

## **Bread Mold Might Be Medicine**

### **Introduction**

This game is about a doctor and the patients at a mental hospital whose lives are touched for better or for worse by the deep delusion of a new patient. The doctor will confront problems in his personal life and the patients will struggle to overcome their dysfunction while discovering their inner virtue. The new patient is incurable but perhaps within his delusion lies hidden wisdom. To play you will need three to five people and an assortment of d4s, d6s, d8s, d10s and d12s, and some poker chips.

### **Setup**

One player needs to assume the role of The Doctor. The Doctor is a generally well meaning person who genuinely cares for the health of the patients. He is a bit misguided in that his professional training often blinds him to the individual and unique qualities of those he treats. He also has some personal life struggles he needs to deal with.

The Doctor's player should name the doctor and flesh out a few details about the doctor's life outside the hospital. Most importantly the player needs to define a concrete problem in the doctor's life that he has trouble overcoming.

The doctor has two stats: Expertise and Problems both of which begin at d12.

### *Example Doctor*

Dr. Robert Albertson

Problem: Dr. Albertson is in love with a woman, Loretta Angleton, who is dating his professional rival, Dr. Eugene Adams.

Expertise: d12

Problems: d12

After defining The Doctor the group as a whole should create a group of patients The Doctor tends to. There should be one patient per player playing the game. This includes the players who will be playing The Doctor and The Deluded exclusively. This group of patients will be shared among the remaining players.

The group should be sure to name each patient and flesh out a little bit about their lives. It is important to note that these patients are not so damaged that they are a danger to themselves or others. They are likely there voluntarily present and not committed. They are deeply troubled but well intentioned people.

At this stage it is important that the players give a concrete description of the patient's dysfunction. Again, this shouldn't be anything psychotic. The players also need to describe an achievement the patient would be capable of accomplishing if his dysfunction were not getting in the way. This does not necessarily have to be a conscious goal the patient has. A patient will also have a Virtue but this gets defined at a later state.

Each Patient has three stats: Function which begins at d6, Dysfunction which begins at d8, and Virtue which begins at d4.

### *Example Patients*

Craig Masterson

Dysfunction: Craig has male identity issues and often overcompensates with affected machismo.

Achievement: He could close the gap with his estranged wife.

Virtue: ??

Function: d6

Dysfunction: d8

Virtue: d4

Brenda Preston

Dysfunction: Brenda lacks the confidence to speak and her mind and usually keeps to herself.

Achievement: She could be a great therapist.

Virtue: ??

Function: d6

Dysfunction: d8

Virtue: d4

Sebastian Wilder

Dysfunction: Sebastian is a bit of a narcissist who believes himself an unappreciated and misunderstood genius.

Achievement: He could write a great novel.

Virtue: ??

Function: d6

Dysfunction: d8  
Virtue: d4

Finally, one player needs to assume the role of The Deluded. The Deluded is incurably delusional. He is not a danger to himself or others but he is permanently lost in a grand fantasy of his own design. The Deluded has been shuffled around many hospitals. At the beginning of the game he is new to this hospital and has never met either The Doctor or any of The Patients.

The Deluded player should first declare whether his character is a man or a woman and should give him or her a name. He should generate no other details about The Deluded. Then \*The Doctor's Player\* answers a series of questions. The Doctor should write down the answers to these questions but he should keep them secret. He answers them alone and does not share them with the group.

What did The Deluded do for a living before his mental collapse?  
What was The Deluded's relationship with his parent's like?  
Did The Deluded have siblings; if so what was his relationship with them like?  
Did The Deluded have any romantic relationships; if so what was it like?  
Did The Deluded have any children; if so what was his relationship with them like?  
Finally, describe one important relationship The Deluded had outside work or family.

In general The Doctor's player has full authority to introduce facts about The Deluded's life prior to his mental collapse at any point in the game.

After The Doctor has finished writing down his answers The Deluded's player should briefly outline the core of The Deluded's delusion. The player should keep in mind both the doctor's personal problems as well as the patient's dysfunctions. The nature of the delusion is going to play a huge role in the resolution of those problems.

The Deluded has a single stat called Delusion it is fixed at a d12.

### *Example Deluded*

Ian Stewart

The Doctor's Notes:

Ian worked as a jewelry designer. While he never gained much notoriety his apprentice has gained quite a bit of artistic recognition.

Ian's father died when he was young and his mother compensated by sparing no expense for Ian's happiness.

Ian is an only child.

Ian was briefly engaged to an up and coming fashion designer named Rose. It was often speculated that Ian's eye for jewelry combined with Rose's clothing designs could have been quite a dynamic pairing in the fashion world.

Since Rose and Ian's planned wedding never came to pass they never had any children.

Ian often played cards with his friend Joseph. At the time of Ian's collapse Ian technically owed over \$300 to Joseph but Joseph would never have pressed the issue.

## The Delusion

Ian believes himself to be a masked vigilante fighting a shadow war against a vampire criminal cartel.

Delusion: d12

In addition to the dice statistics listed above the game uses two kinds of currency represented by poker chips of different colors. The first is called Inspiration. Inspiration represents how inspired by the philosophical underpinnings of The Deluded's delusion the other characters in the story have become. The more this delusion becomes a shared philosophical reference point the more bonded together the characters become. At the start of the game no one has any points of Inspiration.

The second currency is called Reason. It represents how well The Doctor and the patients are dealing with their problems on their own. At the start of the game no one has any Reason.

## Play

Play proceeds as a series of scenes. In general there are four kinds of scenes: Therapy, Interstitial, Private Life and Incident. There is no limit or order to the types of scenes with the exception of the opening scene which must be a Therapy scene. The group as a whole should decide what kind of scene they want to have happen next.

### Therapy Scenes

Therapy Scenes take place as discussion between The Doctor and The Deluded. Over the course of the scene The Deluded recalls one moment, scene or point of action within his delusion. The Deluded's player may ask other players to play parts within his delusion if he wishes but otherwise retains total control over the delusion's direction and content.

The Doctor should begin the scene with a question. The Doctor may interject with questions at any time over the course of the scene. He may ask anything he wants but it must be a question. He may not comment or make suggestions. The Deluded is in no way obligated to answer the questions directly.

In the beginning, The Doctor is trying to make sense of the delusion in terms of The Deluded's prior life. His answers to the questions during setup should inform the kinds of questions he asks. However, over time The Doctor should feel free to ask any questions he likes.

As a counter point The Deluded's player is trying to comment on The Doctor's personal problems via his delusion. He should keep the progress of the The Doctor's private life storyline in mind as he recalls the details of the delusion.

Once The Deluded's player has brought his scene, moment or point of action within the delusion to a close a Therapy Scene ends. The Deluded player earns three points of Inspiration.

Note: It is assumed that the doctor has similar such sessions with the other patients. However, those are never played out.

### *Example Therapy Scene*

Doctor: "Have you ever been love, Mr. Stewart?"

Ian: "Oh, many times. It's the mask. Woman find it irresistible."

Doctor: "So clothing is important to the woman in your life?"

Ian: "It's not the clothing. It's the mystery. Women are drawn to a man that holds a bit of himself back. The less they know, the more they want you."

Doctor: "What happens if they ever find out who you really are?"

Ian: "Bah! I'll never forget Helena. By day I wined and dined her. By night I saved her from the clutches of blood thirsty vampires! Never did she know we were the same man until one night I took her to my secret lair and brought her into my confidence. I could practically feel the magic shatter. Our relationship withered on the vine. Mystery, Doctor Albertson! I tell you that Mystery is the key to a woman's heart!"

### **Interstitial Scenes**

Interstitial scenes are simply two or more characters interacting and contain no dice rolling. It is perfectly acceptable for an interstitial scene to grow into an Incident or a Private Life scene organically. In fact, most scenes that are not Therapy scenes should begin as Interstitial Scenes unless there is a particular point of tension the group wants to get to immediately.

Anyone may propose a scene simply by suggesting who he would like to see interacting. The Doctor is always played by The Doctor player and The Deluded is always played by the Deluded. All other roles are distributed across the group. The Doctor and Deluded players should only ever play other characters if their primary character is not in the scene and there is no one else left to fulfill the role.

## Private Life Scenes

Private Life Scenes are about The Doctor's private life outside of work. Sometimes that involves The Doctor's work in terms of academic status or business issues but it should in no way involve his therapeutic role among the patients. Private Life scenes resolve fictional points of tension around the personal problem defined by The Doctor player at the start of the game.

The Doctor's player need not state it out loud but it should be clear that The Doctor is trying to make progress towards overcoming the problem and some other character is getting in his way of making that progress. Whether The Doctor gains or loses ground depends on a die roll.

Whoever is playing the character that is opposing The Doctor will roll two dice to represent The Doctor's opposition, a d12 and whatever die is currently associated with The Doctor's Problems. The Doctor's player rolls his Expertise (which is fixed at a d12).

If the opposition player reads the highest value on the two dice and if it is higher than The Doctor's roll then The Doctor has failed to overcome the adversity and loses ground towards overcoming his problem. If The Doctor player's die is higher than the highest of the opposition's two dice then the The Doctor overcomes the adversity and gains ground towards overcoming his problem.

You'll notice that The Doctor player is at a serious disadvantage. The Doctor may roll The Deluded's Delusion die (fixed at d12) if he wishes along with his Expertise die and use the highest single value. There are three constraints on doing this.

- 1) He must decide to do this BEFORE he rolls, not after.
- 2) The Doctor takes a point of Inspiration from The Deluded. Note: The Deluded must have at least one point of Inspiration for this to happen.
- 3) The Doctor player must have The Doctor work some aspect of The Deluded's delusion into his methodology for overcoming the adversity. That may be a philosophical stance in an argument or some kind of extreme gesture. The rest of the play group is the judge as to whether the aspect of the delusion has been satisfactorily worked into The Doctor's words and actions.

If The Doctor succeeds without buying into the The Deluded's delusion he earns a point of Reason.

### *Example Private Life Scene*

Doctor Albertson is on his way to lunch when he runs into Loretta.

Doctor: "Oh hey, Loretta, I was just on my way to lunch; want to come along?"

Loretta: "Oh, sure, let me give Eugene a call I'm sure he'd love to join us."

Doctor: "Oh.... Hey... last I heard Eugene was pretty busy I don't think we should bother him."

Loretta: "Nonsense. Eugene needs to give himself a break."

It's pretty clear that Doctor Albertson wants to take Loretta to lunch alone and that Loretta wants Eugene to come along. So dice are rolled.

Loretta's player will roll a d12 and since the The Doctor's Problems is rated at d12 she will roll a second d12 and pick higher of the two results.

The Doctor's player could take his chances with his single d12 from his Expertise but he remembers how Ian talked about mystery being the key to a woman's heart. So he takes a point of Inspiration from Ian's player and gains an extra d12 from Ian's Delusion.

Doctor: "Uh... it's a secret lunch."

Loretta: "A... secret lunch?"

Doctor: "Yes. I'm.... starting a new project. It's a secret project. I'm not ready to bring anyone in on it yet. But I want to share.... a few.... details with you. I can't bring you in on everything, just now, of course."

Loretta's player rolls a 6 and a 9 so her result is 9. The Doctor's player rolls a 7 and an 8 for a result of 8. Loretta's high 9 beats The Doctor's high 8. Oh! So close!

Loretta: "I'm calling Eugene. If you're starting a new project you should bring him in on it. You can trust him. The two of you could do GREAT work together if you'd only talk more often!"

## **Incident Scenes**

Incident Scenes are about the activities of the other patients under The Doctor's care. People come to visit them. They go on field trips. They encounter situations involving the staff or other patients. Incident Scenes resolve points of tension regarding the patient's dysfunction or unachieved potential accomplishment described at the beginning of the game.

Whoever is currently playing the patient need not state it out loud but it should be clear that the patient is trying to accomplish something and some other character is getting in his way. When the patient accomplishes his goal is determined by a die roll.

Whoever is playing the character that is getting in the way of the patient will roll a d12 and whatever die is currently associated with the patient's Dysfunction. He picks the higher of the two results. The patient will roll his Function die (fixed at d6).

BEFORE the roll is made The Doctor player MUST offer Advice. This advice should represent the most mundane, uninspired, and passive approach to overcoming the problem that isn't out and out retreat or caving. This is meta-advice. The Doctor character need not be present in the scene.

If the patient's player accepts the advice he must incorporate The Doctor player's advice into his portrayal of the patient's actions. He may then roll The Doctor's Expertise die (fixed at d12) along with his Function die (fixed at d6) and use the higher of the two results. He also earns a point of Reason.

BEFORE the roll and AFTER The Doctor player has made his advice The Deluded player may inspire the patient's Virtue. Unlike The Doctor this is completely optional for the The Deluded and The Deluded character must actually be acting in the scene in a manner which helps inspire the patient. It's okay for him to just enter the scene at this point if he is not already present.

If this is the FIRST time The Deluded has attempted to inspire this patient's Virtue he must do two things.

- 1) He must cast this patient as a permanent role in his delusion. From this point forward The Deluded sees this patient as that character from his delusion.
- 2) He must DEFINE the Virtue the patient has. The Deluded can see the hidden virtue within the patient and is attempting to draw it out.

If the patient accepts the inspiration he takes a point of Inspiration from The Deluded. Note: The Deluded can only offer inspiration if he has points of Inspiration. The patient then rolls his current Virtue die along with his Function die and uses the higher of the two results.

Note: A patient may not accept BOTH advice from The Doctor and inspiration from The Deluded. It's one or the other.

If the opposition player's result is higher then the patient's the patient fails to overcome the adversity and loses ground towards overcoming his dysfunction or achieving his potential accomplishment. If the patient player's result is higher then the patient overcomes the adversity and gains ground towards overcoming his dysfunction or achieving his potential accomplishment.

### *Example Incident Scene*

Brenda has been watching how the night janitor, Michael flirts with one of the nurses. Brenda wants to persuade him to take a chance and ask her out.

Doctor: "Baby steps Brenda. You should write an anonymous note and leave it for him."

Ian arrives on the scene.

Ian: "Hellena? My god, it has been ages!"

Brenda: “What? I’m...”

Ian: “Hellena! I know who you are. You look... different. What troubles you?”

Brenda looks over at Michael who is flirting with the nurse.

Ian: “Ah! Hellena you always had a keen eye for injustice. No crime legal or moral escaped you. But tell me, why so hesitant? This isn’t like you. The Hellena I knew once stared the Vampire Lord Kafkov in the face and told him to, “Go stake yourself...” I believe you put it. Surely, this matter pales in comparison.”

Ian’s player has now cast Brenda permanently as Hellena in his delusion. Ian’s player also defines Brenda’s Virtue as “Insightfully Observant.”

Brenda’s player decides to take The Doctor’s advice. Brenda gains a point of reason and she will roll her Function (d6) and The Doctor’s expertise d12. Michael’s player will roll a d12 and Brenda’s Dysfunction which is a d8.

Brenda rolls a 3 and a 10 for a result of 10. Michael rolls a 5 and an 8 for a result of 8. Brenda's high 10 beats Micheal's high 8.

Brenda: “I’m sorry, Ian. I’m not who you think I am.” She writes a note on piece of paper she tares out of a notebook and quietly slips it under Michael’s door. Later Michael discovers the note. Reads it, considers it and then asks the Nurse out on a date. He will never know who gave him that necessary push.

### **Spending Reason and Inspiration**

The Doctor may spend three points of Reason OR Inspiration to reduce the die size of his Problems by one level. Note: Three of the same kind, not mixed.

Any player may spend three points of a patient’s Reason to reduce his Dysfunction die size by one level.

Any player may spend three points of a patient’s Inspiration to increase his Virtue die size by one level up to a maximum of d12.

### **Solving the Problem**

If The Doctor ever reduces his Problems below a d4 then he has overcome his personal problems. When this happens a few rules change.

First of all, there can be no more Private Life scenes. That issue has been resolved.

Second, The Doctor is no longer obligated to give Advice during incident scenes. However, if he does he can inspire a patient's Virtue. He must be present and active in the scene like The Deluded but he does not have to be casting the use of the Virtue in terms of the delusion. He can inspire "reasonable" Virtue and the patient gains a point of Reason for taking this advice along with rolling his Virtue in the scene.

## **Checking Out**

Any player at any point may declare that it's time for a patient to check out and leave the hospital. It's usually a good idea to have a patient check out after a sufficiently climactic Incident scene.

When a patient checks out he makes one final roll before narrating an epilogue. He simply rolls his Function and Dysfunction dice using the higher of the two results vs. his Virtue die. If his Function and Dysfunction dice result wins then he lives a normal and healthy but relatively uninspired life. If his Virtue die wins out then he goes on to realize his full potential.

A patient MUST check out if his Dysfunction die is ever reduced below a d4. This, of course, means his epilogue roll is simply Function vs. Virtue.

## **Ending the Game**

The game ends when all the patients have checked out. If The Doctor has not solved his personal problems by then he never will. The Doctor should describe a short epilogue scene to display this.

Regardless, The Deluded is still incurable and the game ends with him being transferred to another institution. The Doctor and the The Deluded should play out one last scene together to say their farewells. This is technically an Interstitial Scene.

## **Sources**

The following films provided inspiration for this game. In each one a man's so-called delusional perspective eventually leads others to health and happiness.

K-PAX

Neverwas

The Fisher King

Franklyn

## **Game Chef Notes**

Holiday - The original title of this game was Mr. Bond Takes A Holiday. The deluded character was fixed as a man named Mr. Bond who believed himself to be a spy. As I went along I

decided to open it up a bit. I still see most of the patients and The Deluded as being "on Holiday" at the hospital.

Bond - I realize that Bond was still relevant to the design because this is a game about characters who grow closer together by finding inspiration in a shared source.

Recall - The Deluded spends most of his time in the game recalling "memories" from his delusion.

Comedy - I see a lot of potential for a lot of "Don Quixote" like absurd-ism depending on how to heart the various character take on their assigned roles in the delusion. The Doctor is an intended Wild Card who could range from a total sympathetic romantic comedy protagonist, to a cynic who finds revelation, to a total hard-ass who gets put in his place at the end.