoms are intense enough to interfere with what society has decided is ‘normal’. Well, I just don’t accept those labels or choose to dignify the diagnosis." He gestures dismissively towards the laptop screen. "You can read all the medical journals you like; they won’t address what is bothering you about me. There is severe under-appreciation in the so-called scientific literature of sensory
overload and a severe lack of actual, useful advice for navigating relationships."

John gives him a smile and Sherlock scrutinises every bit of it for pity. He finds none.

"Yeah, I didn't think a lot of what the books presented as the usual clinical picture described you all that well," John admits.

"I’d rather people just deal with what I seem to be on a surface level; at least it keeps them at a distance. One of my professors at Cambridge put it on record: 'Holmes is disruptive, attention-seeking, highly arrogant and utterly unsuited for patient work'."

For him, the compulsory psychiatry course which that particular professor had been in charge of had been the worst bit of medical school. Taking a thorough psychiatric history from someone entails winning their trust and getting them to open up about emotional issues. How the hell does one do that? Yet, he had passed it. He’d worked hard, used the social scripts offered by textbooks well enough to meet the standard set by the medical school. But, the professor had been on his case right from the start. "He felt entitled to diagnose me instead of teaching me, and his stance – which he even informed the Dean – was that I was 'on the Spectrum but too high-functioning to warrant any special treatment'. It's a syndrome, so one does not have to have all the possible features to be diagnosed." The professor had not been the first to be sceptical about his capabilities as a future doctor, but he and Mycroft had been the most vocal by far. His brother has always assumed that he’d be utterly hopeless at medicine because it involved working with people. He’d never given him the benefit of the doubt.

"That bothers me," John says bluntly.

"What does?"

"That, instead of people understanding why you do things the way you do, you'd rather let them believe you're some arrogant arsehole. It's not fair, and as much as you try to pretend the way you get treated doesn't affect you, it does. A lot, I'd say."

"What does it matter? Either they pity me, or they hate me, and the latter is less pathetic."

John’s eyes seem to be showing pain, and Sherlock tries to grasp why, but before he can ask, a hand is placed over his own. He can’t see it, because the halo won’t let him look down, but he can feel the warmth.

“You are brave, Sherlock. One of the bravest men I have ever known. To deal with that…shit, people telling you that you shouldn't even try, and still be committed to medicine is… well, I can only think of amazing. But, no one will ever realise it.”

Sherlock nearly gapes. Nobody ever acknowledges how hard he has fought – they have been more focussed on telling him he is destined to fail. This is more insight than even his brother has managed over the course of his life so far.

"I've always had this feeling that you overthink things a lot when you have to deal with people. You try to prepare, but you can't really predict how people are going to react. Discretion and politely refraining from saying some stuff out loud is hard when you can't anticipate the course of the conversation, isn't it?" John asks. "You told me I see but I don't observe. Maybe I have observed, but I just haven't connected the dots until now."

Sherlock bites his lip. What is John's goal for all this research; what does he want to achieve? Is it just a polite gesture, a way to mend the bridges that have collapsed after Afghanistan? Why would
he choose this subject matter as a topic of communication? What is he trying to say to Sherlock?

"What about emotions? Is it like the books say, that you don't know how to recognise them?" John asks next.

"In general, or in others?"

"In others, I guess."

"I told you once about that book---"

"The CIA one?"

"It was useful. I can spot signs and put them together. Connect tone to expression and get an approximation of what's going on, but I often get it wrong. So no, it doesn't happen as intuitively for me as it does for most others. It requires a lot of concentration."

"I don't doubt that. Look, I'm not trying to turn you into a patient or blame this for anything that's been going on. I don't think of you as a patient. I don't think about you first and foremost as a person who has this," John says pointedly. "When I think about you, this is just one thing on the list of stuff that describes you. Yes, it's pretty important, more important that I've given credit for, but this does not define you. This doesn't let you off the hook, either, for relationship stuff, because I know how hard you try and what you are capable of when you put effort into it."

It's a relief, to hear John say this – that looking into autism won't mean that he's going to be expecting less. "Then, what?" Sherlock asks. "Why are you doing this?"

"Like you told me, this is you. Labelled and diagnosed, yes, in a way you find somewhat insulting, but it's you, and how could I not want to know? I want to know everything about you."

"I don't know how to tell you these things. You have to ask specific questions. I don't know what I should discuss or what I can describe."

"That's alright." John studies him for a moment, likely to gauge whether more of those questions are welcome right now.

Sherlock isn't sure himself. He can't easily shake all those occasions when he has been forced to reveal some of the things related to his diagnosis to John, only to be met with misunderstanding. John knowing these mortifying things about him now will likely do nothing to increase Sherlock's ability to deal with their relationship right now, so his first instinct is to shut down this entire line of inquiry.

"I'm making you uncomfortable," John sighs. He releases Sherlock's hand, clearly disappointed. Does he assume Sherlock could just shed years of apprehension and worry over how his words, his secrets, might be received?

"Ask," Sherlock says. He can always say he won't answer. It will likely feel hurtful to John, but most likely, a categorical denying of his right to inquire anything would be even more insulting.

"What did they diagnose you with back then, and do you think that's the diagnosis they would use now?"

The question is... concrete. Clinical. Relatively safe. "Some of the doctors I was dragged to felt I best fit what had been written about Asperger's syndrome, which wasn't in any of the diagnostic manuals yet back then – autism had only been added to them very recently. Asperger's has sort of
come and gone when it comes to available diagnoses; several classifications no longer recognise as a separate diagnosis. Not all doctors were convinced of its existence as a separate entity when I was diagnosed, so some suggested atypical autism, but the general consensus in those days mostly reserved that category for non-verbal children. I don’t easily fit into any particular box."

John nods. He must have gleaned that much from his online research.

"Most of them just slapped on the label of some general developmental deficiency with borderline autistic features. Perhaps, if I was diagnosed now... I don't know. The ICD-10 classification lists PDD-NOS as a separate diagnosis, DSM-5 doesn't. The DSM-5's Social or Pragmatic Communication Disorder is too limited to verbal and nonverbal communication to be descriptive in all the pertinent areas. The only entity besides that in the DSM classification is the all-encompassing *Autism Spectrum Disorder.*"

The very first diagnosis he had been given had come from a semi-retired, supposedly ground-breaking expert child and adolescent psychiatrist. Sherlock had found copies of those records at their parents' house. He'd wanted to burn them. *Kanner's syndrome, also known as infantile psychosis*, one page of the medical records had stated about him at five years old. He knows it used to be a synonym to autism, but it still sounds so----

"Sherlock?"

There is a slight smarting in his right forefinger; raising his hand high enough for it to be in his line of sight reveals that he may have been driving his thumbnail into a cuticle. Sometimes his body betrays him like this – he is so focused on surviving an ongoing conversation that he can cerebrally step outside his own anxiety, but it still bleeds out through stimming. He hides his hands underneath his thighs – he may have been fidgeting terribly without even noticing.

John is watching him carefully. Is this how it is going to be now? John looking for symptoms and consecutively giving small things too much weight? Is he diagnosing Sherlock right now, seeking evidence to confirm his own theories? "You said that some suggested Asperger's, some autism, and the others something more vague. How many times were you---"

Sherlock cuts him off to fling out some of the word salad barely forming sentences in his head. "My parents sought a veritable number of second opinions, because my mother really did not think I fit the bill of what was presented in the media and by most child psychologists as the vintage picture of childhood autism. What they really wanted to hear was a less bleak prognosis, I think. They went against the advice of many an expert, insisting I belonged in a normal classroom. They even went so far as to put me in a boarding school that did not provide any special arrangements."

He hadn't meant to mention school, and he hopes that John won't ask about those years. They're not memories he would voluntarily revisit.

"I read those parts of the DSM-5. Do you find the current criteria at all acceptable?" John asks. "I'm not trying to say you should; I'm just trying to get my bearings here."

"You tell me if you think they fit," Sherlock bounces the inquiry back, and instantly regrets it. He doesn't want to hear John describing him in those terms, slotting him into those boxes, neatly explaining him away by those things.

"It's just an agreement to call it something," John points out needlessly. "Just like all diagnoses." He then unfortunately takes Sherlock's ensuing silence as a prompt to plough on. "It's weird trying to think if you fit those lists of symptoms. It feels belittling. It's easy to forget sometimes that there's anything----"
"--- unusual about you," John carefully words, and Sherlock can breathe again.

"It's hard to connect all that to you, because of how brilliant you are, especially at hiding things," John says with a gently teasing smile. "But, the classification has those subcategories, doesn't it, regarding whether there's intellectual impairment or not," he adds, and the smile wanes.

"Yes," Sherlock answers, too fast and too sharply.

"I don't have to go through the criteria about the social stuff. We both know a lot of it fits."

Sherlock decides he likes the word 'we'. He hates this conversation, but the 'we' is unexpected and intriguing and a little consoling.

"Your special interests are intense. But, they get you places, like the shunt did. So, they're not harmful," John reasons and adds a smile, "In fact, far from it, as just about everyone in the business has recognised."

Sherlock is still so on edge that he almost points out that he doesn't need John's acceptance for them, that he truly is intelligent enough to know that neurosurgical research is a more constructive outlet for the 'highly restricted, fixedated interests abnormal in intensity and focus' that the diagnostic manuals require, than, say, learning train timetables by heart.

John’s smile fades a bit. "Look, I’m sorry. All this is a bit new to me. The neuropsychiatry course I did in medical school was something like four lectures. They didn't teach us anything about the sensory stuff, I think. Or the need for routines and rituals. I don't think I paid a lot of attention to that course in general because I didn't think it was stuff I'd need all that much after graduation," John admits. "Well, that came to bite me in the arse, did it ever."

Is this an apology? Why would any student not considering a career in anything related to neuropsychiatry or paediatrics pay particular attention to those lectures? Sherlock had hated them, and he is quite convinced he remembers nearly every word. Those lectures had been voluntary, so attending had been an act of masochism, but he had wanted to know what ideas were conveyed as the official truth to his future colleagues.

"Have you ever considered getting a second – or twentieth – opinion now, as an adult?" John asks.

Sherlock scoffs. "To what end? I am not in need of rehabilitation or financial aid or adjustments to my work, or medication. Why the hell would I want to go through any of it again?"

"Fair enough."

"I've never talked to anyone about this unless forced to," Sherlock reminds him. "Exactly because not even healthcare professionals understand, or care."

"That's changed, for me, though I am actually sort of glad I got to know you first before learning more, even if it means that I've probably done some stuff I shouldn't have. Not all things that the literature says are symptoms and parts of a diagnosis are things that make your life harder. Some of those things just make it different."

Sherlock gives him a sceptical glance. He has no use for John telling him what his life is like. "People don't like or understand different."

John's lip curls up slightly. "To quote you: I'm not people. Reading up on ASD might help me
understand the stuff that does apply to you. I now get a bit better why some of it makes you see things in ways others don't. By being you, you've made me question and think and get curious about a lot of stuff I wouldn't have otherwise."

"What do you mean?"

"A good example is how easily we assume people think like us and how often people misunderstand each other because of that, and how we never usually consider that some people's brains work differently."

"What is your point?"

"You hate the diagnosis because it represents the way you've been treated badly by others. But, I love some of those things that are a part of it because you wouldn't be you without them."

A part of Sherlock is tempted to take that statement and wrap it around his brain like a safety blanket, but the rest of him fears that this may be too little, too late. He puts his hands back on the table. John grabs his right one, and he's embarrassed by the sweatiness of his palm.

John doesn't seem to notice. "I don't expect you to be keen to talk about this, and I won't assume I have the right to know things you don't want to reveal. But please, Sherlock, when you're upset, tell me, even if you can't really explain why, and tell me especially if I've upset you because of this stuff."

"I don't always know, do I, what causes it when something goes wrong! I don't know what it's like to be you any more than you know what it's like to be me, so how am I to know when something happens because of what I am instead of it being some garden-variety normal interpersonal conflict?!!"

"You're right. Just-- don't let me off the hook."

Sherlock pulls his hands out of John's grasp. "Okay. I'll take you at your word on that right now. You use words like things and upset and more things and this and people like you -- euphemisms and placeholder terms because you don't really want to say the actual words, do you? Not even to me. And especially not to others, because of what they might think about you for choosing me!"

Not even his anger seems to discourage John from plundering on: "The reason I'm not saying them is because you don't want me to, not because I'm embarrassed. I've seen your face when someone uses them. I've seen your face when you told me, three years ago, that you had an Asperger's diagnosis. I knew it was a big thing for you to choose to share that, but I didn't understand how big."

"I needed your help, and I felt like it was a piece of information I couldn't avoid revealing; otherwise, you would most likely have asked why I simply couldn't stop behaving in certain ways. I chose you, because you didn't look at me the way other people did."

"I gave you the benefit of the doubt?"

"Yes! And I'd prefer you continued doing that instead of hoovering all the assumptions and generalisations into your head which the literature is rife with," Sherlock snarls, glaring pointedly at the laptop.

"I guess I got curious about you. You were certainly the talk of the town when I returned from holidays and you'd started working at King's. You sort of had my sympathies before I even met you, because I hate fucking hate colleagues talking each other down."
"Exactly. One of your finest qualities."

"You were... different."

Sherlock can't help cringing.

"In a good way," John hastens to correct, "Honest. Interesting. Damned clever. Amazing surgeon. And while you tried to keep everyone else at bay, you came to me after I gave you a bollocking. That would have been enough to make anyone pretty damned curious."

"You didn't make me feel worthless. And the fact that you haven’t done a lot of research into what that label meant? Well, I was glad. It’s one of the nicest things you could have done for me, ignoring all that. It’s been important to the way we’ve are together. From the very beginning, I felt like you were expecting me to do better, that I could do better."

"Christ," John says. "Didn't you ever have anyone who actually encouraged you?"

"My parents recognised my academic aptitude. They simply wanted to spare me from further embarrassment when it came to dealing with people."

"By discouraging you from everything you might have wanted to try." John shakes his head.

"As I said, they wanted to spare me---"

"You're not that bad at dealing with disappointment and failure. Everyone fails and tries again and sometimes makes choices that aren't good. That's called life, and that's how you learn, regardless of whether you're autistic or not."

"My parents and my teachers didn't want me to be unnecessarily discouraged."

"So, those fucking idiots discouraged you pre-emptively! So, which one of them was the one who put the idea in your head that relationships were one of the things you shouldn't even try?"

"It seemed obvious to me, based on the fact that I had no friends, and it was something my brother counselled me against trying."

"Mycroft's been single, what, fifty-some years? You're taking advice form a guy like that?"

"But I'm not good at relationships."

"You should let me be the judge of that, since I am the only person who's actually been in one with you. I won't deny that some things are difficult for you, but some parts of your ASD and SPD or whatever actually help."

Sherlock's brows hitch up. "What could those things possibly be?"

"You try so hard that you're very attentive. You're very determined and devoted, and you want to share things you enjoy with me. You're inordinately sensitive--"

"How is that a good thing?"

"I meant about sex," John says bluntly. "It's a huge turn-on, frankly."

"You can list all these peripheral details, but the downsides remain. If I was any good at this, you wouldn't have felt the need for all this research."
"This isn't just about our relationship. It's about you, and managing with the halo, and lots of other things."

"You'll never convince me that what I am is a good thing."

"Maybe not, but if I can take away even a tiny bit of that self-loathing, I will. Nothing about you scared me off before I learned more, and that hasn't changed. I didn't fall in love with you \textit{despite} the ASD or because of it – for me it's all just a part of a much bigger picture, alright?"

Sherlock finds it hard to come up with a counter-argument.
For the first time, John has arrived at Molly's office in a good mood. He's back on top of his workload and the weekend's conversations have seemed to clear some air. Sherlock seems to be managing with the halo; he had remained moody after their lovemaking had fallen flat but the risk John had taken by trying to talk about his ASD seemed to have paid off and thawed some of the ice. It must be a good sign that Sherlock had spent Sunday afternoon e-mailing John links to various articles he found to be of better quality than the stuff John had discovered on his own. Sherlock hadn't volunteered any personal commentary regarding their contents and had timidly retreated when John had posed some more questions, but it had still felt like they were both attempting to continue exploring the topic. Things aren't perfect, maybe not even good yet, and definitely not all fixed, but John is optimistic. He still doesn't know how to continue the conversation they'd had in the men's room regarding their bigger issues, but he hopes that with Molly's help, he'll get there.

There are still moments when Sherlock seems to be drinking in the sight of him, looking sad and resigned when he thinks John can't see what he's doing. Something tells John it isn't just the halo dragging his partner's mood down, and he's determined to get to the bottom of it and help him climb out of this despond. He seems to have a bit more energy nowadays to spare for thinking about Sherlock.

"So," Molly says, "How was the aftermath of our last session?"

"Surprisingly good, I think," John summarises. "Both what we talked about with you and the stuff that was said in the loo seems to have made at least some difference." When his recall shifts to what had happened the next day, his expression sobered. "He came to me the next day about having a really hard time with the halo and everything else. I think I found some ways to help him with that." He refrains from saying out loud what exactly they'd done, which is silly. He shouldn't be embarrassed to mention sex to Molly, but he can't help his British upbringing shining through, can he? There is also the lingering sense that he should ask for explicit permission from Sherlock to discuss such private matters, even though he knows he's being a bit neurotic. At no point has Sherlock told him what to say or not to say in this room.

Molly nods, smiling. "Anything else?"

"I actually managed to talk to him about being on the Spectrum. I could tell he hated that and wanted to bolt but didn't. He has clearly been trying to decide how much he wants me to know about it and when I pressed the issue, he seemed to relent."

"How does that make you feel, that he'd find it so hard to share those things?"

"I'm trying not to be insulted. I know that the reasons why he doesn't want to talk about it have little to do with me, but sometimes I can't help thinking that he should want me to understand."

"We've talked about trust before. It makes you vulnerable. Being in an intimate relationship doesn't automatically mean that a person trusts their counterpart enough to disclose all of their secrets. That trust has to be earned, and sometimes it doesn't happen until surprisingly late in a relationship. It's not uncommon for a crisis to bring forth the need to address things that have been concealed, and to start working on that lack of trust."
"It's so hard to tell with Sherlock; I have no idea if the things I've said have actually sunk into that big brain of his. I don't know how much he still hides from me. He seems a bit more willing to ask for my help, but I don't know yet if that's enough."

Sherlock is clearly still trying to shoulder alone some responsibilities he shouldn't have to think about at all while recovering. He clearly wants to make John happy, but mostly ends up just making himself miserable and John feel guilty.

"Don't expect miracles, John. Our patterns of behaviour have been created over decades – they don't change very quickly or very easily. Speaking of which, I think it's time to return to something that you have not been keen on discussing with him. Has Sherlock commented on what we discussed – the idea that, in my professional opinion, you fill the criteria for PTSD?"

"No. Why?"

"He's a clever guy, probably very perceptive even if the ASD limits his ability to interpret others. He said that he has done his research, and to me it seemed like he agreed with my assessment. Did he have a hand in you seeking counselling? You said there was a friend---"

"Sherlock didn't do it directly. He talked a colleague, who talked to me – that was the friend I've mentioned."

"How do you feel about Sherlock involving an outsider?"

"It was... fine. The person he brought in was a good choice, I guess. I know why Sherlock did it: he didn't see a lot of options. I wasn't exactly listening to what he was telling me, so maybe he decided that someone else might get through. He was right, as it turned out, even though it felt like I was being cornered. Nobody would want to advertise all that to a co-worker, so it was damned embarrassing."

"Why did telling a co-worker feel particularly difficult?"

"When you sign up for the army, isn't this sort of thing what you're supposed to be able to handle? I don't want people at work to think that I'm some dropout."

"You were injured, leading to a medical discharge. That means that you are not a dropout. Do you feel that only people who are weak and who fail at something might develop PTSD or other stress reactions that warrant assessment?"

Molly certainly does cut right to the point. John bristles. "No, that's not--- No."

"I worked within my own specialty in Iraq, and that was a busy time. Often a lion's share of my job involved convincing my patients that it didn't make them less of what they expected of themselves if they needed help. Many of them shared symptoms very similar to the one described by the orthopaedist who assessed you at A&E during the final days of your hospital stay."

John doesn't like where this is headed. "He thought my leg problem was a fucking psychosomatic limp. As though I'm some hysteric." His tone is sharp, accusatory.

"When emotions don't find any other outlet, they might turn into aches and pain and other physical ailments. Our brains are not separate from the rest of our bodies. Panic attack symptoms are a good example of that."

"Sure," John says. He knows he sounds a bit passive-aggressive. "You think I faked a limp, then."
"You did not consciously simulate it, no. The limp was real, as was the reason for it. A physical ailment is a legitimate reason to seek help and support; in your thinking, it poses less of a risk that someone will say that it's your fault or that you're exaggerating or that you're weak. You are not the only one who thinks that a successful soldier should not crumble under stress, but when it actually happens, that attitude becomes a hindrance to recovery. These are all real problems that deserve help, John, whether they are a gunshot wound, a broken vertebra or a psychological issue."

John huffs, looking at his shoes. Molly's speech makes sense on a general level, but he detests the notion that it explains him.

"You don't look convinced. How do you feel about your scar?" Molly asks. "It's a concrete sign of your injury. How do you feel about others seeing it?"

"It's hideous. I won't even let Sherlock look at it."

"It's just a scar," Molly provokes. "Would Sherlock consider it unsightly?"

"No, he's seen far worse; he'd probably think it's very interesting."

"So, what's the problem there?"

"It's--- well, it's a reminder, alright? That I was stupid enough to go there. That it's all my fault."

Molly is looking at him patiently, and something shifts in John's head.

Suddenly, he's speaking before he even realises – before he has even processed any of what is tumbling out. "He came to Afghanistan for me, and that ruined my plan. I wanted time so that I could, I don't know... Lick my wounds and then go home with my tail between the legs? Hide the damned scar under my clothes, pretend it wasn't that bad. But then he shows up and he sees it all. And he doesn't judge me, not once and that makes it worse. I wanted time to banish that goddamned shame, to get over everything and then go home to him and try to make do with what I've now got left of myself, to somehow work it all out. But, he'd already witnessed everything: the wound, the state I was in, everything. That isn't how I want him to see me. And, he was so much braver than I was. He didn't even think, he jumped on that plane – a bloody civilian who throws a hissy fit if his poncy shampoo runs out and suddenly he's right there, wearing badly fitting camo and my T-shirt and what I was thinking and feeling was not gratitude or love, just embarrassment and anger that he decided, without asking me, that he was allowed to see me like that. He's a saint, and I'm an idiot. I wish he would have chewed me out, really let me have it. That we could have it out and then move on, but instead he decides this is the time to start being the perfect bloody spouse."

He had promised himself he wouldn't cry, because it would be the cherry on top of all this mortification. His chest feels constricted and he huffs angrily when treacherous drops of moisture gather at the edge of his eyes. "It's not fair, thinking about him like this. He didn't do anything wrong. But I just found the whole thing so fucking humiliating."

Molly gives him a tissue. "You are very protective of him, but suddenly the tables were turned, and you were the one needing support."

"I just didn't want him to see me like that." He must sound like a broken record.

"You’ve been upset about Sherlock hiding things from you; about the halo and about his other issues, but you wanted to do the same about what happened in Afghanistan."

"It’s not the same!"
"Isn’t it? No one wants to be seen as less than what they are – especially those we love. His arrival at Bastion made you feel more ashamed of what had happened. The same might apply to him when it comes to the ASD. He hides it, because he's embarrassed."

"He has nothing to be ashamed of! I think he's amazing and I love him. What happened to me is different."

"Is he amazing because of the ASD, despite it, or regardless of it?"

"All of those things, I think."

Molly looks impressed. "I'm not supposed to give you marks for things, but that was a good answer. I doubt he'd want you to appreciate him and be impressed by him mostly just for the way he's overcome his difficulties. Why did you want him to blame you for Afghanistan?"

"Well, it's me who decided to go there, and that lead to this mess, didn't it?"

"This ‘mess’ meaning what?"

"That I don't really know how to be with him right now. That I'm making him unhappy and I’m certainly not happy, either."

"Are you certain those things are solely the result of your tour of duty? The reasons why you went must have existed before you made the decision."

"He seemed happy enough with our life. It is my fault, if I didn't know how to be that way."

"It's not bad or wrong to listen to yourself and to want to change the things you're not happy with. A good partner will respect that and want the best for you. Did you discuss your feelings with him before you left?"

"No, because I wasn't unhappy with him, never have been. It was all just spill-over from things I don't like about myself and my work. I don't think he'd understand what it's like for me."

"So, you left to process those things."


"How did he take the decision?"

"I thought he would have been angry. That he would have cared more, in a way? He just asked me if I'd already decided. It's stupid in hindsight, but I would have liked it if he'd argued against it. Maybe I wouldn't have gone if he'd put his foot down."

"Would you have been happy with allowing him to make that decision for you?"

John thinks on this for a moment, and realises the answer is quite clear. "Hell, no. It would have just been further evidence that my will's in his bloody pocket."

"Is it?"

"No. I don't think so, no."

"Why was he so passive, do you think? Could it be that he was respecting your decision to do something that was important to you?"
"I don't know, do I? It seems unlikely. He bulldozes over me on deciding where to go for the holidays, so why would he let me go to Afghanistan without him, just like that?"

"Maybe he didn't know what to make of it. Maybe the whole thing took him by surprise."

"That makes sense, actually." Sherlock had seemed withdrawn, apprehensive about the whole thing, almost as though he was applying his standard solution of ignoring things he didn't understand. "I think he did care – a lot – but maybe he didn't feel like he had a right to protest. I know I've chewed him out about being selfish before I left, about wanting to make all the decisions about everything in our life before. Maybe that had really sunk in."

"So, you want him to make you pay, to really flog you for doing something that was important to you at that time."

"You make it sound so ridiculous."

"Do you think you might want a break from your work here in London at some point in the future?"

"Maybe." They do travel, but a week at some resort doesn't keep him happy for long. Work is fine at best, crap at worst, but is it any better anywhere else?

"If you asked Sherlock to go with you, to join you for some volunteer work or a sabbatical abroad, do you think he'd say yes?"

"I don't have any evidence one way or the other, but... yeah, maybe. He's impulsive. He likes travelling just like I do. He can adapt surprisingly well to things being different – he proved that in Afghanistan. I don't know. Maybe he would say yes, if he thought that's what I really wanted."

"It sounds like you're not so convinced that he's selfish, after all?" Molly asks with a knowing smile.

"Selfish is not the same as just not very good at seeing things from my perspective. I--- there was that study renovation project that was almost solely for my benefit. I don't know why he does some things, but he can be... too selfless, even." Such as when Sherlock was trying to have sex when he was really not in the mood. "He's not good at deducing how I feel, but that's just him. He has empathy; lots of it, as long as someone clues him in about what's going on. It's cruel to leave him guessing, but I think I do that pretty often without meaning to. I'm just crap at talking about these things."

"How much clueing him into your reasoning did you try to do before redeployment? Do you think your need for him to chew you up about Afghanistan is partly because that would shift some of the responsibility over to him? That he let you go there, and that he didn't stop you from leaving? It's natural to regret it all, since you ended up invalided home--"

John cringes at the word.

"---but you made the decision yourself. It wasn't a right decision or a wrong decision, and your injury is not punishment. Things happen, and the universe doesn't dole out things based on some karmic law. You can't fix things at home by demanding that Sherlock administer a symbolic flogging. He probably needs answers as badly as you do, and you're not getting them if you are looking for a slap-on-a-plaster type of ritualistic fix."

John doesn't reply. He feels like he's being berated and blamed for everything and it's tiring.
Molly isn't done. "Repeating a description of the problem doesn't help us forward. As long as you are stuck in 'I shouldn't have gone', you are not looking at the issues that lead to that decision."

"Don't I fucking know it." John crosses his fingers behind his head and leans back, staring at the ceiling.

"One step forward could be considering what challenges there are in your life right now and giving those things your best. Dwelling on past issues too much will only lead to these ongoing things being neglected and blaming yourself even more. But, those past issues shouldn't be ignored. In terms of therapy, we need to find a balance between those areas. Sitting around waiting for someone to punish you so that you could atone for the sin of leaving and then magically moving on isn't going to happen."

"I thought psychotherapists were supposed to be neutral, to sit around with a pad and a pen and nod, that's all."

"There are many kinds of psychotherapists, and do you really think you have time for that sort of approach?" Molly asks.

John considers this, then forces on a resigned half-smile. "I really don't."

He wonders why Molly is being more confrontational than usual. Is it part of some master plan; is there something that she feels she needs to tug out of him at this point?

"I want to go back to something you said when we were discussing Sherlock joining you for a session."

John drops his head backwards against the chair. "I say a lot of shit that doesn't mean all that much." He knows he shouldn't take things out on Molly, but the frustration over not being able to fix anything and Sherlock not telling him important stuff until things spill over into crisis is grating on his nerves.

"You said that he's had to put up with a lot. I'd like you to think about why you said that. What time period were you referring to?"

"After the injury, before I went back to work, I guess. I'm not proud of it, but show me a doctor from an operative field who would have taken in stride nearly losing their ability to work."

"I am not questioning the massive impact your injury could have had on your future. Has someone done so?"

"No. Except--- sometimes I felt that Sherlock did. He seemed to believe the whole time that I'd be fine. Or, maybe he was good at pretending. He was right, in the end, but nobody could know for certain back then. It was annoying, the way he kept on about it; he was always so damned positive that it made me feel guilty about being depressed." John almost flinches when he hears that word from his own mouth, but he has come to accept that it just may be the best description of the state he'd been in.

"So, that was something in his behaviour that was a stressor for you – that you felt he was sugar-coating the situation. What about the other way around? What did he have to put up with, as you phrased it?"

John sighs. Do they have to talk about this? He got himself sorted out and returned to work. He and Sherlock are starting to put things right. All this negativity means that whatever good mood he was in before the session started is now gone.
He takes a deep breath and confesses: "I drank, alright. Not my proudest moment, and it's over. I stopped doing that. I went back to work."

"Why did you drink?"

At first, it seems like a stupid question. Why do people drink? To forget things. To be able to fall asleep. They drink because nothing matters and nobody understands what they're going through. John remembers thinking that it hardly mattered if his drinking hurt someone, because he was the one who was hurt the worst, and when everything was shit and he couldn't see a way out, the last thing on his mind was sparing the feelings of others.

"It made me less angry," John explains.

Did it, truly? It may have, for a moment, but afterwards he always felt even worse, which then tempted him to continue chasing the fleeting carefree feeling of the alcohol content in his blood rising. He remembers Sherlock shaking his good shoulder after he'd passed out on the couch one evening. He remembers being hungover at breakfast and letting himself get riled up over the very normal sight of Sherlock going to work. He remembers throwing things when the whisky made him lose his last bits of self-restraint. He remembers Lestrade sitting in their living room, telling him to 'fucking man up' because he 'wasn't the first doctor to go through this shit, and people who've been worse off have bounced back because they weren't rolling around in so much self-pity'.

Does Molly really have to dig all this up, today of all days? John glances at the wall clock. They're only fifteen minutes into the appointment.

Molly reaches to her desk, grabs a stack of papers that looks like a pre-printed form. John is actually relieved to see such a thing; he'll be happy to fill whatever depression or anxiety scale she deems necessary if it stops this conversation.

She slips an empty folder under the questionnaire so that John can write on top of it, and adds a pencil on top. "I'd like you to do this. I'm going to pop downstairs to get the post so that you can have the space to yourself while doing it."

John opens his mouth to ask what's so special about this form that it would require solitude, when Molly passes it to him.

It's called 'The Miller-Patton Anger Self-Assessment Test'. The instructions tell him to Circle T for true or F for false on each statement.

He skims the questions, then grabs the edge of the form, disgusted, and attempts to give it back to Molly. "I mention the fact that I was angry when I had a bloody good reason to be, and you push this. This isn't me. Why should I fill this out? I'm not some bloody wife-beater!"

This doesn't seem to fit at all what he's been discussing with Molly. He doesn't have an anger management problem. He's been frustrated and annoyed because he had all the reason to be. Isn't expressing that a good thing?

Molly doesn't take the form back. "If the questions do not reflect you at all, you will get a low score and we can put this behind us and focus on other things. Should be easy, don't you think?"

She meets John's blazing gaze with her own, determined one without any inkling of backing down.

John is still dangling the form in the air. Molly does have a point, but something about it still makes him deeply uneasy. "I don't like what you're insinuating by giving me this. It's pointless."
"While you're filling it out, you might want to consider why you're reacting so strongly to it. Saying that it's pointless is an avoidance tactic, and I'm not going to play that game."

"I was in a good mood when we started this session, and now you spring this on me. I can't be the only one who would be a bit offended."

Molly walks to the door with a slight smile. "Nice try with the guilt, but as I said, if it does turn out to be pointless, we'll shove it out of the way and focus on other things. Filling that out should be a walk in the park if this is not an issue that affects you. Let's cross it out. Prove me wrong, John."

She disappears into the hallway, and John is left holding the abominable piece of paper. He writes his name up top.

**TF 1. I use abusive language, such as name-calling, insults, sarcasm or swearing.**

Who doesn't, when they're angry enough? He doesn't do it at work, but he has been known to curse in theatre sometimes. And, anyone living with Sherlock needs to learn how to use sarcasm as a self-defence mechanism. It's sometimes a bit mean, since it may well go right above Sherlock's head. Does that qualify as abusive, if Sherlock doesn't know how to reply?

He circles *True*, begrudgingly. It's for the cursing, mostly.

**TF 2. People tell me that I become too angry, too quickly.**

He'd gotten into some fights in his teens at school, realising only afterwards that his temper had boiled over well before he had thought through if it was worth it to even get involved. The statement had been true then, but no one had ever complained about it at work. He leaves the question blank.

**TF 3. I am easily annoyed and irritated and then it takes a long time to calm down.**

He has been irritated for at least six months straight. If he's honest with himself, he'd felt that way long before Afghanistan. It simmers on the back burner and mostly, he can stamp it down, but after they returned from Afghanistan Sherlock had been outrageously talented in bringing it to the boil. Why? What had Sherlock actually done to earn his ire, except not being entirely able to relate to something he hasn't gone through himself?

This must be some elaborate trick of Molly's – making him feel like the villain so that he'd be more lenient towards Sherlock. He circles *True*.

**TF 4. When I think about the bad things people did to me or the unfair deals that I have gotten in life, I still get angry.**

Fate has certainly dealt out a crap hand to him lately. *True.*

**TF 5. I often make critical, judgmental comments to others, even if they do not ask for my advice or help.**

He doesn't do this in general, does he? He likes to think he is mostly collegial and supportive at work, especially towards trainees.

His sister is a whole other matter, but there's an entire shitty childhood messing up that relationship.

He knows he has been quite dismissive of Molly today, but she's trained to take it.
What about when it comes to Sherlock? An errant memory slithers in: the two of them at home on the evening when he had told Sherlock he had decided on another army stint. This is what he'd said: 'And while I'm gone, just--- please behave. I don't want to come back and instantly need to fix all your messes.' Sherlock's expression has been etched into his memory – instant hurt and apprehension slowly turning into steely defensiveness. John had cursed inwardly for turning a conversation that was always going to be tense into an argument before he'd even gotten to the big news.

Doesn't everyone say such things every once in a while? Nobody is a bloody saint all the time, and Sherlock can be awfully judgmental of the rest of humanity, too. True, John circles.

**TF 6. I use passive-aggressive behaviours, such as ignoring the other person or promising to do something and then “forgetting” about it to get the other person to leave me alone.**

This is Sherlock, not him. False.

**TF 7. At times, I use aggressive body language and facial expressions like clenching my fists, staring at someone, or deliberately looking intimidating.**

Hell, yes. Being shorter than a lot of his schoolmates meant he had to stand his ground. In the army it mattered how a person carried their authority, and that transferred to a hospital environment, too, especially when dealing with idiot prima donna surgeons, Sherlock included. He also does this when he's jealous, and he's actually quite proud of that jealousy. Wouldn't any partner want to see a display of it when a relationship is threatened by an outsider?

He rereads the question. Aggressive body language? He has certainly done more than bristled. Once, during the early days of their relationship, John had walked into a club, decked a fellow consultant and dragged Sherlock away from him. It had been quite a manly moment, hadn't it?

He circles True, proudly; he's not going to apologise for that one.

**TF 8. When someone does or says something that angers me, I spend a lot of time thinking about what cutting replies I should have used at the time or how I can get revenge.**

He forgives, but he most certainly doesn't forget. It makes him livid if he has frozen during an argument and is left feeling like he hasn't managed to defend himself. Living with Sherlock has sharpened his response times and honed his skills at giving as good as he gets; scathing remarks are now met more quickly. True.

**TF 9. I use self-destructive behaviours to calm down after an angry outburst such as drinking alcohol or using drugs, gambling, eating too much and vomiting, or cutting myself.**

John is beginning to understand why Molly has given this to him. She seems to be convinced that he doesn't talk about his feelings but acts on them, perhaps even impulsively. Fair enough, but so what? No drugs, gambling, self-harm or binge eating; just a little alcohol to calm himself.

Too much alcohol, recently. Damn. True.

**TF 10. When I get really angry about something, I sometimes feel physically sick (headaches, nausea, vomiting, diarrhoea, etc.) after the incident.**

Again, this fits Sherlock better. Sherlock in distress is clearly a whole-body experience; it looks like his anxiety is so intense and so unexpressed that it spills into the physical. John has sometimes shaken with rage, but Sherlock is the one who quivers with any strong emotion like a tree being...
battered around in a storm, and if he can't defuse what he's feeling by fidgeting, pacing, talking or playing the violin, the anxiety becomes plain for others to see, even though it's the last things he wants to happen. What had happened here in the men's room is a very good example.

He circles False.

**T F 11. It is very hard to forgive someone who has hurt me even when they have apologised and seem very sorry for having hurt me.**

Depends on what they have done. John scribbles down a question mark.

**T F 12. I always have to win an argument and prove that I am “right.”**

No. He can have someone else have the last word if he can bring himself to understand their point of view. Sherlock, on the other hand, always needs to be the king of the castle when it comes to arguments. False.

**T F 13. I usually make excuses for my behaviour and blame other people or circumstances for my anger (like job stress, financial problems, etc.)**

John swallows. Not fifteen minutes ago Molly had called him out on indirectly trying to blame Sherlock instead of admitting his own part in how things have turned out after Afghanistan.

He blames the redeployment for a lot of things. He blames his job for a general sense of aimlessness in his life. He blames Sherlock for being less... aimless. Blames him for being Sherlock. Which isn't fair.

True, but it's fucking bullshit, all of this.

**T F 14. I react to frustration so badly that I cannot stop thinking about it or I can’t sleep at night because I think about things that have made me angry.**

He skips the question because he doesn't want to think about this.

**T F 15. After arguing with someone, I often hate myself for losing my temper.**

Yes, he sometimes treats people badly. Yes, he definitely regrets some of his outbursts, especially those that have happened when he's been drinking. Of course he does; he’s not a callous bastard. True.

**T F 16. Sometimes I feel so angry that I’ve thought about killing another person or killing myself.**

God, no, not someone else. When things had truly gone to shit after Afghanistan, the thought of suicide had crossed his mind, but not in any intensity that should be taken seriously. False.

**T F 17. I get so angry that sometimes I forget what I said or did.**

Doesn't everyone? How brilliant that Sherlock probably remembers every damn word John has ever said. True.

**T F 18. I know that some people are afraid of me when I get angry or they will “walk on eggshells” to avoid getting me upset.**
John stares at the question. His hand, holding the pen, hovers over it, wanting to quickly circle 'False' and move on. Yet, something halts his hand and makes him feel terribly uneasy.

Walking on eggshells is what they had done in his family when he was little. Him, Mum, Harry. They tried to be quiet, unassuming, harmless, well-behaved. Yet Dad always blew a drunken gasket eventually. It was so hard to predict when exactly it would happen, and that's what made it so terrifying. John remembers thinking that he never, ever wants to make anyone feel like that – it's the worst thing in the world to be afraid in one's own home. He had sworn never to make anyone feel like that.

Sherlock isn't afraid of him. He isn't. He can't be. Why would he be?

John remembers some things. He doesn't want to, but he does: Sherlock, startled whenever he raised his voice over some minor thing during the first weeks after they returned to London, because there was no way to predict which marginal thing would escalate thoroughly losing his temper.

Sherlock, looking at him like he didn't know him anymore, like he didn't know what to expect; the world's often most verbally effusive man hanging on for dear life to a brittle silence.

Sherlock, flinching when John threw a half-drunk glass of whiskey into a wall right next to him.

Sherlock, retreating from him into another room.

Sherlock, pleading with him: 'I don't want to argue with you when you are like this'.

John wants to crumple the questionnaire into a ball and burn it.

He circles True, the pen scraping the paper so hard it splits a little. Tears apart. Disintegrates.

**T F 19. At times, I have gotten so angry that I have slammed doors, thrown things, broken items, or punched walls.**

He circles True as quickly as he can, not wanting to dwell on this any longer than it takes to get pen on paper.

**T F 20. I have been inappropriately jealous and possessive of my partner, accusing him or her of cheating - even when there was no evidence that my partner was being unfaithful.**

No. John likes to think he's been quite appropriate with his jealousy. The only time he has acted on it, he had good reason to do so. False.

**T F 21. Sometimes I have forced my partner to do a sexual behaviour that he or she does not want to do, or I have threatened to cheat on my partner if he/she does not do what I want them to do to please me sexually.**

No. Never. Sex that doesn't start from a place of mutual desire and enjoyment puts him off instantly, just as it had the last time they'd tried to have sex. He bloody well knows what consent means. False.

**T F 22. At times, I have ignored my partner on purpose to hurt him or her but have been overly nice to other family members or friends.**

He doesn't play games like this. When he's angry, he's honest and open about it – at least so he
likes to think. It's Sherlock who ignores him and sulks, though not lately. **False.**

**TF 23. I have kept my partner dependent on me or socially isolated so that I can control and manipulate their feelings and actions so they will not leave me or end our relationship.**

This gives John pause. While it is true that Sherlock depends on him to some extent when it comes to social interaction, hasn't he been a significant supporter and source of encouragement when it comes to Sherlock finding his own footing? John doesn't limit his social life or interactions with others, never has and never will. **False.**

**TF 24. I have used threats to get my way or win an argument.**

Mild ones, at work. Not really his habit, though. **False.**

**TF 25. I feel that people have betrayed me a lot in the past and I have a hard time trusting anyone.**

No, he does not carry some sort of a universal grudge towards humanity. Were it his Dad filling out this form, this would have been a definite yes, but for John, the answer is most assuredly **False.**

He's relieved to find that it's the last question. Just as he is about to read the scoring instructions, Molly slips back into the room. He composes himself, tries to shove away the things that have stung. Molly sits behind her desk instead of the armchair opposite.

John counts the number of **True:**s he has circled: **twelve.** There are also the ones he didn't want to think about or had left blank, so that may be a downplayed number.

'If you answered "true" to 10 or more of these questions, you most likely have moderate-to-severe anger problems,' the questionnaire states.

He stands up, walks up to the desk and slams the form down on it, text side down, giving Molly a glare. "So, you got to prove that I'm an abusive arsehole, then. You got a cure?" he grabs his coat and slams the door on his way out.

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It's just a stupid questionnaire, John tries to tell himself, while staring down at the bottom of a pint. The grotty pub close to Molly's practice had been a spur-of-the-moment thing. Having a few drinks means he'll have to take the tube home and pick the car up from here tomorrow.

Who cares? He wants to get sozzled. After all, that's what he's good at, according to Molly's accusatory piece of paper, the filling out of which had felt like a thousand blaming fingers were pointing at him.

He tries to muster the energy to think of all the ways in which Sherlock's relationship skills suck in a different but equally destructive manner as his, but this leaves him with a nagging feeling that he's the one worse off since it must be worse to be what that questionnaire described, than just clueless. Should the two of them be incompatible, then?

Sherlock is... Sherlock, and John would never knowingly hurt him. Ever. But, has he done so
without realising?

_Sherlock and John._

_John and Sherlock._

They fit together, don't they?

He downs half the pint just before his phone starts to ring, and he nearly drops it fishing it out of his coat pocket. He doesn't bother to see who's calling. "Hello."

"Hello, John," Molly says.

He groans.

"Have you calmed down?" she asks.

"I'm tired. Did your exercise in making me feel like the shittiest person ever have an actual point?"

"Yes, but contrary to what you are likely thinking right now, that point is not to make you feel bad about yourself. The point is that while were are eager to find faults in others, sometimes that is overcompensation for the fact that there are things we don't like about ourselves. I'm not interested in the details of your answers right now; I am interested in why it bothered you so much that I asked you to fill that survey out in the first place."

"That sort of thing, those--- those behaviours, that's my Dad, and I swore it would never be me."

"I see."

"The things he did, I don't do that. I swore I'd never treat people the way he did. I'm not him, but that bloody survey made me look pretty bad."

"It's not a black or white, yes or no thing. Some of those things in the questionnaire are things we all engage in, but that model of behaviour should not be our default when dealing with anger, sadness or frustration. Sometimes we resort to abusive behaviour because we don't know how else to solve our problems or we fear we are about to be hurt by someone. Judging by what you have told me, I would not describe your relationship with Sherlock as abusive, especially not before you left for Afghanistan, but perhaps we could say that some of the ways in which you've been reacting to stress lately are not healthy or constructive?"

John traces a scratch on the table surface with his finger. The beer is starting to warm his cheeks.

"What are you doing right now?" Molly asks.

"Drinking," John replies, because there's no point in denying it. Isn't this what therapy is for: admit you're a bastard, repent and then scrape your life back together? Sounds like a lot of work, and he doesn't know if he's got the tenacity for it.

But, he's not doing this just for himself. He needs to do this, because Sherlock deserves better.

That questionnaire has called it out. Stripped him bare for all to see.

"How will you feel after drinking tonight?" Molly asks.

The answer is easy, and it surprises John that he doesn't find it all that embarrassing to say out loud. "Like shit. And it's going to make me want to drink some more."
"If our roles were reversed, what would you advise me to do right now?"

"Go home to Sherlock. Go home, because he's the best thing you've still got even after everything you've done to mess it all up and it's an idiot thing to do to sit in a pub alone right now in the mood you're in."

"How does that sound?"

"Better than this hellhole," John says. A patron in the next booth turns a bit; they've obviously heard what he has just said.

"I will reserve a time slot for you tomorrow. I think it would be a good idea not to wait until next week to discuss this further."

"Fine." John can't manage to summon much enthusiasm into his voice. Molly is probably right, though – the more time he'll have to stew on this, the more resentful towards her and himself he'll be likely to get.

"What has happened, happened, John; you can't erase that. But, it isn't going to get better by repeating old patterns. Sherlock is still here for you, and obviously he is very devoted to you; he wouldn't be so afraid to lose you otherwise. Like you said, making a bad choice will make you feel bad about yourself, tempting you to make more bad choices. You stopped that circle once before when your friend talked to you about your behaviour; don't let it start again."

Maybe it's the two whiskies he'd had before starting on the pint, but the moment Molly says Sherlock's name, John's eyes cloud over with tears.

Sherlock is still here. No one has ever done for him what Sherlock had done. No one has followed him to hell like that. No one else would have put up with the way he has been lately, his behaviour worthy of at least twelve arsehole points in that questionnaire.

They're not perfect, the two of them. They're not easy people to live with.

But, they're Sherlock and John.

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When he arrives at home, the sun has set and only the flickering, bluish light of the television illuminates the flat. Sherlock has dozed off in the recliner, and his bare arms under the rolled-up sleeves of John's old jumper have broken out in goose bumps.

John grabs a woollen blanket that has dropped to the floor and spreads it over him. Sherlock mutters something, shifts a little, but doesn't open his eyes.

John knows he's still drunk, but the alcohol content level in his blood is now dropping quite rapidly. Usually, this is when he'd be tempted to even it out with another drink, or curl up in bed feeling bad about himself, but not tonight. It's strange how Molly has managed to make him hate himself and feel hopeful at the same time.

As he watches Sherlock's even, deep breathing and his eyes beginning to wander under his almost translucently delicate lids as he shifts into REM sleep, John has a sense of keeping an eye on a treasure entrusted to him.
This is the most reluctant John has felt about going to see Molly since the very first time. He feels beaten down and humiliated by their last session and the way he'd behaved. He isn't sure whether Molly expects an apology. There are so many things he feels that he should be saying to Sherlock as well, but he doesn't even know how to begin. In hindsight, the patterns appears clear: trying to bottle up the anger and the frustration hasn't helped; it has always found an even more destructive escape route and Sherlock has nearly always been the collateral victim trapped in the blast zone.

Should he try to explain? What the hell would he even say? 'Sorry I've been such a shit lately, and for not knowing why, or what to even do differently?' Is he supposed to make some sorts of amends, now? Is that what Molly is trying to signal? He finds that he fears her expectations almost as much as he abhors what that questionnaire has revealed.

The question still feels like a bucket of ice dumped on him: is he like his Dad, if not in action but in intent? If the man had come to him and Harry and apologised instead of dying off, John would have spat in his face.

John knows he's been cold and distant, unleashing his anger on Sherlock because the real causes of it are not standing there in their flat, available to be targeted.

He walks into the appointment room but doesn't take his usual seat, opting to remain standing behind the armchair, instead. It grates on his nerves that Molly looks as sunny as ever today, as though she hasn't made him terribly embarrassed in this very room. "You look thoughtful," she suggests when John doesn't volunteer anything to say.

He never really initiates a dialogue at the start of a session, but at least he usually replies with more than a grunt when Molly asks how he's doing.

He curls his fingers into the backrest of the chair.

"Our last session gave you lots to digest, didn't it?" Molly suggests.

John grimaces. "You could say that. I felt like that was what you'd been building things up for. That anger thing. As though that would magically explain everything."

Molly regards him a bit wearily, and John suddenly feels embarrassed. Is he doing it again, being annoyed with himself and taking it out on someone else?

"We're just exploring different avenues," Molly explains patiently. "When we behave in ways that seem out of character, at least against our own expectations, pent-up anger is one thing we need to look at in detail."
"Who's this we?" John's tone is biting. "You're not the one who's getting their worst qualities thrown in their face. I was deployed, and I got shot, remind me why we're blaming me for everything?"

"Being honest and trying to find reasons for things is not the same as assigning blame."

"That's just semantics. If the way I behave is the reason things go wrong, how is that not my fault? How is that not blaming me? I'm responsible."

"Blame, in the sense you're using the word right now, is more about trying to find a scapegoat than it is about finding cause and effect and breaking the cycle."

"I'm not Sherlock. I can't look at all of it without any emotion at all."

"Please sit down, John."

Even after Molly's prompt he still hesitates, uncomfortable with the idea of even being in the room. He had been terribly tempted to not even show up.

"Do you think Sherlock is good at keeping his feelings separate from important life events?" Molly asks.

"I don't know. He compartmentalises. Pretends he isn't affected by anything. He's not been angry with me, even though he should have been. He does get moody when he's stressed out, but in general he bottles things up."

"Is Sherlock good at listening to and heeding feedback about his behaviour?" Molly asks.

John realises the faulty logic in his prior statement. "God, no. He's terribly sensitive to criticism from me. He seems to easily take it as evidence of his own worst assumptions about himself being proven right."

"Does that change the way you think about being responsible for him?"

John circles the chair and takes a reluctant seat, but doesn't answer.

"Is there another word for his reaction, do you think?" Molly asks.

"Insecurity."

She nods. "Relationship behaviour is often not a black and white thing, unless we're talking about obvious abuse. Behaviour that some people can shrug off and even take with a pinch of humour can wound some other individual deeply. The brittleness of our confidence in relationships has to do with the way we've been brought up and the life experiences we've had. For someone who has had difficulties in social interaction all their life, a romantic relationship is a formidable challenge."

"Sure," John says distractedly. "Do we really get stuck in the ways our parents deal with things? Doesn't it matter if we decide we want to be different?" He wants to believe so.

"Of course, it matters, but we all need opportunities to learn how to execute different behavioural patterns and models. Therapy is one such an opportunity."

John leans against the backrest, wiping his slightly sweaty palms on his knees. "We deal with tons of other people besides our parents, can't that teach us more things in total than our childhoods? I don't like to think we're that simple, that we're so prone to acting out behaviours we've seen as
children at home."

"If it's the only model we have of a romantic partnership, and we dissolve relationships before or if someone challenges those patterns, then is that really so far-fetched?" Molly’s tone suggests that the question is rhetorical, and she continues: "Did the questionnaire bring on this line of inquiry about the impact of parents?"

"Nothing gets past you, does it?" John exhales through his nose and lifts his elbow on the arm rest, letting his forefinger rest on his cheek and his middle finger on his upper lip.

"Now that you've had time to think about it, what upset you the most about that questionnaire?" Molly asks.

"I just don't like thinking that I'm... that sort of person."

"I'm not seeking to make a diagnosis or slap a label on you, John. It might be helpful if you tried to approach this the same way. You seem to be mixing up a person with a behaviour. I am merely pointing out patterns to the anger you seem to carry with you. Anger which, if resolved, may help you break that pattern. It does not define you as a bad person if you react in a way you've learned early on in your life from others because you weren't exposed to other ways to address those feelings. People often resort to non-social drinking because they're trying to keep depression at bay, to find an outlet for their anger, to alleviate anxiety, or to help them forget things they don't want to talk about. Rare is the man who picks up a bottle because he simply wants to be cruel to his fellow humans."

"I'm a bloody doctor. I should know better."

"Why? Being a doctor doesn't protect us from detrimental life experiences, from mental illness, from gunshot wounds or from having relationship issues. If anything, the pressures of our profession might train us to compartmentalise our feelings and give us a very high baseline of stress so that addressing those issues becomes harder since ingrained in our thinking often are the notions of being invincible and that we don't have time to look after ourselves. Embarrassment also factors into it – we don't want our colleagues to think less of us."

John stares at his knees. He agrees. This must be why Sherlock never tells anyone about the ASD, even when it might help others be more sympathetic towards him; he wants to hold on to the facade of a tough surgeon. John is only beginning to appreciate how much it takes out of him to keep those walls up between him and the rest of the world, how exhausting it is to sham being like everyone else and to fail repeatedly at it. The job can easily get too tough for anyone who's got difficult things going on in their own life; young physicians have been driven to suicide due to the demands of being a doctor in this day and age combined with issues in their private lives have been too big a burden to carry.

It's very easy for John to be supportive and understanding of these things when they happen to colleagues. Why is it so hard to extend that leniency and forgiveness to himself?

“Can we explore that a bit?” Molly asks. "You just said that as a doctor you should know better than to drink. As a soldier, as a doctor in a combat zone, is that even more true in your eyes?"

He thinks this through. “Of course. Drinking to excess is dangerous enough for yourself as a civilian, even more so as a doctor or soldier on duty, and harmful to the people you love. As a doctor in a British hospital, as long as you are sober when on duty it’s not as much a problem as it would be in a war zone, when you have to respond to emergencies when they come. Are you suggesting that I went to Afghanistan to …what? Avoid getting drunk?” He lets his incredulity
show. "It wasn't a habit before I got shot. Just social drinking on occasion; never more than one drink on a weekday."

“I’m glad to hear that; this is just exploring possibilities, John. You might have felt that the added demands and the services discipline would remove any temptation. The pressure and the adrenaline of that kind of work could also compensate for what you saw as being bored at your work here, to fill your time and to distract you from feelings that were making you uncomfortable."

"I didn't go to Afghanistan because I was angry," he says, and it sounds more defensive than he would have liked.

"Are you sure?" Molly challenges. "The line between frustration and anger can be very thin. Why did you sign up for the second tour, then, in addition to what we’re already discussed? Off the top of your head."

"I wanted a change. Wanted to see if I could still do it, that I was as good as everybody else. I wanted to get the hell out of King's, if just for a few months. I wanted to... see if I could still feel like I was in control and that I had options."

"Why was proving those things to yourself so important?"

"I'd been an anaesthetist for years, even finished my neuro subspecialty training a few years back and it already felt like I'd seen it all – except for the very rare oddity. Add all the bureaucratic bullshit, and the fact that I’m not even forty yet – I felt trapped. I couldn't accept that. So there. I volunteered not for Queen and country, just for my own selfish reasons."

He remembers a mean comment he'd directed at Sherlock in Afghanistan about adventure travel. Maybe that applies to himself more, after all: bored doctor in a cushy office jobs wants a bit of action and comes home with his tail between his legs. Fucking pathetic. He'd been the one that barb applied to, not Sherlock, whose motives for going to Afghanistan were a hell of a lot more noble and selfless than John's. He's willing to admit that, now.

"You said you compare yourself to others, that you wanted to feel equal to them professionally. In what ways did you suspect yourself lacking in comparison to them?"

"A lot of doctors at King's and in London are high-flyers like Sherlock. They've got clear goals, an academic career on the side. I know I'm alright when it comes to the practical side and I get along with people and get things done, but I'm not one of those stars and seeing all that on a regular basis makes me feel like I failed."

"Do you worry that's how others see you?"

"Yes and no. I'm not the star of the department, nor am I the laughing stock. I'm just me, and I happen to be in a supervising position. No one has openly questioned my skills, nor has anyone challenged my authority, if that's what you're asking. Managing people still isn’t the same as being a rock-star surgeon." Well, Sherlock challenges his authority all the time at work, but it doesn't bother him since their dynamic is understandably different from that between John and colleagues he isn't intimately involved with.

"The anaesthetist is never the star, is he?"

"Nope. When we do our job well, nobody notices. But, when things don't go smoothly in the OR, we're the ones everybody’s yelling at, regardless of whose fault it is. Usually the patients don't even remember us Afterwards; the surgeons get all the credit. It's fair in the sense that what we do would
be kind of pointless on its own without someone to do the actual operation, but if someone wants to be the star, if they want recognition, they won't be a good fit for anaesthesia."

"You enable the surgeon to do their job."

"Exactly, and I actually like the idea. I never wanted the limelight, and there are plenty of rewarding experiences available in the work itself. It's nice to think that I made it possible for a Mum to meet their baby during a Caesarian section under a successful spinal, or that I made a knee prosthesis patient ambulate early because of good pain relief. I do still get job satisfaction from everyday patient work, and I really don't envy the responsibility of the surgeons, or the frustration they have to face when having to redo an operation or when they have to face the patient after an operation has gone badly. Anaesthesia problems can usually be spotted quickly and fixed quickly, too."

"To me it sounds like you've given a lot of thought to your role and that you're mostly at peace with it."

"Being an anaesthetist is definitely not the problem. If I had to pick a specialty all over again, I wouldn't choose differently. I don't feel a need for the status that comes with being the surgeon."

"Do you think people compare you and Sherlock professionally since you're involved?"

"I don't know. There's no point in comparing our technical skills because we're not the same specialty. Sherlock gets constantly compared to others because of the problems he has with social skills, but that's less of an issue for a surgeon than laypeople might think. He can get by if he's got a good nurse at the outpatient clinic, and in the OR he just needs to not enrage the whole team."

"You have said that dealing with people is one of your strengths."

"I guess. That's how they justified giving me this supervisor job. They actually said out loud that my Sherlock management skills had been the thing that convinced them."

"It sounds like you don't like that characterisation."

"It makes it sound like I got the job because of him."

"I think they meant that you can crack even the hardest nut."

"I know. Still, that was the biggest step forward in my entire career, and even that is connected to him. What if he'd never been recruited to King's? Would I be stuck as just one disposable fish in the consultant pool?"

Molly shifts in her seat, then frowns. "Do you think being involved with Sherlock has affected how people see you at work in other ways?"

John frowns. "What do you mean?"

"I assume your co-workers are aware that you are romantically involved with a man?"

"It's never been a secret at work, no. I didn't expect people at work to give me grief over it, and they didn't. The only negative attention Sherlock gets me is because he's Sherlock, not because we're together."

"I'm glad to hear that. Have you been openly bisexual before Sherlock?"
"I---- I've only even said it out loud a handful of times." He looks at his shoes. "If I'm honest, I thought that I'd never have to go public, that I'd end up with a woman — the easy way out. I guess I was hoping I wouldn't have to face telling other people. I guess it's always been there, being attracted to guys as well. Never acted on it before Sherlock."

"How would your parents have taken the news, do you think?"

"Who the hell knows about Mum? Dad, well... I doubt that arsehole would have had much understanding for anyone who was different. He liked to fancy himself a proper Catholic." John shakes his head. "Hellfire for faggots and so on, when he wasn't too bloody drunk to go to Mass – which wasn't very often. But, it hardly matters, since they're both dead," he adds bluntly. "My sister, Harry, is gay, and she was annoyingly unsurprised when I told her; smug, even."

"What about friends outside of work and family? Do they know about your orientation?"

"The friends I keep in touch with know all about it. Telling people who I haven't seen for a while and who've known me in school or back at uni or in the army is a bit tougher. It's easier if Sherlock's there when I tell them."

"Why is that?"

"Well, the focus is different. Here, let me introduce you to this interesting, very good-looking brain surgeon named Sherlock.... oh, and by the way, we're together. He actually once accused me of dragging him along as arm candy."

"Do you think there's a grain of truth in that?"

"Of course, I want him there, I want people to meet him and he makes me look good. Until he opens his mouth, of course, and puts everybody off, but the first impression is still mostly, well, impressive."

"Do you feel as though people will find your orientation more acceptable if you have selected an attractive, successful partner?"

John runs a hand through his hair. Why does he suddenly feel so cornered? "I guess. At least they're not wondering what sort of--- I don't know, I mean, people have these assumptions about roles in gay relationships. I don't know what I'm saying, and I don't know what people think of me when they see us together."

"You worry about being stereotyped," Molly suggests.

"Yeah. I also want Sherlock with me when I tell people because it seems to be important to him that I don't hide our relationship. He got very upset after we moved in together because he thought that's what I was doing."

"Was he correct?"

"Yes and no. I was trying to get my bearings, and I didn't think I was in any hurry to broadcast us to the world before I was ready."

"What about Sherlock? Was there a coming out process for him when you began dating?"

"He says his orientation is nobody's business, but he doesn't hide it, either. It's a weird balance. If they assume something, he lets them. His family seems to have always known that he's gay, but he's never dated anyone before. I know he had some bad experiences at a previous workplace
because of that, but at King’s I don’t think it’s been an issue. I think people realised quite quickly that he wasn’t like in the rumours."

"Rumours?"

"He came to King’s with baggage – someone knew someone at The National where he was training before King’s, and there was a rumour going on that he was bedding anything that moved." John laughs. "Jesus Christ, they couldn't have been more wrong. He hadn't ever dated anyone, but everyone at King's still knew he was gay from day one and thought that he slept around due to those rumours. It's sad, really – it's almost as if he was relieved that's what they were talking and joking about, instead of knowing about his ASD. He's so damned good at hiding it when other people upset him, but they often do."

"Does Sherlock know about your prior romantic history?"

"I haven't volunteered a lot of details, but he does know I'd only dated women prior to him. I had this damned nickname I’ve never told him about."

"Nickname?"

"Some of the guys from my first tour called me Three Continents Watson."

"Because...?"

A weaker man would have blushed. "I've had lots of partners, alright?"

Molly raises her palms. "No judgment here. You weren't in a long-term relationship at the time, were you?"

"No. I broke up with Natalie just before my first tour. Felt like the honest thing to do.” This is a somewhat sugar-coated version; he had sort of broken up with her. He had never cheated on a girlfriend – in general, he had tried to avoid things ever reaching a girlfriend/boyfriend stage. Casual sex used to be very much his thing.

"What were the early days of your relationship with Sherlock like? Were you and was he confident when it came to intimacy?"

"He was... intimidated. Felt like the novice. He hadn't really--- you know."

"He had no prior sexual experience?"

The effortlessness which she asks this and her neutral wording make John a little embarrassed that he still finds it awkward to address sex with her.

"Not really. I hadn't been with a bloke before, so I told him we were both on equal footing, but he wasn't convinced." Sherlock had explained to him an elaborate thought construct that he'd cooked up about the ways in which experience with women, while not entirely analogous, would prepare him for the challenges ahead. He had actually used those ridiculous words because he's Sherlock. "We managed, once I got him to stop overthinking everything."

"It seems that there is an area of life in which you were, after all, the senior expert compared to him," Molly muses.

John laughs. "If you want to put it that way, sure. I am his senior at work, but then I am older; he was still a reg when we met while I was already a consultant. He relies on me for a lot of things,
especially advice about how to avoid pissing people off."

The thought makes John feel quite proud in a way he seems to have forgotten. When had he stopped enjoying being needed and important? Or, had he really stopped, or has being so angry with himself simply blinded him to every positive thing in his life?

"So, you wouldn't describe it as an identity crisis when the two of you became involved?"

"No. I guess I was happy enough being in love not to care." John cracks a smile, slightly surprised at the simplicity of his own answer and the way it really does feel like the truth. "I sure as hell didn't go to Afghanistan because I was bothered about being in a gay relationship," John feels suddenly obligated to add.

"Do you think Sherlock knows that? You said that not telling others about your relationship caused some tension in the early stages."

“I hope so. We're not affectionate at work, but we do talk about home stuff in theatre and people don't avoid mentioning us being together. I don't think I've given him reason to think that there's a problem. I'm not embarrassed.”

Molly lets him brood for a moment before speaking again. “Alright. I think some of the focus regarding your decision-making to return to Afghanistan centres on the way you see your career and your roles in relation to your colleagues and Sherlock. But, there are other issues we need to address which I think are connected. We're out of time for today, but if you are amenable we could continue this week instead of waiting for your regular appointment.”

John wants to groan. It's exhausting, forcing himself to answer questions that make him uncomfortable, ripping out things he has wanted to believe have no relevance because they're in the past.

He sighs. “Yeah, I guess so.”
Sherlock finally caves in and reaches for the yellow sticky note that has been posted on the fridge for the past few weeks.

Holding his phone at eye-level, he opens the text app, punches in the number and types up a text:

**If convenient, could you stop by this evening on your way home? SH**

The reply comes surprisingly quickly:

**I'm off call but going in for a part of the evening shift at A&E – two new SHOs to break in. Could stop by before that. 3:30 okay? Laura**

His heart rate accelerates: that is only forty minutes away. No time to prepare as thoroughly as he'd like: no time to anticipate all the potential turns in the conversation, no time to hone his script and to figure out exactly how to frame the questions in the hope of getting the answers he needs. But, he knows that if he doesn’t do this now, he won’t be able to get the courage up to ask again.

He draws a deep breath and briefly puts down his phone on the breakfast bar to shake his wrists to curb the nervousness before replying to her.

**Yes. SH**

The reply comes in the shape of a hand with a thumb sticking up.

He hates emoticons; they remind him of those awful picture flash cards that his mother had forced him to use when he was little, when he’d not been able to figure out what to say when pressured to interact. Words have never been his friends.

Now that he’s set things in motion, there is a sense of impending doom, and he goes to the sink to pour himself a glass of water. The first swallow hits his stomach like a cold fist and he throws the rest of it down the sink.

*Think*. He cannot afford to panic. There is only one person he can consult about all this, and he refuses to make a fool of himself in front of her. Doctor Arthur had said to call him if he has any questions or issues he feels he can't bring to John. Well, he now has plenty, so he’s going to just have to deal with it and frame what he needs to know in the time he has before she arrives.

He moves to the living room and paces. After a month in the halo, he is no longer afraid of walking, and the kinetic activity has a soothing effect. He needs to get his head in gear and think of how best to phrase the questions.

For the past two days, he’s been increasingly worried about John. Their weekend debacle in bed had shaken his confidence that things were improving, and although the uncomfortable interrogation-turned-conversation John had initiated on Sunday morning had offered some bland reassurance, it had felt very detached from everything else that is going on. That discussion could
well be something John had done to buy time or just to be polite; after all, it has minor professional relevance to him as well. Sherlock doesn't understand the timing of it at all, unless it's something that John's therapist had made him do, in which case it is likely nothing but a hoop to jump through.

When it comes to trying to decipher the state of their relationship, the events of Monday night clearly weigh most on the scales. When John had come home hours late from his therapist appointment, Sherlock had pretended to be asleep. He wasn't in the mood for conversation, and apparently neither was John. When he'd spread the throw on him in the recliner, Sherlock had smelled the alcohol on his breath — whisky and beer.

The shock of it had kept Sherlock silent. Had John merely had a pint with a friend, he would have texted to inform him, and when John socialises on a weeknight it is always only one drink – or nothing alcoholic at all – so that he can drive home.

The therapy is supposed to be helping, but here John is, back in the habit that had plagued him in the early days after being invalided home. Sherlock doesn't want to go back to that. He doesn't even want to think about those days filled with an overwhelming sense of helplessness and loneliness, a seething anger permeating the air at home and being able to barely keep himself together at work. He needs answers, but if John feels the need to drink again, he certainly won't be capable of any sort of sensible conversation that won't end up with him blowing a gasket. Things have seemed to improve lately, but better is still very far from alright, and he can't ignore the warning signs.

Yesterday, Sherlock had noticed on John’s calendar that he’d suddenly put in another meeting with Doctor Hooper for that day. Never before has John done sessions back-to-back. Something must be happening to bring him to this state and to necessitate intensifying the therapy.

No, the sense of impending disaster that is threatening to crumble Sherlock's composure isn't just because he's about to talk to Laura. The cause must be this whole mess feeling like clouds gathering in the horizon – a proverbial low-pressure zone approaching and causing his entire being to anxiously pulse and hum with a sense of an advancing storm he has no way of stopping.

Yesterday evening, he had tentatively asked John how he was.

"Not bad, considering," John had answered, eyes fixed on some imbecilic crime novel perched on his chest.

His answer had confused Sherlock. "Considering… what?"

John had put away the book, folded his hands on top of the duvet instead and looked thoughtful. "Did you ever enjoy your therapy sessions; the ones you said your parents made you go to as a kid? Or the rehab ones? Well, maybe not enjoy, but you know, was it ever alright? Useful, I mean, in a way that made you feel better about yourself afterwards? You have more experience of this than I do."

The question had brought back horrible memories. The barrage of specialists he’d been dragged to; dealing with prying questions. If he didn’t understand what he was being asked, then how was he supposed to know the answers that they wanted to hear? When he'd been a child, they pressed and pressed and demanded until he lost what little connection he had to his words, because what he offered them was always the wrong thing and constantly having to put everything he had into the effort that was destined to fail was exhausting. Eventually, he just stopped trying and eventually, they would leave him alone. Selective mutism is the label he’d been tarred with as a result. It reduced the therapists to observing him, which he didn’t like either. As a teenager, his behaviour
was described as non-cooperative and disengaged; as an adult, it was always something along the lines of 'lacking motivation and uninterested in his recovery'. He just wanted to be left alone, because the things that were demanded of him he could never do.

So, he understands John’s reaction. Frustration had been quite easy to recognise on the expression that flitted across his features while waiting for an answer. "I thought you said it was helping; having a sounding board and all that," Sherlock had offered.

John scrubbed his hands across his face and then sighed. "Yeah, well maybe I’m not enjoying the sounds I’m hearing, either from me or from her.” He looked up, then, at Sherlock with a sad smile. "But, you can relax. It’s not about you. This is all about me, and I don't like myself right now."

Sherlock had just said the only thing he could say: "I love you, even if you don’t."

That had got him a softer smile. "Sometimes I think you’re a daft bugger for ever wanting me in the first place."

"I could say the same about you being willing to be around me."

A rueful laugh sounded from John before he killed the light on the bedside cabinet and turned to face away from Sherlock. "Yeah; I guess we're made for each other."

That was it. All Sherlock had achieved was a useless and probably false statement about John's escalating difficulties allegedly having nothing to do with him.

He needs an interpreter. Someone who has observed the two of them together and who is better at deciphering what's going on. He needs someone who has proven that they can be trusted, someone bound by confidentiality.

A glance at the wall clock on his third circuit of the living room makes Sherlock grunt in frustration. He’s just spent the first third of his preparation time ruminating over the past few days instead of making battle plans. He closes his laptop on the desk, shutting it off. The whole damn morning he’s been trying to find answers online. Medical journals are full of the biochemistry of sex, turgidly boring things about erectile dysfunction and statistics about the general population which cannot be fully applicable to someone in John's particular circumstances. Why hasn’t someone written something scientifically rigorous yet practically applicable about the impact of traumatic injury on the libido and the emotional needs and challenges of such a recovering patient? All the medical guidelines are geared towards professionals in a patient-doctor relationship, and they seem rather useless in the context of a romantic partnership.

"Focus," he commands himself, squeezing the words out through clenched teeth.

Laura will be here soon, and he needs to get over his residual scepticism over whether there is any sense in this consultation. Doctor Laura Arthur is, as far as he knows, a straight woman with a nuclear family. Why does he think she’d be able to deal with what was going on between him and John? How universal are these issues, how relevant the gender and the sexual orientation to what sorts of relationship problems can arise and how they should be solved?

Sherlock doesn’t know any gay men in established relationships; well, he can mostly spot who is gay at the hospital, when they're out on town, and in their social circles, but would be mortified to discuss this sort of thing with just any stranger or distant acquaintance. Asking someone like Lestrade would be a huge breach of confidence. He’s too close a colleague of both John and Sherlock; asking him would run the risk of giving him too private information, and John doesn’t need someone questioning his competence right now. Sherlock is not even sure that Lestrade
knows that John is still attending therapy; he had promised Sherlock’s boss to go once, nothing more. To go behind John’s back by talking to him again could be, no, would be disastrous if he found out about it. Too risky. If Sherlock approached someone else at work suddenly with such an inquiry, he would probably get slapped with a harassment charge. He has no friends of his own; he just shares a few of John’s – the ones who can stomach him. By definition, John’s friends can’t be approached, especially since some of them are actually much less tolerant of sexual diversity than what they are attempting to project.

Sherlock would rather die than talk to anyone in his family about this. His parents had always advised against him getting romantically involved with anyone. ‘You’re too naïve, son. Liable to be taken advantage of,’ had been his father’s message. His mother has commented very little on his sexual orientation or lack of relationships, save for some lectures on the dangers of gay cruising when it comes to transmission of disease. That leaves Mycroft, and the notion of approaching him with this is absurd. As John had pointed out, a single man in his fifties with no clear interest in either sex seems singularly unlikely to be helpful when it comes to advice about what is going on in the bedroom.

No, it’s got to be Laura Arthur, because there is no one else, and there is the context of being her patient that will allow him to get away with this. No one else seems to understand at all what he is going through inside this wretched metal cage. And, something in Sherlock’s gut tells him that Laura Arthur would not take sides and could thus offer an impartial opinion; she’s seen the way they are interacting at the moment and called them both idiots. She is already aware that there are issues that require resolving – after all, she had left her phone number for Sherlock and told him to give her a call at any time if he needed to.

He steels himself. I can do this.

-o-o-o-o-o-o-o-o-

While kicking off her shoes, Laura scrutinises him in the way he has, by now, gotten somewhat accustomed to. Her clinical eye is diligent and non-judgmental.

“How’s it going, then? Are you two keeping the pin sites clean?” she asks when Sherlock leads her into the sitting room.

“Yes, of course. That’s not why I asked you here.”

Laura twists her torso a little, glancing around the sitting room with mild curiosity before focusing on him again. “Okay, shoot? What can I do for you?”

He’s finding it hard to stand still. Abruptly, he says, “Please, sit down. Then I can.”

She gives a little smile as she sits on the sofa he stiffly points to.

He decides to sit in the rolling chair. It has the advantage of being at the right height to keep her in his eye line without having to struggle. He’s going to need to work hard to connect what her face is expressing with what her tone of voice is conveying, while at the same time grasping the significance of her words. He takes a deep breath. I can do this.

“I need to understand something about the male libido.”
Whatever she had been expecting to be asked, this clearly isn't it. Or… wait, now there is a
glimmer of what he thinks might be understanding.

She asks quietly: “You’re having difficulties with sex because of the halo?”

“Yes, but no, that’s not really what I meant.”

Now, her left eyebrow crawls up her forehead. He thinks this means she wants him to explain
further, but he’s not sure. The facial antics could also be an attempt at shutting down the
conversation by insinuating that he's being deplorably ridiculous. Then again, people tend to make
faces at each other, conspiratorially, when they are teaming up against him and there's no one here
Laura could employ as backup.

"Go on," she prompts, and doesn't sound like she's gathering material to promptly make fun of him.

“It’s not me in the halo. Well, maybe it’s me per se.” He runs out of words and an awkward silence
descends, so he grabs for the nearest thing that comes to mind. “It takes two. Sexual desire…
libido in males. How…” He has to stop, blinking and taking a deep breath.

Laura sits up and leans forward. “Two? As in you and John as individuals, or you and John?”

He sighs. “All of the above.”

Laura shifts her eyes away for a moment and tilts her head; her mouth tightens in a way that
Sherlock decides means that she’s a little confused. Suddenly, she chuckles. "I know there’s a bit in
those leaflets where they tell you to ask your ortho for advice on positions and stuff. I have to say
you're the first one ever to actually do so. I suppose the sections on safe sex in a halo are written
from a heterosexual point of view… which I guess might be a bit awkward for two guys?"

She’s raised her tone at the end of the sentence, so Sherlock knows this is a question. He flaps his
hand because he can’t shake his head. “It’s not about the mechanics. We’ve managed around that
and some of the instructions are applicable. It’s about… about…” he stutters to a halt. Then he
raises his index finger to his head, avoiding the halo bars to tap his temple. “…what’s going on in
our heads. Or, rather… what isn’t.”

“Right.”

Sherlock knows that the way she’s phrased it is the same sort of placeholder word that he uses
when buying time to process something; when other people use them, they are often trying to
divert attention from the fact that they don't quite understand what they have just heard.

He blurs out, “It’s not erectile dysfunction.”

She reddens a bit and bites her top lip. “Look, Sherlock, I’m an ortho – a sawbones. I’m…ah, not
qualified to give advice about libido issues in any relationship, let alone a gay male one. There's a
bunch of good urologists at King's, and I have some contacts who do couples therapy if you want
that sort of professional help.”

He gives her what John once called his death glare. “What do you know about me that would ever
lead you to think that I would talk about anything like this to a complete stranger, especially
considering that some colleagues' discretion is hardly flawless?”

She now looks taken aback, eyes widened with disbelief, but Sherlock is relieved to find nothing
pointing to feeling insulted. "But, why are you asking me?" she sounds exasperated.
“You are married. How long?”

“Nine years.”

"Happily?"

“Well, yeah, I guess. What does that have to do with anything?”

“Established relationship. You have experience of shifting from the honeymoon phase into the commitment stage. How did you do it?”

“Lots of hard bloody work is how.”

“Precisely! That’s what I need to know about… and… other things, too.”

Now, her eyes soften, but he has a hard time deciding whether it’s in pity or sympathy. He’s always had a hard time deciding between the two facial expressions, and today is no exception. He takes a deep breath and closes his eyes briefly to give him a chance to limit input. Then, he opens them again, focuses his gaze on Laura and is off. “What I need to know is how much of the problem is specific to me being a liable party in a relationship or whether it’s something that can be expected to happen when a medical crisis complicates that relationship transition between any couple. You are normal, you are in a stable long-term relationship, you can tell me how you overcame a change in sexual desire as the relationship matured.”

“I’m sorry; I’m just not quite following?”

“If it’s so-called ‘normal’ ---” he adds air quotes for emphasis with a disdainful grimace, "---then there is a fighting chance it can be fixed, especially for John. If it turns out that the problem is because of me, then at least I'll know the prognosis is dire. If it’s my fault, because of the way… the way that I am, then we’re fucked.” He’s too stressed to modulate the volume and it all comes out too loudly. His uncharacteristic swearing adding an extra layer of embarrassment, and he scrambles to add rather lamely, “or not, as the case will be.”

Laura spreads her hands wide, a gesture he has learned means uncertainty. “I don’t know, Sherlock. I mean, what’s normal for one couple isn’t normal for another. It’s not so black and white. I need to know what you mean specifically, to know whether it applies to me and Theo.”

"But, there must be some general principles and behavioural models which would naturally elude me, but which John would probably be aware of, and capable of executing."

It’s Laura's turn to study his expression. In his current state of mind, it's hard to welcome the scrutiny, as understandable as it might be. "Why do you think the two of you are so different; that he could manage that stuff and you couldn't?"

Sherlock stares at her. "Obvious. Don't make me spell it out to you."

There’s a temptation to add an earnest 'please' to the end of that sentence. Before the halo, he has never been treated at King’s College for anything in a context where his earlier diagnoses would have any relevance. Since he never volunteers that information, it shouldn't be on his records. Sherlock had suspected that John may have said something to her, but it's hard to judge from hesitant expression whether that is the case. If not, then Sherlock desperately hopes that Laura is clever enough to have put two and two together. That she has seen through to what he tries to hide.

"Not obvious, Sherlock. I mean, I've heard the corridor talk and some ideas have crossed my mind while getting to know you these past weeks, but I didn't want to assume. Maybe you should
consider talking to someone at Kings’ Clinical Academic Group on Behavioural and Developmental Psychiatry; I hear Declan Murphy’s really brilliant.”

Sherlock knows perfectly well who he is – the articles he has penned about autism are some of the more sensible texts in a sea mostly consisting of pseudo-academic drivel. Still, he would never, ever consult a psychiatrist at the same Trust he works at and to risk becoming a case study summarised to others, even if just informally and anonymously.

No, he would never, ever consult a psychiatrist. Period.

At least that asinine suggestion clearly signals that Laura is talking about ASD. He closes his eyes in dismay. This is going so wrong, he almost moans in frustration. “I’d rather strip naked and dance down the corridors of King’s than do that. Out myself to professional colleagues like that? No… just no.”

Laura looks apologetic. "It's me who should be asking you about practical neuropsych stuff, probably,” she says and sighs.

Sherlock can't make head or tails about her expression. Bitterness? Frustration? Tiredness? Worry? He's pretty certain he's losing control of the conversation, and the urgency he feels over the worry is messing up his concentration.

"My six-year old's got ADHD and she's about to start school. Plenty of advice around on whether it should be in a regular classroom or not, and it's hell, trying to decide," Laura admits.

What can he say to that? He was never a six-year old girl with ADHD, and there is no universal rule on what is best for anyone or someone or everyone with neuropsychiatric issues. If there was, maybe his parents would have obeyed it and things would have been better. He would like to be less mute about these things. If something he might say could make it better for someone else – especially if that person has parents less hell bent on enforcing normality than he does – than he should reply, but what if he says the wrong thing and that leads to disaster? He doesn't want to be someone people come to advise on such things, because that would mean that it's the first thing they think about when they see him. Even John's research into ASD could well stem from the fact that he has realised that it's at the root of the problem.

"I don't know about those things," Sherlock finally replies.

Laura opens her mouth, looking like she might continue explaining, but then retreats.

Sherlock pats the nervous sweat from his palms on the side of his trousers and closes his eyes for a moment, battling a sense of defeat.

“Look, have you got any idea what’s caused all this tension between the two of you?” she asks. "If it’s because the halo is putting you and or John off, well, that’s to be expected. You’re nearly half way through; it won’t last forever, and I wouldn't worry about it at all.”

When Sherlock opens his eyes again, he can see that there is definitely pity in her eyes. “It’s not the halo!” He nearly shouts this.

“Okay. Then what?”

“It started before, even before he went back to Afghanistan. Sex happened less frequently. It stopped altogether when he came back injured, and that hiatus lasted much longer than his physical shape would have dictated. We’d only just started again, tentatively, when this accident happened. We’ve had sex twice, just twice in the past five weeks. The first time he didn’t achieve an orgasm,
and neither of us did the second time. He won't let me see his scar; why not? How often do you have sex? How often would a normal person expect it or want it? How often do you fail to reach a climax? Would you leave your husband if a related problem was… permanent? Is it a sign that other things have gone wrong? How can you tell if someone is terminally unsatisfied in a relationship? Just how important *is* sex?” He runs out of breath before he can add anything more into this list.

She looks shocked. “Ah, wow, that’s a bit… um, too much information and hugely personal.”

They're both physicians, and Sherlock has never understood the prudish manner in which such things cannot be discussed even between medical professionals. John is always the first to remind him of the associated indecipherable social rules. "Of course it's bloody personal, that's why I'm not shouting it from rooftops or calling some psychiatrist!” He tries to get his breathing under control. “I lack social skills. I don’t understand the boundaries, the rules, no one’s written a script for this, I am unable to define the problem and I am at my wits’ end. I *can’t* lose John. What do I have to do to keep him?”

“Talk to him, talk *with* him. He’s clearly gone through a tough time, too. Love him. That’s the only thing I can say. Sex is not enough to hold people together once you've been together for some time, and there's much more to being intimate with someone. Couples that talk, who share things, will get each other through a bad patch in their relationship; at least we did. It's a matter of priorities and about loving someone enough to keep trying.

"John is by far my highest priority," Sherlock replies indignantly.

"I wasn't insinuating that he isn't."

"I think I have been trying quite hard, but I don't know what to do."

"I can't answer that. It's him you need to be talking to."

"I don't know how to converse about such things."

"You think it's easy for anyone? Is it easy for John, do you think?"

"God, no. He obviously hates going to therapy."

"I didn't know he---" Laura trails out. "It's none of my business."

Now he's gone and done it. Unless Laura keeps her mouth shut, John will be livid that he has divulged such a secret. "I trust you to keep my confidence about this conversation."

"Of course," Laura offers immediately.

"You told me I could contact you if I had an issue that I needed to discuss but not with John."

She sighs. "You took that very literally."

Doesn't she understand that this is very illustrative of the issue at hand? He must take things he sees in John and hears from him literally because he doesn't know how to read between the lines. That's why he's asking all this, for heaven's sake!

"I believe it’s a symptom of the state of our relationship that he is in need of counselling."

"Well, are you sure that it's not your relationship having trouble because of something else and not
vice versa? Isn't it a good thing that he's going to therapy?"

"I have no control over what decisions that therapist may be steering him towards. It's obvious I have played a significant role in John's dissatisfaction."

"You think it's your fault?" Laura looks both sceptical and a little alarmed.

"As I said, I don't know what the precise problem is. He won't tell me. He claims he doesn't know that, himself. I find that hard to believe."

"I know he got injured, and you said that he's seeing a therapist. Has he told you what it's for?"

"PTSD at the very least. I was invited to join John for one of the appointments and that was what the therapist was focusing on."

"Okay. Do you think he's depressed? That's often connected. We see that a lot with trauma patients. It's a big life change, what's happened to him. Sometimes it brings things to the surface that someone hasn't dealt with before." She clears her throat. "I had post-natal depression. I couldn't work out on my own where it came from and why it happened. Sex was the last thing on my mind. I was cooped up in the flat with Suzy and it took a while to realise that the way I felt wasn't the way it was supposed to be for a new Mum. It's bloody hard to admit that when you're a doctor. Theo was a bit clueless, to be honest, since I hadn't had any issues before. It's not the same as what's happened to John, of course, with all the hormones and stuff---"

"No, I shouldn't think it is."

"It takes two, Sherlock: Creating problems and solving them, unless one partner does something monumentally stupid or insulting or destructive."

John going to Afghanistan is all those things, but that doesn't make their problems all John's fault. Not at all. In fact, John going to Afghanistan may be a mere consequence of their problems, which lands Sherlock right where he started: without a clue, other than the fact that he must be a part of the cause, no matter what John tells him.

"I hate to leave you without answers and to just say good luck and do your best, but I can't claim to know nearly enough about the two of you to comment much more, let alone to tell you what to do."

"If I ask him things he just denies everything."

"Then, you ask again," Laura looks torn, as though she's trying to decide whether to divulge something. "Look, if there's something you suspect--- never mind."

"What?" Sherlock demands. Finally, she had been about to say something potentially useful, and now she's pulled the plug.

She purses her lips and Sherlock wonders who she's annoyed at – him or herself for being about to say something revealing. "Usually, when someone's got a hunch about their partner, it's right."

"Intuition is simply the brain subconsciously analysing data," Sherlock declares.

She stands up. "I'm sorry, Sherlock. I'm the wrong person to ask. My marriage isn't perfect, but it's good enough to have survived some really stupid and some really difficult stuff. If something is meant to be, it survives. If you're worried and you can't shake that feeling, it's probably a thing that really is going on. I'd say that's the most pressing stuff that you need to talk to John about."
"This isn't helping."

To his horror, she gets up from the sofa and starts to put on her shoes. He follows her to the foyer, watches helplessly as she grabs her coat from the hook. "I'm glad you're doing better with the halo. That I can help you with. Don't forget next Monday's tightening; I'll pop by at around five p.m."

_Sod the halo!_ John has been drinking and they're not having sex and John won't let him see his scar and he doesn't talk at all to Sherlock about what's wrong and his only hope of getting answers from a person who is average, who is neurotypical, who is _normal_ and whose brain thus works like John's and who is consequently much better at reading others than Sherlock, is fading fast.

This is death by a thousand cuts, and the next one might just be the one that bleeds him dry.

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When John arrives home that night, he’s tired. He's not looking forward to seeing more of Molly this week, and although he has gained some determination to explore subjects Molly has raised, the therapy sessions still drain him. Sorting out his shit is going to take time and bloody hard work, but it is worth it; it has to be. He wants to believe so for both his and Sherlock's sake, but progress is so damned slow and hard to notice.

Sherlock declares that he'd prefer to eat their supper in the kitchen rather than in the sitting room. They have a folding table that they can use as a proper dining table, but they just never bother. Eating their meals at the bar that separates the kitchen from the rest of the living room is something they used to do more, before… before everything went to hell. Once they got back from Afghanistan, John had preferred to watch television while eating a take-away, saying it helped him stop thinking about his shoulder. Sherlock had gone along with the choice, with the result that mealtime became an almost solitary affair, despite them being in the same room at the same time, eating the same things.

“I’ll cook the pasta a little longer this time; I know you like it al dente, but it will be easier to swallow if it’s a bit softer.”

He’d picked up some fresh pasta from Carluccio’s, the restaurant/deli almost next door to Doctor Hooper’s office. John remembers having eaten there once or twice and that their tasty fresh pesto had gone done well with Sherlock. The bite-sized little cappelletti, stuffed with a ricotta and spinach mix should be easier for him to eat than any spaghetti or tagliatelle. Not being able to see his plate properly to spin long noodles is still proving to be a challenge.

When they’ve both had a few mouthfuls, Sherlock takes a sip of his water and then clears his throat, which makes John look up in concern; is he trying to swallow too big a bit?

He must have telegraphed that worry in his expression, because Sherlock says, “No; I’m liking this. It’s good. It’s something else. I… I’d just like to talk. Is that acceptable?”

He sounds hesitant, as if he expects John to refuse. Time was when he might well have tried to shut down a conversation, but Molly’s right. He needs to listen more. So, if Sherlock wants to talk, then he’s willing.

“Yeah, sure. Fine by me. What’s on your mind?”
“How was your day?”

It seems very anodyne a topic. He’s tended to avoid talking about work to Sherlock since the halo; no reason to rub his nose in it that he’s busy when Sherlock isn’t.

“Yeah, okay, I guess. The usual mix of trying to juggle things in theatre while putting out fires; I spent two hours chasing up a videolaryngoscope that was sent to maintenance but hasn't been returned.”

“Anything clinical of interest?”

“Had a patient with hemophilia type A in for a meningeoma removal today. It’s not often we get to use one of those hellishly expensive clotting factor concentrates.”

“Are those the ones produced in hamster ovaries or kidneys?”

“No idea. Maybe the third-generation stuff isn't; we have Xyntha, now, instead of the old HelixateFS and Recombinate.”

“Are you still bored by what you’re doing?”

Actually, come to think of it, John isn’t. Right now he finds himself using work as escapism, and on occasion, when these special cases come along, it's nice to be able to manage them with everything that Western medicine has to offer. What is going on in the therapy sessions and at home seemed to be more exhausting these days than work, where he can pass as working normally, his colleagues blissfully ignorant of the turmoil going on in his head. So, he gives a rueful smile. “No. Oh, the bureaucratic crap gets on my nerves at times, but right now, it’s okay; yeah.”

Sherlock takes another bite and swallows. “What about the therapy?”

This question grates a bit, and John uses the opportunity of having a go at his own food to give him a chance to think of how to deal with it. Once he's finished a bite, all he can come up with is “Can’t say it’s the highlight of the day, but then I can’t imagine you ever enjoyed it.”

Maybe his acerbic tone is a tad defensive, and it might not be polite to remind Sherlock of his own experiences after their conversation on the weekend, but John is trying to figure out where this is going. He really hopes it isn’t heading in that direction. Talking about what is going on with Molly is not going to help; he’s not ready. The whole anger issue and his initial reaction to it had unsettled him badly, and although he's gotten back to surer footing with her, it had still been a heavy blow. The last thing he wants to do is start talking about his childhood, digging up all that old stuff that will invariably drag his mood down. He really doesn't want to reveal to Sherlock why some of it has come up with Molly.

When he returns his attention to Sherlock, his partner's attention has shifted from him to the food. Sherlock is poking his spoon around the pasta bowl, trying to scoop up the last of the cappelletti without being able to see it because of the halo. Finally he sighs and puts the spoon down. “How can I help?” he asks.

“It’s not your responsibility to help, Sherlock.”

“But I want to. Be helpful. Talking is supposed to be good. I know I am rubbish at it, but that doesn’t mean I shouldn’t try.”

John drops his spoon into his now empty pasta bowl and folds his napkin. “Talking… yeah, well, not really in the mood, not about that anyway.”
“Couples that talk together stay together.”

John looks up, startled. “Where’d that come from? You’ve not swapped those articles for some stupid self-help guide, have you?”

Sherlock puts the two dirty dishes together and grabs the cutlery before pushing his bar stool back so he can get up. He carries them over to the sink and runs the hot tap before answering: “What does it matter where it comes from? It’s what everyone says. Communication is supposed to be important to offset…” He comes to a halt.

“Offset what?”

“Other forms of contact. When a relationship matures.”

John takes a minute to think this through, and then realises what Sherlock’s probably getting at. “Is this about our cock-up in the bedroom on the weekend?”

“Your analogy is not very fitting, since up is not a word that describes—”

John cuts in: “Alright, I get it. You're putting way too much stock on one incident. It may be the first time for us to call it quits half-way through, but it’s not likely to be the last time either. One day we'll both get old, and things aren't going to work like they do on a twenty-something. Sex isn’t a solution to anything, and I was an idiot to try it without realising you weren’t in the mood.”

“That is not just my problem, when you look at the past few months.”

“Yeah, fair enough.” Sherlock's nervous energy is contagious, and John has no clue as to what he's after with this whole conversation, except to exacerbate his own self-blame.

Sherlock goes over to his laptop, which has been lying closed on the kitchen counter. “I found something today that is interesting… for both of us.”

He puts the laptop in front of John, who sees two tabs open in the browser. Clicking on the first, it opens to an article. The first line catches John’s eye: 'MDMA – the pure form of ecstasy – has been granted "breakthrough therapy" status by the Food and Drug Administration (FDA) for treating PTSD and could become a legal pharmaceutical pending a final trial, which should begin next Spring.'

Sherlock reaches down and taps the second browser; up pops a page from the USA’s National Institutes of Health on clinicaltrials.gov. The article's title is 'MDMA-assisted Therapy for Social Anxiety in Autistic Adults'.

John starts to laugh. “You… want us to get high together. On ecstasy. Wow, just…” He shakes his head. "No, Sherlock. Drugs are not the answer."

“I’m not saying they are – not yet, anyway. It’s going to take a few more years of clinical trials. It’s hardly the first drug with a history of recreational use to be explored for its medicinal potential; ketamine, after falling out of fashion within anaesthesia, has found new indications in prevention and treatment of chronic pain and treatment of depression; cannabinoids are used to treat pain caused by certain illnesses. It's a worthy endeavour to explore all possible solutions to make a more normal life possible.”

John reaches over, covers Sherlock's hand perched on the edge of the laptop screen with his own, and closes the lid. "I don’t want a normal life; we’re neither of us exactly normal. I just want a life that works. There's no pill I can pop to achieve that."
"You've used alcohol for the same indication, to alleviate symptoms."

"And you've----" John trails out, deciding that tea-potting a former drug addict is likely not a constructive way to push forward. "Let's just backtrack a bit. I meant what I said: I have a therapist. I'm working things out. You should concentrate on yourself right now, not me."

"Me, doing exactly that, has led to being accused of being too self-centred. In fact, that has been one of your primary complaints in our relationship." Sherlock shoves the laptop away. "You won't explain what you tell your therapist about me, so I have no way of knowing what to do to make things better."

John looks at him tiredly. Often, trying to follow Sherlock's thinking is fascinating and surprising and fun, but right now trying to take him seriously when he's attempting to solve things he doesn't even understand with references to obscure experimental medicine, it's just exhausting and pointless. "Look, it's been a crap week and it isn't even halfway through. I'd really prefer to skip a two-front battle with you and Molly."

He realises what he's done a second too late. Sherlock is quick to regain his composure but for a moment, before catching himself and drawing on his classic mask of superior dismissal, his surprise and shock are plain to see.

"I am the enemy, then."

"No, Sherlock, no, I---- not what I meant," John complains, and grabs Sherlock's wrist before he manages to storm off. "I'm just feeling the pressure, alright? There's no crisis here, nothing new going on, but Molly's digging up stuff I'd prefer not to think about, but if I have to, then I'd prefer to have a think on it before trying to explain any of it to you. Because you always--- you tend to think everything is about you in the sense that you have to solve it, like it's a bloody missing diagnosis or some great mystery. There's no quick fix for the stuff I'm sorting out with her help. It's not your responsibility; all this, what you're doing, reading up on relationships and PTSD from God knows where, is just going to get you worked up for nothing."

He lets go of Sherlock's arm.

Sherlock's eyes narrow and he crosses his arms protectively. "So, I am to sit tight and await whatever revelations or decisions you may arrive at regarding our relationship when you discuss it with an outsider. Assuming any are ever reached. And, any attempts by me to help are to be discouraged, because all they could ever do is getting me worked up."

"No, Sherlock, just--- stop right there. I'm not saying we can't talk about things. Just--- please, not right now."

Molly had convinced him to schedule a third session in as many days. He's quite certain it's because she has decided that his drinking on Monday was a prelude to some big breakthrough or skirting a swirl down the drain. He can't really blame her, considering the picture he had painted about how that habit had been connected to the way things had been right after Afghanistan.

It still doesn't explain why Sherlock has suddenly decided to throw himself into what he must hate the most in the world – trying to talk about his feelings and their relationship.

They both need breathing space, instead of rattling skeletons around.

"When, then?" Sherlock asks, sounding impatient.

"Sherlock," John warns.
Sherlock opens his mouth once more, but John silences him with a stern look.

Chapter End Notes

Biting your nails down to the cuticles with the tension and tempted to throw stuff at John? Rest easy, for the next two chapters (which chronicle the fifth Thursday) are, in many ways, the most important in the whole story. They will be posted together, because while we are angst demons, we're not evil enough to leave you hanging in such a spot.

If you want to find out about the work that the NHS trust King's College is a part of does regarding ASD, check out https://www.kingshealthpartners.org/latest/1005-neurodevelopmental-clinic-wins-award-for-outstanding-care and https://www.kingshealthpartners.org/clinical-excellence/29-behavioural-and-developmental-psychiatry
A bitter sense of déjà vu hits as John pulls open the front door of the therapy practice. As tiring as there sessions are, he's also fed up with wasting time trying to solve things on his own. Begrudgingly, he is forced to admit that, even though they had been tough, the last few sessions have offered some clarity.

Molly offers him tea, which he accepts before they take their seats.

"Any thoughts regarding yesterday's session?" she asks, predictably.

"Let's just push on."

"You sound tired."

"I hate being right; Sherlock's getting paranoid about what we talk about in here. I have no idea where he's been getting ideas from, but he's all over the place, trying to fix things between us."

"Has anything happened that might have brought this on?"

"He's overreacting, I think, about stuff that happened or didn't happen last weekend. Doesn't surprise me – he's cooped up in the flat like a hermit, which can easily make small things into big things."

"Getting a bit stir-crazy? I recall you anticipating that to happen."

John snorts. "Absolutely."

"I'm glad it sounds as though you're trying to put things into perspective for the both of you. Would you like to talk about last weekend?"

"No, it's--- it doesn't matter. We tried not to let the halo put us off sex, but it does make everything so bloody complicated. I told him he shouldn't worry about it because it'll pass. We don't have to get into that, now."

"Alright," Molly relents. "In that case: today, I'd like to get a bit deeper into what we talked about your prior relationships. Would you say you've been struggling with commitment in general, or just in relation to Sherlock?"

John takes a moment to think about it. "Could be both. I always thought I'd be with someone in a very equal partnership, none of that man-is-the-head-of-the-family bullshit. I don't think we're slipping into any sorts of roles at home, but he does rely on me a lot in sorting out relationship stuff and assumes that I run the household. It's a joke at work that he's got me wrapped around his finger. Since they're saying those things while I'm present, they're just teasing, but still."

"What do you mean when you say he relies on you when it comes to your relationship?"

"I have a sense that he expects stuff I have no idea about. We talked about insecurity. It's a good
"word for him, I think."

"When we're in a relationship, do you think we're entitled to support and reassurance?"

"Sure, yeah."

"Especially in times of illness?"

John looks sheepish. "Well, yeah."

"I'm going to throw in a theory. You can disagree freely."

John nods.

"Is it possible that you've been dismissive of Sherlock's needs during the halo treatment because it reminds you of your own injury and having to rely on his help? That was a theme you raised very early into our sessions, that you felt like you were unable to be there for him in the way you thought was necessary."

"Could be. I mean, I don't like the idea that I'd be--- what? Not helping him enough? I think we're managing the practical stuff and I now understand a lot more why the halo's so hard on him. Even sex is back on the table, sort of. I can't be responsible for cushioning every thought and feeling that goes through his head, am I?"

"I don't mean this in a judicially liable sort of way, but in other ways: are we responsible for those we love and who love us back, both in a concrete and emotional manner?"

John doesn't reply. He finds himself thinking about Harry.

"Sure; we have a duty to protect family, people who are important? I looked after Harry when we were little. I still do, a bit. I like to think I'm looking after Sherlock." He doesn't mention his mother as a person he has looked after in the past, because he doesn't like thinking about it; doesn't like admitting that his Dad had been kind of useless in that regard.

"Remind me again. Harry is your....?"

"My little sister. She inherited some of Dad's habits. She's sober, now. For now."

"Your father was an alcoholic?"

"Among other things."

"What about your mother? Why did you feel a responsibility for your sister when you were children, or are you referring to an ordinary big brother's role?"

"Mum was... she had her own problems. She didn't stand up to Dad. She didn't protect us. She sort of withdrew into her own world."

"So, you took a parental role to both her and your sister?"

John sniffs. "I never got why things got worse after Dad left, you know? Mum just couldn't cope. Harry started drinking at fifteen."

"Do you think it's easy for you to accept help after being the one to help others from a young age?"

"Probably not, but it's not just about that. You called me out on maybe thinking that someone who
joins the army should be strong enough not to get traumatised by anything they might experience. I liked to think not much could faze me." He'd survived being a kid in that house, how much worse could a war be?

"It's a tough transition from an army doctor – an officer in charge of others – to a patient needing help from others. Given what you went through as a child, helping others when no one was there to look after you, that transition may be particularly tough to manage. When we started these sessions, you were putting a lot of pressure on yourself about helping Sherlock even when you were still recovering yourself."

"I didn't have time to sit around complaining about my problems, even if they were causing tension between us and making some of his issues get worse. I just didn't see that it could be a priority. I'm beginning to realise that was a bit daft. Like trying to ignore an elephant in the room."

"What was Sherlock like after you were injured? Do you think he coped well? Judging by how you have described him being there for you during our earlier sessions, it seemed that he made a substantial effort to support you and look after you, even when you were pushing all that away."

John's chuckle is hollow and toxic. "Yeah, he tried. I don't think I let him do a lot. Bastion must have been... really hard on him. Yesterday, he kept insisting he's somehow supposed to be helping me even now, with this----" he waves a hand between himself and Molly. "He's been through a lot, too; I guess I haven't really accepted that before."

"And acknowledging that may be very important, John, to both of you. You haven't been in a good place lately, not in a position to well address his needs, and you shouldn't trip yourself over trying to atone. What you can do now is your best to do things differently, and to acknowledge his need to help you instead of belittling or dismissing it as unnecessary."

"I have acknowledged it, by telling him that he shouldn't worry, that it's not his responsibility."

"During the weeks following your injury, he likely felt very in charge of making sure the two of you were safe and that you were recovering."

"Sure. He needs to let that go."

"If he sees your recovery as incomplete, it may be very difficult for him to do so, especially if he suspects that your reassurances that he doesn't need to participate any longer could just be a continuation of your dismissive behaviour after you were discharged."

John shakes his head. "It's still so bloody difficult to connect how he was at Bastion with how he's behaving, now."

"It's good that you're beginning to see his visit there differently. Before, you felt like he was a fish out of water, that he shouldn't have gone there at all."

"And now I realise he did better than I ever would have thought. He didn't throw his toys out of the pram because life out there is completely different and much more difficult than what he's used to. He did really well."

"Have you told him this?"

John swallows. "Not in so many words."

"I think he needs to hear it. If you were giving him a hard time in a situation that was highly stressful for him, he would probably like hearing that you think he managed admirably. Let me
return to that one question. Are we responsible for the ones we love?"

John shifts in his chair. His heart is pounding. "You know what Greg said to me? He told me that he thinks Sherlock would never leave me, even if a time comes when he should. That was... shit, that hit hard. Does it make me too responsible for him that he has no sense of self-preservation?"

"Couldn't it just be that Sherlock just doesn't want to give up because he values your relationship?"

"That's not the way Greg painted it. How do you think that makes me feel, thinking that Sherlock would stay around like a kicked puppy no matter how badly I treated him?"

"It's been said that we are good at hurting the ones we love because we have the strongest weapons. Agree or disagree: in a healthy relationship, we are aware of those weapons?"

"Agree."

"Can you think of what weapons he has?"

"Making me feel like I'm in his shadow, that my career advances are crumbs from his table, that I'm less intelligent. Saying that he could financially look after both of us; insinuating that I'm replaceable at work."

"What about your weapons?"

"His lack of social skills, difficulties with other people and how that makes people not like him. The fact that he had a sheltered, upper class upbringing and he's used to a certain lifestyle through that and due to being a consulting surgeon. Also, what Greg said: that he'd always stay. Maybe he would, maybe he wouldn't, but I don't want to test that resolve."

"So, if we are responsible for those we love, we need to treat them well, because we are uniquely suited to hurt them?"

Guilt hits like a freight train. "Fuck. That's what I've been doing. I've been throwing those things in his face when I get angry enough."

Molly's smile of soft. "Everyone says things they regret when angry. We're not aiming for perfection here, only restoration."

"I've fucked up, haven't I?"

"You've been reacting to events in your own life. That can make a person irrational and self-protective in a harmful manner, but it doesn't make them a bad person at the core. Sometimes wanting to avoid certain things means going on the offensive. When we're emotionally deeply stressed and drained, it doesn't take much for others to pierce our armour, and we may lash out quite brutally to protect ourselves from that. You've described Sherlock using a tactic where he scares people off before they even get a chance to know him."

John's mouth tightens, and he lifts his palms upwards momentarily in confirmation.

Molly continues: "Guilt can be a vicious circle. We know we're hurting someone, and that makes us feel bad about ourselves, and if we stop caring and believing things could improve, we punish ourselves by making things worse."

"Shit." John angrily swipes the side of his palm across his eyes to get rid of the angry tears gathering.
"Embarrassment can also make us lash out at someone. You went through something that challenged your identity, and not just your professional one. Sherlock is a professional rival you have always found intimidating. Once you can put that aside, I think you might get a different overall look at what has been going on lately."

There’s a tightness in John’s throat. He twists the tea mug in his hands, hoping that Molly would change the subject.

"You look very upset right now," she offers.

Molly can say as many nice things as she wants about moving on and doing better, but the guilt is too crushing right now for any of them to matter.

“I just don’t want to be Dad. Bloody Jekyll and Hyde, he was.” John clears his throat, shifts uncomfortably in his chair. “That questionnaire you gave me--“

"---is not called ‘am I my father’. You’ve had traumatic experiences as a child related to violence and lack of parental protection. Anything connecting such behaviour to yourself will be a sensitive subject. It can also make it much more difficult to address anger issues when someone deeply fears such things being a part of their core personality. But, you are the sum total of parenting, life experiences, genetically predisposed traits and various other things. You may have been exposed to some detrimental behavioural models by your father, but you are not him."

"Everybody liked him – except for us who had to live with him.” John’s lips twitch into a brief, bitter smile that doesn’t reach his eyes. “At home, he was a right bastard. Put Mum in hospital a few times until he walked out. Never wanted children, I think. To everyone else, he was this nice, caring man who would help out neighbours and give money to worse-off relatives. It made me sick; try explaining to a kid how that even works. It’s made me kind of cynical about people who are supposedly good with other people, when they are actually absolute fucking arseholes."

“Maybe this is important, John, even considering how you seem not to value what the hospital has recognised as your people management skills. How do you compare to your father in what you described as his Jekyll and Hyde manner of interacting with others? Do you behave differently towards different people?"

“I’d hate to think I did. Maybe I’m a bit more assertive in theatre than at home, but doesn’t everyone have at least some sort of separate work persona?”

“Is that a question?"

“Yeah. Your professional opinion?”

“Some people seem to be able to be themselves 24/7, but that’s exceedingly rare. The things we experience working in the healthcare mostly prevents that; we need to protect ourselves from certain things through a learned professional role.”

"Sherlock pretends to be the tough guy at work, but I know him and he’s the exact opposite. He may act coldly and boss people around at work in case someone might give him grief, but he's not a bully. I sure as hell am not one at work, either.”

“Let’s invent another questionnaire. Let’s list all the things you are not, which you feel your father was.”

“Pathologically jealous. That’s usually the excuse he used to rile himself up at Mum. I’m not physically abusive in the way he was. I’m not an alcoholic, but I recognise that for me it could
easily become a habit and that I'm not a nice drunk. Next you’re probably going to say I joined the army because of Dad.”

“What did you join the army?”

“We’ve gone through all this.”

“What the army, out of all things that could have given you the excitement and change you were looking for? It could have been moving to another country, it could have been a new kind of job, it could have been a new hobby.”

John readjusts his cufflink. Sherlock had given him this pair last year and they’re his favourites. “I liked the idea of a command structure, of a system where, if you did something wrong, that would be addressed. I like the loyalty, the camaraderie of the service. I liked the idea of being in charge of people – looking after them, you know, having your team and sticking with them through thick and thin? It’s a bit like that in the OR, but I wanted more, I guess.”

“You wanted reciprocity?”

“In what sense?”

“You said you had been the responsible one looking after others at an early age. In the medical profession, we work quite independently. Would you agree that in the army, the command structure you just describe guarantees that someone is supposed to have your back, too?”

"Sure,” John concedes.

"In your personal relationships, do you think that's something you seek?"

"Doesn't everyone?"

"Consider the people with whom you have had the longest relationships. Did you feel like that with them?"

"I rarely stuck around long enough to find out. With Nat would have been the longest. She was a bit... traditional in that what she expected was for me to really be the guy. I like to think women can do the same stuff men can, I don't like stereotypes. It was hard to define what was wrong with what we had, but I didn't like the way she sort of left me alone to fend for the both of us. It's hard to explain."

"Did you feel free to define your own role in that relationship?"

"No. She wanted a knight in shining armour, someone to carry her bags and to show off at garden parties."

Sherlock doesn't expect him to be a certain kind of person, doesn't expect him to fill out any old-fashioned expectations. He just wants John the way John is and to be there and to understand him.

"I'm going to voice an idea, and I want you to tell me if you agree or disagree," Molly suggests.

"Alright."

"All these relationships before, when you let them fizzle out or refused to take a step forward, could it be that you have feared being disappointed by the other person, or feared that you'd have to analyse your own part in the failure of that relationship?"
John swallows. "I just wanted to walk away. I wasn't interested in why those relationships failed."

"Would you agree with the following: in your life, you have been repeatedly disappointed by people you have been forced to trust? Your sister? Your father? Your mother?"

"Absolutely." He has no illusions about the way his childhood was different from anything picture-book perfect.

"In a romantic relationship, you have the power. You can walk away, blameless as long as no one gets the last word in. In the army, the code of conduct, the rules demand loyalty and mutual support. It's safe."

"I guess."

Molly scribbles something down on her pad, and John cranes his neck to see what it is.

"You just put down 'trust issues'," he points out.

"And you are so worried about my notes that you're reading my writing upside down." Molly gives him a smirk.

Then, her expression soberes up. "It may feel like a safe option not to trust someone with your heart. It's safer not to make that commitment, if you can't be sure that the other person has your back."

John doesn't reply. He thinks about the moment Sherlock had sat across from him at breakfast and told him exactly what he needed to hear to be able to pluck up the courage to go back to work after his injury.

"John."

Molly's voice tugs him out of that memory.

She looks unusually stern. "As compared to Natalie, does Sherlock have your back?"

He hadn't expected such a question. It doesn't really fit with what they've been talking about regarding Sherlock's ASD, John having to manage him at work and what's going on with the halo. Yet, what appears topmost on John's mind are not those things.

What he's now thinking about is the moment – clouded in the haze of morphine but still clear enough – when the curtains around his HDU bed at Bastion parted – and Sherlock was suddenly standing there.

John has never felt as relieved as he had been that very moment.

"Yes," he replies without hesitation. "Yes, he does."

"You look surprised."

"I'm not surprised because the answer is yes. I'm surprised because I think I've been trying to – needing to – find things in which he has failed, so that I could justify how things have gone. He didn't fail. He didn't falter. Not once. I did. And I just didn't want to accept that."

"Do you think Sherlock might want to hear that you have his back, too, if he has been unsure about the state of your relationship and trying to fix it – and to fix you?"

"Probably, yeah."
"On how steady ground do you think he considers your relationship to be at the moment?"

"I told you about the research, didn’t I? How he’s trying to find some reason connected to him for what’s been going on, or some obscure fix to what he sees as a chemical defect?"

"Yes, I remember," Molly confirms.

"We had this weird conversation yesterday--- I wasn't in the mood to talk. I probably should have. But I can't fix that by sitting here, can I?" John asks.

"Considering how difficult talking about such things is for him, initiating a conversation may have required a huge effort on his part."

"Great," John says bitterly. "Like I said, I've fucked up."

"Fear of abandonment is not something only people on the Spectrum experience, but there is literature I have recently surveyed that points to neurotypical partners very rarely being the party to dissolve a relationship. And, it doesn't appear as though the sole reason is the difficulties they likely would have in finding a new partner and starting a relationship with them."

John nods. Maybe, just maybe he takes Sherlock a bit more granted than vice versa.

He's – again – thinking about Greg and his stupid bird metaphor. He has just told Molly that he doesn't want to test Sherlock's resolve concerning their relationship, but now realises that he has never really feared that Sherlock would walk away. That gives him the upper hand, doesn't it, the confidence that letting out steam won't fracture the two of them? Would it be fair for either of them if Sherlock stayed because he would never give up, no matter how unhealthy they had become together?

Perhaps Molly senses his anxiety and churning thoughts, since she decides to steer the conversation to a slight tangent: "We have discussed the fact that you got engaged but have not talked about the associated life changes with Sherlock. You mentioned your sister, and you've told me she is all the close family you effectively have. Is starting a family something you think about, in regards to your future?"

"Can't say I've ever actively wanted kids. It's a tough life for medical parents and their offspring. I do think it's good that fellow doctors are having kids and it seems like a huge positive thing in their lives, but I never quite saw myself in the middle of all that. No long-term relationships, remember?"

"Do you think you might start thinking about having children in the future?"

A smile slips into John's features when he realises that Sherlock would point out that nobody can effectively predict what they might be thinking next week, let alone for the rest of their lives. "Not really. If it becomes an issue, I'd bring it up with Sherlock, but he hardly seems like the type. I can't really imagine it being a make-it-or-break-it issue with our relationship."

"I'd advise you to have that discussion at some point. Sherlock being aware of your past involvement with women may well make him worry that you may have once been planning your life around a traditional progression of a heterosexual relationship."

"So, I have to spell everything out to him, reassure him 24/7?" John knows he sounds bitter, but sometimes he still can't help thinking he has to put in a lot more work in their relationship than Sherlock does. That is, before he reminds himself how great a challenge being in one in the first place it must be for Sherlock.
"No, but I think you should keep in mind that when it comes to keeping him up to date what's happening in your relationship and what you expect of the future, he will need more information, more detailed explanations and much more reassurance than the average partner. You cannot assume he will pick up on clues, subtle hints, unspoken things. He doesn't have a framework of expectations when it comes to relationships – it's clearly a very novel and treacherous territory for him."

John nods. Maybe it's never going to be a fifty-fifty thing. Maybe he will always have to be the one to take the lead in communicating, in making sure things work out alright, and to be the one to help Sherlock along.

Is that really a burden?

No, he decides. It isn't.

"I just feel like I should go home and talk to him, instead of you," John says, suddenly feeling antsy. "I worry that I'll just keep fucking up when he's trying to talk to me or when he's clearly upset about something and I can't always decipher what he's after or what he needs."

"You are actively working on your issues – and I also mean those involving the both of you – by letting me help you change those thought patterns that have kept you from being open and honest with him. I think you've made a lot of progress this week."

"I don't know about that. Maybe I'm too close to see it."

Molly smiles. "Well, let's make ourselves outsiders, then. Take a step back. What would someone not too close to you think about where you are in your life? How would they describe you?"


"What about happiness?"

"How would the average person know whether I'm happy or not?" John chuckles inwardly; this is exactly the sort of nitpicky question Sherlock would pose.

"Happiness isn’t an either/or, John. It’s a balance. Good things and bad things, summed up. If there is one thing that is really, really right for you, then it gives you the strength to deal with the rest that isn’t. An important, supportive person in your life can have a huge impact in how you cope with stress and major life events. It's just that old patterns and things connected to your past can get in the way of seeking support from them. Maybe your capability to cope with your injury was diminished because you pushed all the support you had away and tried to be an island."

John bites his lip. If he thinks about the whole of his life right now, there's lots of crap that brings him down but, through all of the last three years, there has been a thread that runs through everything and keeps things balanced.

That thread is what saves even the worst workday. It's what he always loves coming home to, save for the times when they've had a fight.

That thread, that one consistent, beautiful, gorgeous, genius thing that he loves more than anything is Sherlock.

John thinks back to how he'd felt before leaving Natalie in London; he'd felt an immense sense of
responsibility he hadn't asked for, over the happiness of someone else. It was too much, and he didn't love Natalie enough to take the plunge.

He loves Sherlock more than enough to fight for the two of them.

He wants to let go of the past, and maybe he could do that, now, if he no longer feels the need to punish himself through clinging to all the bad stuff that has happened. He wants to make peace with it, to move forward, to drain the poison that has been making him act in ways he can't control and hasn't been entirely aware of before.

Maybe he has fucked up, but he hasn't yet lost everything. If he had a chance to live through the past year again, knowing all he does now – if he could choose between trying to escape, and staying with Sherlock to try to sort through his issues, he would choose Sherlock.

And it's about bloody time he started acting like it.

-o-o-o-o-o-

An hour later, John pops his head into the sitting room to announce his arrival home. “Have you got any requests for dinner?”


“I’ll cook us an omelette. I think we’ve got some bacon in the freezer. How’s that sound?”

“Fine.”

John rummages through the drawers of the freezer and then puts the bacon into the microwave to defrost. Then, he opens his laptop on the kitchen island to skim through his emails while it thaws.

The ping interrupts him, and he removes the streaky bacon; he will chop it up fine and sauté it with some mushrooms and herbs to stuff the omelette.

“Okay with you if I have a shower before cooking?”

“Sure.” Sherlock’s gaze stays focused on the journal he’s reading.

John heads for the shower.

He wouldn't have expected to feel more energetic after seeing Molly for the third time this week, but today's session had felt like shaking out some cobwebs and brightening things up a bit. It must be good to get his grievances out in the open in the therapy sessions, instead of his temper boiling over at home. Sherlock shouldn't be his only option as a sounding board since some of what John seems to need to say out loud would probably feel hurtful to him.

Maybe even some of the suffocating pressure that has been his constant companion for the past months has begun to recede. Things aren't exactly back to normal, but they're changing for the better. Even sex is back on the table, even if the execution is a bit dodgy. But, it'll be fine. Once the halo's gone, even that will probably be fixed.

All in all, John is in a better mood than he's been in a long time when he opens the plexiglass shower door and steps into the main part of the bathroom to dry off. He then drapes the towel
around his waist, tucking the end underneath the edge so that he won't have to hold it up. He gets an idea to light a fire in the sitting room fireplace and to pour them both a small glass of wine after dinner. He had sternly warned Sherlock against having anything to do with it in case he caught an ember in his clothes and couldn't see where it landed due to not being able to look down. Two days earlier, a shirt button had come loose and slipped down his neck after he had already tucked the hems into his trousers, and John had had to find it for him since he can't look down.

He makes a mental note to try to coax Sherlock on the scales tonight. If he keeps losing weight, the halo vest should probably be readjusted to fit snugly. John is sure that Sherlock's ribs had felt much more prominent than before when John had last been washing his back.

After putting on a T-shirt and his jeans, John pads to the kitchen, relishing the thought of a cup of tea while he cooks. But, when he reaches the kitchen island, his breath hitches in his throat.

Sherlock is standing on the opposite side, John's laptop open in front of him on the counter. He has gone pale, his fingers hovering above the keyboard are shaking and there's a tear flowing down his right cheek.

He looks absolutely devastated. Paralysed. Shocked into silence.

"Sherlock?" John wastes no time in circling the island to get to him. "Sherlock, what's wrong?"

Sherlock seems to only now realise he's there. His eyes shift to John, more tears now streaming down his cheeks and sticking to his lashes like dew on a spider's web.

"John," is all Sherlock manages to utter before succumbing into a shuddering onslaught of racking sobs, his eyes squeezing shut. His palms drop onto the counter on either sides of the laptop and slide forward a bit, leaving him bent forward – if it weren't for the halo vest, he'd be hunched over.

John hasn't ever seen him like this, not even at Molly's office. He grabs Sherlock's elbows, tries to push him back into standing. "Sherlock, tell me!" he orders, his tone rough and demanding in its desperation.

Chapter End Notes

No cliffhangers; you get to click straight through to the next chapter.
John gets no answer, since Sherlock doesn't even seem capable of getting his breathing back into any sort of sensible rhythm. He's shaking violently as he sobs, but when John tries to wrap his arms around him, Sherlock shoves him away.

John is utterly confused and close to panic himself, but somehow it occurs him to look at the laptop screen for answers. He'd left his email client open before going to the shower and it appears that a just arrived message on the screen must have caught Sherlock's attention:

From: f.calvert@msf.org  
To: john.watson@kch.nhs.uk  
Subject: availability  
Message: We had good talk in Bastion about the Kasai project in the DR Congo. I can confirm there is spot open in March for six months, you would be very good because we need anesthetist (mostly neurological). Please let me know soon, so I can confirm to team in Mbuji Mayi.

Francois

"John," Sherlock breathes out, his voice hoarsely thick with tears. "John, why?" he asks, sniffing wetly, the following exhale shudderingly hysterical. "Why would you----" he tries, then chokes up again.

John curses under his breath – curses the damned halo vest, curses that he can't wrap his arms properly around Sherlock's shoulders and press his curls against his chest. Instead, he snatches one of the bar stools closer, plants his bottom on it and firmly grabs Sherlock's biceps just outside the wool lining to drag him closer. He practically sags under John's hold, as though there's nothing holding him up except for the plastic vest.

At least he doesn't push John away this time.

"Love," John calls out. "Listen to me."

Sherlock doesn't seem willing of doing so; he angrily reaches past the halo bars to swipe at his eyes at the tears that won't stop coming, then clenches his hands into fists, nails digging into palms, knuckles white. John slides his own palms down to cover them.

"Sherlock, listen. I'm not going. I am not going anywhere! That prick pestered me for a week at Bastion about that project, regardless of whether I was even listening. He went back to Belgium before I got shot," John scrambles to explain. "He refuses to understand a no, which is something I told him many times. I'm not leaving." He grips Sherlock's biceps again to shake him slightly. "You have to believe me. Sherlock, I'm not going!" he pleads.

At first, a part of him is shocked at how strongly Sherlock is reacting to this, but then it hits him
that he should have expected it. Molly has kept asking him if Sherlock knows these things: that John didn't leave for Afghanistan to abandon him slowly, that he's not regretting coming back, that he still wants to be together. He really should have expected this, because not once has Sherlock shown his fear and horror at what had nearly happened when he was shot. Not once, not to him. He must've been so scared, so devastated, not knowing what to do. God, what that flight out to Kabul must have been like – John can't even imagine being able to stay even moderately functional if their roles had been reversed. Sherlock had walked into Bastion, looked after him, even helped around at the hospital; not crumbling, not breaking down, never getting angry, never blaming John for anything. He must have been under an astounding amount of pressure, and John has not been able to fully consider the enormity of it before now.

"I keep--- I keep trying to imagine---" Sherlock inhales sharply, only barely getting the words out, "---not being together anymore and I just can't----" the rest gets choked into a sob.

"I'm not leaving you!" John repeats, and his voice breaks a little at the end. He seems to be speaking to deaf ears. He has never seen Sherlock utterly defeated like this, and it breaks his heart that it's his fault. He must now face the fact that he did this. If he doesn't, he's suddenly certain that they don't have a chance in hell to get through this.

He lets go of Sherlock's shoulders and wraps his arms around his waist instead, fingers gripping and twisting the flimsy fabric of the back of the thin, old T-shirt that covers the vest. He holds on so tight that his bad shoulder begins to ache. "I'm staying, love, I want to stay, I will. Always. I'm never leaving you again. It's not your fault. I'm sorry. I love you, and I'm sorry for all of it. I'm staying."

This could be placation, a guarantee he can't give, just buying time and trying to defuse the scene, but it isn't. He means it. He means every word. He knows that, now.

Sherlock carefully reaches behind his own back to extricate John's grip from his shirt. He then retreats back, far enough away so he can look John in the eyes.

"Why? Why would you stay?" he asks, every syllable thick with confusion and what John now recognises as barely concealed fear.

John realises that Sherlock clearly needs to know this right now, even if he must fear what the answer will be.

"Being here is not going to fix what took you to Afghanistan," Sherlock says, grabbing a piece from the kitchen towel roll to blow his nose. "You've been so miserable since you got back. It's unfinished business, I understand that much." He takes a deep breath and stands a bit straighter. "You mustn't stay because of me and this wretched thing."

"I'm not," John hastens to promise; "The halo will be gone soon. I just want things to get back to how they were before. I want to be with you forever," he pleads, and hates himself for stammering in hesitation a bit at the end. Why has he not said this before, and why does doing so only feel possible when there's a crisis?

Forever. Isn't that what he had promised, when he had slipped a ring into Sherlock's finger?

Isn't forever what he had asked for?

It scares him, that word, but no longer so much that he'd walk away to escape the feeling.

Sherlock blinks away more tears. "Why would you?"
“Because I love you, you idiot. And, I owe you an apology for not making that clearer. I’ve been---
" John hesitates, grits his teeth, looks for the right words and they do come, and he hates them but
they still need to be said: ”---absolutely crap at being with you and giving you what you need, ever
since we got back from Afghanistan. Maybe even before.”

John expects for the confession he’s just made to hurt like hell; he braces for a tidal wave of self-
loathing.

It never comes.

Instead, he feels relief. Relief that they're finally talking about this. That it's out in the open. That
he knows who to blame, now, even if it's himself.

If the two of them can get on the same page, then all that has gone wrong could be dealt with and
maybe then he could move on. They could move on – it's only now John realises how stuck they
both are in the events of the recent past.

In Afghanistan.

In the days right after.

Maybe some of the days before.

Molly’s work has made John more aware of his behaviour than he feels comfortable with
acknowledging just yet, but he doesn't have a choice if he's to fix this. He is now looking right at
the person who has borne the brunt of the anger into which his head has translated everything he
hasn't wanted to deal with.

“So, why weren’t you angry with me?” John asks. "Why did you let me go without any protest in
the first place, and why didn’t you tell me I was being horrible when I got back? Why are you even
trying to understand now? You don't owe that to me, not after everything.”

Sherlock looks a little bewildered by the question. John waits for him to process it.

Sherlock blinks, frustration crinkling his forehead. “Because I love you. How could I be angry?
You came back alive. I was so grateful for that fact that nothing else mattered. Why?”

There is something so shockingly innocent in that statement of unconditional love that for a
moment, John finds it hard to reply. "You weren’t angry about me going?” he finally asks.

Sherlock is now clearly frustrated. “We’ve had this discussion. You needed to go; I respect that. I
had to respect it then; I do now. You needed to know if this…” he gestures vaguely between the
two of them “...and what you do at King's are enough.” Sadness floods back into his expression
full-force. “Because you were shot, you will never know the answer to that question, and I’m sorry
about that. You came back home so furious, at everything. You were angry enough for the both of
us---” He suddenly stops. Opens his mouth to continue but then stops again.

John needs the truth. “What is it? Just say it, Sherlock. I promise not to bite your head off.” He
gives a rueful smile. Molly was right; he needs to listen more, really listen. Maybe it has felt so
good talking to Molly because she makes him feel heard, and he wants the same for Sherlock, who
doesn't have anyone else to talk to about these things than him.

Sherlock, who isn't even able to look straight at him right now. “Are you still angry with me?” he
asks John tentatively in a stuffy voice.
He looks a mess, but he's John's mess and right now, John wouldn't have his life any other way. “Angry with you? What the hell for? I'm the one who's been the bear with the sore head.”

“For not being able to help you, for doing and saying all the wrong things. My failure meant that you couldn't see a way out. I failed you and you had to rely on Lestrade. One conversation with him and you seemed to be so much better; it made me realise just how little I have been able to help you. I'm sorry, John. I really am. I wish…” Sherlock's voice breaks and he takes a quick breath, “…that I could take half the responsibility in this relationship just as you have been expecting, for the concrete things and the other things. I wish I could be the person you need.”

Sherlock’s shoulders are held in place by the halo vest, but John can see the slump of defeat in his posture anyway. He aches to hold him, but if Sherlock needs the concrete space between them right now to have this conversation, so be it.

"I'm sorry for inadvertently giving you reason to believe you could change me," Sherlock says. "Lots of people have tried."

In that moment, John realises the depth of the cost of his anger has been for Sherlock, and it's worse than he had had the guts to imagine. “Hey, stop that.” He reaches out and puts a hand on Sherlock’s arm. “You’ve done nothing that requires an apology.”

Before he can continue, Sherlock interrupts. “That’s just it; I’ve done nothing to help, either. I’m useless at all this. I just don’t know what to do to make you stop being angry.”

“You're not a bloody therapist and no one is expecting you to do what Molly's trying to do. It's not your job. In all honesty: I’m not sure anyone can stop me from being angry, Sherlock, but I'm trying to understand why and to control it. It’s kind of ingrained in me; I’m a product of a lot of things, including things that happened way before I met you. But, one thing you can be sure of: I’m not angry with you and I don't want you to be different. You have helped, and I can see now how hard you've tried, I really do. You have helped, more than you can ever imagine.”

Sherlock scoffs. “That’s not good enough. I should be able to make a difference to you, the way you always do for me. I just seem to screw things up even more. The last time we were in bed I couldn't even---”

"No," John says sternly. "You are not blaming yourself for that. I'd be an arsehole to want to have sex with you that wasn't good for the both of us! You haven't done anything wrong; you've just been yourself, and that's fine."

Sherlock waves a hand at the halo. “That is precisely the problem; I am myself and it's decidedly not fine. There's no point in dwelling on it, but I think I'm angry and frustrated, too. Just not at you. At me – for becoming a burden just when I should be looking after you.” He squeezes his eyes shut and bites his lip so hard John fears that there'll be a bruise.

“You didn't get hurt deliberately! It's not your job to fix me, and what you've done is--- amazing. And, you’re sure as hell not a burden. Never have been.”

“Yes, I am. As you phrased it, you are forever having to clean up my messes at work, and now it’s the same at home. I may not have much experience with relationships, but I do know it is customary to expect that one partner looks after the other when they are poorly, just as you are doing. I would have assisted, if I was so much as allowed even to see your shoulder, but I must have failed to gain your trust for that.”

John wants to kick himself. Why the hell has he not once considered how his reticence might feel
like for Sherlock? "No, that was all me! That was me hating the sight of that thing and wanting nobody else to look at it, ever."

Sherlock dismisses his argument with a flick of his wrist. "The Congo, Afghanistan or bloody Hull – you don’t have to run away to another country, you know; I will accept no as an answer. If I were you, I wouldn’t want to stay here with me." He turns away, presumably so that he doesn’t have to look at John. After taking a moment to compose himself, he then regards John with resignation. "You said you want to get back to what we were, what we had in the beginning. As it turns out, that’s not possible," he announces.

"Why not?"

"According to at least a half dozen peer-reviewed articles in reputable medical journals, the biochemistry of love moves through phases: the first is attraction, then comes obsession and initial bonding, each with concomitant release of hormones and neurotransmitters. One of the articles actually used the colloquialism *honeymoon phase*. Apparently, it never lasts. It’s replaced by the biochemistry of long-term bonding and commitment needed to sustain an established relationship when sexual activity diminishes and is replaced by a different kind of intimacy."

"I’ve read similar stuff in magazines at the barber's, and without such heavy endocrinology, Sherlock. I told you to stop reading all that. What’s your point?"

"It’s not happened. Even if you say Afghanistan isn’t about me, it’s become clear that I’m chemically defective. I must have been unable to move our relationship into the next phase.”

John touches the tips of his fingers to his own forehead and closes his eyes for a moment; he has no idea how to even start defusing what he’s hearing. "What do you mean that *you* haven't been able to move our relationship to the next phase? It's not something people are even aware of; it's not something one person *does*, it just happens!"

"But there must have been something wrong with us, with *me*, of course there is, that's obvious, but perhaps I didn't want to accept that I never had a chance of any kind to----"

"That’s not true, Sherlock. Being apart from you, while I was out there, I missed you terribly, before I got hurt. I missed *us* every night when I went to sleep alone in my hotel room or that damned office at Bastion alone. It made me realise how much I had come to rely on our relationship, but when I got shot it all sort of turned against itself."

"You missed an idealised image of me based on the attraction phase. I was expecting things to continue the way they had been, so I must not have been behaving the way someone in a stable phase of a relationship does. When you came back, you were confronted by the real me and how I wasn’t able to adapt, or to help you get better.”

"Sherlock…." John groans. He needs to knock this idea on the head. It's obvious, now, that Sherlock has been blaming himself for John's depression and anger, taking it on his shoulders as if he was the one causing it instead of considering that things in John's life, things that have little to do with their relationship, might be the cause. John is forced to admit that the deduction is not completely outlandish; it's not as if he has volunteered any proper explanation as to why he had left and why things have gone to hell even after he has physically recovered from his injury.

Determination kicks in; his jaw dips as his shoulders set. "You’re wrong; I was in a bad way and so pissed off with my situation that I just shut everyone out. That was my mistake, not yours."

Sherlock turns around and those weirdly blue and green eyes are full of resignation. "It’s alright,
John. I know that I’m just not any good at this. All the innate skills others seem to receive at birth, I can’t manage. Many of the things you expect of me do not even occur to me. Admittedly, we have both been self-centred lately, but for you that is a transient state. I am uniquely ill-equipped to take into account the needs of someone else. You want to know why I’ve never even attempted a relationship before you came along? That’s because I never saw a snowball’s chance in hell of succeeding in one, and nobody ever showed up who would even have wanted that. I hate myself too much to want to inflict me on anyone, let alone someone I love. Even during the early days, I was just waiting for you to come to your senses and go."

John is too shocked by this revelation to know how to answer.

Sherlock is in full flow now and takes advantage of John’s continuing silence: "In hindsight, Afghanistan really should not have even been a surprise. Such a convenient device of separation could potentially lead to an elegant dissolution of a relationship without overt drama. Quite ingenious, really, this tactic of yours; you’ve used it before on Natalie Palmer."

John's eyes go wide. How the hell does Sherlock even know about Natalie? John is sure he hasn’t mentioned her by name. "Just hold on a minute here----"

Sherlock leans his hip on the stove, standing between it and the pantry as though seeking shelter in the narrow space. He gestures back to the laptop on the counter. “If it isn’t Afghanistan or the Congo, then something else will come up and offer more than King’s. Or, someone who isn't me will come along for you and provide what you need.”

John stands up even straighter and leans a fist on the countertop. How can he convince, with just words at his disposal, someone who has never believed he could be anybody's first choice – or even a choice at all? “No. That’s not going to happen. Neither of those things is going to happen. You’re stuck with me; not going anywhere.”

"Then why? Why leave in the first place? If it had little or nothing to do with me, why not engage me in the decision-making, or the analysis of why you needed such a break from your life here?"

John knows he's been cornered. He can't put this conversation off any longer. It will probably hurt, but anything less than the truth will sound like lying and placation. "I didn't think you'd understand. You're so---"

"Yes?" Sherlock drawls, crossing his arms. He has steeled his expression into a rehearsed sneer, probably to protect himself from accepting what John is about to reveal. "What am I?"

John needs to salvage this, and to do it fast. Think, you idiot! "First of all, you're expecting me to have been very self-aware of what I was doing and why. I wouldn't be talking to Molly Hooper once a week if that was the case. I didn't talk to you, because I didn't think you could relate to someone who wasn't as driven or perfect as you."

Sherlock blinks frantically. The sneer is gone, replaced by an expression John adores, because he knows he's one of the only people who can bring it forth. It appears when someone takes Sherlock completely by surprise, in a good way.

"I'm--- perfect?" he splutters.

John rubs his left eyebrow, the right corner of his lips curling up into a smile. "Yeah. You bloody are. Especially next to silly old me."

Sherlock is frowning terribly hard and John wants to kiss those crinkled lines on his forehead.
"How am I in any way perfect?" Sherlock pronounces the word as though it's a morsel of a food he hates that has suddenly landed in his mouth.

John glances at the ceiling and holds up his forefinger. "Let's see. A: you look like an underwear model."

"I decidedly do not! I have been informed many times that I am angular, oddly proportioned, too thin and altogether quite strange-looking."

"Was this when you were, say, about fourteen? Still in the throes of puberty, not really having reached your adult shape?"

Sherlock snaps his mouth shut.

"B: you're obviously some sort of a genius, and your skills in your field are something people would expect to see in a fifty-something, world-renowned chief of neurosurgery."

John chuckles when Sherlock simply raises one brow which easily translates into 'so?'

"You know so much, and not just about your own specialty. Thank fuck you're not an anaesthetist; you'd constantly make me look so damned bad. And, the icing on the genius practitioner that you are is the fact that you've got a stellar academic career as well."

"I don't see what this has to do with you."

"Well, you don't see me putting any of those things in my CV, do you?"

"I don't understand how my career has any relevance here."

"You don't notice, because you're the one who has all these things. Anyone else around you might get a bit... envious."

"I have done nothing they could not have done with diligence and hard work."

"It only looks like that from your perspective. We don't all have your bloody IQ. And, I sure don't have that talent or the determination to sort things out the way you have."

"You went to Afghanistan because you think I'm too intelligent?" Sherlock is clearly trying hard to understand. At least he doesn't look insulted.

"No. Part of the reason why I went was that I wanted something that was just my own, where you weren't everywhere. I didn't want to feel like my biggest achievement was being with you. And, I didn’t really understand or think about how it would feel for you if I signed up for another tour, not the way I do now."

"So, it was about me." Sherlock's face falls and he starts chewing on his lip.

"No, because you have done nothing wrong! Think of it as me having a bit of a midlife crisis of confidence: I just needed to feel like there was a place for me somewhere where I could be defined by something else than being your significant other. It doesn't mean I don't want to be with you. Stuff you've just told me says that you compare yourself to others, too. It's hard not to, isn't it? You’re the one who cares enough to try to figure out the biochemistry of love and then comes up with the daft idea that it’s somehow your fault when I’m the one being a dickhead."

"You’re not at the middle of your life, at least I hope not. I…” Sherlock runs out of words for a
moment, and John lets him take his time. Eventually, he continues: “I don’t understand you. *Perfect* is not an apt description for someone like me – someone who makes mistakes with people, and whose proverbial *messes* you have to clean up. Your use of the word ‘perfect’ is an ideal that I can’t live up to, as you have pointed out on numerous occasions.” He's clearly becoming deeply upset again.

“You are perfect *for me.*” John lets that sink in, before continuing. “I’m not saying that you are perfect as in *normal.* No, so not what you are thinking. I don’t want you to hide who and what you are, which is a crazy a bundle of contradictions sometimes. If all I wanted was the arrogant genius brain surgeon with no time for anyone else, I wouldn’t have ever fallen in love with you. I love you for the whole of you, every little thing – from those ridiculously lush curls that you let me run my hands through, to the shambles of our home life, all the way to that little crease between your eyebrows that you show me when you get confused. Not the *ideal* you, not the one you like to project to the outside world, but the *real* you, that's what's absolutely perfect for me.”

Sherlock blinks, speechless.

It's just as well, because John is far from done: “I love you for your determination. I know you've worked harder than anyone, exactly because you don't see yourself the way others do: unattainable, distant and frighteningly smart. That’s a disguise to protect you from others. But, you've not been afraid to let me see the real person behind that. You don’t have to be afraid to do that now, or think you have to change. Or be less than who you are.”

Sherlock finally regains some of his composure. "No matter how hard I work, some things are beyond my grasp, because they are things I can't deal with, or learn. Things like how to make *us* work as a couple. You may claim you accept these faults of mine, but----"

"That's where you're wrong," John tells him. "Really wrong. You're not supposed to make *us* work; I'm supposed to do half of that. Maybe more. What you've done for me--- I never expected anyone to care enough to even try. Maybe you don't talk about your feelings or always pick up on social cues but hell, the stuff you do is so much bigger and harder; it's stuff anyone else would have run a mile from. You came to Afghanistan to help and to bring me home," John says pointedly. "You were my knight in shining armour and I told you to piss off."

"I did what I needed to do," Sherlock dismisses.

"No, you did what only a very strong person deeply devoted to another person would do. *Could* do. I didn't know how to deal with that back then. It made me feel pretty damned useless and embarrassed. I didn’t think I was worthy of being loved, not by you and not by myself either. So, I just let, no – *made* – everything go to hell. That's still---- difficult, thinking about it. I didn't want to have a long, hard look at any of it; I thought it would just go away, but turns out I was taking it out on you. You have nothing to apologise for. *I do.*"

"You've had a difficult time," Sherlock dismisses.

It breaks John's heart that Sherlock doesn't seem to think he deserves an apology for the way John has acted towards him. "I've had a difficult time, yes, and I made it worse by letting you become my punching bag. Nobody deserves that, and it didn't help either of us. You, of all people, sure as hell don't deserve that."

Sherlock looks like he has a question he doesn't know how to formulate.

John thinks he knows what that question is, but something tells him he should let Sherlock ask it yet again. He should ask and this time, John is going to answer it. He has already tried, but wanting
to regain his professional confidence is only a small part of the truth. Besides, it would sound awfully petty if that was the only reason.

He owes Sherlock the full truth. Even if it means admitting to doubts about their relationship.

"Why didn't you tell me this before? Why not try to resolve these things right here, at home?" Sherlock asks. "Why did you have to leave?"

_Here we go._ John takes a deep breath. "Out of the two of us, I'm the one who's never been good at being with another person long-term. I never wanted to be responsible for someone's happiness, until you came along. I think I panicked a little, alright? I've never felt so--- loved, as I have with you, and it scared the shit out of me, being that important to someone. It still does, but it's absolutely worth it.

He loves Sherlock so much he wants to face that fear. He knows that now. "Being with you, being _loved_ by you so much is just about the only thing I felt proud of when I first got back, but it made me feel guilty. I didn't think I deserved it, after what I put us through. I didn't understand how you could jump into this relationship with both feet so easily, and I had a much more difficult time adjusting into being with you."

"It was not my intention to make you feel guilty."

"I know. You seemed so sure, you've always seemed that way about us, and I wasn't, for reasons I didn't understand, and that made me feel like crap. Your intention was to help, and even though you don't believe it, you really did. You gave me room to come to terms with my stupidity and get my shit together again to the point where I could go back to work, but for some of the other stuff I needed a different kind of help. Maybe I still do; I'm certainly going to continue seeing Molly. It's not a failure if you can't fix everything – no one can, and I have to do most of the work myself, anyway. At least that's what she's trying to get through my thick skull."

"I've always detested that idiom. The average thickness of the cranial bone---" Sherlock trails out when John gives him an eye roll with a smile. It's not all deflection when Sherlock hurls himself off on these factual tangents, it's simply _him._

"Based on what you've shown me over the past three years? It's total bullshit – the idea that you're not good at this, that you can't learn this stuff. You try so damned hard – nobody's ever paid me so much attention in a relationship," John tells him.

"That's because I'm constantly having to guess what's going on. You make mistakes, I get anxious and it's exhausting."

"I know it is. But, you're doing well."

"Well for _me._"

"No. At some of that... relationship stuff, hell, you're so much better than most people. Better than me, that's for sure. When you decide to put your effort into something, it's a hundred percent. You don't second-guess your decisions when it comes to wanting to be with me; you're all in. We all mess things up sometimes. It's not a race or a competition. The important stuff, the stuff that counts – you do that for me. Always. It's not about leaving your mug in the sitting room; you do the big things right."

"You're always trying to convince me I can do stuff others have told me I'm hopeless at."

"That's because I like to watch you take those idiot sceptics down a peg by proving them wrong,
you genius git," John teases. “You always do. You don't scare me anymore. Being us doesn't scare me anymore. I understand things about you now that I didn’t before. I want nothing more than to be here. I want you, because of who you are, and you've put me off everybody else. You'd be the first to tell me they're all boring idiots and that's true, compared to you.”

"You know what The Botch said to me before you left?"

"Mm?" John hums inquisitively, a little surprised at the tangent.

"'How'd you of all people get Watson to stick around for so long?'"

"That's a bit thick, coming from a guy in his third marriage."

"That is precisely what I pointed out to him."

John chuckles. He grabs Sherlock's wrist to pry him away from the counter and places their joined hands on the kitchen island. "We’re in this together. I bloody love you even when I’m being crap at showing it. Especially then.” He tilts his head, bends his back and leans in to press a light kiss on his partner's lips. Damn the halo.

Finally, Sherlock smiles.
The Fifth Saturday

Chapter Notes

All we can say to summarise the wonderful reader reception to the last two chapters is that we love this fandom so damned much.

We hope this chapter will (also) leave you with plenty of feels.

John would never have thought that the sight of Sherlock frowning at a light drizzle of rain and opening an umbrella could fill him with such relief and joy. He opens his own and follows his partner down Cathcart Road towards the cemetery.

Who would have thought that the solution to Sherlock's reticence to be seen in public with the halo could be solved so easily – all they needed was an excuse for an umbrella! John had, jokingly, once suggested a large enough woollen hat to hide the halo in, to which Sherlock had replied that a paper bag would provide the same level of grace and the added advantage of anonymity.

John had meant to return to the subject of the drugs and everything related to them the day before, but then the email fiasco had happened, and Sherlock had seemed too drained after their talk that John had thought it best not to dig up any ghosts. They'd spent the evening mostly on the sofa watching the telly while quietly enjoying each other's presence. John had fished out a soon-to-expire carton of ice cream from the freezer, and Sherlock had accepted some, even suggesting they crack open a small bottle of dessert wine. John had said yes, since a small portion was never going to bother Sherlock's now-improved balance that badly, and he isn't on any medications that would interact with the booze.

The bottle had been given to them by Sherlock's parents for Christmas. John has met them once when they had been visiting London; they had stayed at a hotel and the four of them had gathered together for a fancy dinner before Sherlock had joined them for an opera performance. The Holmeses seemed nice enough, but Sherlock's behaviour towards them is dismissive and distant. There are clearly things there, old things that make him refuse frequent contact. He seems meticulous about either being on call or booking a trip every Christmas so that he won't be available to attend what he calls the standard family gathering in Sussex where the Holmes parents now live. 'Not my thing, John, all that tinsel and eggnog and having to put up with Mycroft'.

Sherlock can't meet John's parents, since they are no longer among the living. His mother had succumbed to ovarian cancer when John had been in medical school. Sherlock had briefly Skyped with Harry once; he'd been curious and barged into the conversation she and John had been having while John had gone to open the door for room service when they'd been at Lake Garda.

'Gosh, our Johnny's traded up, hasn't he, switching to blokes,' Harry had joked, voice thick and bitter with a hangover.

John had then returned to find Sherlock leaning over the keyboard. 'I see you've met,' he had replied.
with a sigh. He had been planning to invite Harry to London to meet Sherlock, but it never quite seemed like the right time. The sober enough time.

'Good luck, then, Sherlock Holmes; this one's got a shit track record with keeping people,' Harry had said, and John had slammed the screen down. He'd been so mad about Harry taking out her own failures and frustrations on him like this yet again that he'd grabbed his swimming trunks and made use of the hotel pool until exhaustion had washed over his irritation.

They both have a shit track record with keeping people, him and Harry, and over the years, John has certainly let her hear about her tendency to chase away the people who have been good to her. He has been reluctant to admit that it may be a Watson thing, and not just a Harry thing.

Molly thinks he can change lots of things that he hasn't been doing right. This is one that John wants to work on, sticking around.

As he had told Sherlock, it's bloody frightening – letting someone become important. Letting them be reliant on you. In the army, he knew when that responsibility started and when it ended. At work, when his shift ends, the patients under his care will be transferred to a colleague. He likes that deadline, that escape route, that endpoint, that promise of freedom and choice.

With Molly, they have now explored whether that is what he had tried to build with his deployments. But, the more John has now thought about it, the bigger the difference between Sherlock and Natalie feels. Not wanting to be with her was why he left her. When it came to Sherlock, he had not been running as much from anything, but attempting to head towards something that would make him feel good about himself and what he could do on his own. He’d not thought enough about how it would affect Sherlock; he knows that now. And that is what makes this relationship different to everything else: love makes him feel responsible, in a way that doesn't end unless that love stops.

It certainly hasn't stopped.

When he looks at Sherlock, he's more certain than he is about anything else that it never will. That certainty isn't a hundred percent, because nothing in life can ever be certain.

But, it's plenty and it's enough.

It still scares him, what Greg had said about Sherlock not being very well equipped to survive without him. But, John knows he can carry that thought. He can be that sort of a person, if he chooses to. The person who commits commit to being together as much as his partner had committed to him right from the start.

He hurries to catch up to Sherlock before he crosses the intersection of Cathcart Road and Ifield Road and turns a corner. The edge of John's old umbrella flaps a little as a gust of wind hits them.

Sherlock lowers his umbrella a good five inches when a dog walker passes them.

"You look like you're playing detective, tailing someone," John laughs.

"She was exactly the sort of person who would be prone to staring," Sherlock replies indignantly.

"I think she was just interested in getting her dog home."

They continue to the cemetery gates and pick a path along the edges of it. It finally stops drizzling, so John folds away his umbrella while Sherlock stubbornly holds on to his own.
"I think we need to make a plan," John says.

"What are you talking about?"

"For the days when everything sucks. When that thing is driving you round the bend. It was good, what you did, letting me know that things were coming to a head. When you wanted to use."

It's weird how taking the big plunge once – talking about all the difficult things – has made John feel like they could maybe talk about other stuff, too, around which he's being tiptoeing.

"I expected you to--- well, react more. Be more angry; to shout at me," Sherlock admits. "It was terribly hard to try to anticipate your reaction."

"I'm not going to lie; I was surprised, and a bit scared, for you. But, you haven't used in years, and that's what matters. We need to have a plan so that the risk stays low of you taking up something else than nicotine patches. Have you got any on, now?"

"Two. And, before you get on your high horse, I will quit using the patches once this debacle is over. Possibly before."

"What else have we got that can help? Did the---"

"Yes, John, what you did for me worked, but the effect was lamentably transient."

"That's still on the table. And it doesn't mean we need to do anything unless you want to; I'd hardly be horny stuck in that thing, either."

Sherlock's steps halt, and John suspects that it may actually be a relief to him that Sherlock can't easily meet his eyes unless he turns a good ninety degrees on his feet. "I don't want favours. That one time worked, because my frustration level had reached a point where arousal was just one outlet for all the excess energy, somehow."

"It's not a favour if I love doing it," John tells him and gently bumps his elbow against Sherlock's. "I will never get tired of seeing you like that."

A thoughtful hum is his only reply.

"What else helps?" John asks. "Took you weeks to get to that point. What kept it at bay before?"

"Exhaustion. You, providing distractions."

"How?" All that John can think of was the sex.

"Just... You do, alright?" Sherlock sounds impatient and frustrated. "You notice. It helps, somehow, you knowing."

John takes a moment to parse all this together. "You mean how I can tell when you're upset?"

"You notice it. Even at work, when nobody else does."

"I guess." John finds he's quite surprised. It must not be a very big help, this, when it comes to drug cravings and Sherlock currently not being able to do surgery, but it's certainly something he hadn't expected to hear.

"You make things easier. It's difficult to explain how. At King's, you draw in some of the attention that would otherwise be on me, a bit like a lightning rod. At home, you act as though things aren't
as bad as they feel, you act as though I'm not---" Sherlock pauses, sounding as though he's surprised himself at what he had been about to say.

John doesn't suggest anything, doesn't put words into his mouth. He simply continues trying to match Sherlock's brisk pace – he always starts walking faster without noticing when he's thinking or something is bothering him or when he's planning an operation in his head that is minutes away from starting. It's like watching an Olympic athlete preparing for their turn.

"You're there", Sherlock finally says. "You take up some of the space in my head so that I don't fill all of it, so that my brain doesn't get to clutter it up with all the nonsense that comes with me being me. You give me focus, John. You keep me right."

John is tempted to say thank you, because this is bound to be a very big compliment. Granted, it's a strange one, but he's reminded of how Sherlock had described himself during their fight on that first halo Sunday: that he is not good at taking others into account, that he's selfish, that they've both been wrapped up in their own heads.

Sherlock does take him into account; as it turns out, taking John into account may help him cope with himself in some odd, sherlockian manner.

"Just tell me, when it gets difficult. You don't have to say anything specific out loud, just... Like you said, I can read you."


"Anything else?"

"I like the massages. The physical contact distracts me from thinking. And the hair thing," he adds quickly and quietly.

"The hair thing?" John chuckles.

"Don't you dare pretend you're not enjoying getting to do all that after I insisted for so long that you have no business getting involved in my routine."

John scoffs. "Consider me deeply honoured to be allowed to rub on that posh shampoo of yours."

"Why are we discussing this?"

"Because you started it by announcing that you like the hair thing."

"You're annoying."

"Who would annoy you if I didn't do the job?"

They take a left towards the main avenue of the cemetery. Raindrops are back, and picking up their frequency, and John increases their distance so that their umbrellas wouldn't keep bumping against each other.

"Twelve weeks is a long time," Sherlock says after they've stopped briefly to sit out a passing squall on a wet seat on an old stone bench under an oak.

"We'll manage; you're nearly half way now." John is feeling more optimistic than he has for a very long time.

"Do you think Laura will insist on extending my leave beyond that?"
"You'd have to ask her. There'll be physio, and your neck muscles will probably be weak, might not be able to stand all day in the OR. And, the neck brace will limit your ability to look down."

"The range of motion will still be much better. And monitors, screens and all that can be positioned to suit my needs."

"Sure."

"I dread the fact that I won't have operated in close to three and a half months. Or played the violin. Motor skills get rusty."

"Are you really worrying about that? I'm sure you've already developed a great enough routine that you'll jump right back into it."

"It's just that whenever I have been off duty for a significant time, the last days before returning are always ruined by stress. Doesn't that happen to you?"

"Nobody likes going back to work from holidays, that's for sure."

"Not what I meant. I never use up more than two weeks at a time if I can help it – any longer, and the anxiety builds up before returning. It's biochemical, most likely. At work, I am continuously stimulated by a basic stress level, and the related hormones that prepare a brain for action get used up. With no actual danger and thus no proper outlet for their effects during holidays and other sorts of leave, they tip me into anxiety and pointless worrying. It may be part of the reason why I can't keep things in perspective between us."

John frowns. "At least you know how it works. I've heard colleagues joking about whether they still know which end of the laryngoscope to stick in after holidays. And, you should stop beating yourself up about us."

"You must have felt similarly stressed before leaving for Afghanistan?" Sherlock asks. "You knew you would be going into a warzone with limited resources at your disposal, and that you hadn't used some of the skills you would need for some time, and that you'd have to use them in very stressful situations."

"I know what you mean, but I've sort of treated that nervousness as the price I pay – the price we pay as doctors – for getting to do the sort of work that is high-risk, high-yield. We get these amazing rewards of succeeding with critically ill patients and trauma alerts and difficult procedures, but that means we have to put up with a lot of stress to learn to cope with it."

"Hmm. A no pain, no gain-type of deal?"

"Yeah. Maybe you picked neurosurgery largely based on the academic side of it and sure, brains and spines are fascinating, but don't you enjoy the drama at least a little?"

"I do, but I very much prefer to work in a team I know, in a safe environment with good resources and no distractions. I like working with you, because we know each other. Perhaps that's what separates us – you are a good communicator and a good improviser, which makes you uniquely suited to medicine in exceptional, unpredictable situations and alien surroundings. I need stability that you can do without."

Sherlock's adamant tone seems strange, until John realises he is trying to convince him that he's as worthy a doctor as army ones are. And that Sherlock doesn’t think he could ever reach that standard.
John remembers some of the mean things he had said to Molly about Sherlock during their first sessions; He had really put Sherlock down as some posh boy who could never manage if he wasn't wrapped in the OR equivalent of cotton wool.

It's not true.

It had all just been John not wanting to accept that Sherlock, who is the star in the OR at home, could also function at Bastion, which John had clung to as his territory.

He no longer has that need; he can now accept what Sherlock had done for him, because he sees that his partner being good at something does not affect him or diminish him. It's as Sherlock had said: he likes working with John, because John is uniquely suited to working in exceptional, unpredictable situations.

There is nothing more unpredictable and exceptional than Sherlock himself.

"You managed at Bastion. You excel when you can put all your focus on the surgical task at hand, and you're not half-bad at improvisation yourself," John tells him. "Many of the surgeons I've met working for armed forces are great, but they're not the best in their fields, probably. Those best ones, who do the work that really requires perfect lighting and no distractions and access to all the equipment ever invented, they couldn't do that in war circumstances. Their fine motor skills would be wasted if they had to do that often brutal job where you have to focus on the biggest priority problems and try to forget about the rest while constantly having to multitask. But, I think you could do much better than you believe, even when you don't have all your fancy toys and the King's staff at your disposal."

He hopes it will sound like a refutation of what he had once insinuated; that Sherlock was less of a doctor because Camp Bastion may not be a place in which his skills could best be put to use.

"Maybe you'll be nervous going back in," John shifts the subject, "But you've done that many times and every time, once you're back in the saddle, it's fine, isn't it?"

"I suppose."

"And even if you end up having the worst day of your professional life, you'll still be better than The Botch," John jokes.

"I do wonder why he hasn't been demoted to the janitorial services yet. The way he handles a scalpel makes me wonder if he got his neurosurgical training from a fishmonger."

John laughs. "Listen, once we get back to normal, maybe leaving a few months of margin after you get rid of whatever sort of collar Laura gives you next, maybe we could go somewhere for a week or two?"

"I'd like that."

A laden silence falls, but it is not heavy.

Then, they both open their mouths at the same time:

"Would you like to---" Sherlock begins offering.

"I think I want to---" John plucks up the courage to start.

A grin takes over the both of them.
"You first," Sherlock concedes.

"I want something quiet, a private spot for just the two of us. No bloody skiing, no diving crews, no big hotels."

"That's--- more than acceptable. I don't even know what paperwork or medical exams I'll have to do with the fracture in order to get my diving insurance revalidated. That hasn't really been on my mind."

"I don't mind the diving, but for once, I'd like to just have some quiet time with you without the halo or too many activities scheduled. I pick the country, you sort out the details; you're good at that."

Sherlock always finds outstanding places to stay in. "I think I'd like to go to Greece," John announces. The holiday photos a drug rep had been flaunting from Naxos and Santorini had looked gorgeous, and John would like to avoid jet lag for once.

"Greece it is, then," Sherlock agrees.

They've been so wrapped up in the past, and the complications caused by the halo on their everyday life that to John, it feels like a breath of fresh Mediterranean air to talk about the future like this, to make decisions about it, together, instead of it just feeling like something that will take a certain shape regardless of what John wants or doesn't want. It's ridiculous, how small a thing as talking about a holiday could make him feel so much better but suddenly, the future no longer feels like a freight train headed straight towards him.

For a change, he's taking part in the steering. And, Sherlock is letting him do so.

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That night, for once, Sherlock drifts off quickly, leaving John to listen fondly to the gentle snoring. When the halo comes off, he knows that Sherlock will resume sleeping on his side and the noise will disappear. John can put up with it, knowing it is only temporary, and the trouble he is having falling asleep tonight isn't because of the ambient sound. It's thoughts about Sherlock that are swirling around, keeping him awake. It's the good mixing in with the not-so-good; the last few days have been great, compared to the last few months, but he can't help worrying how consistent his progress with Molly will be and how that will affect the two of them.

Still, he does feel like some small victories have been won and can find quite a lot of comfort in that fact. They're both still here, because they want to be – not because neither can see a way out.

He tries to limit his own movements in the bed; no need to thrash about and wake his bedfellow. He turns over and faces away from Sherlock; it helps to deaden the noise which he has learned how to ignore in the past month.

Sometime later, John realises that he must have drifted off but stirred again when the snoring had stopped. He starts to turn, but a hand reaches under the covers and gently but firmly plants itself between his shoulder blades to stop him.

A quiet baritone rumble says: "I'm sorry. The noise must be irritating. I'll order you some earplugs. I'll probably have to move to the other room in an hour or so."

Facing away, John smiles. "Not your fault, just a bit of insomnia. If I needed those, I would have
already popped into Boots. I’m actually getting used to the snoring; in fact, I woke up because you stopped.”

That gets a little chuckle. “Still breathing; I promise.” Sherlock’s voice sounds like he’s talking to the ceiling, which he must be, due to facing upwards.

“Good. That’s important to me. I should tell you that more often, I think.”

The hand still on his back is warm and now, it gently starts to massage the horizontal strands of his trapezius muscle. While Sherlock’s sensory issues means he needs to be firmly touched, he is quite capable of administering very gentle caresses. 'A surgeon’s fine motor skills come in handy', he had once joked.

John hums a little in appreciation. “That's nice. I’ve been spending too much time hunched over the keyboard.”

The hand moves down his spine, dragging down the duvet. Sherlock does not need to see what he is doing; his knowledge of anatomy is guiding his touch. When he gets to John's lower lumbar region, he pushes up the hem of the t-shirt John now habitually wears to bed. Sherlock traces up and down a stretch of the cord-like muscles next to the spine which brings a shudder from John; it’s not quite a tickle, but close.

Sherlock's fingertips next perch on the waist band of John’s pyjama bottoms. “May I?” he asks in an almost nonchalant whisper, as though bracing for a potential no.

“You don’t need an invitation,” John assures him. He feels relaxed and calm, calmer than he remembers being for a long time, and very receptive to whatever his partner may have a mind. It's amazing how great an effect just being close to Sherlock can have when it comes to his mood. This is how it used to be before things changed. Sherlock had called it: he’d been very wrapped up in his own head. "Like I said; whatever you want, it's yours. Within reason, of course," he adds teasingly.

"Spoilsport," Sherlock whispers, and wastes no time in exploring further.

Those hands. Sherlock’s surgical skills and his violin playing make his left hand almost as strong and deft as his right, and John’s gluteus maximus muscle is now the recipient of a remarkable one-handed treatment. Not for the first time, John silently thanks the fact that on their last trip to the Maldives Sherlock had spent a small fortune on a long couples' massage session, from which he seemed to have memorised all the pertinent tricks. As that hand gets to work on his bottom, John thanks his lucky stars for man’s eidetic memory; he seems to be able to remember all the moves that had melted John into a pool of jelly. After less than a minute of this massage, John wonders if it’s being too greedy, wishing that Sherlock might take this beyond just a massage. The halo might well make using both his hands challenging or impossible and Sherlock's state of mind regarding sex may not have changed in just a few days, so John squashes the thought back into the cupboard of his fantasies. He doesn’t want to say or do anything to put Sherlock on the spot; his confidence might still be very fragile. For a moment, John worries whether his growing arousal will even be welcome. After their previous disaster, he’s hesitated to initiate anything sexual lest it ends in something that Sherlock will see as a failure again and promptly assign blame to himself.

Thankfully, John isn't left wondering for long what the plan here is; he's pretty sure that Sherlock is now ratcheting things up just a notch more than their Thai masseuse had done. "I don't want you to feel like you owe me one," John tells him just to be sure that they're on the same page.

A baritone whisper answers, radiating a shiver down John's spine: "Oh, you'd be surprised at the selfishness of my motives right now."
John is relieved that he hasn't been offended at his reasons for doing this being questioned.

"I can feel you thinking. Stop it. I know what I am doing," Sherlock announces confidently.

John smirks in the dark. “I’m not arguing with that.” He lets out an involuntary moan of appreciation when one of those long fingers that had been stroking the crease between his butt cheeks starts to probe more inquisitively at the perineal area—a place that is particularly sensitive in John’s case, perhaps even more than average.

“Hmm. I need to reach more of you. But don’t turn my way,” Sherlock muses.

John feels his weight shifting on the mattress. “What are you doing?”

“Turning onto my side. I’ve been practicing. If I move the rolled towel behind my neck as I turn and slide the pillow along between the top of the halo and the headboard, it’s the same support. I don’t think I can sleep this way yet, but maybe in time…” The next words are closer to John's ear, warm breath shifting his hair a bit. “Stay still.”

John obeys, stifling his urge to shuffle back – to close the gap between him and Sherlock so they can spoon properly. He’s always loved full skin contact.

"I’m going to reach over your waist with my right hand," Sherlock announces.

John has never told this to him, but the way Sherlock talks during their lovemaking sometimes sounds a lot like when he talks about surgery – precise and strategic – and John adores it, as strange as it may sound. Being the object of such thoughtful focus is intense and right now brings in an overwhelming surge of affection.

"My brilliant, lovely genius," John whispers, shifting a little to give Sherlock better access.

"Saying brilliant and genius is redundant," Sherlock mutters.

"Did I mention clever? And gorgeously sexy?"

"John." Slightly embarrassed.

John has to imagine the blush that must have just spread on Sherlock's features since they're not face to face. "I should say these things more often. They're all true, even if you don't believe me." Thank God he's got the rest of their lives to try to convince Sherlock that he is, in fact, very good at all of this. All of the lovely things between them.

“Just focus on my hands and stop blathering,” Sherlock grumbles, but John can hear a smile in his quiet tone.

As if he could do anything else. Those hands are now trying to push his pyjamas down all the way off his arse, so John obliges by lifting his hips slightly off the bed. Immediately, Sherlock's left hand resumes its stroking of his perineum.

But it’s what the right hand is doing that takes John’s breath away. Sherlock gently takes his balls and lifts them, slipping one of his fingers down the perineum to continue the stroking.

Then the left hand gets back in on the act, with pressure of a well-lubricated finger at the rim of John’s anus.

When did that happen?
As if reading his mind, a rumble of laughter. “I put the tube in the rolled-up towel just in case.”

John giggles. “Adding mind reading to your list of skills?”

The finger gives a reply, pressing down more insistently. “Stop talking.”

John is tempted to protest that usually it's him telling Sherlock to stop thinking and to let go when they're doing this, since his mind can run off on its own at any time, but then – as if in reprimand – the right hand leaves John’s groin. Suddenly, there is a squeeze of his left nipple, after which he loses the ability to do anything other than surrender to what is happening: the squeeze turns into a pinch and then the edge of a fingernail is applied and John gasps with shock when the finger between his buttocks sinks in deep.

After mere moments, just as the temptation for John to reach down and give his cock some of the attention it is desperately demanding, Sherlock's right hand leaves his chest and forms a fist around it, just tight enough to make John’s hips buck and thrust, multiplying the welcome relief of friction. The grip is extraordinarily varied – tight, then loose, allowing him to thrust against the fist held still; suddenly it’s in motion, stroking up and down his cock. Not knowing what is going to happen next helps John focus on the moment instead of worrying, and the unexpected element adds to the deliciousness of it all. That finger, relentless in penetrating him, joins each thrust, amplifying everything to a crescendo of sensation.

His breath starts coming in gasps; the intensity of what Sherlock is doing is bringing him very near to the point of coming.

I know what I’m doing. He certainly does, after three years of practice. Whatever minor part of John's brain is still capable of a cerebral thought wonders if this setup is fair on Sherlock, and if he is even turned on by it. That thought douses a bit of cold water on his enthusiasm, but before he can act on it or try to slow the pace down, Sherlock ups the ante.

That finger now crooks and strokes the thin wall separating it from John’s prostate. Like a jolt of electricity, the effect wipes away all conscious thought from his mind, and he is caught in the tidal wave of orgasm. In an explosion of breath, what usually manifests as a quiet grunt is a half-strangled shout this time. Coming never feels this intense when it's just him on his own; it's his whole body being hit with wave after wave of pleasure instead of just a smaller part of him.

After a few moments, he manages to comment between panting breaths: “That was… so fucking amazing.”

At some point, Sherlock must have withdrawn his finger and released his grip on John’s cock, but any conscious memory of it must have been swept aside by the flood of oxytocin and endorphins. As his brain comes back online, John starts to worry.

Thankfully, a deliciously ominous whisper soon signals that there isn't a problem: “…and totally selfish of me.”

John starts to turn over, so he could see Sherlock.

“Don’t.” His hips are gripped, and Sherlock pulls him closer, close enough for there to be skin contact between John’s arse and Sherlock’s very evident erection. Then, those strong hands take charge of John’s shoulders, using them as an anchor, but also keeping him just far enough away to avoid touching the plastic vest.

“You don't need to see me to know I'm here.”
Indeed, he is. Even without looking, John is made aware of just how aroused Sherlock is. It turns out that the fingering had not just been for his benefit, but preparation for something rather larger and harder.

And slower.

In contrast to what had just gone on, this is a slow burn intended for relishing every inch of movement – and the impatient, quicksilver Sherlock initiating such a thing is a rarity. The pleasurable stretch skirts slight discomfort in its intensity, and every inch of movement is controlled. John’s own cock is re-awakening, and the notion of what they’re doing is more erotic than most things he had ever been able to even imagine before being with Sherlock.

Those warm, conscientious hands now leave John's shoulders to caress the back of his neck, gently to start with and then slowly, almost teasingly slow, the strokes become a bit firmer, matching the slow pressure of Sherlock’s hip thrusts. There is a delicate balance between seeking pleasure and attempting to avoid pain for the recipient, and tonight Sherlock is managing that equilibrium for him to a fine art.

There is a baritone whisper behind him. “I want you to think about the Maldives. The sound of the water. Do you remember that?”

As if John could forget. It had been their last night before the flight home. There is something about the tropics that John just loves – being able to shed clothes and just be, without worrying about getting cold, or damp or uncomfortable. The total privacy of the over-water villa had allowed them to make love without thinking about interruptions or being overheard; a total lack of inhibitions. That night John had seen a side to Sherlock that didn’t come out that often – confident and dominant, but not like he is at work. That cold front is designed to keep others at bay. No, this had been a Sherlock at a very rare ease with who he is and feeling no need to lean on John's experience and confidence when it comes to their relationship. It had been novel and exhilarating for John to be on the receiving end of that – very literally. It had been the first time that they had reversed their usual roles; their changed surroundings and Sherlock's relaxed confidence had helped John shed some of his last hang-ups. Although he'd done anal with some female partners, he hadn't really considered trying out being the penetrated party before Sherlock had barged into his life.

In Afghanistan, when John had missed Sherlock the most, he’d remembered that night at the Gili Lankanfushi Maldives resort. It had fuelled many a fantasy that had helped bring himself off in the dusty silence of the office where he'd had his cot at Camp Bastion.

"I just couldn't keep my hands off you when we were there," Sherlock says softly as he shifts his hips to change the angle slightly, and his cock is now pushing more towards John's spine than straight up. It's just about bearable; after already climaxing once, John is even more sensitive than usual.

He is also smiling into the darkness. “Not just your hands, as I can remember very well.”

A palm pushes between his arm and his right side and he obliges, allowing Sherlock to reach over to his chest. A fingertip brushes against his nipple, budding erect and nearly painfully sensitive still.

“I see I'm not the only one with good memory, after all.”

John can't help but hum his agreement; the deep, husky baritone is doing things to him that bring those memories back to him even more. Sherlock’s voice in the presence of others tends to be flat,
unemotional, almost monotone, except when he is displaying scorn, sarcasm or derision. In bed, it’s different. The man uses his voice like a finely tuned instrument that resonates with John at a visceral level.

He hasn’t heard this voice in a long time, it has to be said. And now that he has it back, he realises how terribly he has missed it.

“I’m going to play you like an instrument.” A delicious threat. An adoring promise. It's not often Sherlock attempts pillow talk, but when he does, it's serious business. Coming from someone else, some of the things he says could easily sound a bit silly, but there is a depth of the conviction behind them that floods John with affection for him.

As if to demonstrate his statement, Sherlock's fingers trace a lazy arc down John’s chest, with just enough firmness and the edge of a fingernail to make him want to squirm a little. Even when Sherlock lifts his hand away, John can still feel the trail of those digits, still resonating in his nerves.

John can't help but wonder where this uncommon level of taking charge is coming from after weeks of Sherlock being withdrawn, timid and apprehensive in everything relating to the physical side of their relationship.

Then, the answer hits him and it's so obvious: *Sherlock needs this right now.*

After weeks of being side-lined from work, of thinking he shouldn't need or want anything because there's no room for that at home, of being trapped in the halo that makes everything difficult and even changes the way he moves and eats and sleeps – he needs to rebalance things. To retake his place in his life. Sherlock must need this desperately, and John wants nothing more in the world than to give it to him. Hell, he wants to give Sherlock *everything.*

He then realises more: this is the Sherlock who jumped on a plane to Afghanistan and who did not crumble, did not falter for a single moment when John needed him. This is who Sherlock can be, when he isn't doubting and second-guessing himself, when his priorities are shocked straight by something.

In a flurry of quick thrusts, Sherlock’s hips drive him deep into John, who gasps from the suddenness of it. Then... nothing. Everything just stops. All John can feel is the fullness of that cock just being there. He draws quick, short breaths, trying to force himself to inhale deeper to recover. He feels the heat built up by just the perfect amount of friction; there is nothing, *nothing* that feels the same as having Sherlock inside him like this. His penis is slightly longer and slimmer than John’s, ensuring that unless he deliberately alters the angle to avoid doing so, he pushes against the prostate almost with every thrust.

John starts to reach for his own cock, but his hand is batted away.

“*Mine.*”

This time, there is no fist, just a gentle, almost random caressing that makes John’s balls ache with desire. He needs more, more friction, more movement. He cannot lie here like this; he needs to move. His fist balls up the sheet beneath him.

"*Sherlock…*" He's begging without a shred of shame.

“Do you want something?” The baritone is imperious.

“Where?”

“ Everywhere.” John can only whisper it. His upper thigh is quivering with the tension of him raising it just so that Sherlock can push as deep as possible, and he hooks his ankle on Sherlock’s shin to relieve his muscles from doing so much work.

Sherlock is drawing this out, as though he truly has a plan he’s executing – as though he's trying to override John's refractory period and God, it just might be that he's doing it. John doesn't mind, he really doesn't mind, it's just that despite having climaxed once already, the familiar, deep ache is building up again and he needs more, needs to chase that high----

Sherlock releases his grip on his cock, drawing the moment out until John can no longer keep quiet: “Please,” he moans, overwhelmed and impatient and boneless and desperate.

The answer comes in a firm grip and an even deeper thrust. Then, a slower tempo of Sherlock’s hips pushing into him, a movement that drives his cock into Sherlock’s hand which is pulling in time to his thrusting, amplifying the sensation. John becomes lost to the rhythm, his whole existence narrowed down to the points of contact that bind him to Sherlock. He completely surrenders control, allowing Sherlock to manage the pace which ebbs and flows, extending the whole process until John is kept at the edge of the abyss so long that he hears himself begging again – for mercy or for more, he isn't even sure anymore.

Finally, he tumbles over the edge and comes, spent muscles aching as they tense and convulse. Right at that moment, Sherlock's grip on his cock suddenly slips loose as his fingers convulsively straighten; John only faintly registers the tell-tale twitches of his release inside him since he's still floating in the throes of his own descending climax. He's pretty sure that they've both been loud enough that it'll be awkward meeting the eyes of their neighbours the next time he sees them.

After they've gotten their breathing back under control, and the lube and bodily fluids between are beginning to get sticky, John shifts his hips to get out of bed. "I'll clean us up," he says, but the iron grip of long fingers digs into his hip, preventing him from leaving.

"Don't go." A quiet request. A plea.

John could call Sherlock silly and remind him that he's only going to go to the bathroom and return in less than a minute, but something tells him it would be a very wrong thing to say right now. He reaches behind him, sliding his hand on the bare hip he finds, giving it a gentle pat. "I won't."

Who cares about the bloody sheets?

They'll have a clear out and a wash-up in the morning. Right now, there are more important things to be doing.

John turns to his back and reaches down to pull his own duvet to cover both of them. Sherlock curls an arm across his stomach, readjusts his pillow which had shifted, and lets out a contented sigh. John laces his own fingers with the ones splayed against his stomach.

No further words are exchanged before they slip into unconsciousness. They both sleep straight through until the next morning, with only John’s alarm able to rouse them.
Sherlock pries his lids open, preparing for the potential assault of sunlight. John has the irritating habit of opening the curtains after waking up, as though being almost blinded and consequently irritated is somehow conducive to dragging oneself to work. At university, Sherlock had rarely attended morning lectures if they hadn't been compulsory: he is more of a night owl than any sort of a ghastly morning person.

To his great relief, today his retinas are greeted by the bliss of near darkness. After his alarm went off, John must have snuck out quietly and left the curtains drawn to let him fall back asleep.

Sherlock shimmies his shoulders closer to the edge of the bed and fumbles around the floor for his alarm clock and learns that it's nearly half-past nine. He reaches his arms above his head and presses his knuckles against the headboard to stretch his wrists. His biceps chafe against the edge of the plastic vest, but it can't be helped.

It's routine, now, this getting out of bed safely with a halo-sequence, but he still has to concentrate before attempting it. Turn to side, bend hips, slither toes to floor, push upper body away from bed is what the best guidebook explanation had said.

Once he's sitting up, things get easier. His old, red dressing down is large enough to accommodate the vest, and warm enough to enjoy breakfast in. John has taken to leaving him single-portion containers of yoghurt in the top shelf of the fridge. He'd prefer toast, but it is still a nuisance to swallow, and a bigger challenge than what he has the patience for before he has had coffee. Thankfully, John has not forgotten to leave him some in a thermos. Before the halo, Sherlock had usually been in charge of it; this entails grinding the beans, filling the French press and preparing John's portion the way he likes it. It was something Sherlock had enjoyed: providing John with the luxury of decent coffee.

He doesn't know what to make of their conversation over the past two days. There is much left to be processed from his catastrophic misunderstanding about the e-mail, and the admittedly rather positive aftermath. He is too much of a realist to think a few instances of earnest dialogue could be a cure-all, but the catharsis of getting certain things off his chest is undeniable. It is only a beginning, but still Sherlock wants – no, needs – to think that a corner might have been turned.

Despite the embarrassment of his misunderstanding the email, he is relieved that John had not ignored or dismissed his fears. He had listened, tried to explain, tried to understand. His willingness to take responsibility had surprised Sherlock – he does not want to blame John for the way things have been lately, but there are things both of them could have done differently. He's envious at John for having such a clear view of what his shortcomings may have been; for Sherlock, his own deficiencies are still full of unknowns. Will he ever really be able to meet John half way when it comes to the emotional maintenance of their relationship? Conversations such as the ones they have had recently always leave him thoroughly exhausted, his intellect and his observational reserves drained. Sunday had passed quietly, with both of them using the time to process what had been said and done.

It had sounded and, felt so sincere, what John had told him. He hadn't sounded like a disillusioned person trying to make do with what he had.
'I love you. I want to stay.'

Is it so easy? John had said he would never leave, but he can’t promise that. A traffic accident or a sudden illness could alter the playing field. Even a growing boredom and disillusionment could well do that. There is no such as thing as forever.

When John had been here, with him, during the weekend, everything had been felt easier; when he needed reassurance, John was there to provide it. Now, in the cold light of a Monday morning, alone in the flat, doubts start surfacing.

Before long, he finds himself pacing in the sitting room.

Accepting the notion of being loved by someone is a matter of belief, isn't it? The core of it cannot be proven with concrete evidence. His deduction is that John must love him. Why else would he still be here? Love is not easily quantifiable, nor is there a cut-off threshold for what intensity of it is sufficient to sustain a partnership. And, love cannot be a constant figure; like a vital sign on a hospital monitor, it may be a changing all the time, ebbing and flowing according to life events and the actions of the object of one's affection.

Perhaps he should text John right now that he loves him. Or, would that make him sound too needy? Reciprocity is one of the more difficult things he has yet to master.

What confounds Sherlock the most is this: how can there be such a big difference between their estimates in how he is doing as a half of their relationship? Despite John's use of the word 'perfect', Sherlock just cannot believe his praise. John hadn't managed to offer any reasonable counterarguments to his scientifically-backed estimate of their relationship not progressing through the usual, healthy stages of romantic partnership. How do those things just happen to other people? How do people fix a relationship if they are not even aware of veering off course? Is this why so many separate and divorce and break up? John seems to assume there must be something they're doing right, since they have prevailed so far. Sherlock doubts he could take much credit for it, despite John's reassurances that he's doing alright. Perhaps the halo is a surprisingly suitable stress test to their relationship; a warning that any additional strain may threaten its integrity.

He needs to endure the rest of his twelve weeks without any further incidents. He doesn’t want this to be the test to destruction. John is still in therapy, and they have only very recently reconciled certain difficult things. John does not need any further stressors. Yes, Sherlock will do as he is asked: inform his partner if something is irritating or bothering him about the halo, but that will be the extent of it; they are not out of treacherous waters yet. He mustn't let his guard down. John's mental fortitude is still compromised by post-traumatic stress.

He knows John is seeing Doctor Hooper again today and wonders what John might be telling her about the weekend – what his overall impression is, now that they are no longer at such close proximity as they have been during the sixty hours before John left for work this morning.

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"I fucked up. I know I did. I've been fucking up for some time, I think," John informs Molly bluntly right after dropping down into his usual chair.

He had expected it to feel worse – to feel embarrassing, to make him feel like a failure the way he
has felt like for some time, but all he feels is relief. "Greg was right. I was looking far away instead of looking at what I had right here."

It's all out in the open, now, and he can start fixing things and move on with his life. He's downright impatient to do so, but this doesn't stem from wanting to deny everything like before. Now, he wants to put in the work with Molly and then move on with his life.

Looking at the therapist, he almost expects thinly veiled, smug triumph to make an appearance on her features but of course, that never materialises. She is a professional, empathetic, unjudgemental. They are qualities John thinks he needs to rediscover so that he can focus on his work and his home life instead of guilt and anger.

He needs to stick to believing that he's not a bad person; he's simply someone who's had a tough time and who has resorted to some shitty methods of problem-solving.

"Why don't you tell me what happened, so that we can start discussing it. Right now, I'm having to make assumptions based on your reactions," Molly suggests.

"Sherlock believed that I went to Afghanistan because it was an easy way to leave him. He knows about Natalie, now. I liked her, but I didn't love her. I wasn't planning on a forever with her. Being with her was nothing like what I have with Sherlock, and I should have told him that before things went to shit."

"Has something has between the two of you? You seem to have a lot of new information about his mindset."

"We talked. No, that's an understatement. Long story short, he thought I was leaving again. Then, it all just came out, everything we've been thinking but not saying, I think. Took some time to get Mister Lack of Self-confidence to believe me that I never planned for the redeployment to drive us apart. I hope he believes me, now. If he doesn't, then I'll just have to keep working at it some more. Forever, if need be."

John knows that all these truths he is suddenly freely offering probably sound strange after being defensive for so long, but he can't waste time wrapped up in himself anymore. Sherlock needs him. He needs Sherlock.

"That sounds like a very intense conversation. How did it feel?"

"Pretty fucking good. Exhausting. Horrible, but good, if you know what I mean."

Molly smiles. "I think I do. I am very pleased for the two of you. Let’s talk about what happens next in our sessions — time to make a plan of action. We have spent some time examining your need for redeployment and the aftermath of it. Now, it's time to start addressing what happened during Afghanistan."

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That night, John's bladder drags him out of bed sometime during the early hours of the morning. Sherlock is asleep, but restlessly so, and when he is finished John decides to leave a light on in the bathroom and the door ajar, because something about this is unsettling; he thinks he's heard his own name being muttered a few times, so whatever is haunting Sherlock tonight must be related to him. He's seen Sherlock having nightmares before, but this one seems much more intense than the
A few minutes later John slides back into bed, worrying. After listening to Sherlock's tossing and turning and erratic breathing some more, he is considering touching his arm to wake him when Sherlock suddenly wakes up with a gasp. His eyes open for a moment but stay firmly fixed on the ceiling as he starts hyperventilating. Then, he squeezes his lids shut and clamps a hand on his mouth as his diaphragm convulses violently against his ribcage. It's obvious he's fighting to keep quiet, even though he is clearly losing the battle with the panic.

How many nights have there been like this, carefully concealed from John both during and after his absence? How often has this happened after Sherlock had moved into the living room, leaving John blissfully unaware?

Sherlock's left hand twists a knot into the bedsheet, and he swallows hard, heavy tears squeezing past his eyelids which remain tightly closed. John wastes no more time; he shifts closer and reaches a hand across his torso and sliding his other palm on Sherlock's opposite cheek. Sherlock flinches as though branded – he had clearly still been trying to shake the dregs of sleep, possibly unaware of even where he was.

He calls out Sherlock's name, and those blue-green eyes open, but the halo effectively keeps them fixed on the ceiling. His chest is still heaving like bellows, his shoulders stiff, all of his muscles wound tight as he fights to calm himself down with little success. John knows what it's like to be ripped out of dreamscape into harsh reality, still in the firm grasp of residual fear and panic and confusion. He has fought this battle so many times during the past months.

"Tell me," he prompts Sherlock quietly. Guilt twists his innards into knots, but he ignores it. A part of him thinks he should be kicking himself on the head mentally since this must, somehow, be his fault, but what good is that going to do? "It's alright, I'm here."

"I thought you were----" Sherlock gasps for air mid-sentence, or perhaps he can't bring himself to say the word, "you were----" the rest is half a mutter, half swallowed with a gulp of air, "---when Mycroft and that soldier came to the OR," he finally manages to wrench out of his vocal cords.

John grips his hip with one hand, while the other he carefully slides to his cheek. "I'm right here; it was just a dream."

"No, it's---- a memory that keeps replaying," Sherlock says. "It wasn’t until I got to you and saw that you were really alive----- Hours and hours of not believing anyone and fearing the worst---- No one knew anything when I got off the plane in Kabul, they just shoved me into the transport for Bastion---- I wouldn't believe any of it until I really saw you----” the words are flowing out, disorganised and frantic and etched with panic. At the end of the stilted, aborted explanation, something breaks in Sherlock's voice. It's as though something breaks in him, and John suspects it may be something he has kept in check, shoved into the bottom of his soul, tucked into the darkest recesses of his heart, until now.

Sherlock separates their joined hands and log-rolls to the side of the bed where he can lever himself upright so that he can sit on the edge, with his feet on the cold floor. He’s crying now, despite trying not to; even in the dark John came make out an angry swipe of the side of his palm across his eyes and the congestion in his voice.

“I’m sorry. This is so stupid,” Sherlock practically spits out the words, a half-garbled curse through a film of tears. He seems to be fighting an impulse to flee, to save face, to somehow pretend this never happened, but they both now it's not possible anymore.
"No, it's not," John tells him, sitting up under the duvet and remembering Greg's words about when Sherlock had heard the news about his injury: 'He got the news just after finishing up a case. He stormed into my OR, told me in no uncertain terms he was taking off, and did so. No hesitation. He didn't even look shocked. He looks like he does when there's an emergency case going on. Absolutely determined.'

Is what's happening now the shock Sherlock had shoved out and refused to address back then? Is his subconscious now processing his fear, bit by bit, at night? The realisation is like a poison dart to the heart, but John simply can't let it wreck himself right now – he can't afford to get lost in his own guilt again. What he does now has to count. It has to, because it is the beginning of making up for the time when Sherlock needed him, and he wasn't there.

He scoots closer to sit behind Sherlock and wraps his arms awkwardly around his shoulders because the vest prevents a proper, tight embrace.

It's so hard not to hate himself for being the cause of all this when struggling to comfort Sherlock through the breathless, constricted sobs that never seem to end.

"I'm sorry," he tells Sherlock, whispers it three times into his ears, gently pushing errant curls out of the way, but it's just words. Sherlock wouldn't believe them just like that, when John knows he has acted the opposite for so long. He expects Sherlock to try to tell him that he doesn't need to be sorry, to tell him that it's silly and unnecessary for John to apologise on behalf of someone else's emotional outburst, but he says nothing, and that's how it should be.

God, John wishes he could bury his face in those curls, to pull Sherlock completely to him instead of that idiotic metal and plastic rig being in the way – hug him so tightly their bodies feel as though they are turning into one.

The fingers of Sherlock's crossed arms are now gripping John's biceps like a vice, probably leaving bruises, but John doesn't pray them off, doesn't protest. He presses his lips to the side of a bare shoulder, whispering sounds that almost aren't even words. He knows he can't kiss this better, but the notion of needing to be here, having to face the aftermath of his own actions doesn't make him want to retreat anymore.

There will be good days and bad days; easy nights and dream-tormented nights. They all have to be lived through, just like he had to live through the hell of uncertainty after Afghanistan.

“I am never going to leave you; do you hear me?”

He left, once, but he's here, now. He fucked up, but now he's here to stay, and that has to be worth something. The tears gathering at the corners of his own eyes are not just for himself anymore.

He is here, and he is going to spend the rest of his life doing better by Sherlock.
The Sixth Thursday

Chapter Notes

Trigger warning for this chapter: unexpected death of a patient in the operating room explained in detail.

It's good to be doing clinical work for a change. Instead of a suit, John gets to wear the new comfortable blue scrubs King's is shifting to using, and he has made a conscious decision not to use his OR downtime today to catch up on paperwork. Instead, he's going to enjoy the company of colleagues and other staff he sees too little off.

A trainee nurse is departing and has brought in chocolate-filled croissants to the OR unit's break room, one of which John snatches from the basket. He almost feels like whistling, especially after what had happened last week. The way he and Sherlock had finally started talking more openly feels like a breakthrough. While there is no easy fix for the way he has been feeling or how their relationship has gone downhill, if they keep at it, he can now believe things will get better.

John still isn't sure whether they should talk more about the night when he'd witnessed Sherlock having a nightmare about the day he'd heard the news of the IED attack, but it feels important that he had been able to be there for him. In the morning, Sherlock had been quieter than usual, following him around the flat until he left for work. Instead of taking out his laptop and doing some due paperwork that evening, he had made sure to spend some time with Sherlock. By the time they went to bed, Sherlock's gloomy mood seemed to have dissipated.

After finishing his croissant, John races Jo Peiris, a recent ENT consultant recruit, for the last available seat in the break room, eventually relinquishing it to her with a smile.

Before he gets a chance to ask how she's settling in, Mansoor Pahlavi – one of John's fellow anaesthesia consultants – taps him on the shoulder. "John?"

He twists his torso to see who's there, then sips his tea. "Hey. What can I do for you?"

"There is something wrong with the current batch of carbon dioxide measurement cassettes for the Draeger workstations."

"What do you mean?"

"I have a case in OR three, a young woman for a diagnostic laparoscopy for suspected endometriosis, and the levels just keep rising even though there's nothing wrong with her lung compliance, her saturation, or her oxygen consumption. I'm probably hyperventilating her needlessly, because the reading keeps climbing regardless of what I do."

John frowns. "Who's in there now?" A routine laparoscopy might allow an anaesthetist to briefly leave the OR, but most likely Mansoor has asked an available registrar to sit in while he has lunch.

"Hennessey."
A perfectly competent but inexperienced trainee. "Mind if I go have a look?" John asks, abandoning his disposable cup on the corner of a table.

Mansoor shrugs. "Be my guest."

John makes his way into OR three. Everything looks uneventful: the operating OBGYN is inspecting the uterus and John hears no alarm signals from the anaesthesia workstation.

Conor Hennessey turns to face him, and the young man's thick brows rise. "Doctor Watson?"

"It's John, please." Usually they all call each other by their first names, but John has only met Hennessey once, briefly, which is why he might be inclined to call him by his consultant title. Were he a surgeon, the title would be Mister Watson, for reasons strange and archaic. "What have we got here?"

Hennessey gives him the WHO checklist sheet which has been appropriately filled in and signed. The patient is a 31-year old woman, no allergies, no prior surgeries or anaesthias, no regular medications besides hormonal birth control pills. She uses non-steroidal anti-inflammatories during her period, and needs this procedure for suspected endometriosis. Nothing alarming there.

John leans down to see the carbon dioxide absorber near the floor, the absorbant material inside of which looks half-tinted with violet. It should have been changed by now, but even a half-expired absorber wouldn't cause readings as high as Mansoor had reported, not even close.

John then scans the monitor readings. The patient's blood pressure is normal, pulse slightly elevated. The difference between inhaled and exhaled oxygen is a few percentage points higher than normal, but well within reason. What is not within reason, is the carbon dioxide reading: 9.8. It shouldn't be anywhere close to that level with the current respirator settings, especially in a young woman with healthy lungs. John notices someone has adjusted the alarm settings so that the carbon dioxide level wouldn't constantly set it off.

John looks up and over the drapes. "Anything out of the ordinary with the insufflation?"

The OBGYN glances at him before redirecting her attention to the screen. "No, nothing. The pressures have been normal all through the job."

John turns back to Hennessey. "Has the carbon dioxide reading dropped dramatically at any point, or the saturation, even if it has come back up on its own?"

"No. Mansoor didn't say anything like that, either, and I've been here since the start of the case so if this was a laparoscopic thing, we would have spotted it being triggered. No, that CO2's just been climbing on its own."

If a blood vessel is cut during laparoscopic surgery, the CO2 used to blow up the abdominal cavity so that the surgeons can see better inside could be absorbed into the patient's bloodstream, explaining the strange reading, but for it to be that high there would have to have been a huge leak. Surely the surgeon would have noticed that. Hennessey's point about the problem starting before the surgeon put in the CO2 insufflation is a good one – this is something else than a surgical complication.

"Could use a bit more relaxation, though," the surgeon remarks. John checks the doses given – the patient has just had a very reasonably sized top-up of mivacurium. Why would there be muscle rigidity?

The monitor sounds an alarm: the patient's heart rate has suddenly climbed over the alarm setting
level which is 120 per minute.

John scans the monitors once again, becoming more and more suspicious. "No temperature monitoring?"

"No, since this was supposed to be a thirty-minute job," Hennessey tells him. He doesn't sound very concerned, while John is getting more worried by the second. "The Ward Sister's always on about how expensive those new forehead sensors are."

"The old oesophageal ones are just a couple of pounds and we still have boxes and boxes of them in storage," John points out. The new forehead sensors are easy and quick to use and thus more popular, but they truly are much more expensive.

Something is gathering at the back of his mind; a convergence of signs pointing to.... what? He tries to look for a familiar pattern, racks his brain for something that would explain these not-exactly-life-threatening-but-still-very-odd findings. He scans the monitor readings once more, forehead scrunched up into a frown. The readings for sevoflurane, a gas-form general anaesthetic Mansoor and Hennessey are using to maintain sleep are normal----

Then, it all connects in his head. **Sevoflurane.**

"Fuck," John exhales. No wonder it didn't occur to him instantly. What's going on is very rare, but potentially lethal.

He slams the WHO checklist he'd been holding on the small table on the anaesthesia workstation. "I think she's got malignant hyperthermia!"

All eyes in the OR turn to him.

"What?" Hennessey's eyes have turned the size of saucers.

"What's that?" the surgeon asks.

"Get her temperature, now!" John orders, and the supervising nurse starts opening and closing cupboards in a frantic search for an ear thermometer.

John wastes no time in disconnecting the sevoflurane vaporiser and raising the oxygen percentage in the system to a full hundred. Instead of continuing a steady climb up, the carbon dioxide has now leapt to a staggering 14. He cranks up the respiratory rate and raises the inspiratory volume slightly.

He then turns to face the anaesthesia trainee. "Conor, run to the Ward Sister and tell her to get dantrolene ready for use, now!"

"John, look at this," the surgeon says.

On the monitor, a tiny nick in the wall of the uterus is bleeding, but instead of trickling out, the blood looks **foamy.** "I've been trying to get this tiny thing to stop for three minutes, and it's not responding to anything even though it's decidedly not arterial."

"Her temp's forty-two!" the supervising nurse exclaims, looking dumbfounded.

John glances below the surgical table, hoping that they had inserted a Foley before starting the surgery. He's relieved to find the bag, mostly concealed behind the legs of the scrub nurse, but that relief evaporates instantly when he sees the blood red colour of the urine.
"Sound the code alarm," John commands; "I think she might be about to crash. Where the fuck is that dantrolene?" He knows it takes time to get the powder-form medication to dissolve into a liquid, but he'd feel better to see the vials being prepared right now with his own eyes. "Get ice and pack that on whatever bits of her you can get your hands on!" He clicks off the fluid warmer.

The supervising nurse slams her palm on the alarm button. Right after, Hennessey returns with the Ward Sister in tow, both carrying emesis basins laden with dantrolene bottles.

Soon, John is accompanied by several consultant colleagues and three additional OR nurses. They swap the anaesthesia workstation to one which hasn't been used with sevoflurane in weeks. John inserts an arterial line, bloods are drawn from it and an arterial blood gas analysis quickly done in the machine in the hallway. It reveals hyperkalaemia and profound respiratory acidosis due to the carbon dioxide having now climbed to twenty on the monitors.

The patient gets dosed with intravenous insulin to bring down the potassium level. The foamy, uncoagulated blood is judged likely to be due to developing disseminated intravascular coagulation – the blood's clotting system has gone haywire. John wouldn't be surprised to discover signs of kidney failure due to harmful enzymes from muscle breakdown if he had such analysis available at a moment's notice.

The next fifteen minutes pass in a flurry. They begin to administer the dantrolene and the OBGYN aborts her surgical mission, lets the abdominal cavity drain from the carbon dioxide used to fill it, and quickly closes the port wounds. All possible supportive measures to control the patient's vital signs and increasingly chaotic metabolism are taken, but eventually, the vitals monitor wails the start of ventricular fibrillation.

"Her temperature's 43!" an anaesthesia nurse recruited in as an extra pair of hands yells just as the supervising nurse scrambles to fetch the defibrillator, and Hennessey rips off the drapes to start chest compressions.

Mansoor had just drawn a new arterial sample before the arrhythmia had begun, and he hurries back in to the OR deliver the results. John practically rips the print off his hands. This is Mansoor's case, but since he had been the one to connect the dots and is the head of the unit, leadership has now shifted to him.

Potassium levels are through the roof. The acidosis us even worse. Oxygen levels are tanking; the respirator isn't keeping up with the increasing demands of the patient's muscles.

The first defibrillation produces no results. Two minutes of CPR follow before another attempt is made to shock the patient's heart back into sinus rhythm, and that second shock proves equally fruitless. Amiodarone and adrenaline are drawn and administered after the third shock.

The dantrolene is now in the patient's circulation, but nothing changes. Nothing that the consultants present come up helps to stop the patient's muscle cells from consuming themselves in an uncontrolled, relentless burnup of energy producing massive amounts of carbon dioxide and consuming oxygen like wildfire.

Fourth shock. Continue CPR.

Fifth shock. Continue CPR and administer second dose or adrenaline and amiodarone.

When it's time for the next rhythm check, the patient's heart rhythm has degenerated into asystole. No shock is administered since there is no activity in the heart that could be re-synchronised with electricity.
More adrenaline, refrain from amiodarone. More insulin. Frusemide. Calcium gluconate. Fresh frozen plasma to combat the disintegration of the coagulation system.

Eventually, Mansoor says the words: "Forty minutes."

John lets out a breath, turns to look at the monitors: the flat line of asystole is only punctuated by the electrical disturbances caused by chest compressions. Blood pressure on the arterial graph: 10/5 – all produced by the CPR. That's all the perfusion the patient's brain has been receiving for forty-five minutes.

John takes off his OR hat. He doesn't know why.


Hennessey, who had taken over chest compression again after rotating his turn with two nurses stops, steps back and yells a string of expletives.

There is a thought that comes to John: you're in the clear. Not your case. You solved it. Not your case. You're safe.

It's selfish, and it's not true. All these cases belong to all of them, all of the anaesthetists: they must be each other's safety net. He's the boss of these colleagues, and they will rely on him for support as the inevitable legal inquiries start.

"Thank you, everyone," Mansoor says. "Thank you, John."

It's a bit grotesque, but appropriate: a valiant effort was made. They did what they could, but there is still a young woman lying dead on the table.

Hennessey is staring at the monitors, breathing heavily. Mansoor grips his shoulder and drags him outside; he's an old hat who has seen many juniors shaken by a death in theatre. He'll know what to say to stop this from becoming something that will traumatise the young man so much he won't be able to keep working.

Malignant hyperthermia is a rarity that frighteningly often leads to death. But, knowing this doesn't prevent the second-guessing. If they'd been faster, smarter---- if they'd not used sevoflurane---

There was no family history of adverse anaesthesia-related events. The patient had never had surgery before. She was healthy. No allergies. This could not have been predicted.

This will still haunt John forever, as it will Hennessey and Mansoor and everyone else present. But, he knows he can deal with that burden. He's been through this before. This is the core of being a consultant and not a trainee anymore: being able to reach an uneasy peace with one's ghosts.

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By the time John finally leaves the OR unit, it's two in the afternoon. His second case had been reassigned since he'd been stuck at OR three, leaving him with a few unexpectedly commitment-free hours. He goes to his office and spends a useless hour staring at his computer screen and getting nothing done.

It's hard to shake the defeated heaviness that had settled into in the OR unit. It would feel like dishonouring the dead to simply get on with the minutiae of NHS paperwork right now.
He had sent Hennessy home after Mansoor had talked to him. They had made a decision to keep an eye on the young man for a few days, since he seemed to be blaming himself for not picking up on the unusual emergency. In hindsight, John thinks he recalls reading an article saying that the biggest hurdle in treating the entity is that its rarity makes anaesthetists oblivious to the possibility. Doctors in most other specialties wouldn't have even heard of it. The risk can be hereditary, so close family members of the patient need to be warned. John had reminded Mansoor of this, and he has no doubt that the man will see to all the important steps in dealing with the aftermath.

It had taken less than forty minutes from the start of the sevoflurane administration before diagnosis had been established. The reaction had been violent, developed quickly, and the syndrome always carries a risk of death. There's no way to know if she could have had a chance to survive. Still, not even John can escape the what-ifs. What if someone had picked up on it earlier?

He grabs his coat and his car keys. He won't be of any use today, and it's nearly the end of office hours, anyway.

-Sherlock – the world's most observant man – quickly picks up on something being wrong when John gets home. While waiting for John to make them both some tea, he arranges himself ceremonially to sit beside the breakfast bar after having pulled the other chair away from it to signal that John should plant himself there. To John the setup feels artificial and a bit forced – he can imagine Sherlock having made detailed notes on how to behave when he's had a bad day at work based on the argument they'd once had when he had tried to vent and Sherlock had completely ignored him.

Today, John appreciates the effort. Talking to Sherlock when something bad happens at work tends to help, because his viewpoint is always ruthlessly scientific, which often helps John see the core of the issue better when emotions are trying to take over his side of the story.

"Lost a patient today. Malignant hyperthermia."

Sherlock's interest is clearly piqued. "CACNA1 or the ryanodine type 1 receptor gene mutation?"

"We don't know. No family history about it and this was her first GA. I don't know if they'll be interested or able to test the precise type post-mortem." John doesn't ask how Sherlock knows so much about the syndrome; Sherlock always knows everything about everything.

"Was the presentation typical?"

"I guess, but incredibly fast. Dantrolene's so slow to deploy that I doubt we could have saved her even if we had picked up on it instantly."

"The diagnosis was delayed?"

John shrugs. "Wasn't my case, originally. I popped in after Mansoor complained about carbon dioxide readings."

"I'm sorry," Sherlock offers. "The inquiry will probably require your input as Head of Anaesthesia?"

"Yeah. Mansoor does his paperwork well, though, so I think we'll be in the clear eventually." Still, the process that could follow when a devastated family tries to find someone to blame can be
devastating, especially to a trainee.

"Are you alright?" Sherlock asks, "In the context of what should be expected at this point, of course."

Such a Sherlock thing to say. John chuckles mirthlessly.

He has a think on it and comes to the conclusion that he is alright. This is not the first patient he has lost; he has had practice in how to pick himself up, dust himself off, remind himself that all anaesthesia carries certain risks, and to get on with it. If anything, this has been a welcome reminder that the surgical battlefield is not just somewhere far away. When it comes to medicine, all the places where patients are put under and operated on are a part of it. Anything could happen at any time. When things are dull and anaesthetists are sitting around having tea, everything is fine. When they start running—

Realisation hits: he doesn't miss the military per se. He certainly doesn't miss how frequently they lost patients – at King's it's a rare, exceptional event, but in Afghanistan all the army doctors got numbed to it in a way that had bothered John. What he does miss is having a bit of change to his routine; being reminded of what he can do, and how well he can function in a crisis; that he's not a paper-pusher or someone treating the practical side of medicine like reading recipes in a cookbook. Even if today has been the opposite of a triumph, he had done his best and he has enough experience to understand that sometimes it just isn't enough.

He hadn't frozen, when he'd been needed. He had kept his wits about, delegated duties, prioritised, communicated, led. He had not curled up into a ball and waited for someone else to save him. He hadn't succumbed to anxiety. He hadn't had a flashback because there had been nothing to trigger one.

There are potential challenges in every surgery, every hospital, every OR, every day. He doesn't have to go to the opposite side of the world to find them, and today has made him realise how much more comfortable he had felt dealing with this crisis with the competent and familiar staff at King's. He's privileged to work there, with these people: people like Mansoor and Sherlock. In some ways it is grotesque that a tragedy has made him realise that there are many, many things he values about working at King's, but this hard knock was needed.

He has a place at King's. A career. He can make a difference: people are dying here, too, and those patients need him as much as the ones in Afghanistan did. Today, he'd been the right man in the right place, but simply too late.

Some other day, the odds will not be this horribly stacked against them, and they will win.

"I'm alright," he tells Sherlock. "In the context of what is to be expected at this point," he adds with an eye roll that's more teasing than serious. "How was your day?"

“Well, my body count was worse than yours.”

John’s eyebrows shoot up his forehead in surprise. “What??”

Sherlock gestures to his laptop. “Preliminary five-year follow-up data from the Leeds Children’s Hospital has come through. The infection rate has plummeted, and the obstruction rate has dropped from the usual 40% with the old shunts to 18.8%, but unfortunately four patients with my model died within the observation period.”

Oh shit. This is not good news. Sherlock’s shunt and the promise it offers to change the survival
John examines Sherlock’s demeanour carefully to see the effect this news has had on his mood. To his frustration, he can’t tell anything from the way Sherlock is looking, so he decides he has to dig deeper. “Good news with the lower infection rates, at least; that’s so important.” Infections mean hospitalisations, potentially including a need for intensive care, most certainly lengthy courses of antibiotics, and a possibility that the shunt must be replaced. All in all, lots of worries and inconveniences for the tiny patients and their families.

Sherlock sniffs. “Basic engineering, really. Most CSF infections are caused by the shunts clogging. All my version does differently is make that less likely.” He waves his hands dismissively. “Ventriculostomies and shunts are just the crude plumbing; it’s much more important to know why something is happening rather than just replacing or tinkering with the pipework.”

It isn’t like Sherlock to downplay his contributions to surgical practice; John wonders if all the plaudits for the shunt have put excessive pressure on Sherlock to keep coming up with something new and equally innovative. The price of success can be too high, if it becomes a burden on someone who feels they can only measure themselves by their latest achievement. What makes it worse is that Sherlock had reached fame and fortune very early in his career.

John decides that he really shouldn’t let this fester. Molly has taught him to listen, so he’s going to have to ask questions and then really try to deduce what the answers mean regarding Sherlock’s state of mind. "I assume they've linked the deaths to the shunt; otherwise you wouldn't be worrying about this."

"Obviously."

"Post mortem findings?"

“Three of the four died from subdural haematomas.” Factually stated, Sherlock seems calm about it, and continues his explanation: “For one of them, the problem was getting the balance right. After the initial fitting, the setting drained just a tiny bit too much, but it was judged that it was better than under-draining. It was documented that the parents wanted to avoid a reoperation unless it became absolutely vital, and I would have probably agreed – it may not have been possible to insert a new shunt with much better results; that child had anomalous ventricular anatomy. Over time, the slit ventricle syndrome got worse, the surface of the brain drew away too much from the skull and a blood vessel tore. Since she was an infant, the potential symptoms would have been hard to notice, and a shunt malfunction was not suspected until she lost consciousness. She died on the table during an attempt to evacuate the haematoma.”

John sighs. “That’s sad.”

Sherlock shrugs, “The other two haematomas occurred as a result of accidents that only became clear in the post mortem. It’s almost impossible to protect babies and infants from ever bumping their heads. Even when wearing protective head gear, just jarring the skull a bit can be enough to start a bleed if the shunt is exerting any pressure on delicate structures. I can't say yet if a different shunt could have posed less of a risk of a bleed, or if the shunt actually had a significant role in the events.”

Sherlock gets up carefully, clasps his hands behind his back and starts pacing. “It does go to show that Medtronic was right to stipulate as part of the consent process that parents had to agree to a post mortem. It’s incredibly important to get the data, so these problems can be sorted in the next
He stoops to pick up his laptop without bending from his waist. “Take a look and tell me what you think.”

John lets Sherlock lead him through the rough ideas that he’s started to work on. The first is a new kind of sensor in the shunt. “There are two ways that could be used to monitor for infections: an increase in the viscosity of cerebrospinal fluid or analysis of the by-products from an infection. The process of drawing CSF and then culturing it to identify the cause of the infection inevitably delays treatment; in the meantime, the shunt can become clogged, making matters worse. Monitoring the viscosity could signal either infection due to accumulation of protein and white blood cells, or a bleed when red blood cells begin to thicken the fluid. If the alarm goes off, then the patient could be examined, and a proper sample could be taken unless emergency measures were needed.”

They bat some additional ideas about; the trouble is where the sensor unit could be placed. "Could a sensor unit be fixed to the external skin near the site where the shunt goes through the skull?" John suggests.

Sherlock agrees that it could work. "There needs to be centralised, remote monitoring – a bit like what they do with pacemakers nowadays. Or, alternatively, there could be a way to signal the parents. The problem is that no one monitors the parents,” Sherlock argues. “Some will be good at the required decision-making; others are crap and the device would only be as good as the care the child is receiving.”

John snorts. “Yeah, well that’s true of anything related to a continuing medical condition. The design needs to be simple, a bit like modern blood glucose meters.”

Sherlock isn’t convinced. “The same effect could probably be achieved at a fraction of the cost by getting parents to have a closer look at their kids regularly and not letting them jump off the sofa. I had considered if a temperature sensor could be a way to monitor for infection, but kids are sick all the time, especially those who manage to develop a cycle of nearly constant middle ear infections, and that temp gauge would be causing false alarms due to the latest respiratory virus at least once a week.”

They take a break to order something Italian in. Small, thin pasta seems easier for Sherlock to swallow, so John has curtailed his appetite for big, meaty Indian dishes. He had been embarrassed to only realise after weeks and weeks of the halo being a part of their lives how difficult it is for Sherlock to swallow comfortably or cut stuff on his plate without being able to look down. Part of the problem is that Sherlock would probably have never deigned to ask for help in the latter until John had called him out on it.

When the food arrives, John cuts the linguini into tiny pieces and puts it in front of Sherlock with a spoon and a fork. “Re-fuel and let’s carry on.”

They eat in silence, and John has a brief look at the day's Times.

As he slurps up some of the tomato and pesto sauce, Sherlock manages to mumble out: “As I said, basic thermometer readings won’t really help; they just signal an infection with no guarantee it is in the CSF, and even if it could do that, by the time the fluid is tapped and cultured, the shunt might have gotten clogged already. We need to approach this differently.”

“Follow me,” John says as he collects Sherlock’s pasta bowl and his own.

He leads the way into the study, and sets up two chairs in front of Sherlock’s old white board. He
had insisted that it be brought back from the storage downstairs and re-instated on one of the walls: 'you live here, too, and this mind-mapping thing you do is too important to your research for this to be hidden away,' he had pointed out. After the renovations Sherlock had done on the study, John had realised that he liked being in the room – reading or working on his laptop – while Sherlock brainstormed. He has grown fond of the downright adorable, stubborn-looking focus on Sherlock's features when he's thinking fast and hard. 'Mind in motion' is what John had dubbed the sight of Sherlock pacing in front of the white board, moving post-it notes around, drawing obscure diagrams and muttering to himself.

“Keep eating and tell me what to put up on here.”

The food seems to kick Sherlock's brain into a higher gear. "One idea could be to integrate the sensor system into the adjustable valve; if viscosity rose, the valve could automatically open a bit more to prevent clogging. A flowmeter could also be considered to monitor shunt function---- I should read up some more on the latest research on recently discovered infection biomarkers."

John nods and jots down 'flowmeter' and 'automatic floodgates' on the whiteboard.

“Maybe it doesn’t have to be as sophisticated as I first thought," Sherlock points out enthusiastically. "That just might be where so many of the current researchers are going wrong. They’re trying to solve all of the problems at once, with complex, programmable mechanisms that allow adjustments to be made externally but that only lead to cumbersomely large devices being attached the patient's skull.”

Sherlock waves a fork around thoughtfully. “I’m not saying that approach is wrong; it just might be possible to make smaller improvements that can be incorporated quickly and at a lower cost. The sensor doesn’t have to communicate; trying to do that is running into the problem of power sources and data processing and network upkeep and that’s what seems to be holding people up right now – they’re too hung up on how to mechanise and run something that small.”

“You're thinking about something like a trip switch, then? A material sensitive to the presence of biomarkers in infections?”

“Great minds think alike, John. Unfortunately, this is way out of my comfort zone. I’ve been trying to do research all afternoon on some form of a small insert that could detect neuro-filament light chain proteins which are a promising discovery among infection biomarkers. It’s a challenge, because increased levels of NFP are indicative of many diseases from Huntington’s to frontal lobe dementia – even HIV affecting the central nervous system.” He shoves the empty pasta bowl away from himself on the desk and crosses his arms in front of the halo vest.

John realises that Sherlock hasn't indicated any awareness of the vest, verbally or otherwise, for the duration of their conversation. Mind over matter.

“I’m going to need the help of a pretty serious team of neuropathologists and bioengineers, and also a consultant from the microbiology unit. I’m just the plumber, after all,” Sherlock jokes. A grin comes easily to John; his partner sounds like his usual, enthusiastic self today.

"I'll email Medtronic tomorrow. They probably have a bacteriologist whose brain I could pick."

"Shall I leave all this here?" John asks, sweeping his arm across what he has scribbled down on the whiteboard.

"Please do. Your handwriting is atrocious, but legible." Sherlock stands up slowly, and hisses as he
presses his palm onto his lower back. "I shouldn't be sitting down for so long. Something about it strains my neck."

"Want one of those heat packs?" John had stocked up on chemically activated heat packs in addition to providing a regular bit of amateur massage to keep Sherlock from experiencing a replay of the evening when John had found him on the floor in the throes of a back cramp.

Sherlock waves the suggestion off. "No, I just need to walk around for a bit."

John picks up his plate but pauses in the doorway to scrutinise his partner closely. "You'd tell me if there was something I needed to know, wouldn't you?" He can't help recalling the infection.

Instead of evading his gaze or complaining about him hovering or interrogating, Sherlock regards him calmly and amicably. "Of course."

"Maybe we could do an experiment on whether a generous helping of Black Forest cake could help with your back?" John had made sure Sherlock hadn't heard him make the call to the food delivery service. He had wanted the dessert to be a surprise.

His reply is a superior snort. "I'm quite sure I can predict the results of that one."

"You never know; maybe the British Medical Journal would be in raptures," John chuckles.
Molly adjusts her skirt before taking a seat. "I know you have been both looking forward to and dreading talking about Afghanistan in detail. Now's the time, I think; just like we decided together."

Probably to ease John into it, she had spent the second half of their previous session going through neutral details about John's army training before his first deployment, the events during it and some general facts about his second tour.

"I was surprised, at first, how you didn't start grilling me about getting shot in detail right away on day one," John admits.

"We needed to discuss your view of what your goals were, and there seemed to be more acute matters to address first," Molly replies with a knowing smile.

"Such as why I went there in the first place?"

"Exactly. Considering all the good things I have been hearing from you about recent developments in your and Sherlock's relationship, I think the acute phase of that crisis seems to be settling. Would you agree?"

"Yeah. I think so."

"I wanted to delay getting into this, because you were reluctant to focus on yourself until that happened. We've also now gotten to know each other so you might now feel more comfortable discussing some of your tougher experiences."

John nods. "Yeah, I guess."

"How would you compare your two deployments, if you had to do it briefly?"

"First one... It was fine. Could have gotten out of Bastion more, but it was essentially what I was looking for. I remember it was nice to come back, though. Nobody's nerves could take that sort of a working environment for a long time."

"And the second?"

John shifts in his seat, unease creeping in. "I don't know how to summarise it." His fingers curl into the arm rests.

The second tour is a strange jumble of memories, and if he starts to sort them out in his head, the emotional effect is akin to being knocked around on a roller coaster. There is the sense of relief he'd felt at arrival in Kabul – he'd done it, he hadn't stagnated, he's not a paper pusher, he's still fit for this. Then, there are the good things – things he had known would be the same, such as the easy camaraderie, the sense of purpose and the interesting, urgent cases he got to handle when on duty at Bastion.

Then, there are the other things.

During a patrol he'd volunteered for – even though he was on leave and much higher in rank than
the medics usually sent out for such things – he'd seen a boy who could not have been older than ten years old shooting rats with a Kalashnikov while his little sister watched on, utterly unaffected by the weapon and the bloody sight. Not much of a sense of safety in such a childhood.

He remembers the mornings the most vividly, even the moment of disorientation right after waking up when he always reached out to where he expected to find Sherlock's sleeping form, and found nothing but a cold, dusty floor beside his cot. Missing Sherlock was the one thing guaranteed to make doubt over his decision to leave to set in. He longed for the scent of his shampoo and his very essence filling his nostrils as he buried his nose in the blackish curls on the neighbouring pillow. Remembering the dips and hollows of the body no one else was allowed to be that close to made him feel terribly alone. He missed the small, contented sighs that had not decided on whether they just wanted to be relaxed or aroused, elicited by John scooting closer and stroking a hand down Sherlock's side as he began to stir from sleep. Recalling those things always made John wonder what the hell he was doing there in Afghanistan – alone and with fine sand gritting between his teeth – instead of his own soft bed and home full of the most gorgeous man on the planet.

Somehow, he has still always managed sternly to remind himself that that gorgeous man couldn't be the sum total of *his* existence. He’d come here to find other things about himself, and that was enough to drag himself up from his bunk, get dressed and get the hell on with his day. Throughout his workings hours he often found himself wondering what Sherlock would think of the things he saw and experienced. He had been certain that Sherlock would have enjoyed the surgical challenges on offer there – a chance to work with some of the best trauma surgeons in the world to handle massive multiple trauma and head injuries the likes of he has rarely seen, if ever.

"John?" Molly asks.

He must have been silent for a long while, lost in thought. He remembers Sherlock walking into his HDU room. He had been certain it was a hallucination brought on my pain, morphine and anaemia. *Don't be stupid. Sherlock would never come here.*

Why had it annoyed him so much, seeing Sherlock at the memorial service wearing fatigues? Had it been envy? Had he felt that Sherlock has slipped on *his* life without finding it difficult, while he tried to scrape together what was left of it? He remembers how he'd felt that day, the harsh words he'd spoken, but realises that he doesn't identify with those feelings anymore. It's a huge relief.

"It was just a pair of fucking trousers," John mutters, cross with himself for letting such things get to him.

Cross... and somehow, a bit amused. It seems absurd, how wrapped up he had been in seeing the world a certain way. Sherlock must have been so bloody confused about the way he was behaving.

He fights an onslaught of guilt. *He's still here. You haven't fucked it up completely.*

Molly hasn't stopped looking patient and expectant, and she now has a question: "Trousers? That's the first feeling that hits you when someone reminds you of your second tour?"

John snorts. "Just a memory." He clears his throat. "I guess the first thing always is being embarrassed about how it ended. That sort of upstages everything else."

"Why is that? Is it embarrassing to get injured?"

They've been through this bit of dialogue before, but he can't really blame Molly for wanting to call him out on that. "No, of course it isn't. It's just that----" he glances at the door, a sudden impulse hitting to just walk out and not speak of this again.
"Take your time. If it helps, stand up and wander a bit."

Molly's instincts are good – it's uncomfortable trying to talk about this while she's looking on so intently.

John does stand up, and he walks to the window to watch people walking past the building. "I can't shake the feeling that I should have done more. That I went there and became a liability. I froze. I froze, and I got shot and I was useless. That's not me. I didn't think that was me."

"So, you behaved in a manner you didn't expect?"

"Only people who can act in a crisis, people who can function under pressure even go to such places."

"Has this feeling grated on your professional confidence outside of that specific event?"

John turns to face her. "The feeling that I'm a rubbish doctor? Yeah, why not?"

"Are you?"

"You're really asking me?"

"I'd like to give a definition for a rubbish doctor and then assess yourself against that backdrop. Is it someone who becomes overwhelmed when the stress level of an exceptional and entirely unexpected event?"

"Is it exceptional and entirely unexpected, if you've gone to war voluntarily?"

"Consider an act of terrorism in London. Even though the emergency and healthcare services have been trained to handle the associated injuries and to triage and manage large numbers of casualties, such an event will still be quite a professional and emotional challenge."

"Sure," John concedes.

"There is such a thing as normality in every sort of life. When that normality is broken, we are forced to quickly readjust our expectations and our habits. When that shift happens instantaneously, we are very much overwhelmed, shocked, even traumatised. I've talked to lots of ex-servicemen like you, John, and they always say the same thing: they are embarrassed, because PTSD happened to them."

"Nobody likes to think they're weak."

Molly looks sad. "That's exactly where they are going wrong and complicating their own issues. A single event cannot define someone as weak or strong. There's a thing that's stuck with me; it was told to me by a SAS guy who gave me permission to quote him. You know the SAS – probably the toughest guys on the planet and nobody would dare to claim otherwise. What he told me after serving as point man in several warzones and constantly behind enemy lines was this: there is no such thing as a completely strong, brave or weak person. It's all situational. Even these guys have moments when they are absolutely threatening to be paralysed by terror. It's just that they all know it could happen to anybody; nobody is immune."

John returns to his chair, raising his brows to signal Molly to continue.

"As doctors in training, we adapt to high stress levels, nocturnal exhaustion, distancing ourselves from the emotional turmoil of others, and performance anxiety the likes of which most people
never experience and that they could never cope with. As an anaesthetist and an army doctor, your stress-management skills are exceptional. Extraordinary. *By default.* This means that being overwhelmed in the face of disaster is not a reflection on you – it's a sign of how difficult that situation was. It's not a matter of failing to withstand something; it's facing a situation that would have broken the strongest and bravest of men. We forget that, because we operate among similarly exceptional individuals.” Molly’s tone is calm and confident.

“Tell me about something that’s happened recently where you didn’t freeze,” she then prompts.

"There was an emergency at work a few days ago. Malignant hyperthermia. Wasn't my case, but I ended up sort of running the show. It ended badly, but not because we didn't do everything and anything we could. I didn't freeze. I didn't lose the plot. I acted. I didn't enjoy it like I sometimes enjoy stuff that can be anticipated and what doesn't arise from a complication, but I didn't get paralysed. I didn't have a flashback, either. Well, I haven't had those because there's an emergency, but, somehow, I felt like that could have happened. Maybe."

"That's very good, that you recognise that you've still got it, so to speak. I'm glad to hear that you had such an experience – that you were able to function. This is a work environment in which you have become comfortable. Being able to do what you needed to do there just goes to illustrate how exceptional the circumstances of your injury were."

"That makes sense on an intellectual level, but I can't shake the memory of lying there on the street, hearing all those people drawing their last breaths around me, and I couldn't do anything. You always hear about adrenaline giving injured people astounding strength. Where was mine?"

"Are we speaking of the moment when you were already injured yourself?"

"Yeah."

"Remember what you told me about an argument you and the orthopaedist handling Sherlock's fracture had?"

John nods; he does remember discussing it, but he isn't sure what exactly Molly is after.

"You seemed to agree with the ortho's remark that nobody would expect Sherlock to work with a broken neck."

"That's not applicable. A colleague can take over his duties. What I was needed for couldn't wait, couldn't have been delayed or delegated. It was life or death."

"You seem to easily recognise and empathise with the impairments other suffer from because they have been injured, but you are much harsher to yourself."

John sighs.

"Guilt and embarrassment have been major themes in our conversations, and not just in connection to the IED attack. What other parts of your recovery would you connect them to?"

"I don't exactly like thinking about what I did after getting home."

"Which was?"

John grits his teeth. "I skipped physio, at least for a while. Didn't go back to work. Drank quite a lot, which I've already told you about. Made an even bigger arse out of myself than I was."
"Sometimes, when we don't feel good about ourselves, we create a self-fulfilling prophecy about what we are because we don't want to face disappointment again. Does this make sense?"

"So, you think I was deliberately trying to wreck everything even worse? Sherlock kept treating me like I was a good person. I couldn't understand how he could still look at me with such respect."

"What would you say to him about that now, if you could?"

"That I'm sorry. I did ask him why he didn't tell me I was being horrible to him after we got back home. I am sorry, for all of it. But it's bloody pointless. He doesn't understand or appreciate apologies – he says that they don't fix anything except make the one who did the wrong thing feel better."

"Then don't."

"Don't what?"

"Don't plan apologies, because they will never stop and he isn’t looking for one from you. It's good if you can talk to Sherlock about this from your perspective as well instead of focusing on how you think it may have felt for him; you need to get past the guilt, but you also have a right to sort out your own emotions regarding that time period. Now that you have already communicated effectively with Sherlock about many things that have gone wrong after you came back, it's time to look forward instead of back. Don't focus on being sorry – focus on mutual understanding and making sense of your experiences, and on doing better. Clean slate, John. That's what Sherlock is effectively trying to give you, and you need to give that to yourself. You need to start believing you're worth his implicit forgiveness."

"There are still all the things that keep----" John trails out, not wanting to detail the symptoms of this supposed PTSD of his. "---the nightmares and--- things won't stop just like that, because I decide to move on."

"Perhaps I should have specified that I wasn't talking about your post-traumatic symptoms – those very much still need to be dealt with. We will continue these sessions, and there are plenty of excellent exercises I will be teaching you. The aim is not to keep the intrusive memories away but to redress them, if you will. To alter them by giving them a more constructive context. To tether them to things you can control. A crucial part of panic and anxiety disorders is that the patients become afraid of their own fear. That creates avoidance behaviour, which makes the vicious circle worse. You have been very good at exposing yourself to stress and looking at how you have dealt with the situations that have triggered you – those are skills that mean you have a very good prognosis. If you spend your nights fearing a nightmare, who can blame your brain for flooding itself with stress hormones that will keep you up all night? What has happened to you has created long-term memories, altered the pathways of your brain, but those can be retrained and changed. We can't make you forget or erase the effects, but we can change them. A good example of this is that we can take some of the most potent triggers and prevent them from causing a panic attack by what I call re-anchoring them."

John raises his brows, but there is no scepticism there.

"It means deliberately connecting a difficult memory to some other, more positive or at least non-triggering activity or recollection that will help you ground yourself and calm down. It can be an object or a place; some patients find such a headspace by, for instance, imagining interacting with their pets, and for some the visualisation of a location they feel safe in works well. It can even be something a patient carries in their pocket that can help them focus. I will give you an example: imagining this office can act as a neutral, contextual headspace for you. This is a safe place which
you already connect to being able to verbalise what is happening to you and experiencing intense emotions without feeling like you are unsupported or falling apart or being judged. How does that sound?"

"Show me how to do that."

"I'm liking the enthusiasm. With flashbacks we can also look at grounding techniques; using different sensory input to hold on to your physical surroundings. I'd also like to explore some anger management techniques."

"All right," John concedes, albeit reluctantly.

"Do you think your situation has improved regarding being able to experience positive feelings and being able to enjoy things?"

"After I went back to work, yes." John realises that he had been upset about how everything felt so pointless and not even the things that usually cheered him up had helped after they'd come home from Afghanistan. The biggest difference had been with how he'd felt about spending time with Sherlock – instead of it being a relaxing, lovely thing that always made him feel better about his day, it had suddenly become a tangle of guilt, disappointment, stress and worrying about expectations.

"I think you have already moved through the acute phase, so not we have to focus on preventing these patterns from becoming long-term problems. When was the last time you experienced something triggering?"

"I guess.... Two days ago. Sherlock had been watching a classical concert on loud on the telly, but then he got a call from one of his research contacts in Leeds. I changed channels, and there was a documentary on about the Iraq war. The footage and the noise just sort of... caught me unawares." He'd barely kept it together, retreated to the bedroom without even being able to turn off the TV. In the end, he'd had a long, hot shower, trying to stop shaking. By the time Sherlock's marathon call ended, he hadn't felt fine, but at least functional. Sherlock had picked up on something being off kilter and he'd kept glancing at John when they watched a Blue Planet episode together.

"Did you reach out to Sherlock about it?"

"No."

"Not even afterwards?"

"I... managed. I don't want to connect him to these things in my head. I don't want him to think that he needs to keep an eye on me."

"It's fine to need company and support John, but I agree that we should be wary of you becoming dependent on his presence to calm you down. There's also the matter of the problematic aspects of his sense of duty regarding helping you with this."

John taps the right arm rest nervously with his palm. "I don't want to add to that."

"I will need a few more sessions to discern whether I would recommend it in your case, but I should probably ask at this point what your stance would be regarding the use of EMDR?"

"I don't know much about it. I know it's supposed to work, and that some evidence-based recommendations exist regarding its use."
"Let's not rule it out, then."

"That's fine."

Molly gives him an encouraging smile. "I know this is just peripheral talk, and you must be getting nervous trying to anticipate what I'm going to ask about when we get to the actual topic."

"I guess."

"What's the question that you've most afraid of?"

This catches John by surprise. At first, he means to protest that he hasn't thought about it, but there is one thing he would prefer not to discuss at all, if possible. In the hotel in Islamabad, when he'd woken up and not realised where he was----

"The memory or moment or thing you are thinking about right now – that's off limits for now. If I touch upon it when I ask something, tell me to come back to it later. All in good time. I want you to be able to feel safe when we discuss details. Trust your instincts: if something feels too difficult to discuss at any point, tell me and we'll find another angle. First, we ease into it, and one day you'll notice that you can and you're willing to discuss even those things."

John leans against the back rest, feeling slightly less unsettled. He likes the idea that one day, none of this will feel like a punch in the gut.

He takes a deep breath. "What do you want to know first?"
After breakfast, Sherlock decides to catch up on his medical journal digest emails. Trying to keep up on each pertinent journal individually would leave him little time for actual work, so he skims the abstracts and only digs up the full text versions of articles that truly seem worthwhile. On occasion, they are outside of his immediate expertise, such as the one that catches his attention today.

‘In conclusion, the present study suggests that EF deficits in ASD (particularly Asperger disorder) may be different in profile from those in ADHD and follow a different developmental course. If the present results are replicated, they suggest an optimistic picture for ASD in which executive problems become less marked with age, perhaps as a result of targeted educational intervention or individual compensation strategies.’

So, he’s supposed to take some consolation in the idea that his relationship skills just might get marginally less defective with age. He wonders just when this might happen and if it could somehow be hastened.

It’s no use wallowing. The only thing that seems to calm his nerves regarding their relationship is for the other half of it to be reassuringly engaging with him. Trying to solve things on his own, even with the help of medical science, only seems to lead to negative feedback loops in his head and more questions than answers. John has Doctor Hooper to help him reflect on these things; Sherlock has no neutral party he could consult. His sole attempt with Doctor Arthur had been embarrassing and unhelpful.

He closes the article and checks how the upcoming 5th edition of the IARC/WHO classification of central nervous system tumours is coming along. He repositions himself in the new reclining chair he’d had delivered with the new living room cupboards. Even its ergonomic design can’t compensate for the weird muscular strains that he’s been living with for the past two months. The vest makes proper massages difficult, and even if the lower back spasms have eased, there are still the day-to-day pains in his shoulders, neck and calf muscles. John does his best, and Sherlock is grateful for it, but the effects wear off within minutes of the massage ending. He’s tried heat and icepacks – nothing seems able to offer any long-term relief. He’s given up on any kind of NSAIDs making a difference. He is forced to keep moving around the flat like a restless ghost during the day, and night time sleep is still very patchy at best.

After twenty minutes of being constantly distracted from reading by the vest pressing against his shoulder blades, he heaves himself up from the recliner and goes to sit in his desk chair instead. He likes the fact that it has wheels and the seat turns – those things offer possibilities for socially acceptable, repetitive movements to shake off some of his nervous energy.

Soon, he will have survived two months in this hell and there will be one more to go. After the halo, there will be simpler neck braces and physio, but at least he can go back to work and re-establish some of his routines. He'll be confined to ward duty and the outpatient clinic until Laura gives him a soft collar; until that happens, work will be full of having to deal with other people instead of the calming bliss of surgery. Even though he should make a full recovery, Sherlock worries whether the muscular problems borne during these three months will continue causing him grief later on. What happens if even the soft brace is too distracting? Is it going to be months before he can return to his old form in the operating theatre?
This is all fruitless, worried ruminating, of course, and he knows it. He’s in a hurry to get well and a major reason for that is wanting to be able to focus on John, who deserves someone who can support him, love him, help him feel good about himself and his life – just as he does for Sherlock. No matter how often he tries to reassure Sherlock that it isn’t the case, it has been obvious from John’s behaviour from day one that he has been taxed by the halo, too.

Sherlock’s nose is itching, but he’s too busy typing a new search string into the database to do anything about it. A moment later, he realises that he is building up to a sneeze. In a split second, he thinks about what might happen, but the sting of histamine is so strong that he has no way to prepare.

Everything slows down; it’s as if he can feel the trigeminal nerve signalling to his brain, and then his medulla triggers the reflexive reaction. His lungs expand, taking in a breath so expansive that he can feel his ribcage straining against the vest. Then his nose, oropharynx, larynx and upper trachea co-operate to close off his airway and build up pressure. He can feel his diaphragm and chest muscles trying to contract. His face scrunches up, eyes start to close and then…

...all hell breaks loose. The force of the sneeze is somehow throttled by the halo vest and he feels something give. Through the noise of the sneeze he is sure that he had also heard a crack, amplified by the metal and reverberated straight through his cranium to his middle ear. Before he manages to put all this information together or even register the realisation that something may have gone wrong, there is a searing pain in the back of his head and in the pins at the front, too, making him reflexively lean forward. The laptop slips off his lap and onto the floor, and the wheeled chair slides out from under him, dumping him onto the floor. As his tailbone hits the wood, he cries out, terrified that he’s going to pass out from the additional pain.

He stretches his arms behind him to stop himself from falling backwards, which explodes the pain in his head into full-on agony. He gasps for breath, fighting to stay conscious. Black dots dance in his visual field and it is by sheer force of will that he manages to keep his breakfast down when a wave of nausea hits. A few deep breaths reveal it to have been just a side effect of the pain.

Slowly, he leans forward, and groans when his tailbone complains from the sudden movement with a searing ache. There’s a pressure on his forehead, and something seems to be dripping down the side of his temple, tickling the edge of his closed lid.

Forcing his eyes open, he can see a sliver of his phone on the edge of the desk above him.

*John.*

*I must call John. He’s going to be so angry with me.*

---

John shifts the phone to his other ear, as though that would magically make him hear better. He has stood up from his chair without even realising.

"Call an ambulance now, Sherlock. You should have called them before me."

"Can’t. Can’t see. The blood from the pins is now in my eyes." He is whispering, as if speaking louder is too painful. "You’re first on speed-dial."
"Can you lie down?"

"Halo’s fucked. Can only sit; it won’t hold in place if I move in any direction. Got to stay upright and hold it on."

"Alright, so a pin or two has come loose. Is it the back ones or the ones in the front that have shifted, do you think?"

"Front ones are still in place, but they're bleeding," Sherlock's tone is pleading.

John tries to keep his own voice as calm as he can. "Is there any numbness or tingling or---"

"No," Sherlock gasps, "I don't even know," he then moans. "Can’t faint; I’ll fall."

He is panting hard and John can hear the pain in every breath.

“Stay absolutely still,” John tells him, and leans his head sideways to squeeze the mobile phone between his ear and his shoulder while scrabbling across the desk for the office landline. He then hears a sound from the other end that resembles chair legs scraping the floor. "Sherlock! Don't do anything. Just--- just hold tight, yeah? I'll make the call for you, let dispatch know where the spare key is and where we're put the emergency wrench for the halo. The EMTs will have something for the pain. Just calm down, love. Can you try to think again if there's anything else going on than the pain?"

"Yes, no, I’m not sure. All I feel is the pain in my head and my back." Sherlock replies, sounding strained and quiet.

"Alright. That's good, isn't it? It means everything's still in place."

"You can't know that."

"There's no reason to assume anything disastrous has happened. We'll get you to King's and have Laura fix it."

"Fell on my arse. That hurts, too," Sherlock grumbles and John is relieved to hear a hint of snooty disapproval in his voice. Much better than panicking.

He reassures Sherlock some more and tells him to wait on the line as the 999 service answers his landline call. He makes the conversation with the dispatcher short and to the point and announces that there's no sense in him staying on the line since he's not actually on location. After putting down the land line receiver, he talks to Sherlock on the mobile while waiting to hear the front door to the flat open in the background. He chats about everything and anything: tells Sherlock about his workday so far, reminds him of their holiday plans, repeats how many months have already passed from the accident, making it likely that the fracture has already fused. He tries to keep panic from seeping into both their voices, and gradually, Sherlock begins giving more coherent answers to his question about how he's doing.

Most likely the back pins have slipped and will need to be refitted. Sherlock is right that he can't be entirely sure that nothing truly dangerous has happened; until the pins are back in, he continues to be at risk of spinal injury, especially during transport. The fact that Sherlock isn't experiencing any pins and needles or other neurological symptoms – besides a sudden, bad headache – must mean that the broken dens should still be where it belongs.

*God, I hope so.*
Sometimes, it doesn't help at all to be a doctor. It's the opposite, really: knowing too much makes one aware of everything that could possibly go wrong.

Convincing the EMTs to deliver Sherlock to King's, instead of the closest trauma centre, turns out to be a bit of a hassle, but in the end the argument that the doctor in charge of his case would be instantly available there eventually wins.

Thankfully, Laura hadn't been in theatre when John had called, and by the time the transport arrives, she had already requested cervical spine CT imaging. John arrives at A&E just as she is doing a quick initial neurological survey, and he paces just off the curtained-off corner Sherlock has been parked in to give her space to work. Due to the day being extremely busy, there is no private room available.

Laura swings the curtain aside; John steps closer instantly, startling her. "What's the damage?"

"I'll need a CT to answer that, but there are no clinical signs of spinal cord compression. Nearly two months having passed means that the bone should be able to withstand a bit of knocking around."

John steps around her and takes in the sight. A porter and a nurse are unhooking Sherlock from the ambulance monitoring equipment, preparing to transport him to the radiology unit. The old halo ring and vest are on a chair next to the trolley, and Sherlock is wearing a stiff, yellow neck brace. The front pinholes have obviously been bleeding — trails of dried blood reminding John of church statues adorned with bleeding crowns of thorns meander down his forehead and temples. At least the front pinholes have stopped trickling blood — someone has taped small pieces of gauze on them.

Sherlock pulls off a pulse ox sensor from his forefinger, passing it to a waiting EMT. Then, he notices John, who wastes no time in gripping his now free right hand.

"Sherlock— how are you doing?"

"Laura doesn't know yet, does she," Sherlock points out and shakes off his grip.

The trolley starts moving, and John hastily grabs a flimsy blanket from the foot of the bed and spreads it over Sherlock up to his shoulders — there's a cold draft and his dress shirt is bloodstained and unbuttoned.

"I'll see you after the CT," John calls out after the trolley disappears around a corner. Laura has left as well, probably to finish what she'd been in the middle of when John had called her.

John is tempted to jog to the radiology suite to see the images for himself the minute they have been taken, but it wouldn't be much use: he wouldn't be able to tell how the fracture should look at this point.

He realises he's standing like an idiot in the middle of the main A&E corridor. Should he go back to his office? Should he go to the A&E break room? Should he have gone with Sherlock? No, he wouldn't have let John do such a thing. It's just a CT, he is exhibiting no alarming signs that could point to spinal damage, and it won't be long before they bring him back. Still, John can't shake the image of how timid and lost his partner had just looked when answering his question.
"There's good news and bad news. Which would you prefer first?" Laura Arthur asks two and a half hours later. She and John are standing on the opposite sides of Sherlock's trolley.

John’s "the good news" comes out almost simultaneously with Sherlock’s "bad news first".

Laura decides to side with John. "The dens fracture is fusing right on schedule. The fall hasn’t shifted it at all."

The CT had shown nothing alarming, but to be on the safe side since not all spinal structures are so well shown by computer tomography, Laura had managed to finagle an urgent MRI slot as well. Receiving the results could have taken hours more; she must have walked to the imaging unit and gone through the images herself straight away with a radiologist.

John's guess after Sherlock had told him the entire story of what had happened had been right – the whiplash of the violent sneeze meant that the pins behind his head had lost their grip, and the back of the halo ring had descended a bit, putting a sudden levering pressure on the two front pins. No wonder they'd bled. Sherlock's neck is still flecked with dried blood.

Sherlock had told him that, in addition to the sudden headache, an intense pain had developed in his neck after the back pins were no longer supporting the brace the way they were supposed to. According to Laura, the reason for this is that his neck muscles haven't had much to do for months and now they suddenly had to take the substantial weight of his head. The EMTs had managed to hold the halo ring steady by hand during transport and Laura had promptly removed it and the vest at A&E. Without checking the position of the dens it wasn't possible to re-attach the pins, and since the halo was no longer protecting the fracture, a stiff brace was judged to be the best idea while waiting for the MRI and CT results.

Undaunted, Laura continues: “if you’d been wearing just a soft neck collar, then the sneeze and the fall would have caused a much more violent movement, which could have landed you back at square one. The pin gave before the bone did, thanks to the halo.”

Sherlock's gaze contains no gratitude for the contraption at all. John notices how he is meticulously avoiding turning his head even the slightest bit – probably due to having grown accustomed to not being able to do so.

"You didn’t break your coccyx; it’s just bruised," the orthopaedist continues. "I’ve heard you have a reputation for being a hard-ass. You must have been taking your calcium," she jokes.

Not even the tiniest inkling of her amusement echoes on Sherlock's features.

"What’s the bad news, then?" John asks.

"You have to be refitted. I said twelve weeks originally, and that's what we're still aiming for. We can't risk a re-fracture now, not until there's enough of a safety margin," the doctor says, with a slight scrunching up of her nose in empathy. "We'll use titanium pins instead of the ceramic ones you had before – I can promise that with them, you won't have to worry about this happening again. And, you’ll have fresh vest linings, so the smell won’t be as bad by week twelve."

Sherlock closes his eyes, says nothing. John would have expected him to argue like he had on that first night, to make a case for not prolonging the halo treatment since the fracture is fusing. Then again, he had lost the argument to Laura once already, and they're already way past the halfway point.
John spots his fingers curling into the sheet covering the trolley. His lips are slightly parted, and he looks like he's concentrating hard on something.

John strokes his palm down his arm, and Sherlock flinches. "Does it hurt?"

"Not right now," Sherlock replies, and then presses his lips together as though trying to school his expression into remaining neutral.

"Then what----" John starts, but Sherlock's fingers curl around his wrist.

"Don't," he whispers and finally, unadulterated resignation falls across his features. He usually manages to conceal such things – to carefully construct an air of detachment whenever someone insults him or something else unpleasant happens at work; now, it seems that the pain and the stress have exhausted his mental reserves.

"Thanks, Laura," John says pointedly.

They should discuss details and schedules for the coming hours – Sherlock will probably need antibiotics since the pin wounds have probably been contaminated; thankfully the EMTs had managed to insert an IV. He'll need to go back into the OR for the refit, assuming he won't be any more amenable to it being done while he's awake than he was the first time around. But, John is convinced that right now, the thing Sherlock probably needs the most is a moment to digest all this and to compose himself. It shouldn't come as a surprise that the halo needs to be refitted, but John understands how this incident may have given Sherlock a fool's hope of being rid of it prematurely. Anyone who's been under such a strain for months would grasp at straws.

Laura seems to have come to the same conclusion as John after quietly watching Sherlock. She gives John a tight-lipped smile, then steps out and pulls the curtain closed. John wishes they could have had a private room just like last time, but the department remains busy: a pregnant woman who is a VRE carrier and a patient with a suspected psychotic break are still taking up the single rooms. Since Sherlock isn't critically ill, the only option is the surgical non-emergency bay at A&E where patients are only separated from one another by worn curtains.

Sherlock's eyes are squeezed shut, and he pinches the bridge of his nose. For once, he doesn't need to reach through the bars of the halo, but still conditioned by them, he comes at his face from an odd angle.

John grabs his hand tightly, gives it a squeeze, runs his thumb along the delicate ridges of his knuckles. "I'm sorry. At least we know the dens is fusing."

"Make her do the surgery," Sherlock pleads, blinking a few times before his eyes open. He sounds utterly defeated. "Please, John. I can't do this anymore. If she won't operate, then find someone else; she's not the only ortho in London. I can't go back to square one."

"It's not square one. This won't extend how long you have to wear it."

"I've tried so hard, but I just can't do this anymore."

"I know you have. You don't have to convince me. I know."

"I've tried, but everyone just assumes I'm just making a big thing out of nothing," Sherlock laments.

"I sure as hell don't think that, and sod everyone else." John touches the back of Sherlock's hand, their fingers entwined, to his lips. He remembers Laura's comment that no orthopaedist worth their salt would choose a different course of treatment. There probably is someone out there who could
be bullied or persuaded to act differently, but whether that would be the medically sensible option here is a whole other thing. Surgery would pose more risks than continuing with the halo: wound infection, bleeding, an allergic reaction to anaesthesia drugs, some other complication... At least the halo is a devil they know.

"We're more than halfway through," John promises. "Five weeks, just thirty-five days. We can do that, I know we can."

"You're not the one in it," Sherlock points out, voice hoarse. He's frowning deeply at the ceiling. "Easy for you to say – you can go to work. All I can do is--- nothing. It hurts, and I'm tired all the time."

The past two weeks Sherlock has seemed perkier, more energetic to do stuff around the flat and to continue his research, leading John to believe that he is getting more accustomed to the halo than he had hoped might be possible. Seeing his partner now, so miserable at the news that his management plan wouldn't be changed means that there has to be something else that has lifted his spirits and made him cope a bit better.

There's only one explanation: the two of them have been doing better, together. Talking. Not hiding things. Getting back into the physical stuff.

A realisation hits John, and it's the best news he's had today: before, he had been a part of the things that had made Sherlock miserable but now, he has been making Sherlock happier.

The epiphany gives him a fresh injection of determination. "How is the way you feel with the halo any different from what it would be like after having surgery?"

"I'd have just a collar brace instead of that thing!" Sherlock snaps. "I won't be imprisoned again, John, I can't do it!"

Sherlock's eyes fix on John; widened, startled, as though he'd only now realised that it wasn't just a hypothetical scenario they had been discussing. "It makes everything that is wrong with me just worse, to the point where I can't stand being me."

John hears the depression in that statement and it tears at him. They've now left the realm of the rational; trying to talk reason won't work when despondency has so taken over Sherlock. John can't really blame him: if he ever broke a cervical vertebra, he would never consent to a halo. Not after seeing what it can do to someone, even if that someone might be more challenged by it than the average person.

"There's nothing wrong with you, you hear me?" John tells him sternly. "Halos weren't designed with you in mind, but you've made it this far. You've been a fucking champion."

"If she puts that thing on again she'd better have a bed booked at the ITU so that they can put me under anaesthesia for the rest of the time," Sherlock threatens feebly. "Wake me up in two months."

John thinks that it probably would be a good idea to get a bed at a ward for him for at least one night. The hospital has a much better selection of support pillows, and there they could safely administer Sherlock something to have a good night's sleep. Taking anything sedative at home would pose a risk of falling; John feels terribly uncomfortable and guilty thinking about Sherlock being home alone with the halo after taking the lorazepam when he had stormed off to that engagement party. At an HDU bed they could put him on dexmedetomidine or something else that wouldn't mess with his addiction or make him too drowsy afterwards. Just for one night, so that
they could both get some sleep.

Then again, those ITU and HDU beds are always at short supply and this wouldn't really qualify as an intake indication unless John used his position and also really milked the fact that Sherlock is a doctor and works here. He hates pulling rank in civilian life.

He grips Sherlock's shoulder. "I'm so sorry," he says, "There really isn't an alternative. It's just a few more weeks." *A slight understatement.* He removes his hand, reaching off to the side to drag a chair next to the trolley.

Even though they are both physicians, right now there is nothing setting them aside from the other patients and their loved ones at the unit. There's only so much patience and rationality even the most scientifically minded have at their disposal.

Sherlock closes his eyes again, looking like someone who has well and truly given up. John hates seeing him like this: emotions plainly visible on his face, hands shaking with anxiety and cold sweat from pain and distress plastering some of his locks to his forehead.

Sherlock makes an angry rub at his eyes – he must still be close to tears. "This is so stupid," he huffs, biting down on his lower lip.

A downright painful surge of empathy hits John in the gut, bringing with it another realisation: he hadn't felt like this when Sherlock's initial accident had happened. He recalls irritation at his sleep being disturbed. anger at Sherlock's antics, but not what should have been topmost on his mind: concern for someone he loves and relief that something worse hadn't happened. He'd been so wrapped up in himself that it had kept him from registering what was, and is, now going on right before his eyes: Sherlock, in pain, frightened, distressed and defeated.

Now, witnessing him this inconsolable, John would rip out his own heart and give it to him if it helped, because this is worse than feeling sorry for himself after Afghanistan. He hadn't thought anything could be worse, but that had just been him being too preoccupied the contents of his own head, completely oblivious to the one person who had done everything they humanly could to help him, including risking their own safety and going astoundingly far beyond their comfort zone.

John tucks an errant lock of hair behind Sherlock's ear with his free hand; with the other, he's splaying his fingers to join their fingertips together. "It's alright. It doesn't matter if you feel like you can't do this right now, because you sure as hell are not doing it alone. Whatever you need, I'm yours and I'm right here, you hear me?"

Without letting go of Sherlock's hand, John digs out his phone from his jacket pocket, tosses it in the air so that he can catch it on his palm the right side up, and scrolls down his list of contacts until he finds what he's looking for. He selects the number and hits the green button with his thumb.

Lestrade answers on the second ring. "I was just about to scrub in. What is it?"

John straightens his spine to emphasise his point, even though Lestrade can't see him do so. "Remember those unused vacation days you keep hounding me about? Well, I'm going to need to use them right now, and I need you to clear it with the head of HR because I've got more important things to do."
Since it's office hours and there are plenty of senior anaesthetists available, John is forced to take a step back when it comes to the halo refit in the OR to avoid a risk of someone raising their brows at him treating a family member. He decides that it's actually better this way – in hindsight, acting as Sherlock's doctor had actually been a cop-out for him that first night – a convenient way to distance himself from his own discomfort. He’d dropped into physician mode as a way of keeping his emotions compartmentalised. It's hard to keep out the guilt over how Sherlock must've felt during those early days when John had had little clue as to what the halo actually meant for him on a day-by-day and minute-by-minute basis.

He's much better educated, now. It's a shame he's had to learn the hard way.

Consent forms signed, he goes with Sherlock when he is taken from A&E to the surgical floor. While they are waiting, one of the trauma unit's physiotherapists pops by to give them a blow-by-blow bit of advice about how Sherlock should handle sneezes in the future: “Use your fingers to pull the skin taut near the front pins; a sneeze pulls the skin away. Stand up if there's time; your diaphragm works better under the vest if you're standing. Keep your mouth open; don’t even think about trying to get your elbow up to stifle it or to try to just sneeze through your nose. You need as much of the kinetic energy released as possible without it being diverted to the back of your head. If you get a cold, dose up on the antihistamine.”

She then turns to face John. “And don’t let him sit in a chair that has wheels on it.”

John stays with Sherlock in the recovery area of the OR unit while he sleeps for an hour after getting his new halo vest. No one had tried to point out that most adults have the procedure done under just local anaesthesia and John had overheard Laura promptly shooting down that idea when she was talking on the phone with the OR Ward Sister about schedules. Laura must have noticed that Sherlock is in no state for any additional inconvenience. She’s had the benefit of seeing him on a one-to-one basis during the house calls, so knows his situation well enough to give him a time-out under sedation.

Intravenous paracetamol and an anti-emetic had been administered before Sherlock had been taken out of the OR – John had personally checked this. He has also made a mental note to arrange some granisetron tablets to be available at home to combat nausea. Sherlock has been more open about the trouble the halo has been giving him during the past few weeks, but John can't be sure if he has still been reluctant to ask for help and to be completely honest with him about how he's been feeling. John knows that he hadn't been very receptive to listening at first, and is keen to remedy that now. It's tempting to wallow a bit in blaming himself, but that's not going to help right now, is it?

After Sherlock manages to sit up on the side of the bed without getting dizzy, Laura is summoned to check the pins one more time before John can take him home.

She brings a gift of a donut-shaped pillow and holds it up to meet Sherlock’s eye line. He glowers at it and then lifts his eyes to her face, too, in disgust. “You may be surprised at how much your
tailbone will hurt even if it's just badly bruised."

She then turns to address John. "Have you got icepacks at home for his head?"

The sudden pressure on the old pins and the tissues reacting to the new ones have turned Sherlock's forehead into an inflamed, swollen thing. He's had a heavy dose of an IV antibiotic to ward off an infection.

"I think we've got something we can use," John muses. There is a ready supply of ice packs in various shapes and sizes in the bottom drawer of the freezer. That's one thing that the last two months had done— make them better prepared for muscular aches and pains.

"Are you sure you're up to sitting in the car? You look ready to drop," Laura tells Sherlock. "I could pull a few strings, find a bed."

"I want to go home. Now."

John pulls the curtains tight around the area and digs out Sherlock's trousers from the basket underneath the trolley. He'll have to go home wrapped in a blanket and wearing a hospital pyjama top, since he hadn't been wearing a coat in the ambulance and his dress shirt was ruined and binned.

John kneels down in front of him. "Are you sure? Ortho's full, but I'm sure Lestrade could get you a bed at the neurosurgical ward."

If Sherlock could shake his head, he would have. "Not going there to be gawked at."

John reads the determination in his eyes and nods.

Sherlock rearranges his pyjama top and a sliver of the new vest becomes visible. It's otherwise similar to the old one, but the titanium-pinned halo is slightly different in that it has three forehead pins instead of just two.

"Somehow, this feels less annoying than the original one," Sherlock remarks thoughtfully.

John is relieved to hear him finding and admitting to such a silver lining.

Laura nods. "The extra pin might help divide the pressure more evenly."

John digs out Sherlock's shoes, slips them onto his feet and ties the laces. He knows the man wouldn't be caught dead in anything but his leather Oxfords, no matter what recommendations the halo vest instructional leaflets might have about safe footwear.

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The walk to the car half an hour later is painfully slow, but this time John isn't feeling distracted or restless. They'll take as much time as they need, and he'll stare down everyone who gives them so much as a crooked look.

Before escorting Sherlock out of the building, he had grabbed two plastic-lined pillows from the recovery area and taken them to the car. Once he gets Sherlock safely manoeuvred onto the donut cushion in the back seat, he shoves the pillows between his neck and the halo so that every bump won't mean the metal bars hitting the car seat or the window.
Sherlock closes his eyes, breathing a little heavily as though anticipating what's coming.

John buckles him up without being asked and pats his knee. "Alright?"

"This is a new low. Thank God for the tinted windows – anyone who saw this stupid pillow would think I've had a hemorrhoidectomy on top of everything else. Just get it over with," Sherlock replies.

Thankfully, traffic is at its most quiet, and John uses the sat nav to find a route that entails as few traffic lights and roadworks as possible. As they make their way from the parking spot below the apartment block, his hand hovers at the small of Sherlock's back.

The events of today have felt like a re-match; a chance to fix things, an opportunity to get it right on the second time around. A chance to start over; to be what is needed and what John had failed in, at first.

Once they reach their apartment, Sherlock doesn't even raise a finger in protest when John grabs his arm, walks him slowly up the stairs to their bedroom, drags off his shoes and lowers him on the bed. They rebuild the pillow fort Sherlock has perfected on his side of the bed to best support the halo; John then takes the one of their long and thin shaped ice packs and puts it on Sherlock's forehead just below the new pins. The old pinholes, which had been cleaned in theatre but left uncovered, are already sporting round, blackish brown crusts which John needs to keep an eye on. He needs to get the swelling down, and the ice should help.

He covers Sherlock with the duvet and rolls up on his side next to him, draping an arm across his waist, just below the vest. He hopes that the ice and his proximity might help Sherlock avoid focusing on the feeling of the pins and the vest.

"John?" Sherlock mutters with his eyes closed. He sounds nervous.

John hums in confirmation.

"I----"

"What is it?"

"I'm sorry. I'm so sorry," Sherlock sounds terribly embarrassed and close to tears.

John holds him tighter, still careful not to press on the vest too much. “Don’t be – why should you be? Accidents happen. You haven’t done anything stupid or dangerous; the pins losing grip happens to lots of patients with a halo.”

The silence emanating from Sherlock feels wholly unconvinced.

"Don't be sorry, love. It's all sorted, now," John tells him.

After a moment, comes a quiet question: "Stay?"

"Always," John confirms.
"So, I guess we're on a shared sick leave, now," John concludes his summary of the events of the last seven days.

Molly nods. "How did it feel, making the decision to stay at home with Sherlock? Sounds like you made it quite spontaneously."

"I did, and it was surprisingly easy. I just went ahead and called Greg, no second-guessing or guilt over how much stuff was going to have to be turfed to other people. People take leave all the time because a spouse suddenly gets sick or injured, a sick child needs to be looked after, or an elderly relative has a crisis. I'm the one who has to reorganise duties because of that, but it never annoys me to have to do so – it's just life – so why should I feel guilty when I have to do the same? Sherlock needs me right now, but he wouldn't have asked for me to stay at home, so I had to make the decision for us. Simple as that."

"How did Sherlock react?"

"He apologised to me for the inconvenience, which is just wrong. He clearly felt guilty for the whole thing, even though it was an accident, and I don't know how to change that sort of thinking. It probably didn't help that I sort of blamed him when he first broke the dens. I did tell him that he has nothing to apologise for."

"It will take time for him to find the confidence to believe that his needs matter greatly, even under your current circumstances," Molly offers. "Your decision validated his needs, and you explicitly expressed that he has nothing to apologise for – that is all very, very good, considering that you have struggled over your own guilt in thinking that you didn't address his needs so well the last time."

"I didn't realise that until he needed the refit that I felt different this time around – more worried and more scared for him."

"How has it been at home after the refit?"

"Once he – we – got over the scare over the halo giving out, and his disappointment that Laura wasn't willing to shorten the halo treatment period, it's been alright. It's not like a holiday, but it's a damned luxury, getting to spend all this time with him. We don't do anything special, just everyday stuff."

How could he possibly have sent Sherlock home that day in the state he was in, or even the next day if they had put him in a ward bed, and then left him alone in the flat every day? He would have worried himself sick over the fact that Sherlock had already once been driven to considering wrecking his sobriety. Granted, their relationship problems had been a much bigger additional strain on him then, but John would be naive to think they're entirely in the clear now. Sherlock's attempt at apologising for an accident was a clear sign that, while John's thinking regarding certain things is changing, Sherlock is still stuck in some old patterns.
"You have both been rather busy for the past year, so I'm not surprised you're enjoying quiet time at home. By the way, I liked hearing that you realised that he would probably not have asked you to do this for him, but that you saw a need and addressed that."

"I've wondered if, somehow, the way I wouldn't take his help after Afghanistan made him think that's how I expected him to behave with the halo. He said that he didn't feel as though there was room in our relationship for his issues, and I think I might have added to that with something I said in Afghanistan."

"What did you say?"

"It doesn't matter what I said exactly; I think I pretty much made him believe that I think he's weak. That he can't cope unless he's got someone to smooth his way. Stuff I said right before I left was a bit like that, too. That I assumed he wouldn't be able to cope with me gone."

"You think he was under pressure to prove to you the opposite?"

"Yeah," John admits and smooths a crease on his trousers. "I wish he understood how amazingly well he's done. He fought his way to where he is now, that much is obvious. Trying to get him to talk about his childhood or his uni years is like pulling teeth, which tells me he struggled a lot. I hate the idea that I've added to the notion that he can't deal with relationships or with other people. I know I've supported him, but my opinion clearly matters to him a lot more than the opinions of many others, and I worry that I've discouraged him more than I have helped him. That while trying to protect him I've held him back."

"The two of you have years and years ahead of you as a couple, John. What you have or have not done before this day is not to-be-all and end-all, and from what I have heard from you, you have helped bring forward many positive changes in Sherlock's life and his relations to others. He holds responsibility for those things as well; it's not all on your shoulders."

John fights a pang of frustration, which must show on his face because Molly continues. "I can see Sherlock is not the only one having a bit of a confidence issue when it comes to your relationship right now. Let's consider whether there have already been positive recent developments brought on by changes you have made in your thinking and behaviour. For instance: has Sherlock been more confident in asking for help with everyday things?"

John considers this and realises that the answer is a yes. He would never have thought that every tiny thing Sherlock plucks up the courage to asks for help would suddenly feel like a huge triumph when it comes to their relationship, but they do. "He is telling me some things, now, and when he's having a bad day he no longer hides it but comes to get my attention." There has been sulking about the halo. And following John around the flat. And even the occasional threat to use the emergency wrench John had hidden during the first few days after the halo refit.

Now, those things don't make John angry or frustrated in the way they had in the first weeks with the halo. Instead, they're now just signs that Sherlock is trying to signal that he's the one who's angry or frustrated or miserable or all of these things at once and doesn't quite know how to defuse all that from his head. "He's not comfortable, but he knows how to deal with the halo by now. It's just the contents of his head that need managing," John says with a fond smile. "He gets bored. And stir-crazy. And when it's a bad day, he has no tolerance for any inconvenience that the halo's causing, even if none of those things are new."

When the tension rises too much in the flat there have been some arguments, storming off into the bedroom, angry words and eye rolls, but they're not going for the jugular anymore and short-lived friction doesn't feel like they're crumbling the very core of them. Now, it's just normal couples'
stuff – at least that's how it feels to John.

Yes, there have been tough moments during the past week, but there have also been foot massages, ice cream, laughing so hard that John had had to wipe tears off his face, luxuriously lazy breakfasts, lots of crap telly, shared long naps in the afternoon, even the occasional snog on the sofa, even though it takes more logistics and care than it used to. They've done more brainstorming over Sherlock's research ideas, and during one particularly long walk at the cemetery John had even found himself talking to Sherlock a bit about Afghanistan.

"I think we're fine. We can get through this. I have another week of holiday on the books I can use right now, and I will. Then, there will only be two weeks left with the halo. I think we'll have found our footing again by then."

"Even if it didn't change the treatment plan, it must have still been a major setback for him, needing to be refitted," Molly says with a nod. "I'm glad you recognised that."

She seems to be waiting if John continues on the topic. He purses his lips a bit, taps the arm rest and waits for her to take the lead. Talking to her is still not easy, but most of the stress of doing so has waned. It's become one of John's routines, and they don't always discuss things that leave him feeling emotionally drained afterwards. He appreciates her leaving space in the appointments for addressing emerging issues.

"Sherlock seems to have built a good rapport with the orthopaedist treating him," Molly suggests.

"Yeah. I think Laura – that's Laura Arthur – deals with him a bit like I do – doesn't judge him based on other people's opinions, expects him to behave, takes no bullshit from him and won't let him bend her to his will. He respects that, and I think he can tell that she sort of likes him. It's odd, but I think she does."

"Trusting her professional judgment might also factor into it."

"Sure. He'd never let anyone treat him who he didn't think was very good. Exceptionally good, even. He shows his appreciation by trusting people. That doesn't come easily to him. I'm glad to see him getting along with some colleagues and other staff; when I first met him, his knee-jerk reaction was to alienate everyone, to not even try to build rapport because he assumed he'd fail and get hurt."

"You mentioned that you believe that Sherlock is at least part of the reason why you were promoted to your current position."

"My former boss said as much when she was retiring and relinquishing the position – that my Sherlock-management skills were what impressed the brass. I also wouldn't have gotten into research if it wasn't for Sherlock. And, dealing with him has made me think a lot more about how our trainees are doing and whether they feel comfortable talking about their difficulties."

"Could I offer an alternate theory?"

John shrugs.

"You said that you work well together, that in the OR you complement each other. What if Sherlock simply brings out qualities of yours which haven't been that prominent before? You've always had them, of course, but sometimes another person might be the catalyst for finding our strengths. You did these things, John – being able to help a particularly challenging trainee to adapt to a workplace is definitely something that would get your HR skills noticed, but you did the work.
As for research, he didn't do it for you, did he?"

John shakes his head. "He offered some pointers, that's all. He ruled the whole subject of predicting OR usage outside office hours way too tedious to bother beyond that."

"You might feel like being in Sherlock's shadow when he gets attention for his achievements, but you have achieved things, too. You've gone from being a carefree bachelor changing jobs and relationships frequently to an executive position and a long-term commitment both to one employer and one partner you are committed to."

John stifles a wry laugh. "Yeah, maybe that's part of the problem – too much bloody respect. On top of everything, it's easier to imagine him dating some... I don't know... Someone more in his league."

Molly looks amused. "You said that he hasn't dated much, ever. That he's insecure. That he seems unaware of his romantic potential, and that even the way he dresses and conducts himself is mostly designed to keep people away. I wouldn't be surprised if I heard him echo your words about leagues if he was sitting here in front of me, only in his case it would be that he’s not able to reach your heights."

John laughs. If Molly's right, then it means that in some confidence issues pertaining to each other, they just might be evenly matched. "He told me he never believed anyone would want to be with him romantically. I hope I've changed that."

Molly gives him a pleased smile. "Judging by what you have told me and what I have seen, interacting with others may well cause Sherlock an immense amount of stress. What is your joint social circle like outside of work?"

"Mostly colleagues and some old friends of mine. Sherlock's not keen on them, to be honest. He gets stressed out at parties and dinners, especially if we get invited somewhere overnight. He prefers just the two of us."

"Are you happy with that?"

John worries his lower lip. "We had a huge fight about it right before I started seeing you. He had a good reason to skip an engagement party for my uni friend who I hadn't seen in a long time; he felt like crap with the halo that day and I wasn't understanding how much it was affecting him. I would have liked him to come with me, and he didn't. I guess I ended up venting my anger over that and some similar occasions that have happened earlier. I know he goes to his galas and award dinners and all those things because he thinks they're important for his career and he doesn't really look forward to them, but sometimes it stings a bit that his things are the only ones we go to."

"Why do you think he refuses to reciprocate when it comes to events that you want to go to?"

"It's easy to start thinking he doesn't care that something is important to me, but I know how much it takes out of him to deal with people. He keeps looking for these rules and right answers and the right things to say--- I think he has just embarrassed and accidentally alienated himself from others so many times that he doesn't even want to try anymore."

John hates those moments almost as much as Sherlock must abhor them – the icy silence following a faux pas, followed often by someone cracking a joke or throwing in a sarcasm which everyone else understands except for Sherlock, even though it's directed at him.

"Still, don't I have the right to expect for us to go together when we're invited somewhere?"
"That's a question that may be important for you to answer yourself first, before you attempt to resolve this with Sherlock – especially if it has already caused arguments between the two of you. Do you want him to prove his devotion to you by doing the duty of withstanding significant discomfort?"

"Of course not! Sounds like you're taking his side."

"I am not on anybody's side, John. I am trying to help you examine why it is important to you to have him by yours in social situations. You both have the right to feel the way you feel: you, wanting your partner to accompany you and him, wanting to avoid situations in which he feels uncomfortable."

"You're making it sound like I'm using him as a prop. I know he hates all that social stuff. But, I do want to go sometimes. I wish I knew how to make it easier for him."

Molly is thoughtful. "I don't specialise in neuropsychiatric issues, but I do have some advice I give to patients whose significant others suffer from significant social anxiety. Some of that might be useful."

Molly has always taken care to emphasise that ASD is not her area of particular expertise, but they do often touch on the issue when discussing something related to Sherlock, and she has pointed out some reading material to John which he has found interesting and potentially useful. Most of the recommendations come from one of her professional acquaintances, who's a cognitive psychotherapist specialising in adults on the Spectrum.

John prompts her to continue with an eager silence.

"For a lot of people, it's easier to entertain at home than to go visit someone else. They're in their own territory, they can take a timeout if needed, and they can find themselves a task to occupy them."

"Such as?"

"Being the bartender. Cooking. Providing entertainment."

They don't invite people over very often, but John has made note of Sherlock having a tendency to pick up the violin after turning silent and looking bored for a while. He's very good, so people enjoy hearing him play – everyone wins. "Anything else?"

"An out."

"A what?"

"An escape hatch, if you will. A faked phone call from work, for instance, allowing him to leave the house?"

"You're suggesting lying to guests?"

"A white lie to allow him to keep his anxiety from reaching critical levels. Most often, the escape hatch will never be used, but it may be important to him to know that it exists. Some patients with agoraphobia and social anxiety keep a vial containing a benzodiazepine tablet with them when they leave the house. They may never take it, but it's important for them to have it available. You and Sherlock also need to devise a way in which he can signal you when he needs it. I have a friend who specialises in couples' counselling and individual therapy for adults on the Spectrum and I remember her telling me about a couple where the husband often just took off to walk their dog
when they had guests over, and he rarely came back before they had left. It caused major rows because he did it unannounced, but in the end the wife decided that it wasn't the end of the world, and that she could be honest to their guests about it. She adapted, instead of demanding that he stays and risks a meltdown. I'm going to be blunt here, John: Sherlock needs to be your first priority in social situations. It's most likely a massive concession for him to agree to do these things with you. You need to support him."

"I had sort of realised how much it takes out of him, but it's been the halo that has sort of forced him to talk to me about the ASD. I guess always did know some stuff in theory, and I couldn’t miss how it affected him when dealing with people at work, but I couldn't help thinking that, at least some of the time, he chooses to behave the way he does because it's easier."

"It may well be easier for him. He's deliberately bringing on the worst-case scenario – in a way that he can control and in a way that diverts attention from his difficulties by making people assume he chooses to be disagreeable."

"Offence is the best defence. It’s practically his motto."

"It frustrates you to see him struggle, doesn't it?"

"Yeah, because it's... I hate to say that it's not that hard, being nice to people and not offending them, but I can't really imagine why he keeps failing, because I'm not like him, am I?"

"Were you a popular kid at school, John?"

"I don't know. I played sports, so I had teammates. I always had friends, you know, like any normal kid has---" he trails out, realising the connotations of what he has just said.

"I know why you've paused, John, and you're right in that most children do develop the requisite skillset to form friendships with schoolmates. Most children meaning, of course, those without developmental or neuropsychiatric issues complicating social interaction."

"He doesn't have friends. He's got his brother, that's all. He doesn't talk about what it was like for him at school or uni at all, it's clearly a touchy subject. I think he hated all of it – not because of the academic part, but because of, well, people."

"Was he bullied?"

"I don't know. I wouldn't be surprised, but then again, he's devilishly good at getting back at people who are mean to him. Believe me: you wouldn't want to be at the receiving end when he unleashes that tongue."

"Still, that may well be the defence tactic you have described at work."

"Sure. He assumes people won't like him. If someone seems to do so, it takes him by such surprise that I always feel like I have to worry that he doesn't always realise they might have ulterior motives. It's like he's so flattered that he gets a bit--- I don't know. I feel like I have to protect him."

"It sounds as though you might have a specific example in mind," Molly suggests. "It's good if you do; it might make it more concrete for me what you mean."

"There was this absolute---- let's go with arsehole," John decides. "This hotshot ORL surgeon doing a visiting tenure and everyone was fawning over the guy. His visit included giving additional training to regs. We were going through a rough patch and that fucking snake was all over Sherlock, quite literally, and he just seemed flattered and completely oblivious the way that guy..."
was raising my hackles. I still have no idea how he didn't see through all of it. That fucking prick's behind bars, now, actually."

"Why were you going through a rough patch?"

"We'd only just got together and moved in, and I was trying to get my bearings. Sherlock took the fact that I didn't instantly tell everyone about us as evidence that I was embarrassed of him, of us being together."

"Were you embarrassed?" Molly asks. She doesn't sound judgmental.

"No," John decides. "Isn't it bad form to broadcast to everyone right away that you've started dating someone? Isn't it better to wait a bit, to make sure things actually work?"

"It can be detrimental, but that depends on the people involved. Sherlock may not have appreciated the secrecy the same way others might."

"Sometimes, he tells people details about us that frankly, make me blush. I don't discuss my sex life in the OR. Apparently, he sometimes does and sees nothing wrong with it. At least it sometimes occurs to check with me if something is alright. He got a bit more careful about that after I got angry a few times. Now, it mostly just makes me laugh, because what does it matter if a bunch of nurses know which brand of underwear he would prefer I wear?"

Molly chuckles. "My colleague says that individuals on the spectrum are often very painfully aware that they can cause situations that alienate others, and they worry that it will reflect badly on their partners."

"Sherlock doesn't want me to make excuses for him. He does expect me to help if something's happened at work and he needs a mediator, but his worst nightmare seems to be seen as..." the word 'disabled' in on the tip of John's tongue, but he has vowed never, ever to use it again."

"Do you think people he often deals with, at work or outside of it, have put two and two together even if he hasn't told them about his diagnosis?"

"I'd be surprised if they haven't." John has heard some jokes in break rooms, and some less humorous speculation regarding 'what the hell is wrong with Holmes'.

"What do you think Sherlock wants or expects from you?"

"He says it's important for him that I see him and not the diagnosis. I think we've found some sort of a balance in how I help him out. Our head of neurosurgery has been a good support for Sherlock, and the nurse who usually mans his outpatient clinic is really great at cushioning his interactions with patients."

Molly glances at her watch. "Let's get back to where we were last time," Molly says, "I bet you were hoping that talking about Sherlock would be a get-out-of-jail-free card," she jokes. They had run out of time during their last session; what they'd been doing was going through some techniques for John to decrease over-alertness of his surroundings when driving.

"Slave driver," John teases.

"That's what I get paid for."
This chapter (as does a later one) owes quite a lot to Maxine Aston’s book *The Other Half of Asperger Syndrome*, from which several examples pertaining to relationships have been adapted. Not all of the book is splendid, but certain parts of it are perhaps worth a look.
"Have you contacted Andrew about his dinner invitation? He and his fiancée are due to return to Singapore soon," Sherlock points out over tea on Friday morning.

John plants himself on the chair opposite, plonking a spoon into his mug. "I wouldn't have thought you'd want to remind me about that." He opens a newspaper in his lap; there’s an interesting article on the state of the NHS waiting lists that he’s noticed.

"That was the reason he called," Sherlock insists.

"Sometimes people say these things like 'let's get together' just to be polite," John points out, flicking open the paper to the right page.

“Pay attention, John. This is important.” Sherlock gives him a glare, but not an intense one. "I am aware of that… politeness thing." He waves a hand dismissively. “This is different.”

"Andrew did call me back, but we didn't set a date for anything. Well, he tried to, but I wouldn't commit, since I knew you'd hate the idea."

“What excuse did you give?”

“He called on the day after your sneeze. I told him that once things had settled down and you were on the mend again, I’d give him a call.”

"That was days ago. And I’m fine. The old pin wounds are healed and the new halo has not shown signs of disintegrating. It seems important for us to go."

John puts down the newspaper. "But you don't want to."

"Even if it weren’t for the halo, no, I would prefer not to. Generally speaking, I find such occasions…well, I was going to say tedious, but perhaps the better word, the more honest word, would be.. challenging. But, you said you want me to meet them before their wedding. It's important to you that I do. And, I----" Sherlock trails out, hesitant.

"Hm?"

"You'll think it's stupid."

"The dinner?"

"No, what I was about to---"

"Sherlock, say it. I won't judge. I promise."

"It has occurred to me that meeting them while still having the halo may have some advantages."

John's eyebrows crunch up together. "Like what?"

"As well as providing a convenient excuse to leave early, it might also cause Andrew and his fiancé to chalk up certain things to exhaustion and distraction."
John has a hunch about what sorts of things Sherlock is worried about, and his recent conversation with Molly comes to mind. He needs to be careful not to be dismissive; this is one of the very few times Sherlock has voluntarily taken up the subject with him. "You shouldn't think you need an excuse to be yourself."

"I mess things up. At least you'd have something to fall back on, afterwards, to explain."

"Have you ever told new people why it's sometimes difficult for you to----" John tries to find the right diplomatic expression.

"---not mess things up?" Sherlock offers bitterly.

"Sherlock. Don't say it like that."

"It's the truth. Before, it was just me who faced the consequences. Now, it's you, too, whenever we go somewhere together. Your friends will wonder why you choose to put up with it, to deal with the burden of a partner like me."

"If they can't see all of the great things I love about you, they're idiots whose opinions don't matter."

"I still have to have dealings with others. At work, and when we see your friends. Their opinions shouldn't matter to me, but they do. When you introduce me to people you want me to behave. Let me remind you: those were your words. Your expectations matter, especially if you're having to come out of the closet to them. You want me somehow to justify your choice. My being defective doesn't do that."

John cringes inwardly at the word, but he knows that simply telling Sherlock not to say such things changes very little. "Molly asked about that, wanting you to be present when I tell people about us and she made me realise you're right, at least a bit. It wasn't fair on you, saying that I want you to behave and I'm sorry; I didn't realise how it sounded. I know it's a lot to ask – you, having to deal with people who might not like you, but doesn't that apply to everyone? Nobody gets along with everybody. Sometimes, it's been a bit annoying when it feels like you're doing it on purpose – sounding mean, or cold – but that's just my interpretation. I hadn't stopped to think about it from your perspective all that much. Who knows what's actually going on in your head most of the time," John offers with an apologetic smile.

Sherlock purses his lips, clearly thinking hard.

"I do like showing you off," John admits. "That's because I am proud of you and of us. I used to think I just liked being able to introduce you right away when I tell people, because you're gorgeous. And clever. And yes, maybe I feel like that justifies my choice and that doesn't say a lot of good things about me. I also like having you there because people wouldn't dare to have a go at you twice."

"I can repel idiots," Sherlock confirms.

John doesn't hide his smile, because it comes from a place of sincere affection. "See? Sometimes it's you who makes things easier for me around others. Still, I don't want you to feel like I'm using you as a human shield."

Sherlock's lip quirks up in reply. "They haven't bothered me too much – assumptions being made about my orientation – because that's far from the worst thing said or assumed about me by people."
"I know. And that's why I should get the hell over my hang-up about telling people I'm in a relationship with a man."

"It's fine," Sherlock offers very quickly, but his smile isn't reaching his eyes and John remembers their massive row two and a half years ago when Sherlock had believed that John was actively concealing their relationship.

"You, of all people, clearly know how difficult it is to say some things out loud," John says. "You actually didn't answer my question: have you ever tried that approach? Like, telling people you're--"

"If you can't say the word to me, how do you suppose I'd find saying it out loud to people I'm meeting for the first time?"

"I can say it, but you don't like hearing it." John reaches across the table to cover Sherlock's fingers, curled around the mug handle, with his own. "You're on the Spectrum. The person I'm with is autistic. I have no problem telling that to people--"

Sherlock withdraws his hands and stares at John, clearly appalled at the thought that John would be revealing such a fact to others.

"---but I don't, because I respect the fact that you wouldn't want me to. But, maybe sometimes, with some people, it might be a good idea?"

Sherlock seems to relax – but not entirely. "You think people would be more understanding and accommodating?" he emphasises the words as though they were something particularly foul.

"Well, yeah."

"Yes, they might accept my gaffes and be less likely to take offense. But, they will assume I am of lesser intelligence and assume that I will inevitably fail to conform and act strangely, and that I can't do better even if I tried. That I can't learn. They’d praise me for poor and mediocre performance, and I'll never find out how well I could have done. If I could have fooled them."

"Fooled them?"

"Get them to believe that I’m like them, even for a moment. Normal. Or, that the things I say and do that backfire are a conscious, weighted choice. You always expected that I could do better. That I could do well. That I could manage with people at work. But, you're the only one. When I tell people about the diagnosis, they will see everything I do through that lens. When I succeed, they think I did so despite the ASD. When I fail, I did so because of it. It's all I am, to them – a label."

"Fair enough. This conversation really isn't convincing me you want to do this dinner thing."

"Not wanting something is not the same as being opposed to it yet still willing to do it because it's a thing that's important to you. That gives me plenty enough reason to do something I find uncomfortable."

John's jaw drops. "Sherlock, that's... I don't know what that is. Except for one of the nicest and maybe most romantic things anyone has said to me."

"Flattery and courtship were not my motives for saying that."

"You're amazing. You do know that, right?"
"I'm amazing because I don't want to accept a dinner invitation, but I will do so for you?"

"That, too, but the big picture is that you're amazing because you're you."

"Because I unintentionally say things you find funny because I can't anticipate the humour before it happens?"

"Sometimes you do unintentional things which are amazing, that's all."

"Does that mean I never intentionally do such things?"

"No, of course not. You really think we should go?"

"I contacted my tailor last week, and he has managed to find some solution to the wardrobe dilemma. A suit *can* be modified to accommodate a halo vest, after all."

"I love you."

"You love me because a suit can be modified for a dinner party?"

John shakes his head, laughing, then realises what he's doing. "I'm not laughing at you, I promise. I'll call Andrew later today. I'm laughing because--- actually, there's something I wanted to ask you. It's Molly's idea."

Sherlock shoves away his empty tea mug. "Yes?" he asks, barely concealing his apprehension. "She doesn't want to invite me to an appointment again, does she?"

"God, no. Besides, I would have told her that you'd probably say no."

"If she felt it was necessary---"

"No. I will never want to make you that uncomfortable again. What she suggested was that I could talk to one of her colleagues, a therapist who specialises in adults on the Spectrum who does couples' therapy as well. Molly's pointed me to some written resources, but it's not her area of expertise."

"You would talk to this other therapist--- why?" Sherlock's eyes narrow.

"There are things about ASD that make relationships challenging, and things that make them great. I don't want to apply any stupid generalisations to you, but an expert might have some wider insight into these things."

"You don't think I could tell you what you need to know?" Sherlock sounds taken aback.

There's a book Molly had pointed out to John about individuals with Asperger's in romantic relationships with a neurotypical persons. One of the things that had stuck in his mind was: *Most of the partners with Asperger syndrome I have interviewed showed a strong commitment to their relationships and offered a sincere faithfulness.* He wants to avoid thinking that such generalisations – especially coming from non-neuroatypical authors, as Sherlock had pointed out – ever would be the whole truth. But, Molly has certainly been able to help him understand Sherlock better, so wouldn't someone specialising in adults on the Spectrum have the potential to also be useful?

Sherlock looks sceptical.

"I want to understand more, and maybe there's stuff neither of us knows since you've not been in a
relationship before, and I haven't been in one with someone like you," John suggests.

One thing in the book that had been a revelation, is the notion that John is not the only one who has felt like they've gone through a whirlwind romance that had quickly advanced through many stages of a typical courtship. What the book had had to say is: 'if they have fallen in love and felt that they have found a suitable partner who has all the qualities they are looking for, then the topics of commitment and co-habitation may appear in conversation quite swiftly, since someone with Asperger's may see little point in waiting'. Again, John desperately wants to avoid seeking explanations for everything Sherlock does or doesn't do from a three-letter abbreviation, but if some of the things that confuse and amaze and frustrate him – or both of them – may have logical explanations, then why wouldn't he want to be fortified with such knowledge?

"So, what you are looking for are management tricks and rules," Sherlock summarises scathingly.

"No. What I'm looking for are ways in which we can get over difficult stuff if any of it ever has to do with your ASD. Explaining those things makes you uncomfortable, and there's stuff you probably would feel awkward discussing with me but what I might want or need to know about."

"I don't like the idea of someone making assumptions about me and feeding them to you as gospel."

"I won't go if you don't like the idea. Molly just thought it might be useful."

Sherlock goes quiet. John picks up the newspaper again to give him space. When he is almost through with the article he'd meant to read, Sherlock calls out his name.

John lowers the paper down.

"Can I think about it some more?" Sherlock asks carefully.

"Of course."

-o-o-o-o-o-o-o-o-o-o-o-

John unbuttons his coat while they wait for someone to answer the door. "Remember what I said: if you want to go home---"

"Stop. Fussing!" Sherlock snaps from behind clenched teeth.

John takes a deep breath to settle his nerves, just as the door to the Shoreditch loft flat opens. They are in a bit of a state because traffic between West Brompton and Shoreditch had been dire. At one point, stuck in traffic on the 501 even though it's a Sunday evening, John had used the hands-free to call Andrew and tell him they'd be late.

Through the doorway, the two of them can now see cream-coloured sandstone walls and a British Pakistani woman wearing an orange cocktail dress and matching ballet flats. After hellos and giving their apologies for being late, John gives her a peck on the cheek and Sherlock shakes her offered hand.

Sonya Qaisrani invites them into the foyer and prompts John to hang up his coat; Sherlock had left his borrowed parka in the car. Although John has already spent an evening in the spacious
apartment, he's still impressed by the large modern paintings, the coordinated colour schemes from room to room and especially the massive statement piece that is the biofuel-burning fireplace in the sitting room. There are no separating walls between it, the kitchen area, and the dining area.

John spots Sherlock surveying the surroundings and looking if not impressed, then at least appreciative.

Andrew meets up with them in the dining area, carrying a tray with four champagne flutes. Passing them around, he comes face to face with Sherlock for the first time, and lets his gaze sweep up and down. "Blimey. John wasn't kidding. And tall as well," he points out, glancing conspiratorially at John before giving Sherlock a grin. "I hope you're not on some painkiller that'll make you loopy if you drink?" His tone is slightly teasing.

"Nothing heavier than paracetamol," Sherlock replies dryly, and receives a glass.

"Great to have you here," Andrew announces, stepping back. The years haven't stacked on more than a few extra pounds, but he has grown a beard. A ginger of half-Irish descent, Andrew has always been almost stereotypically cheery and loud.

Sonya beams. "I've heard a lot about you both; I was so sorry to have missed a chance to get to know you at the party, John, but you know how it is when you're hosting – too busy to stop and talk."

"Don't worry about it," John dismisses amicably. They don't really host parties at home; he has a hunch that Sherlock would probably rather jam a fork into his own eyeball.

John wonders how nervous his partner is at the moment. He notices that Sherlock is holding his champagne flute gingerly with both hands as though trying to be very careful with it.

"Thank you for the invitation," Sherlock suggests slowly, as though not entirely sure if it's the right thing to say.

John has seen him waltz through charity functions, dealing alright with meetings at work and handling other various social situations with much less awkwardness than he's currently projecting. Everyone probably relies on certain expectations of what's going to happen at more formal events; it must be the intimate spontaneity of spending time with friends that poses the biggest challenge. John realises Sherlock must be trying very, very hard right now, and that's what usually trips him up – either he ends up inadvertently saying something insulting or strange, or he second-guesses himself, plays it too safe, and comes across as disinterested, cold and aloof.

Andrew nods towards Sherlock. "Lucky that I at least caught you on the phone. I hear it was you who nagged to our John here that this dinner was supposed to happen." He raises his glass. "Welcome. To old friends. And new ones."

They clink glasses together. John is grateful that both their hosts are diligently avoiding letting their gaze linger on the halo. Sherlock's Savile Row tailor has done a splendid job in devising a system that gives space for the vertical bars through four slits with buttons, but the rig is naturally still very eye-catching. His suit is navy blue while John's is grey with a conspicuous pinstripe, and he had added a red tie. Sherlock hates ties, and one would probably not compliment a halo. John is happy that he isn't having to put up with the baggy clothes he has hated all through his recovery.

Andrew looks more casual than the two of them in a maroon dress shirt and designer jeans. "Dinner will take some twenty minutes more cooking time, so we have time for a chat. Have a seat." He points to the large sofa group in the sitting area. The path across a carpet to reach it is
narrow, and John sees Sherlock put his glass down on the coffee table first so that he can run his hand along the edge of the sofa to gauge where to go since he can't look down.

"Does that thing hurt?" Sonya asks, sounding worried.

Sherlock takes his time getting seated before answering. John is tempted to offer a hand to assist, but refrains.

"I am constantly aware of it but no, it doesn’t usually hurt," Sherlock replies politely. He then quickly tucks an errant curl behind his right ear. John had done his best last night with his hair, but there's so much he still hasn't learned about what Sherlock does to it when he needs to look his best.

"Is it common for neck fractures to be treated with that?" Sonya inquires. She is not a doctor, but an auctioneer specialising in Chinese antiquities. A splendid job offer she'd received had relocated the couple to Singapore, where Andrew has now also carved a career for himself working part-time as a university lecturer in ophthalmology, and spending the rest of his work hours as a consultant and some sort of a manager at a private hospital. Judging by this apartment, they are doing well. When John had known Andrew as a registrar, he'd shared a flat with a friend in Whitechapel, which back then certainly hadn't turned into a trendy area yet.

"No, he just had bad luck in that his C2 fracture is of a very specific type that should be treated with a halo – The C2 is the second neck vertebra from the top", John adds for Sonya’s benefit.

He spots Sherlock groping around for a pillow, and shoves one between his back and the bulgy back rest of the canvas-covered designer sofa.

"I googled you after we talked," Andrew points at Sherlock with his glass. "I congratulated John at the engagement party on having done well with his career in London, but apparently you're the real star here."

Sherlock is now examining John's expression instead of looking at Andrew. Against the backdrop of their recent conversations, John realises that Sherlock may be worried that such a comparison may irritate him. John surprises even himself by not feeling annoyed at all, because things Sherlock has achieved have not been stolen from him. He needs to be able to be proud, not envious.

He gives Sherlock a smile and raises his brows, prompting him silently to continue talking to Andrew.

"I wouldn't know about that," Sherlock dismisses and downs half his champagne on one go, glancing around the room. He doesn't usually drink, and they haven't eaten since lunch, so John hopes the bubbles won't hit his head too hard.

"How did the two of you meet?" Sonya asks, perching herself on the hand rest of the sofa across from the table, leaning against Andrew.

"Workplace accident, Johnny here told me," Andrew cuts in. "Classic."

"Sherlock came to King's as an SpR – that's specialist registrar" – John adds, for Sonya’s sake. “I was one of the neuroanaesthetists – well, still am, but my current position involves a lot more paperwork than OR work. I helped him out with a project and we got on like a house on fire."

This is a partial lie. They'd definitely had some ups and downs at the start of their acquaintance, and that project had been trying to ensure that Sherlock got to keep his medical licence.
"It sounds a bit romantic; late nights in theatre together," Sonya points out.

"When you've got someone's cerebrospinal fluid dripping onto your shoe, romance is hardly the first thing on your mind," Sherlock comments dryly.

John cringes inwardly. It's fine to say such morbid things in solely medical company, and Sonya maybe be used to that sort of talk from Andrew, but still... He intervenes by changing the subject: “This flat is amazing; how did you ever find it on a short lease?”

Sonya laughs. “It’s not what you know but who you know. One of my clients has a whole string of properties: New York, Paris, here, and Hong Kong. He let me have it for the three months we’re in town, in exchange for the commission on that piece.” She gestures to a horse statue on the console table by the painted brick wall. "That's a Tang Dynasty Flying Horse. London rental prices are even more exorbitant than Singapore, that’s part of the reason why we are settling out there after the wedding.”

"Where do the two of you live, then?" Andrew wants to know.

"Flat in West Brompton, owned by a former UCLH urologist," Sherlock replies.

"As you said, it's who you know when it comes to finding a good deal in London. Do you own a place in Singapore?" John asks.

"Renting at the moment. It's smaller than this, but it's a waterfront high-rise. Can't complain. Once we get back, we might start taking a look at something bigger in the Orchard Road area, especially if we decide to start a family."

"You are a broker in antiquities," Sherlock points out to Sonya.

"Yes?" Sonya turns to face him.

There is no follow-up question, but thankfully she interprets this as a permission to explain about her work. Andrew disappears into the kitchen with his champagne glass to attend to the food, allowing John to watch Sherlock. Now that the conversation is moving forward, Sherlock seems a bit more composed, if not entirely relaxed. He'd had ample time to prepare for this evening, and John thinks the suit must have helped him feel less awkward. A few times when they have attended parties at a short notice, Sherlock has been a bundle of nerves prone to long, cryptic monologues about things people who aren't in his specialty would not understand much about, and withdrawing into himself at the slightest suspicion that he may have said something wrong. Now, he's quiet but listening attentively.

One thing John had told the couple about beforehand was the fact that Sherlock isn't fond of eating anything with big bites or tough chewing, blaming it on the halo keeping his neck in an awkward position. Sherlock has other food preferences and intense dislikes but explaining those would have ventured into territory that would have required him to mention ASD. He had, however, mentioned some of Sherlock's favourite indulgences after she'd asked what he likes. They have been promised soup and lasagne, both of which John knows Sherlock will eat, as long as the soup is one of the varieties he finds acceptable.

Strangely enough, things feel less awkward now that Andrew isn't in the group presently. Were this just the two of them, the old comrades wouldn't be engaging in polite chitchat but reminiscing and throwing around their old sort of humour. John would be focused on him and not Sherlock, but, right now, John is delighted to realise he prefers the current scenario. Sherlock is his first, and in many ways, his only priority tonight. They're here as a couple, and if Sherlock gets uncomfortable
or doesn't feel well, nothing will make John feel better about himself than taking him home. He won't be sorry if his time with Andrew is cut short; he's just a mate, whereas Sherlock is *everything*.

Sherlock throws in a few surprisingly well-informed questions about the Tang dynasty into Sonya's tales about her work – who knew he was a history prodigy as well? As usual, he manages fine if he gets to talk about something factual and concrete, something he's familiar with. His knowledge base is his comfort zone.

John leans back against the oddly padded sofa and lets himself concentrate on enjoying the champagne. It's a small producer's vintage one, a bottle leftover from the engagement party. He is hardly a wine expert, but he knows what he likes. Sherlock has been willing to indulge those tastes when they go out for dinner or are on holiday, even though he isn't keen at all on alcohol.

Once dinner is ready, they gather in the dining area. It seems to be a relief to Sherlock that they are to serve themselves; it allows him to create a tiny portion that elicits a brief, worried glance from their host. In the end, Andrew does not comment.

Instead, he takes up the subject of John's work. "So, any future plans, then? Just stay at King's, enjoy the crumbling NHS?"

"Crumbling is in the eye of the beholder. Compared to the public health care in Afghanistan, it's a dream," John quips back. "Sherlock's running a follow-up study into his shunt design and I've got the Clinical Director gig."

"You don't miss the RAMC? Sometimes I wish I wasn't too old for it, now," Andrew sighs.


"I did miss the RAMC, but not as much as I thought. Had to learn that the hard way," John says, wiping off a bit of soup from his lips. "I went back."

"What?" Andrew asks, clearly very surprised.

John glances as Sherlock, whose spoon has halted. He looks as though he's expecting something unpleasant. He realises that Sherlock hasn't heard him talk about this voluntarily, least of all without getting angry. "They offered a temporary placement, a sort of a mix between a civilian contractor and a serviceman. But, I got shot, and now that avenue’s off the agenda forever."

He expects a pang of embarrassment to set in, but it never hits.

He went to war. He got injured. It isn't surprising or outstandingly rare. After all, Andrew and he had both been needed as army doctors *because* people who go to war, can get shot.

"I hope it wasn't too serious?" Sonya asks.

John scrambles to decide what to say. The truth isn't something that would make for pleasant conversation over winter vegetable consommé or whatever the hell Andrew had called the soup.

He could nod. He could placate, say that it isn't that bad, that most soldiers return with nothing worse than some blisters from walking. But, it would feel disrespectful for Sherlock to downplay what they had *both* gone through.

Suddenly, Sherlock makes the decision for him: "It was serious."
"Bloody hell," Andrew says, shaking his head. "All the more reason to say that those days are over for me, too." He glances at Sonya. "I have other priorities now; that kind of risk taking doesn’t sit in well with family responsibilities."

"I've always been a supporter of the idea that people should do whatever the hell they want to do that makes them happy. But, redeploying because you can't work out a better way to sort yourself out is selfish, not self-fulfilling. It's selfish, if you don't stop to think about the other person who's going to stay behind," John says pointedly.

He desperately wants to know if and how Sherlock is reacting to this statement – this admission – but he can't bring himself to look at his partner. It's still too raw. He can admit this to himself but saying it to Sherlock is a whole different beast. Still, he's glad he now has done exactly that.

He shifts in his chair. "Got shot through my shoulder. They thought there could have been nerve damage, but it was just swelling."

"I consulted a renowned expert in Antwerp," Sherlock cuts in. "There was little need to worry but understandably, John was quite depressed after the incident."

John's eyes go wide. Anger rises in him, and he feels the slight tint of furious embarrassment creeping onto his features. But, he manages to ask himself: what the hell does it matter if Sherlock says such a thing? Isn't this what John has told him: that if people can't sympathise or relate, they're not people one should waste time with. If they don't try to understand when someone is having a hard time, then good riddance.

"Thanks for that reveal, love," John says with a mirthful snort. "Yeah, I guess took me a while to get my head back on straight."

There wouldn't be enough patients for Molly to rent a Harley Street practice space if he was the only one needing a bit of help. Andrew is one of his best mates, and he knows what it's like out there in the desert and in the field clinics. They've been through a lot, him and Andrew, struggled through a lot both in the army and after graduation working in the battle fields of London's A&E departments.

"I've got an army-recommended therapist and she's really good. I'm doing better, now. We're doing better," John says, surprised at the pride in his tone.

Andrew looks surprised. "That bad, eh? Sorry to hear that."

"I couldn't have sorted myself out without this guy, here." He pats Sherlock's knee under the table. "He flew in to get me home from bloody Camp Bastion!"

"You're RAMC, too?" Andrew asks, with a slightly disbelieving tone. John now regrets what he'd griped at the engagement party about Sherlock being high-maintenance.

"No. My brother has some military connections, so I was allowed to travel there." Sherlock's tone is reserved.

"And he was bloody brilliant," John enthuses, "Became practically a temporary consulting neurosurgeon at the hospital while I was awaiting discharge and transport home."

"Well, here's to that, then, and you getting home safely. Both of you," Andrew suggests, and raises his glass of a prickly verdejo grape white.

The conversation then turns to less loaded topics, such as the complexities of obtaining a licence to
practice medicine in Singapore, ivory smuggling, and planning a wedding remotely from another country.

After the delectable lasagne of which even Sherlock serves himself a tiny second helping, dessert arrives. It consists of a deconstructed tiramisu: a marsala-soaked soft sponge finger, topped by a scoop of Italian vanilla gelato ice cream dusted with cocoa powder, accompanied by a shot glass of espresso coffee to pour over the whole thing. John is delighted to see Sherlock tuck into it; the phone conversation he’d had with Sonya about Sherlock’s food tastes has paid off well. Sherlock’s blood is probably fifty percent caffeine, and combining that with ice cream is a sure fire way to the man’s heart.

After the supper, they return to the living room, and Andrew offers everyone a brandy. Sherlock declines, and John has to, too. “Designated driver,” he explains.

“Would you like some tea?” Sonya offers. “Or something soft? I have fruit drinks and sodas.” Sherlock replies, “Water would be fine. Not too cold, if that’s possible. Tap water is best.”

Andrew smiles, “One Thames Water special coming up. You too, John?”

Sherlock is sitting a bit awkwardly on the edge of the sofa; the halo makes his posture look excessively straight compared to the rest of them sprawling back in comfort. John wonders if he is getting tired.

When Andrew returns with the water, Sherlock downs half the water in one go and then puts the glass back on the coffee table before clearing his throat. John notices subtle but unmissable signs in Sherlock’s eyes and complexion that are a testament to the number of glasses of wine he has had.

“I would like to … um…ask a question, but I don’t know if it would be too personal,” Sherlock declares.

John can see that he’s conflicted, curiosity warring with his anxieties about making a social gaffe. He hopes to God that this doesn’t go down wrong with Andrew and Sonya. He’d steer the conversation to safer ground if he could, but that would require that he actually knew what Sherlock is about to say.

Andrew is smiling, “Fire away.”

“I notice, Andrew, that you are not wearing a ring, but Sonya, you are. Is there a reason why only one of you is?”

Andrew manages his surprise. "Well, to be honest, it never occurred to me to do that during the engagement. When it comes to after the wedding, I know Sonya wants me to wear a gold band next to the one she's got now, but I may not be able to. My fingers swell in the heat, making any ring uncomfortable, and during clinical work I'd have to take it off, anyway. My father’s signet ring that he gave me when I was eighteen was actually a casualty to the heat a couple of months ago. A tight squeeze in the outside heat and humidity then had problems with the air conditioning indoors—which in Singapore is quite ferocious – so my pinky finger shrank in the cold to the point where the blasted thing fell off. Lost it somewhere in the university. I wouldn’t want to risk that happening with something so precious."

With a pang of guilt, John realises that his own engagement ring is lying in the bedside cabinet collecting dust. He does remember its existence every once in a while, but he has never thought that a lifeless object was that big a deal when it came relationships.
Sherlock had stopped wearing his, too, and it has never occurred to John to ask why. He had just assumed it was inconvenient, and neither of them had developed any sort of a routine for taking it off for work and remembering to put it back on.

Sherlock has to turn his whole body to be able to see Sonya properly, but he does and asks, “This problem does not happen for you?”

She smiles and gets up to come close enough to put her left hand where Sherlock can see the diamond solitaire ring clearly. Then she turns over her hand to show him the palm side. “Look closely. I can cheat. There is a soft silicon gripper on the inside of the ring. It stops it from shifting about when the temperature changes. And it’s worth it. When I get the wedding band to match this lovely diamond, then I will be able to wave it in the face of every client, art dealer and hotel staff member who makes an amorous advance or treats me like a little girl.” She giggles, “I think of it as my body armour. Marriage is a sign of adulthood and prestige in some of the countries where my major clients come from. It often shocks them that I’m not the secretary.”

Her fiancé smirks. “And before you ask the obvious, turns out I’m allergic to the silicon; gives me a rash. In my case, no woman in their right mind would throw themselves at me, and it’s not something that the men in Singapore wear; wedding bands are not used in Chinese, Malay or Indian cultures; only a few of the expats do.”

Then, Andrew drops John right in it: “So, what’s the story on you two? Wedding bells chiming anytime soon?”

It is very quiet in the car on the way home. John has taken the advice of the satnav on this occasion which means avoiding the West Way. The southern route is taking them through the City of London and along the Embankment. At this hour, traffic is heavy but still better than it would be have been in the afternoon. London’s congestion only starts to calm down after midnight and they’d left at ten thirty.

They’ve just turned onto the Mall, heading for Buckingham Palace and then on to Hyde Park Corner when Sherlock finally speaks: "Well, what should I have said?"

"Maybe a little less honesty would have been better." John manoeuvres the SUV across the six lanes of traffic at the Hyde Park Roundabout. Getting from Constitution Hill to the exit to Knightsbridge is always challenging, and he takes extra care at night. Who knows how many of the cars have drivers who are near or over the alcohol level? When the lights turn red just past Harvey Nichols, John has a chance to turn to look at Sherlock, whose eyes are firmly fixed forward. He knows that this is the halo's doing, but wonders if it’s remarkable convenient at the moment, because it allows Sherlock to avoid eye contact.

Before he can say anything, Sherlock beats him to it. “You were the one who said that if someone could not accept us for who and what we are and how we choose to live, then they are not friends.”

“Yeah, but I’ve never said I wasn’t ready for a wedding.”

“You aren’t.” And then as if he isn’t sure of that statement, Sherlock asks, “Are you?”

John has to decide. And that makes it hard, because Sherlock is right, in one way.
“Well, not at this precise moment. It’s not like either of us has been on top form lately, has it? Making a decision like that while I’m dealing with Afghanistan and you are still in the halo—well, it just doesn’t seem the right time to be talking about weddings.”

There’s a pregnant pause, before Sherlock asks what he must have been brooding over: "Will it ever be a right time?"

John snaps his eyes back onto him; they’re stopped at a red light. "Of course, it will. I proposed, remember? And, I meant it."

"Things change. People change. If…”

“We’ve been over this. I said I would never leave you, Sherlock, and that’s not on principle but because I can't imagine ever wanting to. I meant it then, and now. Whether you or I wear a ring before, during or after some hypothetical wedding is irrelevant. We're not in a hurry to do anything like that since I’m not going anywhere."

Sherlock’s forehead gives a thoughtful but subtle crunch since the halo limits how expressive he can look. Finally, John gets a chuckle in reply: "That had better be metaphorically speaking, because the light has been green for a while."

On cue, a driver in the car behind them hits his horn and flashes his lights.

Smiling, John puts the car in gear.
"He said yes. Mulled on it for days, but he said yes to me talking to the colleague you mentioned."

Molly looks a little surprised. "I have to say I was sceptical."

"He's just worried that I'll start applying some inaccurate generalisations to him. I think he wants me to understand more, and since he doesn't always know how to explain things, maybe it could be a relief for him for me to learn more without him having to be the one educating me."

"Do you think he'd be willing to attend with you? Sometimes that can help relieve anxiety about this sort of thing."

"I asked, but he was very, very clear. Said he'd had enough therapist visits to last him a lifetime, and it would be a cold day in hell before he'd ever willingly agree to another. It made me realise how much he wanted to help me by showing up here that one time with you."

Molly nods. "Besides fearing being stereotyped, he may also feel threatened in other ways, and very keen on hearing what exactly you've discussed," Molly warns.

"I'm going to be honest with him about the contents of the appointment, if he asks. It's great that he said yes, that he trusts me to try to make something good out of it. I've weighed the pros and cons, believe me."

"I'm pleased to hear that. We're not trying to explain away all the potential problems and challenges in your relationship because of the ASD – we're merely trying to increase your awareness of potential issues so that you could circumvent them together."

"Exactly. That's how I was trying to explain it to him."

"I agree that you should be open to him about what you've discussed. If it helps, you can tell him it's just a consultation, that you are not planning to engage in an additional therapeutic relationship. You'll want to emphasise that this is not the focus of your therapy, just a side dish, so to speak."

When John arrives home, he finds Sherlock in the bedroom; he'd been waiting for John so that he could have a bath. John almost compliments him on being sensible in not trying to do it on his own – even though he is now quite good at managing with the halo, getting into and out of the bath would be dangerous alone.

Sherlock's wash-up plan fits very nicely with the fact that John has a surprise for him: he'd stopped by at the traumatology outpatient clinic and picked up a new set of thick fleece lining for the vest. He had convinced Maude at the outpatient clinic to show him some pointers on how to loosen the straps symmetrically and just enough to tug out the old one, and how to use a ruler to slide in the new without any folds remaining. It had been Sherlock's request to try fleece under the new vest instead of sheepskin, and it does seem to itch a little less, but there's been more chafing. This probably also has to do with the lining being new. As Laura had pointed out, fleece gets foul faster,
so John is determined to ensure it gets changed before it's time to take off the vest entirely. He knows Sherlock has been upset over not being able to keep up his meticulous daily hygiene routine.

Once Sherlock is sitting safely in the bathtub, John plants himself down on the chair they're now keeping next to it, and presents the lining packet to him. He wasn't exactly expecting Sherlock to be over the moon, but he does get a careful smile. John knows he loves baths, and maybe the warm water also helps with the aches and pains the halo rig has introduced.

"You want some quiet time?" John asks, pouring in a bit of the lavender bath oil Sherlock buys from that posh place on Oxford Street. "I could make tea and leave the door open so that I'll hear if there's anything you need. I can bring it here for you."

Sherlock runs a finger up John's shirt-sleeve-covered left forearm. John is convinced that he has lost some muscle mass in the bicep after his injury, but the one on the right is still well-defined. "No, stay."

John turns the chair so that he can lean his elbows on its back rest and his chin on his palms. Sherlock watches him, sitting motionless with his legs bent at the knees and his arms outstretched along the sides of the bathtub. He doesn't look shy, not exactly, but he is clearly aware that John is allowing himself a full survey of him.

John can't not look. He thinks that only a blind person wouldn't let their gaze linger in what he is seeing: the perfect, pale, smooth curves of Sherlock's narrow hips, the lithe runner's leg's, the concave stomach. He wants to nip his teeth at those collarbones, run his tongue up the side of that long neck – damn, damn, damn the halo right now!

Sherlock is stretching out his arms in front of him now, splaying his long, now slightly wrinkled fingers, and his cock seems to be showing signs of interest under John's scrutiny.

An idea occurs. John stands up and unbuttons his dress shirt. He discards his trousers, socks and pants in a pile near the sink, and then grabs the edges of his T-shirt.

He hesitates for a second, which Sherlock instantly notices: "John? What are you doing?"

"Joining you," John answers, fingers still pinching the hem of the shirt. Still hesitating.

He has been sleeping with a T-shirt on since he came home from Afghanistan. He doesn't like seeing the scar in the mirror. He doesn't like anyone else seeing it, either. But, he can't back out now. He doesn't want to back out now. He wants to get in that bathtub with that utterly beautiful man who belongs with him.

He takes off the T-shirt and turns to face Sherlock. He hadn't been prepared of how exposed he feels; small, somehow, under the gaze of a person who looks like a Greek statue even when they've got an unsightly metal contraption screwed into their head.

In three weeks, the halo will be gone, and Sherlock will look the way he always does. John, on the other hand, will carry the unsightly scar of his own bad choices forever.

Sherlock straightens his lower back, swivelling his hips so he can turn to see John better. His gaze is, unsurprisingly, fixed on the bullet wound.

John curls his lips around his teeth, glancing away, but he doesn't grab a towel to cover himself.
"Show me," Sherlock tells him quietly, and John likes how it's almost an order. He doesn't want to have the choice to hide anymore. Not from Sherlock.

He sits in the chair next to the bathtub, the wood feeling cold under his bare buttocks. Sherlock's gentle fingers begin tracing the surgical scar that stretches from his collarbone towards his bicep. The staples had been left in quite long, so there are small parallel scars commemorating them jutting out from the main incision. In the middle of the main scar there is a raised, crater-like area with a pale middle; it marks the entry site of the projectile. After traveling through the soft tissues in the front, it had gone through his scapula exited, then bounced back off the ceramic plate of his bulletproof vest and caused some more skin and subcutaneous damage. The surgeons had fished the fragments out from the back of his shoulder, where there is the aftermath of a smaller surgical incision visible, as well as the exit wound and the scattered, small, re-entry wound scars.

Sherlock splays his fingers on his shoulder, strokes just the fingertip of his thumb on the entry wound. "It looks alright, John," he says quietly, and it's a promise.

Maybe, if Sherlock says so, it could be alright. Sherlock doesn't lie, doesn't obfuscate, doesn't throw around empty praise. When he says things like this, he means them.

Sliding his bottom closer to his legs, Sherlock slips his hand back into the warm water; the examination is over. John stands up, then flings his leg over the edge. It takes some jostling to arrange himself so that Sherlock is sitting comfortably between his legs. It's a pity that the vest prevents him from leaning his head against John's shoulder – that's how they usually do this. He sits up a bit, and Sherlock leans a bit forward but presses his lower back against his stomach. He reaches his right arm around Sherlock's waist, letting it rest at the start of a soft trail of curls reaching downwards from Sherlock's navel begins. The fingers of his left hand he threads into Sherlock's hair, eliciting a contented sigh from his partner as John tugs his way through the worst tangles. Sherlock squirms a little, and his shifting around in his lap is reminding John that there's nothing stopping them from making use of the fact that they're both very naked right now.

Sherlock's thoughts seem to be going down that same road. This wouldn't be the first time John giving him a bit of a head massage turns him into a limbless, wanton thing.

"I wouldn't say no to your hand," Sherlock suggests.

John grins. "I'm already giving you a head massage. Getting greedy, are we?"

"Your fault for spoiling me rotten. You do have two hands, so why leave the other one unoccupied?"

"Maybe I should teach you a lesson," John whispers straight into his ear, and grins at the shudder this brings on. "Leave you all hot and bothered for days."

"You wouldn't be cruel like that," Sherlock replies in a mock scandalised tone.

John replies by sliding his right hand promptly to Sherlock's cock and gripping its base with just enough force for it to be possessive. "No, I wouldn't," he laughs, and begins slowly stroking along the entire length, loosening his grip slightly so that the movement would be more fluid. He flicks his thumb across the tip on every stroke, creating small waves in the tub since his hand is submerged.

His hesitation for Sherlock to see the bullet wound seems a bit silly and distant right now. He doesn't have to learn to like the sight of it, but the only one whose acceptance he really needs has given it without a moment's hesitation. It's suddenly easy to let all that go and to focus on the
feeling of warm skin against his own.

In a few minutes, John's head is swimming with arousal from the sounds he's eliciting from Sherlock. None of his girlfriends had even been this sensitive; maybe it's the only upside of the SPD. Then again, if Sherlock had ended up in bed with someone not willing to take into account that he can also easily get overwhelmed with too much sensation, the result could be a disaster.

John nips his shoulder with his teeth and Sherlock's hand reaches back to give John's thigh an affectionate squeeze.

A splotchy, rosy tint of arousal has spread on Sherlock's chest.


The baritone vibrates along John's spine down to his tailbone and blooms an even more intense warmth there. Then, he suddenly remembers that Sherlock still doesn't know what the H stands for. He now thoroughly regrets what he had said about never wanting to let Sherlock know such a thing about him. Everything about him should be Sherlock's. They're engaged, for fuck's sake.

"It's Hamish," he says, and trails kisses down the side of Sherlock's forearm.

"Hamish," Sherlock repeats contentedly.

It's strange how, sliding over Sherlock's lips, the name John had hated all his childhood doesn't sound that embarrassing, after all.

"Quit stalling," Sherlock orders next, and shifts forward in the tub so that John can climb out and they could start turning his earlier command into reality.

-Thirty minutes later, John lies with his head on Sherlock's bare abdomen, below the end of the vest. Heady evidence of their lovemaking hangs in the air of the bedroom and in the sheets John has shoved half off the bed so that they'd get taken to the laundry basket. Neither of them seems to want to move, since time seems to have slowed or disappeared altogether – or so John would wish. He's perfectly content just lying here, blissed out and satisfied.

'Oxytocin and endogenic opioids', Sherlock had once said to explain away this post-orgasmic languid laziness.

'Love's a nicer word,' John had countered.

It's not just the physical side of this moment John loves – it's the fact that he feels like they can speak more freely; that it's easier to say things that would sound silly in other contexts and which Sherlock would thus be prone to dismiss as mushy sentiment.

John rolls to his side, props himself up on his elbow. Sherlock can't turn his head to look at him unless he rolls entirely on his side.

"Hamish," Sherlock repeats, brows scrunched up in the most adorable configuration. He's thinking, hard, and John wonders why that stupid second name of his is suddenly so important.
"William," John replies with a smirk. "God, that doesn't suit you at all, does it."

"My parents would disagree with you but then again, the William they knew was, in part, a false construct. A front. Someone who tried to heed the advice and rules of all those therapists and content himself with some profession deemed suitable by others. It would have been a slow death by tedium. Eventually, I got tired of keeping all that up, so I sent William packing."

"I'm pretty sure I like you better than him."

Sherlock rarely talks about his formative years. John would like to know more, but he can sense his defences instantly springing up whenever he has tried to ask something. Besides his family, has there ever been anyone Sherlock had cared about? Is the fact that he won't talk about his time at Cambridge or medical school or the early stages of his specialty training a sign that there are things there that are particularly painful?

"Whenever I have to spend time with my parents or Mycroft, I don't feel like they see the same person as you do," Sherlock muses.

"It's probably like that with parents for everyone. They see some snotty-nosed little boy in wellies, no matter what sort of a life you've carved out for yourself. Parents tend to forget that their children grow up and live independently. I never want you to pretend to be something you're not with me, not about anything." John slides a hand on his stomach, thumb gently smoothing down the trail of soft, now slightly sticky hairs that meanders downwards from Sherlock's bellybutton.

"I wanted to manage when you were away," Sherlock changes the subject. "I've always been able to focus on work, and I've lived alone, before. It shouldn't have been that hard. It was disconcerting how much your absence complicated things."

John leans in to press a kiss on his hip. "You're allowed to say you missed me. That it was crap, being alone. That you didn't understand why I left, and that it was too much when you didn't hear from me for days. You should have told me. I won't think less of you if you say those things. I'm not here only if you behave, and you're sure as hell not my second option. You will never be my second option, because that was everyone else. I pushed Natalie away, because she didn't feel right. You do. You always have."

Sherlock slowly turns to his side, shoves a pillow under the halo. "John," he says, voice thick with things he may not know how to turn into words.

Now looking straight into those strangely coloured eyes, John says softly, "I love you. You're the best thing that ever happened to me." He reaches between his knees to pull up the one sheet that is still in decent condition to cover them up to their waists.

"I never thought I could be the best thing that happened to anyone."

"You just hadn't met me, yet."
Molly's therapist friend is a psychiatrist called Joanna Pichler. John likes her from their very first meeting, and because she isn’t probing into his particular issues, he feels able to relax. Perhaps already having established a working relationship with Molly also makes the start easier. She had been the one to arrange their first meeting since there was usually a long waiting list to see her. Doctor Pichler's English has a pleasant Austrian lilt, and John finds her easily approachable and with a good sense of humour. She's a Cambridge graduate like Sherlock with short, gracefully greying chestnut hair, a lithe figure and a conservative dress sense. She's much what John would have expected.

With John's permission, Molly had explained some background information to her prior to the first appointment regarding Sherlock and the reasons John had sought therapy. Fifteen minutes into their first appointment, after listening to him explaining their recent relationship troubles, Joanna is eager to remind John that no two people on the Spectrum are the same. "I hate generalising, but I do have some material which I give to most of the spouses of individuals on the Spectrum which I think anyone in such a relationship would benefit from reading. It details what it means for an autistic individual to have a hyperactive sensory systems and other sensory processing issues, how a lack of social skills does not equate a low level of need for social interaction, and how flirting can be outstandingly difficult for some on the Spectrum, but loyalty and affection can almost be too easy. Some, all, or none of it may apply to Sherlock, and you will have to be the expert on that and to correct me if my conclusions do not seem to fit. It's not fair to make assumptions. I like to say that my patients are here because they are people having psychological issues and they happen to also be on the Spectrum; I never say that they are here because they are autistic. And, when I have a consultation with someone like yourself – a partner of someone on the Spectrum – it's important to help you see that only some of the issues you may be grappling with relate to the condition. Try to keep an open mind, John."

Most of his questions do seem to be so Sherlock-specific that Joanna isn't able to comment much without knowing him. One of the things John finds himself doing early into the appointment is describing Sherlock's behaviour during his deployment. He asks why Sherlock would want to hide so much from him.

"He may have wanted to conceal those things, yes, but something one of my male patients once said to me has stuck with me," Joanne replies, looking thoughtful. "His partner was what one might call a career woman who travelled a lot for work. He said that he wanted to keep an emotional distance, to be detached so that he would feel less pain from the separation."

"But, it doesn't work like that, does it?" John asks. "I now know that Sherlock was upset and scared by my going to Afghanistan, but he didn't show any of that to me before I left. It actually upset me a bit how little he appeared to care about me going away for months; I didn't realise that it was an act. It took him months to start expressing how he really felt about it, and without being stressed out by an accident that put him into a halo to stabilise a broken neck and what was going wrong between us, I think he would have hidden all of that from me forever. I had no idea what he was feeling when I was away, let alone that they effectively put him on sick leave. If I'd known, maybe things would have been different."
"Would you have cut your deployment short? I assume that is not possible, at least without a spouse becoming severely ill or injured."

"Yeah, I'm not sure this would have qualified. It would have stressed me out."

"Have you considered that Sherlock might have worried that you would be distracted if he communicated about not coping well, which could have put you in even more danger? Keeping his distance could have been useful to protect you both."

Joanna's suggestion makes sense. After working with Molly, John knows now that he shouldn't blame Sherlock for not stopping him from another deployment; he'd been trying to let John do what Sherlock was convinced he needed to do. Molly had helped him see that Sherlock had simply been under a lot of pressure to show that he could cope and now, Joanna has given him another angle. Shoving all those feelings aside to try to protect both of them is something that John hasn't thought of before, because it hasn't occurred to him that someone might be able to do so, at least for a while. He has always known that Sherlock's defences are formidable, and this gives him a new-found sense of awe about them. This must have been Sherlock had been able to function in Afghanistan – focused, determined, unwavering, brave and seemingly unfazed by the unfamiliar surroundings – he had compartmentalised, blocked it all out. But, those emotions eventually have to be processed and John has been glad to see them resurface recently, as painful as they may be.

Joanne gives him a patient smile. "It's important to see it from his perspective. So many on the Spectrum have been told that they don't understand emotion, lack empathy and are poor at communicating their feelings. Would you feel confident in talking about your fears to someone you cared about under those circumstances? Particularly if that person is not wanting to hear anything negative? Even if he felt he should tell you what he was feeling, Sherlock might have worried that he'd be unable to explain it in a way that wouldn't make you think of him as weak. All his life, he may have been told that he's unlikely to be able to live a totally independent life, to be able to cope on his own. A belief that one is poor at life skills and communication becomes a self-fulfilling prophecy for so many on the Spectrum. Avoidance is often a fall-back strategy."

Towards the end of their first session, Joanna offers some useful insights into managing expectations and communication: even though Sherlock seems very averse to talking about his feelings and their relationship, having such conversations and saying stuff out loud that to John may seem self-evident is, according to her, outstandingly important: "When your reaction isn't so extreme that it's blindingly obvious, it may be particularly difficult for him to pick up on your feelings when you are unhappy with something he has done or not done. Even if he does realise something is wrong, he may not be able to recognise the difference between upset, annoyed and angry. And even if he comes to the right conclusion, it may then be very difficult for him to analyse the reason why you are reacting in that manner. So, the solution is simple: tell him. Explain yourself. 'I am angry because...,' and so on. This puts pressure on you, because you have to be honest with yourself: are you angry or just annoyed; is this worth the stress it's going to cause him to try to process what's going on? And, when you do give him feedback, it is crucial to focus on the behaviour, not the person."

"What do you mean?"

"Avoid phrases that start with 'you are', and especially ones that contain the words 'always' or 'never'. This is good advice for anyone in a relationship, of course." She smiles. "Start with yourself. 'I feel angry, because...'. In my professional experience, what seems to cause the most stress in a relationship for someone on the Spectrum is when you inadvertently reinforce their own lack of confidence in themselves. If you tell him how you would wish for him to change his behaviour, you are giving him something concrete to work with. If you judge him and ask him to
change who and what he is, he can’t, and that will be soul-destroying.”

John nods, thinking back to their argument at the end of the first week with the halo. What he'd said to Sherlock in anger had been pretty heavy with the words never and always.

"When he seeks to communicate about his feelings, be patient. Give him time. Don't try to help by putting words in his mouth or trying to explain to him how he must be feeling. Don't assume anything."

John now remembers their breakfast conversation about seeing Andrew while still having the halo. He had managed to encourage Sherlock to try to explain even though he was clearly struggling and uncomfortable with the whole thing. He now realises that it is a huge thing that he had wanted to initiate such a conversation in the first place.

Next, Joanna relays to John some case study examples to help him see how an ASD person copes with what to them is the unpredictability and uncertainty of a partner’s emotional reactions. One is a story about a former patient of hers – a mature law student whose Asperger wife knew he had very important final exams coming up. She received a call from a relative about her husband's uncle having been killed in a car accident. She remembered her husband not wanting to be disturbed and not wanting to schedule any activities apart from attending lectures during the two weeks leading up the exams, so she decided not to tell him about his uncle. When he eventually found out, he was furious, and she did not understand why. She had come to the conclusion that since the uncle had died, there was nothing that could be done to alter the situation and he’d said he didn’t want to be disturbed. To her, the decision to wait was perfectly logical. That incident lead to a major crisis in their relationship, leading him to seek counselling – to help him grasp why she would take things so literally – and to help him with being more precise in his communication with her.

Joanna continues: "Many of my ASD patients have described feeling like they are the targets of random, completely unexpected reactions from their partners. It's that element of surprise that confuses them and erodes their confidence. A childhood that often includes bullying, disappointments and embarrassing incidents in dealing with other people also do little to convince them that they could ever be successful in something as intuition-dependent as a romantic relationship. If you felt like you are often doing things wrong and there is no way to know what, when and why, wouldn't you feel like your relationship is always under threat, and that you are helpless to stop it from failing?"

John tells her about Sherlock's research regarding relationships, and she nods emphatically. "He isn't the first to turn to books and journals and references to understand the progress of a relationship. Flirting, romance and reading the non-verbal signs of affection and sexual attraction are difficult – even impossible – for some ASD adults to decipher, so the ability to recognise the changing of a relationship from friendship to romantic partnership and a more permanent union may slip by unnoticed. Or, someone on the Spectrum might be expecting to see certain clichéd events that would mark those transitions. Moving in together, having sex for the first time, an engagement and a wedding may be such concrete acts and rituals which they look for as a framework of how stable a relationship is. It's a similar thought process to the way many have been taught as children to rely on social scripting to get them through human interactions. When things go off script, they can feel utterly lost."

This leads John to think about Sherlock's preoccupation with their unused rings when they'd visited Sonya and Andrew. He realises that it must have been impossible for Sherlock to understand how there could have been a proposal, and then those rings had been left in the drawer to gather dust. No wonder he had been thrown for a loop regarding John's intentions about him and whether John
had been using Afghanistan as a means of banishing him from his life.

He finds it interesting when Joanna says that many partners of individuals on the Spectrum seem to be gifted at empathy and picking up on the emotions of others and sensing the atmosphere in a room, but that being the socially skilful half of a relationship creates a power imbalance that may trouble the autistic partner and make them feel too reliant on their spouses.

She asks some questions regarding their working lives, and praises John for some of his approaches regarding encouraging Sherlock to try to interact with others instead of just relying on him to cushion things. She also seconds Molly's advice about creating strategies together with Sherlock prior to socialising that can ease his anxiety, because that reaction easily leads him to either avoidance by acting aloof or provoking a poor reaction by trying too hard. She suggests asking Sherlock about which socialising scenarios he finds easier than others: does he want to meet people at home, or outside of it, and if an activity should be involved that offers a comfortable thing to centre interactions on instead of having to manage regular small talk.

"One of my patients said the she had never seen her partner as relaxed and enjoying herself so much as she had during a murder-mystery dinner party. There were clear, explicit rules, a mystery to be solved together in which she could engage and impress with her intellectual capabilities."

John thinks about Sherlock's amazing diagnostician's skills; he has thought, more than once, that if he started solving crimes like he solves patient cases that baffle everyone else, he'd be very a brilliant detective. He knows so much even outside of his own specialty – it's like he just puts the facts together, then effortlessly slaps on even the rarest and most obscure of diagnoses. He also notices things no one else would never ever realise the significance of when examining patients.

"Try thinking of a social event as a mine field, John," Joanna summarises. "Someone with ASD maybe believe that, no matter where they put their foot, something is going to go wrong, which means their worst fears coming true. If that happens in social situations with their partner, it’s not only their own embarrassment they have to deal with – it’s the partner's, too. It’s no surprise that most ASD adults tend to avoid social interaction to some degree, which just further strengthens their negative self-esteem and worries them that they might do something so wrong as to damage their relationship with their partner. It will probably be discouraging to you that his first impulse may always be to say no when you suggest socialising, but it may help if you find an angle in that particular event that might make things easier or more interesting for him."

John then recounts a number of tales about Sherlock at work and laments the fact that he often ends up making excuses for him. "I can't explain stuff he does to people by saying he's on the Spectrum. He'd be livid if I told that to someone without his permission. So, I end up reinforcing the stereotype that he's an arsehole, and that people just need to accept that someone is allowed to behave the way he does to keep others at bay. It plays into stereotypes about surgeons which I hate," John admits. "We once had this bigwig visiting surgeon who insisted on a certain radio channel to be on in his OR. We were lucky to have him teaching registrars, and they were all keen to pick his brain. Sherlock got picked to assist him, but he can't function if you've got something playing in the OR that distracts him. He walked out, mid-surgery, because he couldn't concentrate on the teaching and commended another reg who was watching the operation to take over without asking the surgeon in charge. Sherlock would never, ever walk out of a surgery he was in charge of and thus responsible for the patient – he would simply steamroller over anyone who tried to dictate what goes on in the OR – but this guy was in charge and Sherlock couldn't overrule him. Took a lot of smooth talking to get the visiting professor – who was aghast at such behaviour – to understand that he wasn't being insubordinate. Another example is that if Sherlock is on call and is forced to answer what he thinks is an idiotic consultation, he lets the person consulting him know that he thinks they are idiots, regardless of who they are. He's pissed off some high-up people in our
hospital and other hospitals, too. and they invariably complain. We usually don't even ask for Sherlock to write a reply to those complains, because that tends to make things worse. I've written a few for him," John admits. Strictly speaking, it would be Lestrade's duty, but John often gets dragged into any conflict including his partner.

“That sounds like you have assumed responsibility for smoothing things out instead of helping him defuse the incident. There is a danger in that, you know. If an ASD person doesn’t think he or she is responsible for how others act in response to them, it can mean that they stop trying to learn how to do better.”

It has felt like, on occasion, that Sherlock tries to turf issues to him which he should have resolved himself. He thinks about everything Sherlock has said about why John's approach to his problems had felt different: that John had believed he could do better, unlike many others.

"So, I should let him write those replies and watch everything get worse?"

"No. It seems that he listens to you, so perhaps you could be his proof reader and point out to him which parts of what he has drafted might be problematic and why."

"I guess." John often tries to just get those replies out of the way, and admittedly he hasn't had much faith in Sherlock ever learning the fine art of apologising. But, this is just him assuming so, and it's contrary to his usual belief that Sherlock is greatly capable of improving when it comes to dealing with others.

“We have a system when we go to talk to patients together," he tells Joanna. "Some signals for when he's about to wreck the whole thing. It's subtle enough that he can backtrack and try again, or I can step in. It's more about preventing problems than defusing a disaster. He used to behave as if the scrub nurses could read minds, because he kept forgetting that what he thinks about or talks to himself in the back hallway of the OR unit isn't actually magically transported into the collective consciousness of other people. I once suggested to him to write everything down that he comes up with in terms of preparations for upcoming surgeries, and to instruct his secretary to collect those notes daily and to make copies for the OR unit Ward Sister. He started doing that right away."

“And did you realise at the time that you were giving him a tool to use that solves the problem without your interference?”

“I didn't think about it that way. I just wanted him to sort it out himself instead of making it someone else's problem."

“That's what I am saying, John. Recognise these things for what they are: coping strategies which you can help him create. You should make your advice very concrete, clear and memorable. Maybe he will try it before things get so bad that you have to follow along behind him with a broom.”
John mentioned in an earlier chapter ("The Other Half of Asperger Syndrome").

No waiting time for the next chapter, since these two very much belong together (and the two chapters are inseparable as well LOL).
During their second appointment two days later, Joanna picks up on where they had left on discussing the two doctors' working lives. "Is it just who helps him out with communicating with patients and other staff? Does he seek or accept help from anyone else when you're not available?" she inquires.

"There's a very experienced nurse called Marie who handles his outpatient clinic," John tells her, "Usually, the Ward Sister circulates the nurses between several surgeons, but after a few months Sherlock had actually gone up to her and requested that Marie be permanently assigned to his clinic days. Everyone was really surprised when she didn't have any objections – the other nurses always complained about him. I got so curious I went to talk to her."

John then recounts the conversation he'd overheard standing close to the open door of the appointment room – he hadn't meant to eavesdrop, but curiosity had got the better of him.

"That man is dying of a brain tumour – we can't make him more comfortable!" Sherlock was protesting.

"Remember what I said about emphasising stuff you can do instead of just telling them their case is inoperable?" a female voice had asked; he'd guessed she must have been Marie.

"All I can do is to send them to oncology or the palliative clinic. They got this appointment because surgery was being considered. Why would they care about anything else?"

"You have to make them feel like we're not abandoning them," she'd explained patiently. "Saying we're going to do everything we can to make them more comfortable is one way of promising support and continuity of care."

"So, it's just one of those... magic word things you keep harping on about?" Sherlock had sounded sceptical but intrigued.

She had laughed. "You got it."

There'd been a sound of a chair rolling away from a desk and papers being shuffled, and then Sherlock had appeared at the doorway. "John?"

"Hi," John had said, trying to look as though he hadn't been standing there for long. "I was on my way to a meeting and wanted to say hi to Marie. I heard you two got paired up for good."

Sherlock had frowned. "I find her more competent than average, which cannot be said for many other nurses here," he announced. The door was still open, so Marie probably heard his comment.

Sherlock then glanced at his watch. "Thank God that was the last appointment. The neurosurgical M&M is this afternoon."

The M&M meeting is where all deaths and significant adverse events within a unit are discussed and analysed. Someone presenting means that they've had such an incident happen to one of their patients.
"Are you presenting?" John asked.

"No. But Anderson is," Sherlock announced triumphantly.

"Have fun," John said mischievously, knowing that Sherlock wouldn't be able to resist honing his considerable intellect at Philip Anderson's tragic case like a ballistic medico-legal missile. There is no love lost between the two surgeons; Anderson considers Sherlock to be an egotistical arsehole and Sherlock considers him to be highly incompetent and obnoxious. John has sometimes been tempted to suggest locking them in a room and letting them sort their differences out once and for all, but then again, their animosity is less about specific issues than it is about a general dislike for the other person.

Sherlock strode down the hall towards the lifts while John slipped into the appointment room.

"Doctor Watson? What brings you here?" Marie asks.

John has seen her a few times before, but had not connected a name to a face, since he has little to do with the neurosurgical outpatient clinic. "Just wanted to see how the two of you were getting on." While he isn't Sherlock's immediate boss, he's still the Director of Operative Services, and HR issues in all operative fields are his jurisdiction. "I'm glad they found someone who gets along with him. Or are you just a glutton for punishment?"

The fifty-something, short woman with a perky blond perm gave him a warm, cheek-lifting smile. "Oh, I don't know what the other nurses are so riled up over him for. And Lord, he gets nervous when there's a case coming in he really wants to do. For him, it's all about the doing. Once he thinks he has established a plan for the patient and sorted out what needs sorting during one appointment, he loses patience if he has to continue dawdling with that patient some more. You know how it is – they tend to have a lot of questions, and he still doesn't get that he can't just tell them it's pointless to explain things further because they're laypeople who won't understand a word he's saying. He's not mean on purpose, he's just so focused," Marie muses.

Focused is one word for it – a rather diplomatic term to describe Sherlock's difficulties with people.

"He used to get a lot more complaints, and that has practically stopped after he started working with you. How'd you do it?" John had asked.

She leaned her palm on the smaller desk in the room and clicked a few things on the mouse to sign herself out of the patient records. "I just pop out to have a chat with the patients in the corridor before they come in, while he dictates his notes."

"And you tell them... what?"

Marie raised her brows, her smile never waning. John had decided that he liked her. She seemed like someone with a permanently sunny disposition, and Sherlock usually hates that, so he couldn't wait to hear how she defuses things in advance.

"Oh, I tell them that Mister Holmes is a splendid surgeon, but he is a bit of a character and he concentrates so hard and is so interested in the medical side of things that he doesn't always remember to be polite. If he says something that's a bit off, I just give the patient and their companions a knowing look and that usually does the trick."

"So you sort of team up with them?" John had asked, intrigued. It didn't sound as though she was ganging up against Sherlock – just expressing that she was on the patient's side and that it wasn't unexpected or personal if Sherlock didn't always do so well in being kind.
"I guess. He doesn't mean anything bad by the things he sometimes does. I'm not sure he lacks empathy, it's just---- he doesn't stop to think things from the patients' perspective and he isn't very good at picking up on the atmosphere in the room."

"But he'll accept advice from you?" John was amazed.

Marie looked thoughtful. She had a matriarchal air about her – felt like someone who would not be easily offended and who would see the big picture and be optimistic about other people. "They're just suggestions."

"What was that magic word thing he was talking about?"

Marie had chuckled. "I used the term as a joke, once, but he took it seriously. He was complaining that he didn't see the point of saying such things as being sorry that someone had been diagnosed with a brain tumour, or that they were going to be looked after if the tumour is inoperable. I told him that such stuff, while not very medical, are magic words that'll calm people down so that they'll be able to concentrate on listening to him again after getting bad news. I even told him that if he gets them to calm down quicker by saying such things, he can get rid of them quicker," Marie explains apologetically.

Sherlock has sometimes complained to John at home that he's a *surgeon*, and if he isn't going to operate then he shouldn't be expected to waste time and effort on patients who won't be lying on an operating table – that someone else should sort their cases out once the decision has been made.

"I also told him that brutal is not the level of honesty that most people really want," Marie had then added. "So, he started *asking* them about it."

"Asking them?"

"The patients. About honesty. He asks them what level of honesty they'd prefer and if they say something along the lines of complete, or 'give it to me straight, Doctor', then he knows he doesn't need to tone down his bluntness or – as Sherlock says – they can at least blame themselves if it's too much for them."

To John, it spoke volumes that Marie and Sherlock were on a first-name basis instead of the nurse going for the usual 'Mister Holmes'.

Marie continued: "If they ask for anything else than deep honesty, he delivers the news and then usually sort of gets me into the conversation."

"So that you can provide a good dose of those magic words?" John had joked.

"You got it, Doctor Watson."

"He thinks highly of you. He may not ever say so, but it's obvious he does," John then told her. She’d smiled and said: “I know that. You didn’t have to tell me; but thank you anyway.”

"Marie is amazing," John reiterates to Joanna, having now concluded his story; "the number of patient complaints has stayed very low, and I have no idea what we'll do when she retires. Not that she'll accept much praise: she told me that she's worked at King's for twenty-five years, which means that Sherlock is hardly the first moody, difficult, arrogant or socially awkward young surgeon she has nudge in the right direction. She also said that he's far from the worst she's had to deal with."
"Maybe she could pick and train a special replacement for herself," Joanna suggests and sounds like she's only half-joking. "It's very good, what she's doing – giving him tools, scripts and simple suggestions instead of criticising his persona."

John thinks about what Molly had said about Sherlock perhaps bringing out certain skills in him. "I think he gets less stressed since he gets to focus on the medical side, and Marie's obviously great with people so she gets to shine in that."

"He gets the help he needs without anyone looking too deeply into the reasons why he needs it," Joanna confirms. "It's not a broom tactic but playing to both their strengths."

John realises that the stories about Sherlock he has been telling Joanna have mostly just confirmed what he already knows; he can tell what things about Sherlock's behaviour alarm and confuse others, because he reacts to them the same way. He has been sharing these anecdotes and she has confirmed that many of them well illustrate issues connected to him being autistic, but there seems to be little point in picking apart which bit is because of ASD per se and what is not – it's all just Sherlock.

Next, Joanna gives him a downright cheeky smile. "And what’s it like in your home life? The same as at work? Different? What annoys you at home?"

John ends up talking about chores and recounts their minor arguments about housework, shopping and paying the bills and Sherlock's utter lack of interest in other such things that simply have to be done. Then he suddenly feels a pang of guilt. "I didn't mean to come here just to complain about him."

"It's quite alright, John – this is a place you can freely vent about all this. Making problems visible is the only way the address them. If you don't express your frustration somewhere, it will start bleeding out at home."

That's exactly what had happened after Afghanistan: he had buried a lot of stuff, but it has still seeped out and poisoned the well. John nods.

"Demands and expectations are key things my patients tend to complain about when it comes to domesticity as well," Joanna says. "If their spouses always do certain things around the house or look after their joint finances, they may assume the partner enjoys it or is not bothered by those tasks. Unless you tell them otherwise, how on earth do you expect them to realise that it isn’t ‘fair’? Expecting that they will offer to inconvenience themselves by taking over those activities may not happen, because a concept as abstract as reciprocity may not occur to them at all in the context of housework. If you want him to participate, be explicit about it. If you ask him to do something, how does that go?"

"Most often he asks why he should if it's something that I have always done before. But, if he says yes, he puts it on his calendar and takes care of it."

"How is your sex life?" Joanne asks next, and her bluntness feels both unsettling and yet a bit refreshing to John after circling around the subject with Molly so much more apprehensively. John tells him about some of their relationship issues stemming from the fact that Sherlock doesn't always pick up on why he isn't in the mood. Some of that is situational, such as just after getting home from a heavy call shift, but some, he has to admit, had been because of things he was working through as a result of his own injury. But, he also tells her how satisfied they’d both been with their bedroom activities before Afghanistan.

It turns out that Joanne is not surprised at all at how concerned Sherlock had been about the change
in the frequency of their lovemaking – enough to mention it to Molly in their one and only joint session. "This is what I was talking about, John, when I mentioned patterns and expectations and scripts. You had very frequent and mutually satisfying relations before you left for Afghanistan. Afterwards, this was a change for the worse that he was able to spot much more easily than subtler things about your behaviour."

"I think sex has always been important for him. For us. It's been much less difficult having it than talking about it or any other stuff about our relationship," John muses.

"It involves a very different method of communication than verbalising emotions. Sex is as much about what he wants to receive than it is about what he wants to give. He is probably very unsure about what sorts of emotional messages you are expecting to receive from him – sex is more concrete; he sees visible, favourable results to his actions."

"He's not shy about it, which is great when it's between just the two of us, but I kept getting a bit embarrassed about his oversharing at work just after we got together," John admits.

Joanna chuckles. "Too much information? Shame, embarrassment, chastity and primness are social constructs which many on the Spectrum see very little use for or do not understand. Once you made your feelings known, did this oversharing continue?"

"No. He got the message."

"That's good. You have the right to define – both of you – which aspects of your private lives to share with others. Sex is a reasonable easily demarcated area to exclude from conversations with outsiders."

"I couldn't be annoyed at him for long – he was just so.... happy, I guess. Even his boss picked up on that," John offers, feeling a surge of pride that he had once been the one to cause such a reaction. Maybe he can be that, again, if he keeps up trying to mend their relationship.

Eventually, during the second session, he and Joanna agree that, without her meeting with Sherlock, it's hard to give much more specific advice.

"I can't suggest to him that he comes to see you," John explains, "it's obvious he’s had such a terrible time with therapists when he was growing up that it just creates so much anxiety that it wouldn’t be fair to inflict that on him."

He then tells her the story of Sherlock’s probable near melt-down in the men's room of Molly’s office.

She nods, "It can't be easy to be receptive to professional advice, given his prior negative experiences. Working with people on the Spectrum has improved over the past twenty-five years, but Sherlock sounds like he is one of those ‘in-betweener’ — old enough to have been diagnosed, but too young to have had the advantage of modern therapeutic approaches. If he was subjected to so-called applied behaviour conditioning by therapists, then it is no wonder he is mistrustful today. Some things you have relayed which he has commented about blending in and fooling others might suggest that he's been subjected to such methods. Thank goodness there are more alternatives now, and it isn’t about trying to force someone into being something that they are not."

"I don't want him to think that he needs fixing, that I think his autism an illness that needs to be cured; I just want to help him believe in himself a bit more. I don't know what I would have done if I hadn't started seeing signs lately that things are getting better. I think he was getting----" John's breath hitches in his throat as he tries to fight the sudden onslaught of emotion, "---I think he was
getting really depressed because of the halo and what was going on with us and I was worried and I didn't know what to do…” He swallows and averts his eyes from Joanna. Quietly, she passes John a tissue which he holds limply in his hand. He ends up not needing it, since he somehow manages to get his emotions under control again.

He hasn't wanted to admit to himself how guilty and helpless he had felt watching Sherlock's struggling during the first weeks with the halo. The worst thing was that John had been aware that his incapability was due to not feeling like himself, either. The anger borne out of that he had, then, taken out on Sherlock.

They sit quietly for a moment. John calms down when he manages to remind himself how far they’ve come from those dreadful days. He thinks back to yesterday: the two of them, seeking each other's warmth under the thin sheet, Sherlock's smile lighting up his features and making him look a decade younger after laughing at something John had said.

"Alright, John?" Joanna asks calmly.

"Yeah. It's just... it's been a tough six months."

"So I've gathered."

"But, it's over," John tells himself more than her. "It's just a few weeks left in the halo. We're alright. We will be alright."

Joanna assures him that she is available if there is ever a need for further counselling.

As she walks him to the door of her practice, she tells him one more thing: "The most important piece of advice from me would be this: don't make him guess what you are feeling. Never assume he will read between the lines. Say things out loud, explain why you're reacting a certain way to his behaviour. Try to focus on communicating that rather than on the person doing the behaviour. I guarantee it will help him with his anxiety if he can rely on you to be honest and direct when it comes to your relationship. Give him a road map of where the two of you are."

Though he must have seen the appointments with Joanna on John's calendar, Sherlock doesn't ask about them. Not once.

Whereas once he might have been relieved about that, or even thought it was okay for Sherlock not to raise the subject, John has learned something important from Joanna: it’s not right to assume that Sherlock has drawn the right conclusion about his seeing this therapist. What if he thinks that it's some sign of John being unhappy, or wanting to know whether the relationship will get better? Sherlock had understandably been worried and apprehensive about the whole thing, and the appointments are very much about him, so John feels obligated to put his mind at ease.

No more assumptions.

That night, after he washes up the dishes, he goes into the living room and sits down next to Sherlock. “Need to talk.”

"Why?" There is a slightly wary tone in that question.

"Because you’ve not asked about this other therapist I’ve seen twice this week."
Sherlock has to turn his whole body to be able to look him in the eye, but he does. "It’s your business."

John smirks. "Nope. I know you. You will have seen the name in the diary, and you will have googled Joanna Pichler to discover her area of expertise. You must have made a calculated decision not to ask, even though you knew."

Sherlock’s hands are in his lap, and they twist a bit. He averts his eyes from John. Before, John would have been put off by his distress, and relieved that Sherlock doesn't want to talk about this. Now, he knows that it may mean that it is something they definitely should discuss.

"I worry that you might be drawing the wrong conclusions about why I'm doing this," John suggests.

"You explained why, already."

"You told me that you were afraid that she'd offer generalisations, and that she would have the same approach as people who have tried to change you in the past."

"I'm not an expert on what sorts of advice you might need regarding our relationship."

John takes one of those fidgeting hands into his own and holds it. "You don’t need to worry. I consulted her to get some help on doing things better with you. No one has ever managed to provide a manual on the Care and Feeding of Sherlock Holmes, so I thought I might get some tips on what I can do better to make things easier for both of us. It's about me changing my behaviour, not about you changing yours. She doesn't think that being autistic causes relationship problems on its own, but that it can complicate communication about them."

A couple of little worry lines appear on the bridge of Sherlock’s nose. "Do you trust her advice? Why is she an expert?"

“She isn’t, not in you. That’s one of the things she and I agreed on. She was very meticulous in only offering general advice based on research and years of experience. When she commented about something you’d done or said, it was only based on something I’d told her, not on any assumptions she made based on other people. But. I know that it's still just my version of the events. Truth is, I know more about you than any therapist ever would. I live with you, and you trust me with things I doubt you’d have ever wanted to share with any of them."

"That’s... logical," Sherlock says a bit stiffly; "Thank you," he adds in a tentative tone.

John knows it's one of the words he offers when he isn't quite sure how to react. "I've been asking a lot of whys lately, when it comes to you. You have the same right. When you don't understand something that I do or say, or the way I react, I want you to ask, instead of assuming that it's your fault for doing something wrong. Instead of assuming that problems will just keep on appearing because you're not like me, and I'm not like you, and you're always the one who doesn't know what to do."

Sherlock is worrying his lip. "It's humiliating, having to ask."

John strokes his knuckles with the tip of his thumb before letting go of his hand. "All couples have tons of misunderstandings, and the best solution is always the same: to ask and to say things out loud. That isn't specific to us at all."

"Was she useful? Will you continue to see her?"
"I think it was useful, yeah, but there's no need right now for further appointments. She's available if I need a sounding board in the future. Or, if you do. I'll continue seeing Molly, but right now, the only expert I need to hear more from when it comes to you, is you."

Sherlock doesn't reply. They sit for a moment in an amicable but slightly confounded silence. John then decides to defuse the tension by turning on the TV. Sherlock shifts closer to him on the sofa, folds his legs underneath him. Eventually, his palm settles on John's knee, fingertips tapping gently along to the opening theme of the news broadcast before his hand slides down between them to lace fingers with John.
John stands by the sofa, watching Sherlock trying to play his violin by experimenting with different positions. "Why don’t you just wait a couple more weeks?"

"Two and half months without playing means I have lost the calluses I need. Anyway, I won’t be able to play wearing a regular brace or a soft collar either. So, it’s worth trying alternatives.” Sherlock arranges the violin down his arm, rather than anywhere near his neck.

John goes to chop up vegetables for a casserole, cringing at the occasional screeching.

After about twenty minutes, Sherlock’s playing becomes a bit more tuneful. "Ah, now I get it. I have to keep the neck of the violin just on the web between the thumb and my first finger, so it lies against my hand. Amazing what a difference it makes."

After shoving the casserole in the oven, John comes to read the newspaper on the sofa.

When Sherlock comes to the end of a piece that John vaguely recognises, he flexes his left hand and stretches his fingers by splaying them.

"Sore?" John doesn’t want him to strain anything.

“Not really. Actually, it’s more a case of convincing my muscles they don’t have to work so hard. I won’t be able to play anything too complicated, but with the right music…” He stops, as if thinking hard. "It’s the old-fashioned way. Back in the Middle Ages, rebec and vielle technique involved this position. It’s easier on the muscles, but it gives less control. A bit awkward because I can’t look down, but not impossible." He puts the violin back in the new music cupboard and releases the tension on the bow hairs, hanging the bow next to the instrument. "I’ll do some research online; there must be some sheet music for rebec I can use."

John is glad to hear such a confident tone from Sherlock: he is now more willing and able to accept the situation and make do without letting the halo get him down. It seems to be a part of the two of them recovering the equilibrium that has been missing for months. It’s still a bit tentative, and they are being careful around each other, but there is a sense of renewal and greater ease around each other.

Sherlock arranges himself into the reclining chair and turns on the TV to the five o'clock news.

After a few minutes, the doorbell rings. John looks up from his newspaper and glances at Sherlock. "We're not expecting anyone, are we?"

“Could be Jehovah's Witnesses again. They came by last week. Seemed very keen to save my soul."

"I'll bet they were much less keen after meeting you," John jokes without thinking, then wants to bite his tongue: he shouldn't rub it in, like this, that it's easy for Sherlock to put people off.

Thankfully, Sherlock doesn't seem to mind the joke at all. "The halo did seem to put them off,
which seems theologically counter-intuitive," he says with a quirked-up lip.

John rises from his seat and goes to peer through the peephole. When he recognises the visitor, he wastes no time in opening the door.

"Evening," Mycroft Holmes greets him, a dripping umbrella in hand. "Is Sherlock ready? I thought we might have a light meal before the concert."

"Um." John has no idea what the man is talking about. He calls over his shoulder. "Sherlock!"

The TV is turned off.

"Come on in," John prompts the older Holmes while they wait for the sound of approaching footsteps.

Mycroft draws the door closed behind him and removes his gloves. He looks up just as Sherlock appears from behind John – and drops his umbrella as his eyes widen in shock. "God almighty," he breathes out, stares for a moment, then blinks twice before he finally seems to gain hold of his faculties again. "Is this an... experiment?" he offers, taking in the sight of Sherlock in the halo rig.

John's head snaps around to shoot Sherlock a scandalised look. "You haven't told your family?!"

Sherlock shrugs. "It wasn't as though I was planning on seeing them while in this thing. Or the neck brace that comes after."

"So, what have you done that requires you to be strapped into that... device?" Mycroft walks closer to Sherlock and does not bother to disguise his alarm and distaste at the sight.

"An accident that just caught the wrong bone in my neck. It’s nearly healed. If you’d come in a fortnight, I would have just had a regular neck brace."

"So, is it the reason why you’ve clearly forgotten about our evening plans?" Mycroft asks, a slight accusatory edge to his tone John realises he's carefully trying to hide. The deduction must have been easy: Sherlock is hardly wearing anything in which he'd be willing to parade around in public. He's in a dressing gown and one of John's old, oversized souvenir T-shirts, and a pair of cheap tracksuit bottoms.

"Things have been a bit of a mess lately," John placates.

Sherlock doesn't look apologetic at all as he stares down his brother. "I have no idea what you're talking about. I haven't made any plans whatsoever with you."

"Since you did not protest in reply to my email, I assumed that the matter was settled. I do believe I made it quite clear in that message that, since Mummy and Father are abroad, I would be delighted to spend my birthday with my favourite brother at a Nicola Benedetti performance."

"That email must've got stuck in the spam filter," Sherlock mutters. "And because I am not working at the moment, I tend to lose track of the calendar."

"Did you say favourite brother?" John chuckles at Mycroft.

"He's only saying that because he has no other brothers," Sherlock points out and crosses his arms. He tries to lean on the door frame to the spare bedroom, but the back halo bar on the right hits the wood first and he flinches before pulling away, looking indignant.
Mycroft raises a patrician brow. "Admittedly, the pickings have always been slim. My offer does still stand, assuming you are not busy, and that contraption does not require house arrest."

John thinks that it would be good for Sherlock to leave the flat more, maybe even to pluck up the courage to go somewhere a bit more crowded than the West Brompton cemetery grounds. Having walks there is about all that John has been able to convince him to do. Sherlock has been cooped up for so long already, and the more he hides, the more self-conscious he's probably become of how people might react to the sight of the halo—or the neck brace after. John has convinced himself it might do Sherlock some good to experience it not being the end of the world when people see him wearing such things.

"I think you should go; some fresh air and a change of scenery will do you good," John says. "Is she any good, this Nicola Benedetti?" he asks Sherlock, who looks as though he's asking something truly ridiculous.

"She is phenomenal. I have her Vaughn Williams and Szymanski recordings," Sherlock scolds him and John can see he's tempted.

Sherlock crosses her arms and fixes his line of sight on his brother. "I'll go if John comes with us."

Mycroft shrugs. "The box I have reserved sits six. You know I always reserve it as a whole since one never knows what sort of people one might end up having to share it with." He practically shudders, as if rubbing shoulders with the hoi polloi would contaminate the very essence of his soul.

"I'm not coming, unless John joins us," Sherlock insists, even though Mycroft has already promised as much.

His insistence puzzles John for a moment; the two brothers do sometimes attend this sort of event, and never before has Sherlock even assumed that he would accompany them. While John does enjoy classical music, he isn't even half the connoisseur Mycroft and Sherlock are.

Then, realisation dawns: while they have now built quite a functional routine of managing with the halo at home, Sherlock still relies heavily on him when they venture outside. John doesn't quite believe he wants someone to downright hide behind, but nevertheless, his insistence must stem from the fact that he wants John there for the support. After everything they've now been through, and the things John has been trying to change for the better lately, the thought feels lovely. Whatever Sherlock needs, John wants to be the one to make happen. It's his privilege and he's earned the right.

He's damned proud of himself for achieving a state where Sherlock is comfortable asking for these things, and he sends Molly a silent thank-you for helping him get there.

Mycroft looks analytical. Perhaps he's considering the reasons for Sherlock's reticence as well. "We could, perhaps, arrive fashionably late? Because it's a box, they won't stop us from seating ourselves even if the concert has started. I've organised a car and we can retreat during the encores to avoid the stampede. I assume it's advisable to try to avoid crowds lest you bump into people with that---what is that thing called?" he asks, directing his words at John for some reason.

"A halo ring and vest for a cervical vertebra fracture." John is certain that the older Holmes knows plenty enough about medicine to understand the explanation.

John is immensely glad that Mycroft seems to have realised that Sherlock needs a bit of a nudge to leave the house and is making a promise that he wouldn't be subjected to unwanted attention.
"Well, are you coming?" Mycroft asks. "I presume that you won’t be dressing for the occasion, beyond what you are wearing?"

The grin dawning on Sherlock's face is triumphant. "Oh, I had a suit jacket made to fit this thing. Nice to have another excuse to wear it."

John offers Mycroft a whisky while they go to the bedroom to change. While helping Sherlock when his T-shirt gets tangled in a protruding bit of the halo, he remembers something he had been meaning to suggest at bedtime: "Do you want me to change the lining?"

Sherlock sniffs his own armpit. "Preferably, yes. Otherwise I'd worry for the suit jacket."

They'd decided to forgo changing the fleece the week before since it had been swapped for a fresh set during the refit. John hopes he remembers all the pointers he'd heard from the outpatient clinic nurse. John had thought that he'd have to loosen the halo straps to do the swap, but she had assured him it's doable, if difficult, without risking the vest getting too loose.

John tells Sherlock to sit down on the edge of the bed and sticks his fingers between the vest and his shoulder, shoving at the velcro bits attaching the lining to the plastic until it gives. He does the same to the velcro just below the armpits, which brings forth a complaint about tickling.

"I'm trying not to, but it's tight."

Finally, the old lining comes out. John rips wide open the two leaflets that had been given to them by the hospital about halo care and slides them under the plastic vest to lie against the velcro so that the new lining will slide into place more easily. In the end, he's forced to find a ruler from a drawer in the study so that he smooth the edges of the fleece out underneath the vest.

He pulls out the bits of leaflet, which lets the Velcro grip the fleece, and then steps back to admire his handiwork. Sherlock rolls a bit of fleece sticking out from the neck to keep the plastic from chafing.

"Better?" John asks.

"The same, but more hygienic," Sherlock says resignedly. He then goes to the cupboard to fetch one of the two light blue dress shirts his tailor had deconstructed; they now feature a set of extra seams and buttons so that the vertical bars of the halo can be fitted inside the shirt rather than just leaving the topmost buttons undone which leans to the shirt sitting not on the shoulders but spread like a tent from the neck down.

John does the buttons for him, then does the same to the navy blue jacket; what the tailor had done to it is genius: the buttons are hidden in short strips of satin ribbon on the backside of the fabric, pulling the extra seams together so that from a distance it looks like it has been sewn on around the halo bars.

While Sherlock starts buttoning up his cuffs, John quickly puts on his own suit. He splashes on a bit of aftershave – Sherlock doesn't like it if he uses too much of it.

Sherlock is surveying himself in the mirror on the wardrobe door, looking slightly gloomy.

John claps a hand on his shoulder. "Let's go."
The concert proves to be a turning point. From the start, the performance holds Sherlock spellbound. In the darkness of the box, John sees him relaxing and focusing on what is happening on the stage, rather than being distracted by his physical discomforts or self-consciousness about his appearance. John keeps sneaking sideways glances, taking in the rapt concentration. For once, he feels he can just look, without the man realising it and trying to deflect the attention.

He adores what he sees.

Perhaps John has gotten so used to the metal struts now that he can see beyond them. The pin holes from the first halo have healed now, and in the dark, they can't even be seen that well. The weight loss of the first six weeks has been partly regained, once John realised that smoothies, soups and dicing meat and vegetables finely made them go down more easily. They’ve found a way to reach acceptable hygiene standards and keep Sherlock’s hair under control. It has not felt like a chore to John, and he’s made sure Sherlock knows that he actually enjoys being given permission to play with those curls. All the things they’ve had to navigate and learn together has taught John a lot about the man. The whole process of washing hair, for instance, is now a form of shared intimacy, something John is now aware that he had missed dreadfully. The vest may even have made them more willing to experiment with sensory stimulation that doesn’t always have to end in an orgasm. It has broken their routine of almost habitual full-on sex instead of doing many subtler things.

Absence makes the heart grow fonder, some say, and that certainly applies to kissing: John can't wait for the halo to be gone so that it won't interfere with a proper snog anymore. Just a few weeks left. They will probably go quickly, at least for John, who is going to return to work on Monday. He's convinced Sherlock will be fine on his own; they had actually talked about it a few days ago, and Sherlock hadn't sounded as though he was trying to conceal anything when he'd told John that he thought it was fine for John to return to work.

During the interval, a bottle of champagne is delivered to the box, with three glasses. Mycroft raises an eyebrow of enquiry. "I am assuming that you are not on medication that precludes this?"

Sherlock’s reply is sincere. “I have needed little else than paracetamol and ibuprofen lately. And, I for one, am happy to indulge in a glass, seeing that you are pushing the boat out. Laurent Perrier Grand Siecle is a fine wine.”

John raises a glass and says: "Happy birthday, Mycroft."

This raises a wry smile on the elder Holmes' face. “Thank you, although I am never sure why adding a year to one’s age is worthy of congratulations. At some point, it becomes more commiseration. I’d rather offer my congratulations on being able to cope with my brother despite this… challenge of his. Must have been hellishly difficult." He raises his glass. "To your resilience John.”

Mycroft Holmes does not dole out praise very freely. And, it's good that the older Holmes has reminded John of everything he's had to take into account lately regarding the halo, because there is something he had thankfully remembered to grab from the kitchen before they left. He slips a hand into his breast pocket and produces a straw, which he proudly sticks into Sherlock's glass. The bubbles make it float up from the bottom of it, and Sherlock is forced to pinch it between his thumb and his forefinger to keep it from falling on the floor.

Mycroft watches the proceedings with an expression that is difficult for John to interpret.
"A case in point," Mycroft comments, and raises his glass to Sherlock, who mirrors the gesture, still gingerly holding the straw in place with his other hand.

"Let's hope the plastic won't give off any sort of a side taste on this," Sherlock says and whiffs the champagne. He takes a sip, and then his expression turns slightly more sombre. "Still, a broken bone is nothing compared to what John’s been recovering from; now that is something worthy of admiration." Sherlock sounds slightly hesitant, as though he's not quite sure how John would react to such praise.

It must mean something, the two of them acknowledging such things out loud to strangers such as Mycroft and Andrew and Sonya. They are also talking about other things out loud, now, which they had avoided before: John realises that while Sherlock has certainly continued to gripe about the halo, he has also begun to talk about it more, telling John things without there being an instant need for assistance. The 'need-to-know' basis Sherlock had described to Molly seems to have changed to 'nice-to-know' and 'want-you-to-know'.

The champagne is now warming John's toes. He leans over the gap between their seats and bends a bit sideways from the waist to plant a kiss on Sherlock's cheek; it lands quite close to his lips due to John not wanting to bump his own forehead on the halo. Sherlock exhales, lips parted, eyes fluttering open and his mouth spreads into a lovely, carefree, practically smitten smile.

Intermission is now over, and the lights begin dimming again. John leans away and settles back into his own seat.

Chapter End Notes

The end is nigh – well, the end of Scar Tissue is, but there will be much more in this series. At the end of chapter 37 we'll tell you all about our next fic projects.

We can't thank you all enough for the feels, the laughs, the insight, the squeeing, the in-depth analysis and the all-round communal spirit.
Sherlock seems to be on tenterhooks while they wait for their turn at the orthopaedics outpatient clinic. This appointment for the removal of the halo had originally fallen on the 13th Wednesday after Sherlock's accident, but he yells at various people on the phone until it's rescheduled to the Monday of the same week. John is hardly surprised that he isn't willing to put up with the halo for a single day more than he absolutely must.

John is amazed what people can adjust to. Now that he understands how big a burden the halo has been for his partner, it's a marvel how they've managed to create routines that have got them through the day with so little effort. After returning to work, he has not spent office hours in a constant state of worry, and Sherlock has seemed to accept his limitations with much more grace than before the refit. Of course, that doesn't mean he still can't wait to get rid of them.

A nurse calls them into the outpatient clinic's procedure room, and Doctor Arthur swings round in the saddleback chair she has commandeered next to a side table with a laptop. "Hi, Sherlock. John," she also acknowledges.

The images on the screen must be the slides from Sherlock's control CT, taken an hour prior. "Everything looks good. We'll still want an MRI since soon there will be no metal distorting the images, but I don't expect to find anything I won't like in there. I'd commend you for a job well done, putting up with the halo, but I'm sure John lavishes you with enough praise."

Sherlock raises a sly brow at John.

"Have a seat," Doctor Arthur says.

Without even being prompted, Sherlock begins unbuttoning his oversized dress shirt. His arms are covered by goose bumps by the time he lets it drop between the back of the chair and his bottom.

"Maude, a hand please," the orthopaedist prompts. The nurse hands her a screwdriver-like instrument which she uses to detach the vertical support beams from the halo ring. "Keep your head forward and chin up. You'll be surprised how weak your neck muscles may have become. We'll strap on the brace once the vest and the pins are out but first, I'll let you enjoy having nothing on for a moment. John, could you make sure his head doesn't tip off this position?"

John slides his hand gently onto Sherlock's neck, letting it lie gently by rather than grabbing on.

Carefully, Laura unscrews the attachments between the vest and the vertical bars, and Maude wastes no time in opening the vest clips.

"Get ready for a bit of a whiff", Laura says. John instantly gets the point; even though the fleece lining had been replaced not two weeks ago, there will still have been a build-up of body odour under the vest that no amount of baby wipes could ever expunge.

“Okay, now,” Laura says as she slips the vest halves off Sherlock.

He exhales loudly when the weight disappears off his shoulders, and nearly slumps forward. John
clamps a steadying hand on his shoulder. "Mind your head," he reminds Sherlock. His hand hovers by Sherlock’s neck, in case he can’t manage the weight.

The halo ring and the pins are still in, but not for long. Doctor Arthur tells Maude to hold the halo ring in place while she turns the pins gradually, separating them from the skull one by one.

John spots Sherlock clearly trying to refrain from grimacing, and leans forward. "Remember to breathe," he says quietly.

"Any pain?" Laura is working quickly, and there is a tinge of reassurance in her voice.

Sherlock grunts. "A bit. Feels odd, the smell is horridly ripe and I could do without the sound effects. How much longer?

"Hang in there."

Finally, the halo can be lifted off completely. Maude is already holding a white plastic brace ready, but Laura quickly puts the halo down on the side table and lifts a hand to keep her at bay. She is frowning and watching Sherlock carefully. "Everything alright?"

John circles the chair to see what's going on.

Sherlock, who has gone pale, swallows hard. "I don't feel so---" he trails out, blinking.

Laura nods to Maude. "Make it quick," she says with a nod, sounding like this is something she has seen before.

John steps back behind the chair and places his palm on Sherlock's forehead, pressing his head back against his midriff since his head is threatening to loll forward. The nurse nimbly manoeuvres the brace into position.

Once she’s pulled the strap in the back, Doctor Arthur offers Sherlock her arm. "Let's get you lying down."

John grabs his other arm as Sherlock rises to shaky feet, and together they manoeuvre him onto a trolley placed against the back wall of the room.

Sherlock pinches his eyes closed.

"Vertigo?" the orthopaedist asks.

The answer is an affirmative hum.

"Wouldn't have been the first fainter we've had; the weight suddenly disappearing can mess with your sense of balance. John mentioned you've been having a hard time in the car – some patients have more trouble with proprioception than others. Looks like you were one of the unlucky ones. We'll get you an appointment with Peter stat so that you can start getting your neck muscles back into shape. That'll help."

Peter Tranmer is a trauma-specialized PT John had played squash with for a while after joining the King's College staff. He briefly wonders if the soft-spoken Yorkshireman will be stern enough to manage Sherlock, who won't take kindly to being touched by strangers. Though, for the sake of fixing his neck and getting back to the OR, he'll likely be motivated to behave.

"This week, you're going to take it easy and start rehab," Laura announces.
"I thought I could go back to work now," Sherlock complains. Colour is returning to his face.

John needs to be quick to quash this. "You can start part time next week; I saw Greg in the hallway this morning and he says it won't be a problem."

"Part time will invariably mean ward duty, easy and boring cases, or just outpatient clinic," Sherlock gripes.

"Won't kill you, and it's only for a few weeks. There's no way you'll be able to lean over the surgical field for hours before rehab has kicked in," John shuts down the argument.

"How does the collar feel?" Maude asks.

"It's fine. Anything's better than that thing," Sherlock says, reaching out an arm and pointing a forefinger surprisingly accurately towards the halo ring on the side table without opening his eyes.

"You're allowed to move your head a tiny bit now, you know; the brace will limit your movement but bone healing at this point will benefit from some amount of muscle strain," Doctor Arthur explains.

Sherlock tries a minuscule nod. His eyes are still closed.

"We'll let you have a bit of a rest before getting up. Time for a coffee," Doctor Arthur suggests to Maude with a smile. "John, how do you take yours?"

"Milk, no sugar, thanks. His is black, two sugars. You're not going to throw up, are you?"

"I don't think so."

John rubs a palm up and down Sherlock's arm and grabs a blanket from the basket underneath the trolley since Sherlock is shivering slightly. He retrieves the dress shirt and puts it next to Sherlock before covering him with the coarse blanket. He can start wearing his normal clothes, now.

Sherlock fingers the edge of the blanket. "That's horribly scratchy."

"Beggars can't be choosers," Maude says with a smile. "The skin on your chest and back have been under wraps for so long than anything is going to feel weird. Before you get dressed, I'll do a good wipe down. You'll have to work at getting the skin back into shape." The two women then disappear out the door.

John decides that a distraction is called for. "Any ideas on what you want to do after the MRI is done and we can get out of here? We could have a long lunch and then go to the National Gallery or whatever you fancy, now that you've only got a brace. I took the afternoon off." He can't wait to encourage Sherlock to get out of the house now that people won't stare at him. The cervical collar will attract some attention, but it's hardly comparable to having four pins screwed to one's head. And, once his scarf is in place, the white plastic collar will be much less noticeable.

Sherlock opens his eyes and squints suspiciously at the ceiling lamp before shifting his gaze to John, who takes half a seat on the trolley next to his thighs. "Actually, I'd prefer if we could just go home and have a nap."

John is surprised. This does not sound like his quicksilver partner. "Sure, but why? Aren't you excited about being freed from that thing? I thought you'd want to paint the town red."

Sherlock averts his gaze slightly, and John realises he's a bit embarrassed for some reason.
"If you want to go out for lunch, we could---" Sherlock starts.

"Sherlock. This is about what you want. If you want a quiet day in, then I'd love nothing more."

"It's just that I've slept so badly, and I've not been able to sleep very close to you anyway, and it's been difficult---" Sherlock trails out and clears his throat.

The dots connect in John's head: Sherlock used to fall asleep with his head on John's good shoulder and John's arm around him. That had all fallen by the wayside due to the halo.

_Bloody hell._ Sherlock Holmes, finally freed from what he had kept calling the Iron Maiden, and what he wants most of all is a proper cuddle? The thought makes John want to drag everyone who has ever thought that King's College's star neurosurgeon is a heartless bastard of a sociopath into this procedure room right now so that he could prove them wrong.

He slips off the trolley, leans over Sherlock, slides a palm on his cheek which has gone slightly pink-tinted with completely unnecessary mortification, and kisses him the way he hasn't been able to kiss the man he loves for twelve bloody weeks because of that stupid metal contraption getting in the way. He takes his time, gently nipping Sherlock's lower lip between his teeth, slithering his fingers into his hair and finally touching the tip of his nose against Sherlock's. Once Sherlock opens his eyes he fixes his gaze on John's eyes. After another kiss initiated by Sherlock, who grabs the back of John's head and pulls him in, John straightens his back and regards Sherlock with mock seriousness.

"If you ever again hesitate to ask me for things like that, I'll kick your arse, Doctor Holmes."

-o-o-o-o-o-o-o-o-o-

Once they get home, Sherlock has an amendment to his earlier request: "First, a proper bath, John, finally!"

The thought has revived some of his vigour now that the nausea and dizziness have abated. John is still hovering as terribly as he has been since the pins gave out, but to his own surprise, Sherlock doesn't really mind. After the cold season in their relationship during John's convalescence, he basks in the attention, and the fact that he has stopped feeling like he has to walk on eggshells at home. His complaints about the practicalities of life with the halo are no longer met with scorn, mockery and exasperation: instead, John listens and genuinely tries to fix the problem. There's an easiness in their interactions now that has been lacking, and Sherlock isn't entirely sure when, or how, that change has come about. Is it John's therapy?

He had realised the change had happened when he'd managed to call John about the halo giving out. Even through the pain, he had – out of a recently developed habit – tried to brace himself for the blame and the dismissal, but John's response had consistent solely of concern and protectiveness, making Sherlock realise this hadn't been the first time, lately, when John's reactions have surprised him positively. The conversation that had started when Sherlock had seen the email about the Congo project, and many discussions after it, have felt like lancing a boil. Finally, it's all out in the open – why John had left – and it isn't as bad as Sherlock had begun to believe in his constant anxiety and apprehension about what was expected of him. The urgency to do something, to fix things, to change, to be different in order to meet John’s expectations has not evaporated entirely, but his faith in John liking and wanting him for himself has been at least partly restored. A foundation of trust has been rebuilt, and the anxiety levels over the past three weeks have ebbed away.
Which is why he can't wait to get into a bathtub with John, scrub himself clean and press his practically-reborn body against John's. There have been kisses and hugs and even sex lately, but those have been severely limited by the halo and the discomfort it has been causing. The Philadelphia model rigid neck brace, handpicked for him by Laura Arthur, might be considered taxing to wear by some patients, but none who have experienced a halo vest would dream of complaining about it. As Laura had said, it does allow very slight movement of the neck, promoting bone re-trabeculation at this stage, but most importantly, it only covers his neck, leaving his back and his head unencumbered by anything. Sherlock would never have thought he'd be this happy to be able just to be able to remove his own damned clothes. John watches the spectacle with a slight grin; he has just poured a generous helping of a lemon verbena and patchouli-scented bubble bath (a Christmas gift to Sherlock from him) into the water running into the bathtub.

John suddenly holds up a finger. "Just a sec," he says, already heading out the door.

Sherlock grabs his bathrobe from a hook on the wall and puts it on since he's getting cold. He's tempted to make a mental note to throw the robe in the wash after today – he doesn't even want to look at his chest with its shedding, dead skin that has festered under the vest. At least the neck brace had been fastened onto clean skin – his neck had been something relatively easily cleaned even with the halo. He had declined Maude's offer of having his back and front scrubbed with baby wipes; he hates those wretched things with a passion now, and hopes he never, ever has to use one again. He wants to enjoy a proper wash at home.

For a moment, he considers stepping into the shower to give himself a pre-bath scrubbing – the brace won't be harmed by water. Then, he realises that he would quite like for John to see to his hair. Before this dens fracture fiasco, it had never even occurred to him to let someone wash his hair – he had assumed they would be clueless about it and create a frilly mess. But, John has been both receptive and a quick study, and his fingers digging into Sherlock's sensitive scalp had been one of the only bearable things during the last three months. Maybe, one of these days, Sherlock might even reveal to him he loves nothing more than a tug in his follicles John sometimes does when they're having---

"Ta-dah!" John startles him by suddenly appearing behind his back.

Sherlock turns to witness the sight of him holding four candles and a box of matches. "Where did you get those?"

"Some housewarming gift we never touched before." He arranges the pillar candles on the rim at the foot of the bathtub, lights them and turns off half the LED spots in the ceiling. "How's that?"

"Meretricious."

"Says the hopeless romantic."

Sherlock snorts, and moves to stand in front of the mirror above the sink, fingering one of the small, round plasters that cover each of the pinholes.

"Do you think these will leave permanent scars?" Sherlock knows that he sounds unsure of himself. It's just that it feels vain to be mentioning something so small to a man whose shoulder bears a much more significant scar. The Sherlock of old might have just blurted such a thing out without thinking, but John's reticence to show him the shoulder wound have made him realise he's not the only one who can feel self-conscious. For Sherlock, it's more about not giving mean tongues ammunition; for John it's about... self-respect?

John leans over the tub to check the temperature, then flicks off the bubbles that get stuck to his
fingers in the process. “Maybe. Laura said some patients do, others don’t. A scar is nothing more than the body’s way of re-building soft tissue damage. Would it be so bad?”

"You're one to talk," Sherlock plucks up the courage to tease. He watches John's expression carefully, half-expecting anger, but finds none.

John gives him a tender, mock-exasperated glance and then grabs a few fresh towels from the cupboard.

Sherlock turns slightly so that he'd see the pinhole sites behind his ears, but of course the brace prevents him from tilting his head enough to even try properly.

John steps in, shifts some of his curls and touches his scalp. "They look fine. No bleeding."

Sherlock pouts at the sight of himself in the mirror. “John, your scar is covered by your clothing. Thanks to the halo having to be refitted, I might have five scars on my forehead.” He pokes at one of them, wincing slightly. “Luckily, my hair covers the ones in the back, but these---.”

John pries his fingers off from the rightmost plaster. "No pawing at them. You can take the bandages off tomorrow; the scabs should form soon. After that, you need to mobilise the skin to loosen the adhesions and promote the healing. If you ask nicely, I might be inclined to help by giving you a head massage three times a day.”

That gets him a shy smile. “Of course, you should have deduced by now that I adore that.” Then, Sherlock's smile fades. “You wouldn’t let me do that for your shoulder.”

“You're not a PT, and I was an idiot. There are probably some adhesions in the scar, but we can't know if massage would have helped prevent them. Let my stupidity be a lesson to you: physio will be important to re-build your neck muscle strength; your appointments start on Thursday. Don’t procrastinate like I did.”

“You’ve recovered fully, now?” Sherlock asks, and shoves his hands into the pockets of his bathrobe. He knows John had seen a highly regarded upper limb surgeon a week prior to assess just that. Sherlock had done considerable research to find the best possible expert, but before, John always refused to even talk about it. Now, suddenly, he had asked Sherlock for the that colleague's name again.

"Yeah, sort of. The range of motion has returned to normal and with some continued weight training, he says I should be able to rebuild the muscle strength. The scar is still obvious enough to make me self-conscious," John admits.

Their eyes meet in the mirror.

“Not with me, I hope?” Sherlock ventures to ask.

“Nope. I’m over that now." John looks a bit sheepish, and Sherlock thinks it's rather adorable.

"I guess I was acting a bit like you with the halo – not wanting other people to gawk at it. A bit stupid, really; as you said, nobody can see it unless I'm naked," John says resignedly.

Sherlock looks at the mirror more intently and pries up the edge of the plaster on one over one of the holes despite John just having told him off. “You didn't shoot yourself. When it comes to stupidity, I was the idiot who put a chair on a desk to remove a light bulb in the middle of the night.” He presses down at another of the plasters. “Doesn’t hurt anymore.”
“Good. Headache?” John is frowning at his fussing with the bandages.

“No, the paracetamol’s taken care of that. By the way, I’ve put in an order for The Body Shop’s Wild Argan Oil body butter and whipped lotion with the hopes that you’d let me get to work on the skin on your shoulder. Massage will help keep the skin supple and break up the collagen under the skin. Might still be beneficial.”

"Your new project now, is it?" John asks, but despite the dismissive words, he doesn't sound angry.

Sherlock turns and leans on the sink in order to scrutinise John more closely. “What about the other---” he almost says 'scars', because it would be apt, but John might appreciate a more business-like expression, “---things? The nightmares and all. Is Molly helping you with those?”

John nods. “Yeah, I think so. A bit. Still going to be a bit angry and frustrated about what happened, since that crap doesn't go away overnight. This whole thing…” he stops for a moment, as though to try to find the right words.

He’s being more careful with what he says these days, and Sherlock has been wondering if it’s because he has understood the need to be more explicit when talking to him of all people.

John clears his throat. “This whole thing is a self-inflicted wound, even more so than yours. You were just being careless, whereas I really put myself in the line of fire. I just have to learn how to stop being so god-damned angry at myself about it.”

Sherlock puts his hands on both of John's biceps and curls his fingers around them to get his attention. “Anger serves a purpose, just like a scar. It increases adrenalin and prepares you for a challenge; it’s the mind’s way of dealing with an injury, and it's still more constructive than being paralysed with full-on depression. You've used anger over the years to propel you out of what I have deduced was an unhappy childhood, then through medical school and through military service, not to mention using it constructively to manage all sorts of personalities at work to earn you your current position. Anger isn't just self-destruction – it can be an important part of determination. Properly channelled, it motivates. When we had our first proper conversation ever, it happened because you were angry with me, and it made me think that you did it because you cared. Not about me at that point, obviously, but you cared for the patient."

John nods. Sherlock had certainly made such a lasting impression that John had been downright fascinated by this arrogant arsehole of a surgeon who could rile him up so badly.

"Anger is what makes you brave in a way that others aren't. I wouldn't have you any other way.” Sherlock lets his hands slide down and off John's arms.

John unbuttons his cuffs and wastes no time in doing the same to the rest of his work shirt. Off come the trousers and his pants while Sherlock watches appreciatively.

“Pots and kettles, Sherlock,” he says and shuts off the cold and hot taps. "You're not exactly free of it yourself. Being pissed off about how people have treated you over the years makes you into who you are, too. Anger at other people telling you what you couldn't do makes you want to prove yourself better than they are. They told you that you shouldn't be a doctor and you fought your way onto the path of becoming the best goddamned neurosurgeon I will likely ever get to see. I'm sorry things after Afghanistan had to go the way they did. What I was going through managed to undermine your confidence, and that's what makes me feel the guiltiest of all. You don’t have to pretend with me, or keep things from me. I love you, all of you. Especially the bits I get to see only when it's just the two of us at home."
John steps closer and tugs the bathrobe off Sherlock’s shoulders. "It's not your job to fix me. Your job is just to be you. And don't ever think you're not helping me. Nothing is better than having you next to me when I wake up from a nightmare to remind me where and who I am."

There's a slightly calloused spot from the vest on Sherlock's right collarbone, onto which John now places a gentle kiss on. "Thank fuck that thing's gone."

"My sentiments exactly." Glancing at the tub which has now filled just the right amount, Sherlock quickly drops the robe and slips into the tub, making room for John behind his back in their usual configuration. John usually never fails to comment that the taller one should be the one sitting behind but Sherlock's 'I like it this way' never prompts any further protestations.

It's difficult to keep in mind that he can move a lot more freely, now. When John gently tips Sherlock backwards to lean his back against his chest, his first instinct is to sit up rigidly, lest the pins bear the brunt of the position. It's heaven, sliding forward a bit deeper into the water and placing his head on John's good shoulder. He discreetly grabs a sponge, submerges it and starts running it along the area that had been covered by the vest.

"Let me," John suggests, speaking quietly into his ear.

Sherlock shifts the sponge out of his reach. "In a moment, you'll get all of me, freshly scrubbed, instead of having to be reminded of everything you have been forced to put up with during the past few months." He realises he'll get to shave much more easily now, too. Not under his chin unless he momentarily takes off the collar, but still.

"I don't mind," John says, but stops reaching for the sponge and leans the back of his head against the wall instead of wrestling more with Sherlock.

Sherlock realises that not once has John complained about the rankness of the wool lining of the vest, or his greasy hair; bathing was such a big undertaking that they only did it a few times a week, at most. John had offered additional baths on days when Sherlock's mood had been the lowest, but it had still been a far cry from his usual, frequent and meticulous grooming rituals.

"Are you on call this weekend?" Sherlock asks while reaching behind his back to vigorously scrub at his shoulder blades. As he had told Doctor Arthur, he's spry, which includes being able to wash his own back without any missed spots.

"No. All yours."

"Good. I intend to make up for lost time," Sherlock says determinedly, lacing his words with just the right amount of innuendo that it doesn't sound ridiculous but also won't leave John ignorant of what he means.

"You're not supposed to strain yourself too much."

"Spoilsport. I actually think some of our technical lovemaking skills have developed due to the halo limiting our activities."

"Is that your way of saying I was rubbish at giving head before?"

"There's always room for improvement."

"Berk. Maybe you should show me how it's done if you're such a bloody connoisseur."

Sherlock squeezes the sponge dry over John's head.
"Oi!" John protests, wraps an arm around Sherlock and runs his thumb across a sensitive nipple leading Sherlock to gasp. Due to the intense momentary distraction that is now intensified by John's tongue playing with his earlobe, the sponge drops to the floor with a wet splat from his hand. The sudden movement makes the candles flicker.

"First things first," he chastises John, grabs a bottle of shampoo and tries not to feel self-conscious about presenting it to John. "Would you---?"

John is all smiles. "Demands, demands."

"Yet you stay," Sherlock reminds him, and the joke feels audacious against the backdrop of recent events. Yet, it brings forth no awkwardness or fear. What used to be a sore spot, a taboo subject, has turned into their usual banter.

"I do, God help me," John laughs, and sinks his fingers into the curls presented to him.

— The End —

Chapter End Notes

Thus concludes this tale of our two doctors finding their way back to each other. "Would you consider letting me write it with you? were Seven's fateful words to J some six months ago – time flies when you're having fun!

Thank you, thank you, THANK YOU all you lovely readers, commenters, lurkers, squee-ers, all of you. We love you.

So, you may ask, what comes next from us?

This is what 7PercentSolution shall be adding to her already flabbergastingly extensive catalogue, starting TODAY:
Based on ACD's *The Adventure of The Gloria Scott* and part of Seven's main fic verse (the one with about 1.6 million words), *Extricate* begins at Cambridge, where socially awkward chemistry student Sherlock has an unfortunate encounter with the teeth of a canine owned by the girlfriend of Victor Trevor, the ruggedly handsome captain of the rugby team. Neither of them can anticipate the far-reaching consequences of that first meeting.

**J. Baillier shall be keeping the fandom entertained with two things in the near future. First of all, there will be:**
In part seven of *You Go To My Head*, John battles resistant bacteria, killer viruses and other infectious threats, while Sherlock tries to reconcile with a ghost from his past. Chapter 1 will be posted on the 1st of June.

The second fic J will be posting this summer (starting the 1st of July) will be a johnlock AU of epic proportions:
A washed out war hero struggling with his past. A prodigy who walked away from his family legacy. Both are praying that the War Clock never resets to zero, yet hoping that it does, as they try to find their footing in a world where humanity is constantly under threat.

There's even a trailer. Did I say epic already? :)

*Catch you later,*
J & Seven

Please drop by the archive and comment to let the author know if you enjoyed their work!