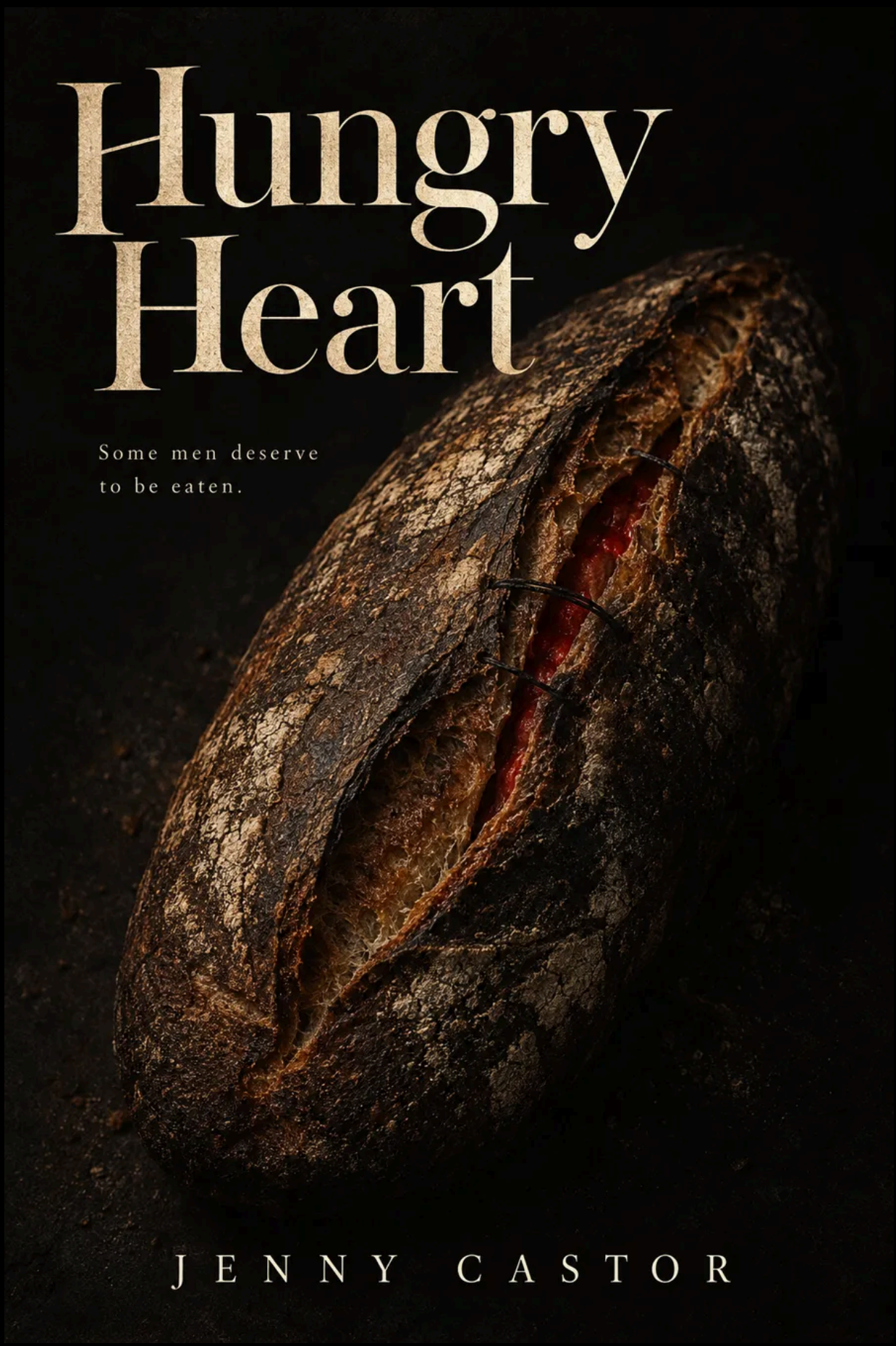
SERIALLY STUDIOS

COMMISSION PACKAGE



Hungry Heart

Some men deserve to be eaten.

Written by Jenny Castor

Prepared 03 November 2026

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PART I

The Idea

The seed the novel grew from.

> *Some men deserve to be eaten.*

PREMISE

Hungry Heart — Louisa Fischer The first man Amy Fletcher sleeps with is kind until morning. Then he calls her a charity case, laughs at the scar between her breasts, and tells her she should be grateful anyone wanted her. Amy wakes twelve hours later in his bed. The walls are covered with blood and gore. Something is caught between her teeth. Most of him is gone. At twenty-three, Amy expected her transplant to give her an ordinary life. Before Southmead Hospital found a donor, illness had reduced her world to medication alarms, her mother's spare room, and watching other people leave for parties she could not survive. The new heart gives her strength. It also gives her appetite. Amy hides the first death. When it happens again, she learns that the heart wakes when desire curdles into humiliation or fear. She cannot command it once it begins, but she can choose who brings it close to hunger. Bristol has men who drug women. Men whose cases collapse. Men who know exactly how frightened a woman must be before the police will call her unreliable. Amy begins dating them. She tells herself this is control. Choosing the meal is not the same as controlling the mouth. Her donor was Caroline Cors, a wealthy property solicitor whose three husbands and two lovers disappeared. Caroline died before anyone could prove she was the Black Widow of Clifton. Her confidential transplant file contains an older surgical scar around the heart. There is no record of how it came to be there. DI Farah Khan wants Amy's vigilante killings stopped. She knows what some of the dead men did and why their victims were failed, but she will not accept a justice that leaves families identifying scraps. Dr Jonathan Hartley, the surgeon responsible for Amy's transplant, wants the heart removed before its tissue spreads farther into her chest. The operation will probably kill her. Concealing what is happening may condemn other recipients and destroy a transplant programme that keeps dozens of people alive. Nina Clarke has spent years watching her best friend nearly die. She wants Amy to stop treating survival as something she has to apologise for. As Amy becomes healthier, bolder and increasingly secretive, Nina is delighted by the woman emerging from the patient—until she begins to suspect that Amy's sudden appetite for life has a body count. Then Amy falls for James Murray, the night baker below her flat. James does not scorn her, rescue her, or mistake fragility for goodness. He wants the truth and a future in which Amy does not disappear whenever tenderness becomes dangerous. Amy wants him badly enough to feel the first hard change beneath her scar. Now she must explain anti-rejection medication found in a dead rapist's blood, a cardiac biopsy containing human tooth enamel, and a second pulse that begins whenever James touches her.

Someone is also leaving parcels of raw meat outside her door, tied with the same black surgical thread found embedded in Caroline's heart. And Amy begins to discover that Caroline may not have been the beginning of whatever is living inside her. The heart has eaten cruel men. It has not yet been asked to spare a good one. Amy believed illness had stolen her life and the transplant had returned it. Now every new freedom—sex, strength, independence, anger, pleasure—makes it harder to determine where the donated heart ends and Amy begins. If hunger can inherit violence, can love teach it restraint? Or is Amy's insistence that James deserves to live merely the last boundary between the woman she believes herself to be and the thing she is becoming? Do not turn this into a jaunty vigilante romance. The killings are frightening, intimate and physically consequential. Amy can discover satisfaction in choosing men she believes deserve punishment, but the book must remain troubled by what she is doing. Her moral certainty should become less reliable as her confidence grows. Do not make Caroline a complete personality living inside Amy or reduce the heart to simple possession. Something physical and inexplicable has been inherited, but Amy's choices remain Amy's. The distinction between inherited appetite and chosen violence is central. The romantic relationship must intensify the horror rather than provide an escape from it. James being good makes him more dangerous to Amy, not safer. For register: The Substance and Promising Young Woman, with the intimate bodily horror and dangerous sensuality of Louisa Fischer's fiction.

WHAT THE BOOK IS ABOUT

Amy stitches the heart still long enough to spare James, but instead of letting Hartley remove it or telling Khan what she has done, she leaves James and arranges another date.

THE QUESTION UNDERNEATH IT

When Amy chooses which cruel man will awaken her transplanted heart, what part of the killing can she still blame on the heart?

PART II

What Became of Your Idea

Every distinctive thing in the premise you sent, and where it ended up — kept as written, grown into something else, held for a later book, or left out. Nothing here was decided quietly.

The first man Amy sleeps with mocks her scar and is mostly eaten by morning.

Kept · in the book as you described it

Lewis Pritchard's humiliation triggers the first on-page feeding and Amy's foundational concealment in chapters 6–7.

A transplant gives Amy strength and an appetite activated when desire becomes humiliation or fear.

Kept · in the book as you described it

The central threat rule is learned through two uncontrolled deaths, then deliberately exploited and finally shown to depend on Amy's emotional preparation rather than a target's moral guilt.

Amy starts dating men whose sexual violence escaped justice.

Kept · in the book as you described it

Amy draws targets from patterns Khan recognises in stalled investigations, including grooming evidence and recorded victim accounts that never reached charging decisions.

Choosing the meal is not controlling the mouth.

Kept · in the book as you described it

This drives the corruption arc: Amy can select circumstances but cannot halt a feeding until she uses the physically ruinous widow's hitch.

The confidential transplant file contains an unexplained older scar around Caroline's heart.

Kept · in the book as you described it

The scar and black sutures reveal an illicit earlier transplant performed by Evelyn Hartley and prove the heart predates Caroline.

DI Farah Khan knows some dead men harmed women but rejects a justice that leaves families identifying scraps.

Kept · in the book as you described it

Khan's stalled case knowledge helps Amy choose targets while Khan's investigation, shaped by distrust of her own institution, refuses both easy condemnation and protection.

Nina delights in Amy's new life until she suspects a body count.

Kept · in the book as you described it

Nina helps Amy claim independence, then betrays her by admitting Khan to the flat and ultimately survives Amy's misdirected attack.

James, the night baker below Amy's flat, wants truth and tenderness rather than rescuing her.

Kept · in the book as you described it

James's patient intimacy awakens the strongest second pulse; he asks Amy to face Hartley with him but cannot make the choice for her and leaves when she preserves the secret.

Tacrolimus in a dead rapist's blood, tooth enamel in a cardiac biopsy and a second pulse around James create converging evidence.

Kept · in the book as you described it

The toxicology draws Khan to Amy, pathology proves the heart is growing feeding structures and James's presence tests whether goodness changes the appetite.

Caroline Cors was suspected in the disappearances of husbands and lovers.

Transformed · grew into something the book needed more

Caroline did choose victims, but she inherited the heart rather than creating its hunger, making her Amy's predecessor instead of a possessing personality.

Jonathan Hartley wants a probably fatal explant to protect Amy, other recipients and the transplant programme.

Transformed · grew into something the book needed more

Hartley's medical case remains strong, but he concealed the abnormal organ to protect the programme and his mother's reputation, making his proposed rescue inseparable from self-preservation.

Raw meat parcels tied with Caroline's black surgical thread appear at Amy's door.

Transformed · grew into something the book needed more

Hartley leaves warmed laboratory meat as a covert experiment in diversion; Nina witnessing him deliver it exposes his prior knowledge.

PART III

Overview

The book at a glance.

TITLE	Hungry Heart
AUTHOR	Jenny Castor
GENRE	Horror / Dark Romance / Dark Fantasy
FORMAT	novel
CHAPTERS PLANNED	36
CHAPTERS WRITTEN	36
WORD COUNT	110,898
CONTENT RATING	adult
CONTENT LEVEL	explicit
WRITTEN FOR	women 20–40 who read contemporary/transgressive horror but also want a strong relationship and desire engine.
FOR READERS OF	The Eyes Are the Best Part meets Such Sharp Teeth, A Certain Hunger

SHORT HOOK

A transplanted heart hungers for cruel men—and Amy can choose who brings it close enough to feed.

BLURB

Amy's new heart gives her strength, desire and an appetite she cannot control. After it devours a man who humiliates her, she begins choosing others who might deserve its teeth. But a good man's tenderness wakes the same hunger—and this time Amy wants him left alive.

THE BOOK IN ONE PARAGRAPH

After her transplanted heart devours the first man she sleeps with, twenty-three-year-old Amy Fletcher hides the death and begins steering its appetite toward men whose sexual violence escaped prosecution. At the book's midpoint, Amy discovers that the heart passed through another woman before Caroline Cors and mistakes that history for proof that its hunger can be mastered, deliberately summoning it to kill an abusive police officer. As the heart spreads through her chest, DI Farah Khan closes in, surgeon Jonathan Hartley demands a probably fatal explant, and Amy must physically restrain the organ to spare James Murray—then abandons him and resumes choosing victims rather than surrender the power that has made her feel alive.

WHAT THE READER IS PROMISED

The reader gets the dangerous exhilaration of watching a formerly fragile woman become strong, sexual and frightening, while every victory leaves blood on something she wanted to keep clean. James asks what Amy wants, waits when she cannot answer and stops when her body goes rigid; his patience makes their Explicit intimacy more perilous because tenderness reaches the part of her the heart most wants. The book never turns the dead into punchlines, makes Amy's targets simple permission to cheer or lets romance wash away what she has chosen.

THE AUTHOR

JENNY CASTOR

Jenny Castor writes women who want too much and refuse to apologize for it. Her fiction moves through kitchens, nurseries, nightclubs, and the insides of other people's bodies with the same unblinking attention, finding appetite wherever she looks — for food, for sex, for violence, for control. Her narrators confess rather than explain, and the reader is never given the comfort of judging them from a safe distance. She is interested in what femininity costs to perform, and what happens the moment a woman stops performing it. Her books tend to turn funny in the worst possible moments, and never apologize for that either.

VOICE

Scenes open mid-gesture — a hand already reaching, a decision already made — and close on an image rather than a resolution, so momentum carries between chapters instead of settling inside them. Sentences run long and clause-heavy when the narrator is justifying herself, then cut short for the things she can't dress up. Interiority is constant and confessional, first person, addressed to no one in particular; dialogue is sparse and functional, there mainly to expose the gap between what's said and what's felt. The prose refuses to flinch from the body — food, sex, blood handled with the same forensic appetite — and refuses to supply a moral frame for any of it. Humor arrives dry, inside the narrator's own logic, never as an authorial wink.

INFLUENCES	Chelsea G. Summers, Rachel Yoder, CJ Leede, Eliza Clark, Kirstie Swain
COMPARABLE TITLES	A Certain Hunger, Nightbitch, Maeve Fly, Boy Parts, Penance

PART IV

Originality

What this book was checked against before it was written.

CHECKED	2026-10-06
VERDICT	No substantial match found

SUMMARY

The concept appears original within transplant horror and dark romance. Its sentient or behavior-altering donor-organ motif has genre precedents, but the combination of bodily appetite, morally unstable vigilantism, transplant-program secrecy, and romance-driven danger does not clearly reproduce a specific published work.

TITLE Hungry Hearts — Anzia Yezierska (1920) low

The proposed title differs only by singular versus plural from this published short-story collection. However, the phrase is generic, and the works have entirely different premises, genres, characters, and settings.

PART V

Genre

The shelf this book belongs on, and the promises that come with it.

GENRE	Horror / Dark Romance / Dark Fantasy
CATEGORIES	Fiction > Horror > Body Horror, Fiction > Fantasy > Dark Fantasy, Fiction > Romance > Gothic
KEYWORDS	female vigilante serial killer, cannibal heart transplant, medical monstrosity novel, morally gray female protagonist, dangerous sensual body transformation, Bristol supernatural thriller, women taking revenge on predators
FOR FANS OF	For fans of The Substance, A Certain Hunger and Promising Young Woman.
TARGET AUDIENCE	women 20–40 who read contemporary/transgressive horror but also want a strong relationship and desire engine.

TONE

visceral intimate body horror, morally corrosive feminine rage, predatory sensuality, claustrophobic medical dread, tenderness under mortal threat

THEMES

- Inherited Appetite vs Chosen Violence — When a transplanted heart hungers for cruelty, is the woman who selects its meals still innocent of the killing?
- Deserved Health — If survival itself was once something Amy had to justify, does she now have to justify the violence that keeps her thriving?
- Moral Certainty's Decay — As Amy's confidence and strength grow, can she still trust her own judgment about which men deserve to die?
- Tenderness as Threat — If love is the one hunger the heart has never been asked to spare, does James's goodness make him safer with Amy or the most at risk?
- Diagnosis vs Confession — Is Amy's silence about the heart protecting the people who depend on her transplant, or only protecting herself from being stopped?

WHAT MAKES THIS BOOK ITSELF

The classic monstrous-woman corruption arc is executed through transplant medicine's daily disciplines, making every medication alarm simultaneously an act of self-care, forensic evidence and preparation for predation.

THE BOOK'S DNA

TONE	intimate-clinical and morally dark
PRIMARY	Horror
MICRO GENRES	body horror, dark romance, medical horror, transplant Gothic, psychological horror, dark fantasy, vigilante horror, police procedural suspense
WORLDBUILDING DENSITY	moderate
DOMINANT ARC SHAPE	tragic-empowerment
EMOTIONAL INTENSITY	9
BINGE LIKELIHOOD SCORE	9
ESTIMATED DROP RISK CHAPTERS	8, 21, 23, 26, 28, 36
READABILITY	commercial-literary
SENTENCE COMPLEXITY	varied
VOCABULARY RICHNESS	0.84
INTERNAL MONOLOGUE DENSITY	high
PACING	variable
CONFLICT DENSITY	9
RESOLUTION CADENCE	deferred
SUBPLOT COMPLEXITY	high
TENSION CURVE SHAPE	escalating-with-valleys
CLIFFHANGER FREQUENCY	0.86
POV TYPE	first-person
DIALOGUE RATIO	0.3
PROTAGONIST ARCHETYPE	villain-protagonist
RELATIONSHIP DYNAMICS	neighbours-to-lovers, caretaking-with-boundaries, love-versus-accountability, friendship-under-betrayal, patient-versus-compromised-

	doctor, investigator-versus-suspect, human-versus-parasitic-self, vigilante-to-predator
ROMANTIC TENSION LEVEL	9

CONVENTIONS WRITTEN TO

- Horror & Gothic
- Romance
- World & Adventure

PART VI

Research

What was checked before anything was invented.

ESTABLISHED FACTS

- Standard post-transplant immunosuppression uses calcineurin inhibitors like tacrolimus, plus tapering steroid doses, and must continue indefinitely — missing doses risks rejection within days to weeks.

  Gives a concrete medication name (tacrolimus) and dosing logic Amy would live by; its presence in a dead man's blood becomes a forensic clue with real pharmacological grounding.

- Rejection can occur years after transplant even with medication, and treatment involves changing the antirejection drug regimen or retransplantation.

  Explains why Hartley monitors Amy long-term and why a late-onset abnormality (the heart's tissue spreading) would plausibly first be read as rejection before anyone suspects something stranger.

- Immunosuppressants work by weakening the immune system broadly, not just the heart-specific response.

  Justifies why Amy might get sick more easily, bruise, or heal oddly — useful texture for scenes where her body reacts unpredictably to violence or exertion.

- UK rape/serious sexual assault investigations require victims to give a recorded or video account to a specially trained officer, and victims can access an ISVA (Independent Sexual Violence Adviser) for support through the process.

  Lets DI Khan's procedural frustration be specific: cases collapse not from lack of belief but from evidentiary thresholds, timelines, and the gap between a video ABE interview and a charging decision.

- Crime scene evidence gathering for sexual offences explicitly includes searching for signs of grooming, targeting and harassment, not just the assault itself.

  Gives Khan language for why she 'knows what some of the dead men did' even without conviction — a documented pattern of grooming behaviour can exist in case files despite case collapse.

- Clifton, Bristol, sits on elevated limestone terrain above the Avon Gorge, roughly a mile west of the city centre, with Cliftonwood below it bounded by steep, narrow roads and footpaths (only two roads in/out of Cliftonwood).

  Gives Caroline Cors's old territory a literal verticality and insularity — steep terraces, few entrances/exits, good for a sense of enclosure or a body's movements being traceable.

- More than 1,100 UK police officers were under investigation for sexual or domestic abuse as of late 2023, per Guardian reporting.

  Gives Khan a bitter, specific institutional backdrop for her distrust of easy procedural solutions — she's not naive about the system she serves.

TEXTURE

- A transplant patient's day is structured around tacrolimus dosing times — missing a dose by even hours can be medically significant, giving Amy a literal alarm-clock relationship with her own body.
- Victims reporting sexual assault in the UK give their account via video-recorded interview with a specially trained officer, not a simple spoken statement — procedural, clinical, re-traumatising by repetition.
- Cliftonwood's geography means only two roads lead in or out (Ambra Vale and Clifton Wood Road), with many footpaths between — good for a sense of being watched, followed, or cornered on foot.
- A Crime Reference Number is the bureaucratic object victims are told to 'write down and keep' — a small, cold detail of how assault becomes paperwork.
- Clifton proper sits on limestone high ground over the Avon Gorge — steep inclines, old Georgian terraces, views down into the gorge, a mile's walk from Bristol's noisy centre into something quieter and more exposed.
- Heart transplant rejection treatment sometimes means 'repeating the transplant with a new donor heart' — a fact Hartley would know cold, and one that makes his proposed operation on Amy read as a last resort, not an overreaction.

PITFALLS AVOIDED

- Don't have Amy stop her anti-rejection medication casually or for long stretches — missing doses causes rejection symptoms (fatigue, arrhythmia, breathlessness) within days, not vague long-term risk; this should be a constant, visible pressure, not a plot-convenient switch she can flip.
- Don't write UK police procedure as instant or TV-paced — a rape case moving from report to CPS charging decision is slow and often stalls at the evidential test, which is exactly why Khan's dead men's cases 'collapse' rather than simply not being reported.
- Don't make Clifton/Cliftonwood a generic 'posh leafy suburb' — it's specifically a steep, geographically pinched limestone escarpment above a gorge, with genuinely limited road access, which should shape chase/stalking/escape logistics.
- Avoid treating tacrolimus/immunosuppressant use as a vague 'pill' — it has specific named drugs (tacrolimus, calcineurin inhibitors, steroids) that a forensic toxicology

report would name explicitly, which matters since this exact detail turns up in a dead rapist's blood.

- Don't give Khan easy institutional righteousness — the same police force she works for has its own severe internal sexual/domestic abuse problem, which should inform her tone toward Amy's vigilantism rather than letting her be a simple moral contrast.

SOURCES CONSULTED

- Heart transplantation
  https://en.wikipedia.org/wiki/Heart_transplantation
- Kidney transplantation
  https://en.wikipedia.org/wiki/Kidney_transplantation
- Campus sexual assault
  https://en.wikipedia.org/wiki/Campus_sexual_assault
- Rape kit
  https://en.wikipedia.org/wiki/Rape_kit
- Clifton, Bristol
  https://en.wikipedia.org/wiki/Clifton%2C_Bristol
- Bristol Zoo
  https://en.wikipedia.org/wiki/Bristol_Zoo
- Transplant rejection
  https://en.wikipedia.org/wiki/Transplant_rejection
- Transplantation (medicine)
  https://en.wikipedia.org/wiki/Transplantation_%28medicine%29

PART VII

Arc and Structure

The shape chosen for this story, and why that one.

Freytag's Pyramid (five-act tragedy)

Amy's midpoint high—thriving physically and embracing her power to choose the heart's victims—should become the hinge into a long tragic fall as her moral certainty decays and James becomes the hunger's ultimate test.

MOVEMENTS

CH 1–5	Exposition
CH 6–7	Inciting incident
CH 8–16	Rising action
CH 17–20	Climax — the peak, at the centre
CH 21–31	Falling action — consequences unspool
CH 32–36	Catastrophe and dénouement

LENGTH OF THE BOOK	36 chapters
CHAPTERS WRITTEN	36
LENGTH THE STRUCTURE SUGGESTS	24
VERDICT ON LENGTH	suits

The movements above are placed across the 36 chapters the book was written at. They were first laid out at 24; the structure is a set of proportions, so it scales with the book rather than fixing it at the length it was first imagined.

WHY THE STRUCTURE PROPOSED THAT LENGTH

Twenty-four chapters allow a measured rise to the central turn and ample space for the slower, consequential descent demanded by tragic body horror.

CONSIDERED AND SET ASIDE: OVERCOMING_THE_MONSTER

Although the inherited heart supplies a vivid monster, that shape fits less well because the central horror is Amy's willing collaboration with an appetite that cannot be cleanly separated from or defeated by her.

Freytag's Pyramid

Gustav Freytag

A classical dramatic structure that builds from exposition to a central climax, then descends through falling action to a resolution. Often used in tragedy, it emphasises cause and consequence, with a clear turning point at the midpoint.



Best for

Tragedy, literary fiction and stories centred on consequences. Ideal when the story is driven by a central flaw, moral question or inevitable confrontation, and where the emphasis is on the outcome rather than a happy resolution.

Avoid when

The story is intended to be light, episodic or open-ended, or when you need multiple climaxes, subplots of equal weight, or a more modern, fast-paced structure.

1 Exposition
0% – 20%



Introduce the world, main characters and underlying conflicts. Establish the protagonist's situation, goals and any seeds of future trouble.

2 Rising Action
20% – 40%



Complications, obstacles and escalating tension. Choices and actions set in motion the chain of events that lead towards the climax.

3 Climax
40% – 60%



The central confrontation. The highest point of tension where the main conflict comes to a head and the story's true stakes are revealed.

4 Falling Action
60% – 80%



The immediate aftermath. Consequences unfold, loose ends begin to tighten, and the full impact of the climax becomes clear.

5 Denouement
80% – 100%



Resolution and final outcome. The story's tensions are settled, showing the lasting consequences for the characters and world. Often carries a reflective or thought-provoking tone.

How it works

Freytag's Pyramid follows a clear five-part arc: exposition, rising action, climax, falling action and denouement. The story builds to a single central climax in the middle, then descends, with the focus on the consequences of the protagonist's actions. This structure naturally suits stories where cause and effect, and the weight of outcomes, are central themes.

Key strengths

- Clear, intuitive structure
- Strong focus on cause and consequence
- Ideal for character-driven and literary fiction
- Emphasises dramatic tension and resolution
- Well suited to tragedy, moral questions and reflective endings

THE PROTAGONIST'S ARC

THE BELIEF THEY BEGIN WITH

Amy Fletcher believes that choosing who pays for her survival makes every resulting cost deliberate and defensible.

- event: Amy carries her belongings upstairs without help and treats physical independence as proof that nobody should regain authority over her body.
- event: Amy conceals Lewis Pritchard's remains and takes tacrolimus beside his blood, choosing continued survival before she understands its price.
- event: Amy keeps Gareth Pike close after escape becomes possible and treats selecting Gareth as mastery over the feeding.
- event: Amy corners Oliver Venn until Oliver's fear wakes the heart, destroying Amy's distinction between discovering danger and manufacturing it.
- event: Amy uses exact medication and the widow's hitch to preserve future hunts, converting self-care into deliberate preparation for violence.

SUBPLOTS

- Amy Fletcher and Nina Clarke
- Amy Fletcher and James Murray
- Caroline Cors and the inherited heart
- Jonathan Hartley's medical containment
- James Murray's wholesale bakery ambition
- Farah Khan's linked-disappearances investigation

PART VIII

Tropes

The conventions this book keeps, bends and refuses.

These tropes form a dark romance built on horror's internal logic: a woman corrupted by an inherited hunger that wakes when others suffer humiliation, learning to choose its victims until she falls in love with someone good enough to be unconditionally dangerous to her. The romance is forbidden not by circumstance but by the nature of what Amy is becoming—James's goodness makes the distinction between her chosen violence and the heart's appetite collapse. The book promises the reader a tragedy where love deepens rather than resolves the monster, where sacrifice may be necessary but never redemptive, and where the final question is not whether Amy survives but what she becomes in the surviving.

MAJOR **The Corruption Arc** ch P, ch l, ch a, ch n, ch t, ch e, ch d, ch

straight

Amy's consumption by the inherited hunger is the spine of the tragedy—she does not resist it, negotiate with it, or escape it, but progressively surrenders to it as her confidence grows and her moral certainty decays. The arc runs its full course from initial horror at what she has done to active selection of victims to the final terror of loving someone the heart has never been asked to spare.

MAJOR **Forbidden Love** ch P, ch l, ch a, ch n, ch t, ch e, ch d, ch

straight

James is forbidden not by external circumstances but by the nature of what Amy is becoming—her love for him intensifies the horror rather than resolving it, because his goodness makes him the one prey the heart has never been asked to spare. The trope is delivered straight: the love is real, deepens genuinely, and creates an impossible choice that has no redemptive exit.

MAJOR **The Rules of the Threat** ch R, ch u, ch l, ch e, ch s, ch , ch a, ch r

straight

The heart's hunger operates by discoverable internal logic: it wakes when desire curdles into humiliation or fear, Amy cannot command it once it begins, but she can choose who brings it close to hunger. These rules are established early and then tested repeatedly—the trope is delivered as a hard system with consequences, not as mysterious or arbitrary.

SUPPORTING **Body Horror Escalation** ch P, ch l, ch a, ch n, ch t, ch e, ch d, ch

straight

The physical manifestations of the inherited hunger escalate from the first kill's aftermath through the surgical discoveries (tooth enamel in biopsy, anti-rejection drugs in a victim's blood) to the second pulse that begins when James touches her. Each escalation makes the boundary between Amy's body and the heart's more porous and terrifying, not explaining it away.

SUPPORTING The Slow Reveal

ch P, ch l, ch a, ch n, ch t, ch e, ch d, ch

straight

Caroline's true identity and prior scarring, the surgical thread in her heart, the absence of records explaining the earlier scar, and the parcels of raw meat are all planted before Amy understands their significance. The reader can see the pattern of inheritance emerging before Amy accepts it, creating dread about what she is becoming.

SUPPORTING The Sacrifice

ch P, ch l, ch a, ch n, ch t, ch e, ch d, ch

partial

The trope's core beat—a character surrendering something essential to prevent greater harm—lands, but the key element of redemption or heroism is withheld. Amy may sacrifice her safety, her innocence, or her future to protect the transplant programme and the people who depend on it, but this sacrifice does not cleanse her or resolve the hunger. She remains compromised and monstrous even (or especially) in her act of restraint.

PART IX

Story Bible

The decisions every chapter is written against.

THE STORY

After her transplanted heart devours the first man she sleeps with, twenty-three-year-old Amy Fletcher hides the death and begins steering its appetite toward men whose sexual violence escaped prosecution. At the book's midpoint, Amy discovers that the heart passed through another woman before Caroline Cors and mistakes that history for proof that its hunger can be mastered, deliberately summoning it to kill an abusive police officer. As the heart spreads through her chest, DI Farah Khan closes in, surgeon Jonathan Hartley demands a probably fatal explant, and Amy must physically restrain the organ to spare James Murray—then abandons him and resumes choosing victims rather than surrender the power that has made her feel alive.

THEME

Amy stitches the heart still long enough to spare James, but instead of letting Hartley remove it or telling Khan what she has done, she leaves James and arranges another date.

THE QUESTION

When Amy chooses which cruel man will awaken her transplanted heart, what part of the killing can she still blame on the heart?

THE LIE THE PROTAGONIST BELIEVES

Never let anyone else decide whether your life is worth its cost; choose the cost yourself and make somebody deserving pay it.

WHAT THEY WANT

Amy wants to build an independent, sexually alive life and keep her donor heart without being exposed, confined or forced into a lethal explant.

WHAT THEY NEED

Amy needs to let people see what survival costs and accept being stopped before secrecy turns her appetite into a private court.

THE WOUND

Years of severe cardiac illness taught Amy that occupying space, needing care and wanting pleasure made her an expense other people were entitled to resent.

THE MOMENT THAT MADE THEM

At nineteen, after Amy collapsed during Nina Clarke's birthday meal and the ambulance took her back to Southmead Hospital, Amy heard her exhausted mother Julie tell a nurse outside the curtain that every good day ended with everyone paying for Amy's body; Julie returned smiling with Amy's overnight bag, unaware Amy had heard.

THE OPPOSING FORCE

Dr Jonathan Hartley wants Amy's heart removed before its invasive tissue reaches her lungs and before evidence proves that he knowingly transplanted an anomalously scarred organ. He concealed the scar because discarding Caroline Cors's otherwise viable heart would have exposed an earlier illicit operation performed by his mother, destroyed the Southmead transplant programme's public trust and endangered patients waiting for organs; he is right that Amy is becoming medically uncontrollable and that one recipient cannot be protected at the cost of future recipients, but he repeatedly treats her survival as the expendable variable.

MIDPOINT

At the Freytag climax in chapter 18, retired theatre nurse Edith Salter sees the black sutures emerging through Amy's biopsy wound and reveals that Caroline Cors was herself given the already-scarred heart in an illicit operation performed by Evelyn Hartley. Amy now knows Caroline was not the hunger's origin but another woman who chose its meals; instead of hearing a warning, Amy takes this as proof that the appetite can be carried and directed.

MIRROR MOMENT

In chapter 31, Amy watches security footage with Khan and sees herself smiling before Felix Rowe insults her—the hunger had already begun because she came wanting the insult, not because he forced violence upon her. She recognises Caroline's composure in neither voice nor memory but in her own patient preparation.

THE LOW POINT

Freytag has no early all-is-lost equivalent near chapter 8; its functional catastrophe beat occurs in chapter 33, when the heart attacks Nina during an argument without sexual threat or a male target, James sees Amy try to hold Nina over the opening in her chest, and Amy believes she has permanently lost both James's desire and her claim that she can aim the hunger.

CLIMAX

In chapter 35, while the heart opens during Explicit intimacy and begins drawing James into Amy's chest, Amy refuses his attempt to hold her down, uses Evelyn Hartley's black curved needle and stitches the living seam to her sternum from the inside, sacrificing breast tissue and the future she imagined with him to force the organ to spare him; she then rejects Hartley's waiting explant and threatens him with exposure, making concealment irrevocably her own choice.

THE HIGH POINT

In chapter 19, corrupt officer Gareth Pike corners Amy on a Cliftonwood footpath after learning she contacted one of the women who reported him. Amy refuses to flee toward either road out; she names the details he expected the police file to bury, makes him reveal his contempt and deliberately opens the hard seam beneath her scar. She remains conscious while the heart consumes him and walks uphill carrying her medication intact.

RESOLUTION

Nina survives but will no longer keep Amy's secrets, Khan lacks enough admissible evidence to charge Amy with bodies that cannot be reconstructed, and Hartley remains professionally trapped by his own concealment. James moves out of the bakery room beneath Amy's flat and asks her not to follow. Amy keeps the heart, resumes exact tacrolimus dosing under another clinic consultant and, after weeks of healing, answers a message from a man whose collapsed assault case Khan once described.

WHERE THE PROTAGONIST LANDS

Amy deepens the rule by learning to spare James through self-mutilation, then using that success as permission to conceal the heart and keep selecting who will feed it.

WHAT THE READER IS PROMISED

The reader gets the dangerous exhilaration of watching a formerly fragile woman become strong, sexual and frightening, while every victory leaves blood on something she wanted to keep clean. James asks what Amy wants, waits when she cannot answer and stops when her body goes rigid; his patience makes their Explicit intimacy more perilous because tenderness reaches the part of her the heart most wants. The book never turns the dead into punchlines, makes Amy's targets simple permission to cheer or lets romance wash away what she has chosen.

WHAT MAKES IT PARTICULAR

The classic monstrous-woman corruption arc is executed through transplant medicine's daily disciplines, making every medication alarm simultaneously an act of self-care, forensic evidence and preparation for predation.

IMAGE SYSTEM

MEDICATION ALARMS

In chapter 1, Amy's tacrolimus alarm sounds while she is dressing in Lewis's room, marking a life controlled by survival.

In the final act, Amy uses the same alarm to time a date around the heart's restlessness; care has become part of her hunting method.

THE SCAR BETWEEN AMY'S BREASTS

Lewis laughs at it as evidence that Amy should be grateful for his attention.

Amy opens and restitches it herself to spare James, turning the mark from shame into both weapon and self-made cage.

RAW MEAT WRAPPED IN BUTCHER'S PAPER

A parcel appears outside Amy's flat after her second feeding and seems like a stalker's threat.

It becomes proof of Hartley's frightened attempt to divert an appetite he helped unleash, then appears in Amy's own refrigerator as a restraint she knows will eventually fail.

BREAD SPLIT ALONG A SCORED SEAM

James shows Amy how dough opens where the baker has cut it, not always where it is weakest.

The scored crust comes to resemble Amy's sternum and her belief that choosing the opening means controlling what emerges.

BLACK SURGICAL THREAD

A strand is embedded in tissue removed during Amy's first biopsy.

Amy uses the inherited restraint herself, making an old concealment part of her own body and decision.

MYSTERIES

- question: What killed Lewis Pritchard, and did Amy consciously participate?; answer delivered by: Amy remains partly awake during Dean Sallis's death and experiences her sternum opening around a toothed chamber while her own hands hold him close

- question: Why does Caroline Cors's donor heart bear an older surgical scar?; answer delivered by: Edith Salter recognises the stitch and admits she assisted when Evelyn Hartley transplanted the already-scarred heart into Caroline under a false emergency admission
- question: Who is leaving warm raw meat tied with black surgical thread outside Amy's door?; answer delivered by: Nina follows Jonathan Hartley through Cliftonwood and sees him place a parcel before confronting him face to face
- question: Why did Hartley transplant an organ he knew was abnormal?; answer delivered by: Under Nina's pressure, Hartley admits that rejecting the organ would have exposed his mother's illicit operation and halted a transplant programme with patients already waiting
- question: Can the heart be made to spare James once it begins feeding?; answer delivered by: Amy tests the widow's hitch on herself during the final attack, and James remains alive while the sutures tear through her chest

REVERSALS

- fairness: Her sudden heat, a second rhythm under her sternum and the metallic taste during sex were present in chapters 3–5 but read as unfamiliar arousal and transplant anxiety.; delivered by: Amy wakes in the physical aftermath and coughs Lewis's shirt button from beneath her tongue; how it lands: Her new health becomes inseparable from an intimate physical predator inside her rather than a clean return to ordinary life.; what changes: Amy's belief that the transplant merely made her strong stops being true when Lewis Pritchard is consumed in her bed.
- fairness: Lewis's death followed the same emotional turn, but Amy's blackout and shame made his cruelty appear to be the heart's moral target rather than her own trigger.; delivered by: Amy remains partly conscious through Dean's attack and feels the second pulse become a jaw; how it lands: When Dean Sallis drugs her and the heart eats him, Amy understands that desire turning into fear or humiliation is the repeatable trigger.; what changes: Amy's belief that the first death was a unique reaction to Lewis's cruelty stops being true.
- fairness: The older scar, Caroline's unexplained wealth-funded treatment and Hartley's unease around black thread were visible early, but all appeared to belong to Caroline's suspected murders.; delivered by: Edith Salter recognises Evelyn Hartley's black surgical knot on Amy's exposed biopsy wound and tells Amy

whom she saw on the old operating table; how it lands: Caroline becomes a predecessor who made choices like Amy's, and the unexplained old scar becomes evidence of an earlier transplantation and attempted restraint.; what changes: The assumption that Caroline Cors created the hunger stops being true.

- fairness: Hartley always used the service entrance, knew when Amy's appetite episodes occurred and asked whether raw protein changed her pulse, behaviours that first read as clinical thoroughness.; delivered by: Nina sees Hartley place a meat parcel outside Amy's door, follows him and forces him to admit he recognised his mother's sutures before the transplant; how it lands: His monitoring becomes surveillance, the meat parcels become experiments and his proposed explant becomes both medical triage and the destruction of evidence.; what changes: Amy's belief that Hartley only recently realised the organ was abnormal stops being true.
- fairness: Amy had changed venues, rehearsed a vulnerable disclosure and withheld her tacrolimus dose by only two hours to sharpen her bodily distress; each choice was presented as caution until seen together.; delivered by: Khan makes Amy watch silent bakery-adjacent security footage and studies Amy's face rather than explaining it; how it lands: Footage of her date with Felix Rowe shows that she engineered his humiliation of her and was already anticipating the kill before he behaved cruelly.; what changes: Amy's belief that she waits for a man to reveal himself before releasing the heart stops being true.

BOOKENDS

OPENING IMAGE

Amy stands half-dressed in Lewis Pritchard's room while her tacrolimus alarm sounds, hiding the scar between her breasts as he watches.

CLOSING IMAGE

Amy stands dressed for another date while the same alarm sounds, swallows her tacrolimus and leaves the black-stitched scar uncovered in the mirror.

PART X

The World

Where the book happens, and the rules it runs on.

GEOGRAPHY

Amy's flat above Murray's Night Bakery: Amy's first private territory after years in Julie's spare room, close enough to the ovens that warm yeast rises through cold floorboards and the mixer vibrates through her bed; its single flour-gritted stair makes every visitor, stain and parcel difficult to hide. Murray's Night Bakery: James Murray works below street level among burnt flour, butter, hot metal and cooling racks that tick in the dark. Its reversed hours place him awake beneath Amy when most neighbours are absent. Southmead Transplant Unit: The clinical authority over Amy's survival, with blue-white examination light, gripping vinyl chairs and muted monitor tones behind curtains. It controls her follow-up care, donor confidentiality and access to the body she considers hers. Caroline Cors's Cliftonwood house: A steep, under-occupied limestone house whose costly wallpaper cannot keep out damp or gorge wind. Its magnifying stairwell and difficult road access preserve traces while making every entry conspicuous. Cliftonwood: A pinched slope below Clifton, entered by Ambra Vale or Clifton Wood Road and crossed more easily by footpaths than cars. Anyone following, carrying or disposing of something must contend with gradients, overlooking terraces and very few exits.

RULES

Tacrolimus must remain in Amy's body on schedule; missed doses can turn strength into fatigue, arrhythmia and breathlessness within days, while taking it leaves tremor, bruising and vulnerability to infection. Its chemical presence is specific enough for toxicology to identify if it reaches somewhere it should not be. Donor identity and transplant records are restricted; breaching them can cost staff their work and place Southmead's other recipients under suspicion. Sexual-offence reports become video-recorded accounts, forensic searches and long waits for a charging decision; documented targeting can establish a pattern without establishing a prosecutable assault. The transplanted heart can answer desire that curdles into humiliation or fear with physical hunger. Amy can approach danger and select whom she approaches, but once that bodily change passes a threshold, intention no longer governs force. It is not Caroline speaking through her, and whatever Amy's body does leaves ordinary blood, tissue and trace evidence behind.

AESTHETIC

Bristol appears through wet glass: amber streetlight caught in sash windows, black shopfronts and limestone darkened by rain. Before dawn, Murray's Night Bakery smells of scorched flour and butter on hot metal; upstairs, flour-fine grit coats the rail. Southmead replaces warmth with alcohol hand rub, radiator minerals and blue-white light that makes bruises look deliberate. Cliftonwood rises in damp steps above traffic that can be heard more easily than reached. Medication alarms cut through sleep. Bread opens along a scored seam; Amy's sternotomy scar repeats it in skin. Black surgical thread looks glossy when wet.

HISTORY

Severe cardiac illness reduced Amy Fletcher's life to Julie's spare room, Southmead Hospital and other people's calculations about what her body cost them. After Amy collapsed during Nina Clarke's birthday meal, she overheard Julie say that every good day ended with everyone paying for Amy's body; Julie still does not know Amy heard. Southmead transplanted Caroline Cors's heart into Amy, giving her strength that ordinary recovery language cannot adequately describe. An older surgical scar encircles the donor heart, but no account accessible to Amy explains it. Three husbands and two lovers disappeared from Caroline Cors's life. Suspicion hardened into the name Black Widow of Clifton, but suspicion never became proof before Caroline died, leaving her house and professional circle contaminated by questions nobody was required to answer. Repeated sexual-assault investigations have accumulated recorded interviews, grooming evidence and Crime Reference Numbers without producing chargeable cases. Avon and Somerset Police also carries the knowledge that officers can themselves become subjects of sexual or domestic abuse investigations, making institutional virtue impossible to perform cleanly.

PRESSURE POINTS

Amy stands to lose her first independent home, Nina Clarke's uncomplicated delight in her recovery, Julie's practical care, James Murray's patient regard and her certainty that the transplant returned an ordinary life. Southmead's need to monitor Amy conflicts with her need to stop being publicly managed as a failing body; refusing scrutiny risks her health, while accepting it gives clinicians increasing authority over what her new strength means. Failed sexual-assault cases have left dangerous patterns visible but legally unresolved. DI Farah Khan can know that a man targets frightened women without possessing evidence sufficient to stop him, and every institutional shortcut risks protecting either an offender or a corrupt investigation. Caroline Cors's wealth preserved privacy around her disappearances, while her house remains geographically exposed and professionally guarded. Anyone seeking answers must become visible to neighbours and to people invested in calling old suspicion gossip. The bakery beneath Amy collapses the distance between secrecy and domestic tenderness: James works while she sleeps, hears movement through the building and leaves space where Amy expects either pity or collection. Safety with him would require being known; concealment keeps him physically close to what he cannot assess.

MYTHS

Southmead speaks of transplant as a second chance, as though survival begins cleanly once the sternum closes. Recipients know the new life remains tethered to alarms, blood levels and the possibility that the body may reject what saved it. Clifton's professional class calls silence discretion. Around Caroline Cors, that story allows vanished people to become unfortunate private history rather than evidence of what money and social embarrassment can conceal. Police procedure is said to turn testimony into fact. DI Farah Khan works among cases where repetition has exhausted victims while leaving the evidential threshold exactly where it was.

ECONOMIC REALITY

Not a pressure in this story.

FACTIONS

- **Southmead Transplant Unit.** fears: A concealed clinical decision becoming evidence that recipients were exposed to a preventable danger.; wants: To keep recipients alive while containing any donor-derived abnormality before it threatens the wider programme.; methods: Consultant authority, restricted files, repeated

blood testing and the leverage of medication changes or surgery.; controls: Amy's transplant surveillance, donor records, biopsies and access to specialist treatment.

- **Avon and Somerset Police.** fears: Public proof that institutional delay, internal misconduct or professional defensiveness protected dangerous men.; wants: Cases that can survive evidential scrutiny rather than merely produce a persuasive pattern of suspicion.; methods: Slow comparison of statements, toxicology, digital traces and grooming patterns, with DI Farah Khan pressing exact facts against institutional caution.; controls: Murder investigations, sexual-offence evidence and the route from recorded victim account to a CPS charging decision.
- **Clifton conveyancing circle.** fears: Fresh scrutiny turning discretion into complicity and valuable houses into enduring crime scenes.; wants: To settle property cleanly and keep old suspicions from attaching themselves to current business.; methods: Keys withheld, calls returned late, reputations traded privately and awkward knowledge divided among people who each claim to know very little.; controls: Professional access to Caroline Cors's property history, former clients and the social memory surrounding her disappearances.

M1 CARD CHECK

- [{'card': 'COHERENCE', 'note': '', 'passed': True}, {'card': 'CONTROL VS CHAOS', 'note': '', 'passed': True}, {'card': 'FREEDOM VS SECURITY', 'note': '', 'passed': True}, {'card': 'INCIDENTAL DETAIL', 'note': '', 'passed': True}, {'card': 'SPECIAL WORLD', 'note': '', 'passed': True}, {'card': 'SPECIFICITY', 'note': '', 'passed': True}, {'card': 'STATUS QUO', 'note': '', 'passed': True}]
- True

PART XI

The Universe

The canon this book shares with anything set beside it.

HISTORY

- Long before Amy's transplant, someone performed an undocumented operation around Caroline Cors's heart using black surgical thread in an attempt to restrain its abnormal appetite.
- Evelyn Hartley's restraint procedure failed to eliminate the condition, but its physical traces and method survived.
- Caroline Cors became a wealthy property solicitor whose three husbands and two lovers disappeared. She died before authorities could prove that she was responsible.
- Dr Jonathan Hartley knew Caroline's donor heart was abnormal before implanting it in Amy and concealed a clinical decision that could threaten the transplant programme if exposed.
- Amy spent years gravely ill and dependent upon medication, hospital care and her mother Julie's spare room before receiving Caroline's heart.
- After transplantation, Amy's health, strength, independence and sexual life expanded alongside the heart's appetite.
- Amy learned to select cruel or predatory men as situations likely to awaken the heart, turning an involuntary first killing into a pattern of chosen exposure.
- The deaths of Dean Sallis, Gareth Pike and Oliver Venn became part of the violent record surrounding Amy's recovery.
- Lewis Pritchard's death demonstrated that Amy's participation could not be reduced to unconscious possession or complete loss of self.
- Amy succeeded in making the heart spare James Murray, proving that its appetite is not absolutely irresistible while also revealing the severe cost of resisting it.
- By the end of the first story, Amy has transferred her medical care away from Hartley but refused definitive surgery, choosing dangerous agency and postponement rather than explantation.

GEOGRAPHY

The universe is rooted in contemporary Bristol: rain-darkened limestone, wet residential streets, hospitals, police interview rooms, expensive Clifton property and small businesses working before dawn. Amy's flat above Murray's Night Bakery is her first independent home and the emotional centre of the first story, while Southmead Hospital anchors the medical and institutional landscape. The wider world is accessible through transplant networks, archived surgical histories and the movement of donated tissue, but horror remains intimate and local rather than grandly apocalyptic.

MYTHOLOGY

- Violence can be inherited through living tissue without being inherited as a soul.
- The appetite is drawn not merely to flesh but to an emotional conversion: intimacy becoming degradation, desire becoming fear and tenderness becoming danger.
- A heart can be taught or forced to spare someone, but love is not an automatic protection against hunger.
- The oldest known intervention treated the appetite as something that could be bound physically, suggesting that Amy and Caroline belong to a history older than either woman.
- The distinction between host and organ has no clean moral or anatomical border once abnormal tissue begins spreading.

WORLD RULES

- A transplanted organ can carry a physical, inexplicable appetite without carrying the donor's complete personality, memories or moral agency.
- The inherited appetite responds most strongly when desire turns into humiliation, fear or cruelty; these conditions awaken it, but they do not absolve the recipient who knowingly creates them.
- Once fully awakened, the heart can transform Amy's body and drive intimate, catastrophic feeding that she cannot simply stop through ordinary willpower.
- Restraint is possible, including the sparing of someone the heart has begun to target, but it is physically costly and cannot be treated as a permanent cure.
- The abnormal tissue can spread beyond the transplanted organ into the recipient's chest, making delay materially dangerous and simple explantation increasingly

difficult.

- The black surgical thread and the older scar around Caroline Cors's heart derive from an earlier attempt to restrain the abnormality. That intervention failed as a cure but established a reproducible precedent.
- Transplant medicine remains medically real: Amy requires scheduled tacrolimus, suffers its side effects and risks rejection, arrhythmia, breathlessness and death if treatment is interrupted.
- No supernatural condition erases human responsibility. Amy's illness, the donor's history and the heart's appetite influence her choices but do not make those choices someone else's.
- Clinical evidence of the anomaly can coexist with evidence of homicide. Diagnosis and criminal accountability are not mutually exclusive.
- The phenomenon is biological enough to leave tissue, dental and blood evidence, yet remains beyond any complete conventional medical explanation.

ECONOMIC REALITY

Hospitals control access to life-preserving treatment, records and expertise, while their dependence on public trust encourages concealment. Wealth and professional status helped Caroline move through expensive property circles while disappearances accumulated around her. Men with social credibility can outlast accusations that their victims cannot make institutions accept. Amy's survival depends upon medication, specialist care and stable housing, while James's bakery represents precarious, labour-intensive independence rather than effortless refuge.

AESTHETIC REGISTER

Grounded medical and bodily horror in rain-soaked contemporary Bristol, rendered through intimate domestic spaces, clinical detail, dangerous sensuality and the warm nocturnal labour of a bakery beneath cold rooms. Violence is frightening, messy and consequential rather than triumphant. Romance increases vulnerability and dread; it never functions as a cure.

POLITICAL LANDSCAPE

Power is divided among the Southmead Transplant Unit, individual clinicians protecting patients and careers, police seeking evidence that can survive scrutiny, and institutions that repeatedly fail victims of sexual violence. The transplant programme must balance disclosure against public trust and the survival of recipients who depend upon it. DI Farah Khan represents lawful accountability without pretending that the law has treated every victim justly. Amy's transfer of care reduces Dr Jonathan Hartley's direct authority but does not erase his implication in earlier concealment. Nina Clarke's independent testimony creates a civilian counterweight to both Amy's self-justification and institutional secrecy.

TONE GUARDRAILS

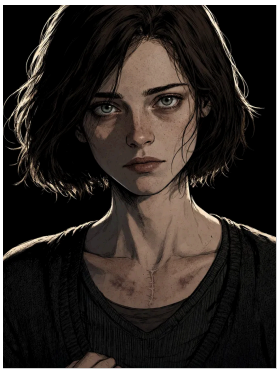
- Never present vigilantism as clean, jaunty or uncomplicatedly empowering.
- Every killing must have physical, emotional, legal and relational consequences; bodies do not become disposable because the victim was cruel.
- The anomalous organ may exert appetite, sensation and bodily compulsion, but it must not become a complete donor personality possessing the recipient.
- Human choice remains central. Inheritance can complicate responsibility but cannot erase it.
- Romance must intensify risk, bodily vulnerability and moral conflict rather than cure the supernatural condition.
- A good or loving person is not automatically safe; tenderness may be one of the strongest triggers or tests.
- Medical realities such as immunosuppression, rejection risk, infection, scarring and institutional dependence must remain materially important.
- Do not portray transplantation itself as corrupt or monstrous. The horror lies in a specific anomaly and in human concealment, not in donor medicine generally.
- Institutions may fail, protect themselves or act paternalistically, but individual clinicians, police and witnesses should retain credible mixed motives rather than becoming a single conspiracy.
- The universe should remain intimate and embodied. Escalation should deepen ethical and biological consequences rather than become an apocalyptic war between supernatural factions.

- Survivors of sexual violence must not function merely as justification for a killer's moral certainty.
- The older history of the appetite may be expanded, but no explanation should reduce it to a simple curse, demon or technologically controllable superpower.
- Bristol and any future setting should be rendered through labour, housing, weather, class and institutional access, not as decorative gothic scenery.
- Hope may exist through boundaries, testimony, restraint and difficult care, but never through denial of what violence has cost.

PART XII

The Cast

Everybody the book is built around.



PRIMARY

Amy Fletcher

Twenty-three and newly independent, Amy Fletcher intends to make her borrowed health look like an ordinary young woman's life.

Amy is the twenty-three-year-old narrator whose donated heart physically consumes people when desire turns into humiliation or fear. She progresses from concealing uncontrolled deaths to cultivating situations that will awaken the heart, ultimately mutilating herself to spare James while choosing secrecy and future hunting over removal of the organ.

heart-transplant recipient building an independent life



PRIMARY

Dr Jonathan Hartley

Amy's transplant surgeon is precise, attentive and increasingly unwilling to accept that her remarkable recovery is ordinary.

Hartley knowingly transplanted Caroline's anomalously scarred heart because rejecting it would have exposed his mother's illicit operation and threatened Southmead's transplant programme. He covertly tests whether warm raw meat can divert the appetite and presses for a probably fatal explant, motivated by genuine medical danger as well as the need to bury his own concealment.

Amy's transplant surgeon



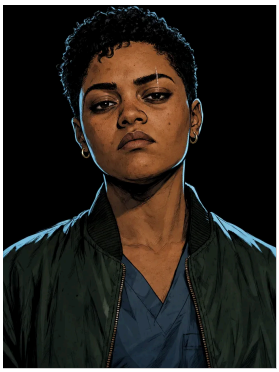
PRIMARY

James Murray

James Murray works while Bristol sleeps, turning flour and heat into bread beneath the new tenant he cannot help noticing.

James becomes Amy's lover without treating illness as innocence or weakness, and his patient tenderness provokes the heart more dangerously than cruelty did. He finds physical evidence of the mouth growing inside Amy, asks her to face Hartley with him and survives when she applies the widow's hitch, but leaves after she chooses concealment over a shared future.

night baker beneath Amy's flat



PRIMARY

Nina Clarke

Amy's oldest friend celebrates every inch of her new life, loudly, practically and with a spare key in her pocket.

Nina supported Amy through years of illness and initially celebrates the confidence and independence produced by the transplant. Suspicion drives her to investigate Hartley and admit Khan to Amy's flat; after surviving Amy's attack, she refuses to keep protecting Amy from the consequences of her choices.

Amy's best friend



SECONDARY

Caroline Cors

Clifton property solicitor Caroline Cors leaves immaculate titles, expensive rooms and five disappearances nobody can make her explain.

Caroline was a wealthy property solicitor suspected in the disappearances of three husbands and two lovers. She inherited the already-hungry heart through Evelyn Hartley's illicit operation and appears to have selected victims much as Amy eventually does, but she is a predecessor rather than a personality possessing Amy.

Amy's heart donor and suspected Black Widow of Clifton

SECONDARY

DI Farah Khan

DI Farah Khan investigates deaths too brutal to explain and victims whose histories make easy sympathy impossible.

Khan investigates the grotesque deaths while recognising that several dead men had histories of harming women that the justice system failed to resolve. Toxicology and security footage lead her toward Amy, but the remains and evidence never become sufficient for a charge; she nevertheless destroys Amy's preferred account of herself by showing how deliberately Amy prepared Felix Rowe's death.

detective investigating the deaths

MINOR

Bethan Gough

Bethan is the recurring coordinator who handles Amy's blood appointments, medication queries and the practical transitions around biopsy care, giving Southmead a consistent human presence that is not Hartley. She is neither Amy's confidante nor a second investigator; routine contact lets Hartley's unusual interventions stand out and allows later care to pass to another consultant without inventing additional clinic staff.

transplant coordinator at Southmead

MINOR

Dean Sallis

Dean drugs Amy during a date and becomes the heart's second victim. Amy remains partly conscious as her sternum opens and the heart consumes him, allowing her to identify the repeatable trigger; tacrolimus in his blood then gives Khan a forensic path toward transplant recipients.

Amy's second date

MINOR

Edith Salter

Edith recognises Evelyn Hartley's black stitch and admits that she assisted when Evelyn transplanted the already-scarred heart into Caroline under a false emergency admission. Her identification of the widow's hitch overturns Amy's belief that Caroline originated the hunger and supplies the restraint Amy later uses on herself.

retired operating-theatre nurse

MINOR

Evelyn Hartley

Evelyn performed the illicit operation that placed an already-scarred heart inside Caroline and used black surgical thread to restrain it. She is Jonathan Hartley's mother, and his protection of her reputation helped place the same organ in Amy; whether Evelyn remains alive during the main chronology is not decided by the source.

surgeon from Caroline's medical history

MINOR

Felix Rowe

Felix becomes a victim after Amy changes venues, rehearses vulnerability and delays one tacrolimus dose so that she can cultivate the bodily conditions for feeding. Security footage shows Amy smiling before he insults her, proving that she wanted the humiliation to arrive and was no longer merely waiting for a man to reveal himself.

man Amy selects for a later date

MINOR

Gareth Pike

Gareth is a corrupt officer accused of abusing women and protected by failures within his own institution. After learning that Amy contacted one of the women who reported him, he corners Amy on a Cliftonwood footpath; she deliberately summons the heart and consumes him while remaining conscious.

police officer Amy confronts in Cliftonwood

MINOR

Hugh Redman

He is the second of three husbands whose disappearances contributed to Caroline's Black Widow reputation. No separate history or fate is fixed for him, and his function is to strengthen the pattern rather than carry an independent subplot.

MINOR

Julie Fletcher

Julie cared for Amy through severe illness and once told a nurse, believing Amy could not hear, that every good day ended with everyone paying for Amy's body. She still offers practical help and keeps Amy's spare key, unaware that her exhausted remark became the private wound shaping Amy's refusal to be treated as a burden.

Amy's mother

MINOR

Lewis Pritchard

Lewis is initially kind to Amy but humiliates her after sex by mocking her sternotomy scar and calling her a charity case. His cruelty triggers the first feeding, leaving most of him consumed and forcing Amy to choose concealment before she understands what her heart can do.

Amy's first sexual partner

MINOR

Oliver Venn

Named in the prose of chapter 31 and added to the roster from it rather than planned into the cast. A walk-on until something else is written for them.

MINOR

Owen Watkins

Lewis's flatmate is the person whose expected return gives Amy a hard deadline for removing identifiable remains from Lewis's room. The role can also supply a human face for Lewis's disappearance if the investigation returns to his home, rather than requiring a separate neighbour or property manager.

MINOR

Richard Penrose

He is one of the three husbands who disappeared from Caroline's life before her death. The source does not establish his individual circumstances, so he should remain part of the unresolved historical pattern unless the manuscript needs one disappearance to receive particular scrutiny.

MINOR

Sheila Tovey

Amy's upstairs neighbour owns Hercules, an elderly dachshund who refuses the stairs. The neighbour provides a recurring domestic presence in the building, making Amy's supposedly private territory feel inhabited and allowing ordinary interruptions to complicate stains, parcels and unusual visitors without adding a separate landlord character.

MINOR

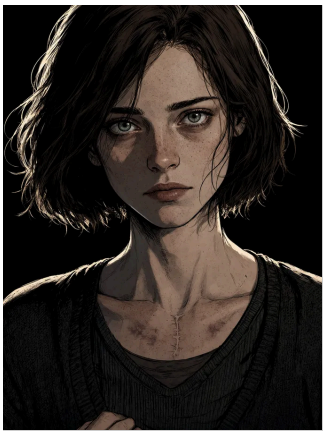
Simon Vickery

He is the third missing husband associated with Caroline and the inherited heart. The source leaves his personality and the details of his disappearance open, so those should only be developed if Amy's investigation requires one husband to anchor a concrete scene.

PART XIII

Character Deep Dives

Each principal, worked out to the level the prose is written from.



primary

Amy Fletcher

Twenty-three and newly independent, Amy Fletcher intends to make her borrowed health look like an ordinary young woman's life.

HOW THEY LAND, FIRST TIME

Newly strong after years of cardiac illness, Amy is determined to live alone and experience the ordinary pleasures she has missed. She remains watchful about her scar, medication and any hint that other people regard her survival as a burden.

FIRST IMPRESSION

I trapped the KEEP IT alarm beneath my thumb while the tablet balanced in my other palm. My hand trembled; the heart did not.

THEIR LIFE BEYOND THE PLOT

Amy compares secondhand dining tables she cannot fit into her flat and saves recipes for meals requiring six people. Alone, she tests her improving strength through domestic tasks—lifting flour sacks, carrying groceries without resting—then records none of it because measurement still feels clinical.

THE CONTRADICTION

Amy resents bodily management yet follows medication schedules with devotional exactness. She can rebel against a surgeon while arranging tablets by dose and hour, making her both difficult to control and frighteningly capable of sustaining whatever she chooses.

THE FORMATIVE MOMENT

At nineteen, after collapsing during Nina's birthday meal, Amy heard Julie tell a nurse beyond the curtain that every good day ended with everyone paying for Amy's body. Julie returned smiling with the overnight bag, leaving Amy to pretend sleep while the monitor counted the cost aloud.

WHAT THEY CARRY

Amy carries the certainty that pleasure obtained in her presence eventually becomes labour for somebody else. Every offered lift, spare key and worried question therefore arrives already converted into debt, even when the person offering it has made no such calculation.

THE LIE THEY TELL THEMSELVES

She tells herself that secrecy protects other people from the exhausting details of her survival. The lie is useful because it lets her accept their company while withholding anything that might permit them to interfere.

THE FLAW

Amy practises covert self-sufficiency: she hides symptoms, need and uncertainty until nobody can help without overruling her. What begins as protection from pity makes every private decision more extreme because admitting difficulty would expose the earlier concealment.

TORN BETWEEN

She wants to be desired as an adult rather than handled as a patient, yet being accurately known would expose needs she associates with humiliation. Intimacy offers the ordinary life she craves and the scrutiny most capable of taking it away.

HOW THEY SPEAK

EDUCATION	Illness interrupted Amy after A-levels and a partially completed distance-learning foundation course. She thinks carefully, researches compulsively and distrusts anyone who uses specialist language to close a conversation rather than clarify it.
CONFIDENCE	Low at first, disguised as brisk competence and advance preparation. As her body strengthens, confidence becomes unnervingly still: she stops filling silences and lets other people reveal what they assumed she would tolerate.
HUMOR STYLE	Her humour is dry, literal and usually aimed at procedures, euphemisms or her own inconvenient body. She jokes most when she wants concern withdrawn before it becomes supervision.
SPEECH CALM	When safe, Amy speaks in measured, complete sentences and adds small qualifications so nobody can accuse her of exaggeration. With Nina she loosens into longer complaints, petty observations and laughter she tries to swallow.
VERBAL TELLS	She begins evasions with technically and gives unnecessary timings when fabricating an account. When angry, she becomes conspicuously precise about what somebody actually said, correcting even details that would help her.
SPEECH STRESS	Under pressure, explanations multiply until she hears herself sounding guilty; once cornered, she switches to blunt imperatives. Genuine fear removes politeness first and pronouns second: Stop. Outside. Now.
SPEECH COMMUNITY	She speaks contemporary Bristol English shaped by Julie's household, NHS wards and online patient forums, without broad dialect performance. She says flat, mobile, trainers, GP, bin and takeaway; she knows trough level, rejection markers and obs as ordinary vocabulary rather than impressive terminology.
NEVER SAYS DIRECTLY	She cannot say that she needs looking after without hearing an invoice being prepared. Instead she asks whether someone is already nearby, has eaten or happens to own the thing she requires.

SOCIAL CLASS ORIGIN	She comes from Julie's practical, modest Bristol household, where purchases were kept, repaired and discussed. Independence has changed her address, not her reflex to calculate whether heating one room is extravagant.

HOW THEY SOUND

> Tea, please. Milk, no sugar.

> It was fine. Anyway, how did yours go?

> Don't touch me. Just—give me a minute. Please.

> I want you to stay. I don't know what happens if you do.

WHERE THEY TRAVEL

ARC POSITION	At their starting position; the story has not begun for them yet. → She has formally transferred care yet rejects definitive treatment, choosing agency and dangerous postponement over explantation.
CURRENT FEAR	That the hitch will fail, the graft will reach the surface or lung, and she will lose control of what happens to herself and others.
GROWTH STAGE	10
PHYSICAL STATE	healthy → Injured but functioning; wrist remains bruised, transplant wound is largely healed, and the bloodied green dress remains concealed in her flat.
EMOTIONAL STATE	baseline → Physically depleted, frightened, defiant, and increasingly committed to postponing surgery through risky self-management.
LAST KEY ACTION	Took her scheduled tacrolimus, left the hitch visible, packed spare black silk, and went to meet Mark Hales instead of remaining home or accepting surgery.
DOMINANT EMOTION	neutral → Defiance
LAST UPDATED CHAPTER	36

THE MOMENTS THAT TURN THEM

> Chapter 32:

> Chapter 33:

> Chapter 34:

> Chapter 35:

> Chapter 36:

WHAT MAKES THEM REAL

Amy notices chairs without arms, distances between toilets and exits, pill residue, hand tremors and whether food can be carried upstairs before she notices décor. She privately enjoys heavy shopping bags and full baths, but often misreads quiet concern as someone calculating how much trouble she will become.

WHY A READER STAYS WITH THEM

CAPABILITY	She understands transplant routines, medication timing and the practical management of a body that can deteriorate quickly. She is observant, methodical under aftermath pressure and newly strong enough to act on decisions others still assume she cannot execute.
PROACTIVITY	Amy moves rapidly from hiding evidence to researching patterns, testing triggers and arranging encounters. Her initiative is unmistakable even when she recasts preparation as merely being cautious.
RELATABILITY	She wants privacy, sex, untidy pleasure and a home where nobody praises her for surviving breakfast. Her resentment of gratitude rituals remains recognisable even when the uses she finds for freedom become indefensible.

WHAT THEY CANNOT DO

- She cannot ask for help before a situation becomes urgent because early requests feel like voluntarily presenting an invoice.
- She cannot reliably separate arousal, panic and cardiac warning signs; years of dangerous palpitations trained her to interpret bodily excitement as impending failure.
- Tacrolimus leaves her tremulous, easily bruised and vulnerable to infection, making blood cleanup and self-treatment materially hazardous.

- She has no forensic training and overestimates what thorough cleaning can erase because domestic competence is the only concealment model she possesses.



primary

Dr Jonathan Hartley

Amy’s transplant surgeon is precise, attentive and increasingly unwilling to accept that her remarkable recovery is ordinary.

HOW THEY LAND, FIRST TIME

Hartley is an attentive transplant surgeon who treats small changes in Amy's wound and blood levels with grave concentration. His clinical authority can feel protective or controlling depending on how urgently Amy wants to be left alone.

FIRST IMPRESSION

Hartley pressed two fingers beside Amy’s scar without first warming them. “Tell me what changed, not what you think it means,” he said, watching her face instead of the monitor.

THEIR LIFE BEYOND THE PLOT

Hartley swims before early ward rounds, keeps the same lane regardless of congestion and eats breakfast standing over the sink. He privately restores damaged surgical instruments bought at auction, polishing away corrosion while preserving every engraved owner’s mark.

THE CONTRADICTION

Hartley is genuinely gentle with unconscious patients, explaining each touch although they cannot answer, yet markedly less tender once they can disagree. His care is deepest where it cannot obstruct him.

THE FORMATIVE MOMENT

As a registrar, Hartley found an unlogged operative ledger in Evelyn’s locked desk and confronted her after midnight in an empty theatre. She told him one unlawful night must not erase every life she had saved; he removed the copied page before the morning audit.

WHAT THEY CARRY

He carries the knowledge that his career rests partly on making Evelyn's worst decision administratively invisible. Every successful transplant since then has made disclosure feel less possible because more living patients now appear attached to the original concealment.

THE LIE THEY TELL THEMSELVES

He tells himself that secrecy is merely triage performed across years: one compromised record weighed against a functioning programme. This lets him experience self-protection as arithmetic rather than appetite.

THE FLAW

Hartley converts shame into management. When another person's fear implicates him, he responds by narrowing their options, gathering more data and calling the resulting pressure care.

TORN BETWEEN

He wants to preserve Amy because her recovery embodies his finest work, and to remove the organ because every improvement may prove his worst decision is still growing. Either choice can kill something he considers his responsibility.

HOW THEY SPEAK

EDUCATION	Medical school, surgical training and transplant fellowships taught him to organise uncertainty into differentials before admitting emotion exists. He speaks as though every conversation will later be entered into notes and challenged at review.
CONFIDENCE	High. He occupies silence without filling it, expects instructions to survive repetition and becomes more formally courteous when somebody resists him.
HUMOR STYLE	He is rarely funny and does not recognise when an overlong factual anecdote has become comic. His occasional jokes explain obscure medical history until everyone regrets encouraging him.
SPEECH CALM	Relaxed, he uses complete, moderately long sentences and offers two practical choices while quietly excluding a third. His warmth appears through careful sequencing rather than affectionate language.
VERBAL TELLS	He says “Let us separate those things” when an accusation has landed accurately. A sudden use of someone’s full name means he is preparing to exercise authority rather than persuade.
SPEECH STRESS	Under pressure, pronouns disappear and actions become passive: samples were misplaced, decisions were reached, concerns arose. If cornered personally, he repeats the question in narrower terms and answers only that version.
SPEECH COMMUNITY	He speaks educated southern British English shaped by north Bristol medicine and decades in NHS theatres. He says theatre, ward round, notes, registrar, cannula, nil by mouth and consultant; American clinical terms irritate him beyond their importance.
NEVER SAYS DIRECTLY	He cannot say that protecting Evelyn Hartley also protected himself, or that Amy frightens him. He calls family loyalty incomplete documentation and fear an unacceptable clinical uncertainty.
SOCIAL CLASS ORIGIN	He grew up comfortably in a north Bristol medical household where professional reputation shaped meals, holidays and friendships. He has never left that class, though hospital hierarchy lets him mistake institutional fluency for earned toughness.

HOW THEY SOUND

> No, thank you. I ate earlier.

> That isn’t something I can usefully discuss here. Was the door locked when you arrived?

> Let us separate those things. I made the decision. The reasons were not identical.

> I need you alive, Amy. I do not know how to make that compatible with keeping the heart.

WHERE THEY TRAVEL

ARC POSITION	At their starting position; the story has not begun for them yet. → His authority over Amy's treatment has been formally reduced, though he remains implicated in the medical and evidentiary conflict.
CURRENT FEAR	That Amy's evidence and the trust's investigation will expose his concealed pathology, transplant decisions, and role in the liver intervention.
GROWTH STAGE	6
PHYSICAL STATE	healthy → Healthy.
EMOTIONAL STATE	baseline → Controlled, watchful, and professionally displaced after losing Amy's immediate care to Dr Lennox while the trust investigates his decisions.
LAST KEY ACTION	Appeared briefly at the transplant-unit nurses' station before leaving when Amy saw him.
DOMINANT EMOTION	neutral → Alarm
LAST UPDATED CHAPTER	36

THE MOMENTS THAT TURN THEM

> Chapter 17:

> Chapter 22:

> Chapter 24:

> Chapter 27:

> Chapter 35:

WHAT MAKES THEM REAL

Hartley notices joins: puckered sutures, wallpaper seams, resealed envelopes and repairs pretending to be original fabric. He misreads terror as missing information, but takes private pleasure in warm hospital linen, balanced instrument trays and knots that lie flat under one fingertip.

WHY A READER STAYS WITH THEM

CAPABILITY	He can interpret transplant pathology, obtain restricted records, alter surveillance schedules and operate inside a scarred chest under severe time pressure.
PROACTIVITY	He orders extra biopsies, traces anomalous tissue and tests raw meat as a diversion rather than waiting for Amy's symptoms to become public.
RELATABILITY	He has spent years watching scarce organs arrive too late for people he knew by name, making his terror of wasting one emotionally credible even when it corrupts him.

WHAT THEY CANNOT DO

- He cannot apologise before establishing exactly what the apology might admit; legal and clinical consequences crowd out the human sentence.
- He cannot improvise convincingly outside hospital hierarchy, where his title no longer settles who must listen.
- He cannot destroy original clinical material, even when it endangers him, because undocumented medicine is the inheritance he most fears repeating.



primary

James Murray

James Murray works while Bristol sleeps, turning flour and heat into bread beneath the new tenant he cannot help noticing.

HOW THEY LAND, FIRST TIME

James is a quiet night baker whose clothes smell of butter, smoke and cold air. He asks direct questions, leaves Amy room to answer and offers companionship without behaving as though she needs to be rescued.

FIRST IMPRESSION

James caught a sliding tray against his hip without disturbing the risen buns, his forearms powdered with flour. “Middle one’s less burnt, if you’re pretending this is breakfast.”

THEIR LIFE BEYOND THE PLOT

James watches furniture-restoration videos during proving pauses and braids leftover dough into useless thumb-sized loaves. He privately wants a south-facing kitchen, living herbs and a Sunday lunch eaten when everyone else means Sunday lunch.

THE CONTRADICTION

James feeds people instinctively but stiffens when they call him caring, as if kindness were an invoice they might later dispute. He wants his work noticed and his tenderness left unnamed, two wishes Amy cannot satisfy at once.

THE FORMATIVE MOMENT

A former partner packed while James cooked dinner and said he made leaving impossible without making her cruel. He had mistaken months of patient usefulness for proof that their relationship remained alive, and the meal stayed untouched while the oven fan ran.

WHAT THEY CARRY

James carries the shame that his steadiness can become a room another person feels guilty leaving. He therefore waits past usefulness, terrified that any firm demand will prove his former partner right in a different direction.

THE LIE THEY TELL THEMSELVES

He tells himself that asking for nothing leaves people free to tell him the truth. In practice, his patient presence can become a silent test whose rules only he understands.

THE FLAW

James overvalues endurance: once he decides someone is frightened rather than rejecting him, he can absorb almost any evasion. This makes him dependable and dangerously slow to admit that patience is helping a lie survive.

TORN BETWEEN

He is torn between believing Amy's account of her own body and trusting evidence he has touched himself. He fears becoming another man who decides what she means, but also fears that waiting will make him complicit in something irreversible.

HOW THEY SPEAK

EDUCATION	James left sixth form after one year and completed a bakery apprenticeship through day release. He trusts repetition, tolerances and visible results more than abstract explanations, but reads widely when a practical problem embarrasses him.
CONFIDENCE	Medium. He is physically assured at work and unembarrassed by silence, but unfamiliar rooms make him wait for instructions longer than anyone notices.
HUMOR STYLE	James tells expansive, affectionate stories in which he is usually the fool and everyone already knows the ending. He uses humour to make company feel informal, then lets the story overrun the moment when he should ask a difficult question.
SPEECH CALM	Relaxed speech comes in loose additions, with pauses that invite interruption and endings that drift into another practical thought. He asks ordinary questions plainly and does not decorate compliments.
VERBAL TELLS	When unconvinced, James repeats the final fact back without its explanation. When hurt, he begins sentences with “I heard you” and answers the words while refusing the intended dismissal.
SPEECH STRESS	Under pressure, his sentences lose their pauses and become linked lists of observed facts. He stops asking questions, lowers his voice and repeats what he saw until the other person answers that rather than changing the subject.
SPEECH COMMUNITY	He speaks contemporary south Bristol English shaped by family retail, vocational training and night production. He says batch, prove, deck, service stair and first bake; outside work he uses flat, shift, bin and tea, without performing a broad local accent.
NEVER SAYS DIRECTLY	He cannot easily say that waiting makes him feel unwanted. Instead, he gives an exact time he will remain available and leaves food that can survive reheating.
SOCIAL CLASS ORIGIN	He grew up in a south Bristol family where the bakery’s refrigeration failures entered conversation like ill relatives. He earns securely now but still treats paid convenience as evidence that somebody failed to plan.

HOW THEY SOUND

> There’s soup. Back shelf, behind the milk, unless I finished it. No, I didn’t.

> Not tonight. I’ve still got things downstairs, so leave that one.

> I saw it, Amy. I saw the whole thing, and you need to stop telling me where I was standing.

> I want you here. Properly here, not halfway down the stairs.

WHERE THEY TRAVEL

ARC POSITION	At their starting position; the story has not begun for them yet. → Absent from the chapter's main confrontation but remains separated from Amy after setting a boundary against her refusal of surgery.
CURRENT FEAR	That Amy's graft will attack him or another person again and that she will continue refusing definitive treatment.
GROWTH STAGE	10
PHYSICAL STATE	healthy → Severely injured but alive, mobile, and recovering from the graft wound to his abdomen; his dressing was changed and he has no fever.
EMOTIONAL STATE	baseline → Loving, physically injured, anxious, and emotionally separated from Amy while waiting for her account of his condition.
LAST KEY ACTION	Messaged Amy his normal temperature, clean dressing, and asked how her appointment had gone.
DOMINANT EMOTION	neutral → Anxiety
LAST UPDATED CHAPTER	36

THE MOMENTS THAT TURN THEM

> Chapter 28:

> Chapter 29:

> Chapter 33:

> Chapter 34:

> Chapter 35:

WHAT MAKES THEM REAL

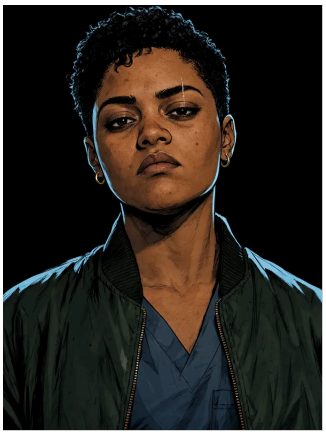
James notices rooms through heat, draughts, waiting times and whether food has been touched. He misreads prolonged silence as a request for more time, and takes private pleasure in the first crust crack from a cooling loaf and daylight appearing in empty shop glass.

WHY A READER STAYS WITH THEM

CAPABILITY	He manages fermentation, ovens, stock, burns and predawn production without supervision. His work gives him strength, heat tolerance, exact timing and intimate knowledge of every sound travelling through the bakery building.
PROACTIVITY	James brings food upstairs, checks unexplained disturbances and eventually insists on accompanying Amy to Hartley. His action comes late because he gathers material proof before making demands.
RELATABILITY	He wants to be useful without being thanked too intensely and delays painful conversations by completing one more manageable task. Readers can recognise the comfort and cowardice in that habit.

WHAT THEY CANNOT DO

- He cannot safely drive after a full night shift; microsleeps began during his apprenticeship, so he walks or uses buses even in emergencies.
- He is intensely squeamish about needles entering skin, though blood, burns and torn flesh do not unsettle him.
- He cannot press someone verbally without sounding colder than he intends, so he retreats into facts and practical offers.



primary

Nina Clarke

Amy's oldest friend celebrates every inch of her new life, loudly, practically and with a spare key in her pocket.

HOW THEY LAND, FIRST TIME

Nina is an affectionate, energetic friend who has spent years making hospital life less grim for Amy. She is delighted to see Amy living alone and dislikes any suggestion that Amy should apologise for taking up space.

FIRST IMPRESSION

Nina came up Amy's flour-gritted stairs backwards, dragging a leaking plant in a bin bag while refusing help. "You live here now. Stand there and enjoy it."

THEIR LIFE BEYOND THE PLOT

Nina programmes live events at a small Bristol music venue, memorising access routes, changeovers and which performers leave dressing rooms revolting. Alone, she watches elaborate cake-decorating videos, eats toast over the sink and rolls used admission wristbands into hard little beads she keeps in a matchbox.

THE CONTRADICTION

Nina appears socially fearless but is physically squeamish: exposed tissue makes her vision narrow and her knees soften. She will nevertheless remain beside an injured person, talking continuously while looking at the wall, which makes her bravery both genuine and badly suited to what Amy becomes.

THE FORMATIVE MOMENT

At Nina's birthday meal, Amy went grey and said she only needed air; Nina insisted on one more song because the cake had arrived. Amy collapsed before the chorus ended, and Nina stood holding the restaurant bill while paramedics cut through Amy's blouse.

WHAT THEY CARRY

Nina carries the conviction that enjoying herself made her miss Amy's collapse. Since then, every good evening contains a private inspection: colour, breathing, exits, phone charge and how quickly an ambulance could reach them.

THE LIE THEY TELL THEMSELVES

She tells herself that noticing everything is simply what friendship looks like after serious illness. The lie lets her remain useful without admitting that vigilance calms Nina first and may make Amy feel watched rather than loved.

THE FLAW

Nina manages people before they can refuse her plan, arranging transport, access and explanations as completed facts. It makes her excellent in emergencies and corrosive in private life, where her certainty that action is kinder than waiting repeatedly turns care into trespass.

TORN BETWEEN

She wants Amy to enjoy privacy, sex and bad decisions without reporting back, and she wants proof that Amy will still be alive tomorrow. Either choice can feel like repeating the birthday meal: watching too closely ruins the night, while looking away may miss the collapse.

HOW THEY SPEAK

EDUCATION	Nina earned a degree in event production from a post-1992 university while working venue bars. It taught her to make persuasive pitches from inadequate information and to regard every disaster as a sequence of jobs, which becomes less charming when the disaster is a person.
CONFIDENCE	High in rooms, medium in intimacy. She can redirect a crowd or challenge a contractor without hesitation, then talks too brightly when someone asks whether she is frightened or lonely.
HUMOR STYLE	Nina performs affectionate, overcommitted impressions and extends weak jokes until resistance becomes participation. The noise is generous but strategic: if everyone is laughing, nobody can ask why she has been watching Amy breathe.
SPEECH CALM	Relaxed, she talks in quick associative runs, revises herself aloud and invites interruption without surrendering the floor. Her sentences often end in a practical offer or another question because simple silence feels socially unfinished.
VERBAL TELLS	Before asking something invasive, she praises an irrelevant detail such as shoes, lighting or food. When frightened, she begins with “No, listen” and asks several questions without leaving space for answers.
SPEECH STRESS	Under pressure, her pace accelerates while grammar falls away. She stacks questions, repeats the disputed noun and becomes louder rather than sharper, as though sufficient momentum can prevent the other person leaving.
SPEECH COMMUNITY	She speaks contemporary Bristol English shaped by south-city family life, university events training and venue back rooms. She says flat, queue and lift, while work gives her get-in, running order, bar close, rider and last entry; she can shift from crew shorthand to polished sponsor language without imitating either.
NEVER SAYS DIRECTLY	She cannot say that Amy’s illness made friendship frightening or that recovery has made Nina less necessary. Instead she offers lifts nobody requested, mentions journey times and asks whether Amy has charged her phone.
SOCIAL CLASS ORIGIN	She grew up in a rented south Bristol maisonette where shift rotas governed meals and nobody paid full price for entertainment. Cultural

work has changed her clothes and references, not her suspicion that expensive quiet is usually somebody else's mess being hidden.

HOW THEY SOUND

> About eight, probably. I'll text when I'm actually leaving because you know what I'm like.

> Your hair looks good. Did you do something different? Anyway, there's food.

> No, listen, where were you, and why is your phone off, and don't say battery because it wasn't the battery.

> I'm staying. You can be angry while I stay.

WHERE THEY TRAVEL

ARC POSITION	At their starting position; the story has not begun for them yet. → She has moved from protective confidentiality toward independent testimony and bounded contact with Amy.
CURRENT FEAR	That Amy will continue injuring herself or someone else while treating the graft as something she can control.
GROWTH STAGE	8
PHYSICAL STATE	healthy → Severely injured; her right shoulder has a large wound and remains in a sling while plastics considers grafting.
EMOTIONAL STATE	baseline → Painful, frightened, exhausted, and cautiously more self-directed in cooperating with the investigation.
LAST KEY ACTION	Told Khan that Amy held her against the graft, that James pulled her away, and that she would finish her account without checking with Amy first.
DOMINANT EMOTION	neutral → Concern
LAST UPDATED CHAPTER	36

THE MOMENTS THAT TURN THEM

> Chapter 26:

> Chapter 32:

> Chapter 33:

> Chapter 34:

> Chapter 36:

WHAT MAKES THEM REAL

Nina notices whether rooms permit an undignified exit: side doors, toilet routes, staff corridors and where coats have been trapped. She misreads quiet as a problem requiring energy, but privately loves empty venues after closing, when cooling lights click and every chair faces nobody.

WHY A READER STAYS WITH THEM

CAPABILITY	She can manage crowds, reconstruct timings from rotas and messages, persuade gatekeepers she belongs backstage and remain operational while frightened. Her venue work has made her attentive to cameras, restricted doors, cleaning records and the difference between an accident report and gossip.
PROACTIVITY	Nina follows discrepancies rather than waiting for confession: she compares Amy's stories with opening hours, contacts people and eventually uses the spare key. Her action moves the investigation forward but repeatedly outruns what she truly understands.
RELATABILITY	She wants her friend well enough to become briefly unnecessary, then feels hurt when that happens. Readers can recognise the shame of resenting an outcome they sincerely wanted.

WHAT THEY CANNOT DO

- She cannot look directly at an open wound for more than seconds; nausea and tunnel vision force her to help by touch, sound and peripheral sight.
- She cannot sustain a prepared lie under exact questioning because she starts correcting minor details nobody challenged.
- She cannot leave an unresolved argument overnight; previous medical emergencies taught her that morning is not guaranteed, so she returns and escalates.



secondary

Caroline Cors

Clifton property solicitor Caroline Cors leaves immaculate titles, expensive rooms and five disappearances nobody can make her explain.

HOW THEY LAND, FIRST TIME

Caroline is the dead donor whose wealth and vanished partners made her notorious as the Black Widow of Clifton. The surviving public story offers suspicion and expensive discretion rather than proof.

FIRST IMPRESSION

Caroline removes a damp completion statement from beneath her glass and says, “Paper first. Whatever happened afterward belongs to somebody else.”

THEIR LIFE BEYOND THE PLOT

She swims before work, collects obsolete house keys and eats buttered toast over the sink to protect the dining table from crumbs.

THE CONTRADICTION

A formidable negotiator, Caroline becomes physically solicitous around illness: warming towels, checking water temperature and sleeping badly beside anyone feverish.

THE FORMATIVE MOMENT

After Evelyn Hartley’s illicit operation, Caroline woke restrained and heard her husband ask whether the altered heart affected the property settlement before asking whether she would live.

WHAT THEY CARRY

She carries the conviction that survival made her marital asset more valuable while making her private body less her own.

THE LIE THEY TELL THEMSELVES

She calls each selected death household clearance: unpleasant, finite work preventing a worse occupation.

THE FLAW

Caroline converts emotional danger into administrative evidence, making every suspicion actionable and every intimate failure resemble a file awaiting disposal.

TORN BETWEEN

She wants companionship that enters her carefully kept rooms, yet fears anybody close enough to notice the heart's requirements.

HOW THEY SPEAK

EDUCATION	A law degree and property specialisation trained her to separate provable defects from costly suspicions; she speaks in clauses designed to survive repetition.
CONFIDENCE	High — she allows silence to become the other person's discomfort and rarely supplies the reassurance they expected.
HUMOR STYLE	She uses elaborate, socially polished teasing that leaves its target uncertain whether they were insulted; laughter is camouflage, not fellowship.
SPEECH CALM	Measured, hospitable and slightly over-complete; she offers two practical options, then waits as though no third possibility exists.
VERBAL TELLS	She says "Show me where" when resisting hearsay. Repeating someone's first name means she has decided charm will work better than denial.
SPEECH STRESS	Her sentences lose courtesy and become numbered facts. She repeats the question exactly, exposing its unsupported assumptions instead of answering it.
SPEECH COMMUNITY	Educated Bristol English shaped by conveyancing and Clifton clients: completion, covenant, particulars, vendor, freehold. She says drawing room professionally and front room only when tired.
NEVER SAYS DIRECTLY	She never admits fear or need; she discusses locks, routes, expenses and whether somebody intends to stay the night.
SOCIAL CLASS ORIGIN	Lower-middle-class Bristol respectability, converted through law and marriage into Clifton wealth; she conceals the climb by treating luxury as routine maintenance.

HOW THEY SOUND

> Coffee, if there is some. Hot is enough.

> You have asked twice. I heard you the first time.

> No. Start again, and this time tell me what you actually saw.

> Stay until morning. I would prefer that.

WHERE THEY TRAVEL

ARC POSITION	At their starting position; the story has not begun for them yet. → Her history remains the source of the restraint method and the graft's documented precedent.
CURRENT FEAR	None.
PHYSICAL STATE	healthy → DEAD
EMOTIONAL STATE	baseline → DEAD
LAST KEY ACTION	No action possible; her silk restraint method is reproduced from the evidence associated with her.
DOMINANT EMOTION	neutral → None
LAST UPDATED CHAPTER	35

THE MOMENTS THAT TURN THEM

> Chapter 4:

WHAT MAKES THEM REAL

Caroline notices hinges, blocked exits, mismatched keys and whether hospitality has been staged. She misreads spontaneous kindness as reconnaissance and privately enjoys heated towels and imperfect supermarket peaches.

WHY A READER STAYS WITH THEM

CAPABILITY	She understands titles, ownership trails, access rights and how expensive privacy is maintained through ordinary paperwork.
PROACTIVITY	She researches targets, controls locations and creates plausible property-related reasons for meetings rather than waiting for danger.
RELATABILITY	She hates being watched while eating and saves desirable food until guests leave, then discovers she no longer wants it.

WHAT THEY CANNOT DO

- She cannot tolerate sedation because waking restrained reactivates surgical panic.
- She cannot improvise believable vulnerability; rehearsal makes her colder.
- She cannot destroy property records, even when they endanger her, because documentary continuity steadies her.

secondary

DI Farah Khan

DI Farah Khan investigates deaths too brutal to explain and victims whose histories make easy sympathy impossible.

HOW THEY LAND, FIRST TIME

Khan is a tired, exact detective with a low voice and an unnerving ability to let silence do the questioning. She appears neither impressed by respectable reputations nor eager to make claims her evidence cannot support.

FIRST IMPRESSION

Khan peels an untouched satsuma over Lewis Pritchard's bloodstained carpet and says, "Tell me what was removed before we arrived."

THEIR LIFE BEYOND THE PLOT

She swims slow lengths after late shifts, cooks elaborate rice dishes she portions badly, and watches televised property auctions with the sound muted.

THE CONTRADICTION

Khan is professionally patient but privately impatient with recovery; illness, grief and indecision irritate her when they refuse a timetable.

THE FORMATIVE MOMENT

A frightened complainant withdrew after months of delay, asking Khan whether disbelief would have hurt less quickly. Khan had no answer before the woman left.

WHAT THEY CARRY

She carries every documented pattern that never crossed the charging threshold, particularly the knowledge that accurate police work can still return someone to danger.

THE LIE THEY TELL THEMSELVES

She tells herself meticulous procedure prevents personal judgment, although she chooses which dormant files deserve another hour after everyone leaves.

THE FLAW

She withholds partial truths until they are usable, making frightened people experience her caution as another institution deciding what they can bear.

TORN BETWEEN

She wants dangerous men stopped and murder evidence preserved; pursuing either carelessly may destroy the only viable path toward the other.

HOW THEY SPEAK

EDUCATION	A comprehensive-school pupil who studied criminology before police training; she distrusts decorative language and tests every confident noun against available evidence.
CONFIDENCE	High; she lowers her voice rather than raising it, allowing silence to expose who needs reassurance, permission or escape.
HUMOR STYLE	Almost humourless while working. Off duty, she enjoys dreadful puns delivered without expression, then becomes visibly pleased when others groan.
SPEECH CALM	Low, measured clauses with concrete questions. She permits unfinished answers and rarely supplies words for someone struggling to speak.
VERBAL TELLS	She says “Start with what you saw” when rejecting interpretation. Under personal strain, she omits names and refers to everyone by role.
SPEECH STRESS	Her sentences shorten into commands and exact repetitions. Courtesy disappears first; volume changes only when someone is physically endangered.
SPEECH COMMUNITY	Contemporary Bristol English shaped by policing, court files and a British Pakistani household. She says statement, exhibit, charging decision, front room, takeaway and ring me.
NEVER SAYS DIRECTLY	She never says a failed case haunts her. She rereads its chronology, contacts the complainant herself and asks whether their address remains safe.
SOCIAL CLASS ORIGIN	Raised in a lower-middle-class Bristol household where professional security mattered. Promotion changed her rooms and clothes, not her suspicion of expensive discretion.

HOW THEY SOUND

> Still water. No ice.

> That’s not one I discuss at work. Did you bring a coat?

> Stop. Put it down, step back, and keep looking at me.

> I believe you. I cannot make the evidence become different.

WHERE THEY TRAVEL

ARC POSITION	At their starting position; the story has not begun for them yet. → Her investigation is gaining an additional eyewitness account, while Amy's medical deterioration increases the urgency of preserving evidence.
CURRENT FEAR	That Amy's medical crisis and continued self-directed restraint will produce another attack or destroy evidence before the investigation can act.
GROWTH STAGE	5
PHYSICAL STATE	healthy → Healthy.
EMOTIONAL STATE	baseline → Suspicious, methodical, and urgently concerned while gathering Nina's corroborating account.
LAST KEY ACTION	Received Nina's account in the family room and remained present while Nina set limits on Amy's involvement.
DOMINANT EMOTION	neutral → Concern
LAST UPDATED CHAPTER	36

THE MOMENTS THAT TURN THEM

> Chapter 20:

> Chapter 23:

WHAT MAKES THEM REAL

Khan notices neglected maintenance, untouched food and which exits require stairs. She misreads spontaneous tenderness as appeasement, but privately enjoys warm laundry and auctioneers mispronouncing street names.

WHY A READER STAYS WITH THEM

CAPABILITY	She compares toxicology, surveillance, statements and collapsed assault files, noticing behavioural preparation without overstating what it proves.
PROACTIVITY	She reopens neglected patterns, walks Cliftonwood routes herself and approaches witnesses institutions previously exhausted.
RELATABILITY	She remembers practical details people disclose under stress and follows up without pretending that attention guarantees safety.

WHAT THEY CANNOT DO

- She cannot promise protection after release or non-charge, because she knows staffing and law cannot sustain it.
- She cannot improvise warmth convincingly; rehearsed reassurance sounds like an interview technique.
- She cannot ignore contaminated evidence, even when exposing it may protect someone she believes dangerous.

PART XIV

The Roadmap

What each chapter is for, decided before any of it was written.

CHAPTER 1

Claim the new flat as her own without asking Julie or Nina for help.

Contrast · Protagonist arc moment · Hopefulness — Amy Fletcher's restored strength, private home and first exchange with James Murray make an independent life feel materially possible at the opening of this story.

Amy carries her medication, kettle and bedding into the flat above Murray's Night Bakery, rescues James Murray's flour delivery from the rain, and labels her tacrolimus alarm KEEP IT before taking the stairs again simply because she can. James retrieves the flour and irritates Amy by asking what she wants rather than what she can manage.

CHAPTER 2

Return James's flour sack without accepting neighbourly supervision.

Rising Action · Relationship shift · Anticipation — Amy Fletcher discovers that James Murray can offer disagreement, physical attraction and future contact without asking Amy to surrender independence.

Amy carries the empty sack into Murray's Night Bakery while James laminates pastry for a wholesale trial, and their argument over whether burnt croissants are failures becomes flirtation sharpened by Amy's interest in his flour-coated hands. James admits he wants three dependable wholesale accounts and no fashionable daytime café, giving Amy a reason to descend again.

CHAPTER 3

Complete her biopsy without letting Southmead turn recovery into renewed dependence.

Payload · Mystery plant · Tension — Jonathan Hartley's pause, implausibly quick reassurance and extra blood order make a routine biopsy feel deliberately incomplete while Amy Fletcher remains physically dependent on the institution Amy now distrusts.

Jonathan Hartley biopsies Amy's unusually vigorous heart tissue and pauses over imaging that shows an old circumferential scar beneath the transplant sutures; Hartley calls the mark an artefact, closes the file and orders an extra blood draw. Amy pockets a discarded image showing a glossy black filament beside the heart.

CHAPTER 4

Identify her donor from the information Hartley tried to hide.

Rising Action · Revelation · Dread — Caroline Cors's history turns the hidden alteration in Amy Fletcher's heart from a medical anomaly into a possible pattern of violence, while Amy's decision to preserve the discovery for private use makes that pattern actionable.

During Nina Clarke's celebratory dinner, Amy uses the transplant date, donor age and a funeral notice to identify Caroline Cors, then finds reports naming Caroline the Black Widow of Clifton after three husbands and two lovers disappeared. Nina jokes that Amy has inherited Clifton property values without the property, but Amy saves Caroline's address and lies that she found nothing.

CHAPTER 5

Arrange sex before fear of her scar can restore her old isolation.

Rising Action · Protagonist arc moment · Hope — Amy Fletcher chooses visible sexual risk and receives enough desire from James Murray and Lewis Pritchard to believe that Amy's restored body can support a life organized around pleasure rather than protection.

Amy matches with Lewis Pritchard, chooses a dress exposing the upper edge of her sternotomy scar and agrees to go home with him after he treats her history as interesting rather than tragic. When James sees Amy leaving, Amy enjoys James's concealed jealousy and refuses to explain herself.

CHAPTER 6

Leave Lewis's bed with her new sexual confidence intact.

Escalation · Crisis · Fear — Amy Fletcher's sternotomy scar opens from inside and prevents Amy from leaving, converting a recognizable sexual humiliation into an immediate threat that neither Amy nor Lewis Pritchard can control.

After explicit sex in which Lewis is attentive, Lewis wakes cruel, calls Amy a charity case and laughs at the scar between her breasts; Amy's humiliation becomes fear when a second pulse begins under the scar and hard tissue opens along her sternum. Amy reaches the bedroom door before the opening in her chest pulls her backward and consciousness vanishes.

CHAPTER 7

Remove every trace connecting her to Lewis's mutilated bedroom.

Payload · Action · Dread — Amy Fletcher's calm, sequential cleanup turns an involuntary feeding into a voluntary concealment, while Lewis Pritchard's unanswered family contact makes discovery certain rather than hypothetical.

Amy wakes twelve hours later amid blood and opened bone with Lewis's tissue between her teeth, cleans what she can and carries identifiable remains through the service stair in his laundry bag. Amy lies to Nina about spending the night alone, then swallows tacrolimus beside Lewis's blood because keeping the heart matters more than understanding what the heart did.

CHAPTER 8 — Behave normally long enough to believe Lewis's death was an isolated catastrophe.

Contrast · Quiet · Relief — James Murray's practical work, shared food and respect for Amy Fletcher's physical boundary give both Amy and the reader a credible interval in which ordinary tenderness appears possible after Lewis Pritchard's killing.

Unable to tolerate meat, Amy joins James in the bakery while he prepares a failed wholesale sample, and Amy's blunt criticism helps him repair the pastry rather than discard it. James touches Amy's bruised wrist, stops when she stiffens and leaves Amy wanting the patience she cannot safely explain.

CHAPTER 9 — Convince Farah Khan that Amy never went home with Lewis.

Rising Action · Mystery plant · Apprehension — Farah Khan's precise questions make every ordinary object and truthful fragment in Amy Fletcher's flat capable of supporting or exposing Amy's lie, while Khan's departure provides no certainty that Amy convinced her.

DI Farah Khan visits Amy because Lewis's family reported him missing and his messages identify Amy as his last date; Amy supplies a careful lie while Khan notices a blood-darkened seam on Amy's laundry bag. After Khan leaves, Amy learns Lewis had no recorded assault history and understands that ordinary cruelty, not proven predation, was enough to get him eaten.

CHAPTER 10 — Get reassuring biopsy results without admitting what happened to Lewis.

Payload · Mystery advance · Dread — Human tooth enamel inside Amy Fletcher's pre-Lewis biopsy proves that the transplanted heart has carried physical remains across bodies, while Jonathan Hartley's concealment removes any expectation that medical scrutiny will produce safety.

Hartley shows Amy that the biopsy contains human tooth enamel embedded inside cardiac tissue and demands to know what she has ingested; Amy blames dental work and refuses admission. Hartley increases surveillance while secretly removing the anomalous sample from the ordinary laboratory chain.

CHAPTER 11 — Survive a date after Dean Sallis drugs her drink.

Escalation · Action · Fear — Dean Sallis removes Amy Fletcher's physical control, and the heart restores Amy's survival by making Amy consciously assist in explicit violence she cannot stop.

Dean Sallis drugs Amy, boasts that frightened women become unreliable witnesses and carries her toward his locked bedroom; Amy's desire to be wanted curdles into fear, the sternum seam opens and the heart consumes Dean while Amy remains conscious long enough to feel her own hands assist. Amy wakes stronger and recognises that Lewis's death can happen again under repeatable conditions.

CHAPTER 12

Let James tend her injuries without revealing Dean's death.

Contrast · Relationship shift · Hope — James Murray's immediate respect for Amy Fletcher's physical refusal allows Amy to choose renewed contact, proving that tenderness remains possible even though tenderness is not safe.

James finds Amy bruised on the bakery stair, cleans a cut and asks before kissing her; when Amy's body locks, James stops immediately, but the second pulse answers the tenderness before subsiding. Amy kisses James again after the danger passes, making withdrawal harder for both of them.

CHAPTER 13

Learn what the police recovered from Dean without exposing herself.

Payload · Mystery advance · Apprehension — DI Farah Khan's toxicology disclosure turns Amy Fletcher's exact medication routine into evidence while Amy must remain composed enough to learn what else the police know.

Khan questions Amy about Dean and reveals that toxicology found tacrolimus in Dean's blood despite Dean having no prescription; Khan also tells Amy that two women previously described Dean's drugging method before their cases collapsed. Amy realises her medication can expose every feeding and begins calculating targets whose established patterns might distract from her trace evidence.

CHAPTER 14

Dispose of an anonymous parcel before Nina sees it.

Rising Action · Mystery plant · Dread — the raw-liver parcel shows that an unknown person can enter Amy Fletcher's building, knows about the altered heart and is attempting to manage Amy's appetite without approaching Amy openly.

Amy finds raw liver outside her flat wrapped in butcher's paper and tied with glossy black surgical thread matching the filament in Hartley's image; Nina arrives to practise pharmacy calculations, and Amy hides the parcel in the refrigerator behind a cake Nina brought. Amy later eats the liver nearly raw and feels the second pulse settle without satisfaction.

CHAPTER 15

Help James win a wholesale account without letting attraction become dangerous.

Rising Action · Relationship shift · Hope — Amy Fletcher and James Murray win a concrete business success through complementary stubbornness, and the success lets Amy choose future intimacy without requiring the chapter to pretend that Amy has told James the whole truth.

Amy rides with James to deliver pastries to a hotel buyer, challenges the buyer's attempt to turn Murray's Night Bakery into a daytime brand and helps James secure a trial on his own terms. James kisses Amy in the rain, and Amy admits only that her transplant sometimes makes touch frightening before inviting him upstairs another night.

CHAPTER 16 Find proof in Caroline's house that the heart caused Caroline's disappearances.

Escalation · Mystery advance · Tension — Amy Fletcher searches a house she has entered illegally while DI Farah Khan's investigation moves closer to Amy's dating history, and every useful discovery creates evidence of Amy's own presence.

Amy breaks into Caroline's Cliftonwood house and finds butcher's paper residue, legal notes on vanished men and an empty case shaped for a curved surgical needle; expensive wallpaper conceals damp and old blood beneath the stair rail. A nursing invoice names Edith Salter beside Evelyn Hartley, giving Amy a living witness to Caroline's undocumented operation.

CHAPTER 17 Extract Caroline's restricted transplant file before Hartley can erase it.

Climax · Revelation · Dread — Amy Fletcher obtains the proof Amy wanted, but the proof is paired with confirmation that the inherited abnormality is becoming part of Amy's body rather than remaining a removable object inside it.

Using Nina's knowledge of Southmead filing conventions, Amy enters Hartley's office during clinic and photographs Caroline's confidential record, which documents an older scar encircling Caroline's heart but no authorised operation. Hartley catches Amy leaving and warns that the abnormal tissue is spreading beyond the donor organ, confirming that Amy's body is no longer a passive container.

CHAPTER 18 Make Edith explain the scar and teach Amy how Caroline controlled the heart.

Climax · Mystery payoff · Apprehension — the mystery produces usable answers, but every answer makes Amy Fletcher more confident that she can preserve the heart by choosing its next victim.

Edith Salter sees black sutures emerging through Amy's biopsy wound and reveals that Evelyn Hartley illicitly transplanted the already-scarred heart into Caroline decades earlier, then taught Caroline a temporary restraint called the widow's hitch. Edith describes Caroline choosing dangerous men during periods when the stitch loosened; Amy hears proof of direction where Edith intends a warning about repetition.

CHAPTER 19

Prove she can deliberately aim the hunger at Gareth Pike and survive in control.

Climax · Action · Fear — Amy Fletcher knowingly gives Gareth Pike enough power to frighten her, then refuses a clear escape and becomes the person keeping Gareth within reach of the feeding heart.

Amy dates Gareth Pike, a police officer accused of abusing frightened women, and deliberately provokes his entitlement until Gareth threatens her; Amy welcomes the second pulse, keeps Gareth close after escape is possible and assists the heart as Gareth is pulled into her opened chest. Amy takes Gareth's phone containing victim messages and leaves believing selection has converted appetite into justice.

CHAPTER 20

Use Gareth's evidence to protect his victims while preserving her mastery and alibi.

Climax · Pyrrhic Victory · Apprehension — Amy Fletcher experiences cleanup and intimacy as successful control, while the repeat tacrolimus result shows the reader that each successful feeding makes DI Farah Khan's pattern more specific.

Amy anonymously delivers Gareth's phone to Khan, disposes of Gareth's remaining tissue and returns to James strong enough to accept sustained touch without the pulse waking because the heart is temporarily fed. Khan recovers tacrolimus-contaminated blood from Gareth's abandoned car and links Gareth's disappearance to Dean's toxicology and Amy's dating history.

CHAPTER 21

Enjoy an ordinary morning with James without explaining why her body is calm.

Contrast · Quiet · Relief — Amy and James can briefly inhabit a working, affectionate morning because Amy's heart is satiated and James does not demand the truth Amy is withholding.

Amy helps James shape pastry after a night together, and James celebrates the bakery's first wholesale account by making a misshapen heart from leftover dough that Amy calls anatomically optimistic. James proposes giving Amy a bakery key, and Amy accepts the future implied by the key while hiding Gareth's phone case in her coat.

CHAPTER 22

Force Hartley to continue her medication without submitting to hospital confinement.

Payload · Mystery advance · Dread. The scan turns Amy's private bodily danger into proof that an invasive process is advancing toward a place where neither secrecy nor ordinary self-management can plausibly contain it.

Hartley shows Amy a scan of tooth-bearing tissue spreading toward her lungs and identifies the parcel thread as the same obsolete surgical silk embedded around Caroline's heart. Hartley orders inpatient monitoring, but Amy refuses and leaves with her tacrolimus prescription after threatening to expose Caroline's falsified file.

CHAPTER 23

Learn how much Khan can prove without giving Khan another lie to test.

Falling Action · Mystery advance · Tension — Khan's evidence narrows around Amy Fletcher while remaining just short of the proof needed to restrain her, so every measured answer risks becoming either a usable lie or an admission.

Khan shows Amy the linked messages, grooming complaints and toxicology around Dean and Gareth, then states that knowing why someone might choose these men is not proof of how the men vanished. Khan asks why Amy's recovery accelerates after each disappearance, and Amy answers with transplant language about second chances that neither woman believes.

CHAPTER 24

Make Hartley admit why he transplanted Caroline's scarred heart.

Falling Action · Revelation · Fear — Hartley's evidence makes the graft's invasion medically urgent, while his proposed cure requires Amy to accept a serious chance of death at the hands of the man who concealed the danger.

Hartley admits that Evelyn performed Caroline's illicit transplant and that he concealed the old scar to avoid exposing Evelyn, destroying Southmead's public trust and jeopardising the transplant list; Hartley demands an explant before Amy's invasive tissue reaches her lungs, although the operation will probably kill Amy. Amy refuses to become Hartley's expendable correction and copies Evelyn's operative notes.

CHAPTER 25

Keep James without giving him enough truth to reject her.

Falling Action · Relationship shift · Hope — James Murray asks Amy Fletcher to stay and answer rather than treating Amy Fletcher's partial truth as an automatic reason to leave, creating a limited but real possibility of connection after Hartley's threat.

Amy tells James that the heart can hurt people and claims Dean and Gareth died only after attacking her, omitting Amy's deliberate selection and Gareth's chance to leave. James says waiting has become a way to avoid judging what he sees and asks Amy for the whole truth; Amy gives James the bakery key back, then stays when James asks her not to disappear before answering.

CHAPTER 26

Persuade Nina to interpret the scans and keep Hartley from arranging surgery.

Falling Action · Betrayal · Tension — Nina Clarke's assistance gives Amy Fletcher a temporary reprieve from Hartley while quietly creating the evidence trail that can be used against Amy Fletcher.

Nina confirms that Amy's abnormal tissue is spreading and recognises the raw-meat parcel as an attempt to manage a biological appetite; Amy frames concealment as protection for herself and dozens of transplant recipients. Nina agrees not to call Hartley that night but copies Amy's scans and Gareth's messages, admitting through the action that practical help no longer means obedience.

CHAPTER 27 Identify the parcel sender and stop being manipulated through hunger.

Falling Action · Ironic Reversal · Dread — Hartley's explanation makes the parcels understandable as medical panic, but Amy's successful coercion turns that panic into protection for her continued predation.

Amy confronts Hartley with the obsolete thread, and Hartley admits leaving the raw meat because Evelyn's notes suggested animal tissue could delay feeding while Hartley searched for a safer explant. Hartley's attempt to manage Amy privately gives Amy proof of evidence tampering, and Amy uses the parcels and Evelyn's notes to force continued medication and silence.

CHAPTER 28 Help James fulfil the hotel order and prove they can still build a life together.

Contrast · Quiet · Relief — Amy and James complete the hotel work successfully, enjoy each other's competence, and make a hopeful agreement about intimacy after the dread of Hartley's confession.

Amy and James work through the bakery's first full wholesale order, quarrelling over butter temperature and laughing when Amy's transplant alarm sounds like an industrial warning among the timers. James states that he wants Amy specifically, including her anger and appetite, but refuses another intimacy built on omissions; Amy promises to show him what happens if he stops when asked.

CHAPTER 29 Have explicit sex with James while proving consent and stopping rules can keep him safe.

Payload · Crisis · Fear — James Murray's careful consent fails to protect him because Amy Fletcher's desire and fear of losing James Murray satisfy the graft's trigger without any cruelty from James Murray.

James follows every boundary during explicit intimacy and stops the instant Amy asks, yet tenderness and Amy's fear of losing him produce the strongest second pulse since Gareth's feeding. Amy feels teeth form behind her sternum, shoves James out and claims rejection caused her panic, concealing that James did nothing cruel enough to fit her rule.

CHAPTER 30 Obtain a restraint method without agreeing to Hartley's explant.

Falling Action · Revelation · Tension — Amy Fletcher gains a usable method at the same moment she learns its severe bodily cost and its strict limits, leaving every apparent solution conditional.

A black suture pushes through Amy's biopsy wound while new tissue consumes part of her breast, and Amy uses Evelyn's notes to locate the curved needle Hartley kept with Caroline's archived instruments. Hartley warns that the widow's hitch must be driven through living tissue from inside the opening and can only restrain the heart temporarily; Amy steals the needle and leaves surgery unsigned.

CHAPTER 31

Restore her victim rule by feeding on Oliver Venn before the heart turns toward James.

Falling Action · Devastating Loss · Dread — Amy deliberately creates Oliver Venn's fear in order to awaken the graft, so the feeding removes the last credible distance between Amy's appetite and the heart's violence.

Amy dates Oliver Venn because Khan described Oliver's collapsed assault case, but Oliver recognises Amy's trap and tries to leave before threatening her; Amy humiliates and corners Oliver until his fear wakes the heart, then allows the feeding to finish. In a rain-dark window Amy sees that the terror triggering the heart belongs to Oliver and that Amy manufactured it.

CHAPTER 32

Remove evidence from her flat before Khan can obtain access.

Catastrophe · Betrayal · Fear — Nina's intervention puts Amy's closest friend beside an activated graft, and the reader can see the physical danger before Amy can accept that Nina belongs inside it.

Amy returns to find Nina has admitted Khan with the copied scans, and Khan photographs the surgical thread, raw meat and blood traces while Nina accepts responsibility for choosing intervention over Amy's refusal. Amy orders Khan out, turns on Nina for making Amy's body public again and feels the heart open in response to rage and abandonment rather than sexual threat.

CHAPTER 33

Force Nina to leave before the hunger crosses its threshold.

Catastrophe · All Is Lost · Dread — Amy's closest friend is injured by the hunger while James sees Amy fail to stop it, making Amy's private system of selection and control visibly untenable.

Nina refuses to leave while Amy is medically unstable, and the heart seizes Nina despite Nina posing no sexual threat; James enters, sees Amy holding Nina over the opening in her chest and helps tear Nina free at the cost of flesh from Nina's shoulder. Amy believes she has permanently lost Nina's trust, James's desire and the claim that she can aim the hunger.

CHAPTER 34

Prevent Khan, Nina and Hartley from deciding what happens to her body.

Catastrophe · Mystery payoff · Tension — Amy is surrounded by people who can name the damage she has caused, but none of them can yet take the next choice from her.

Nina survives and tells Amy she will answer Khan without embellishment or protection; Khan explains that tacrolimus, messages and blood establish a pattern but the unreconstructable bodies and Hartley's contaminated evidence cannot yet support a murder charge. Hartley offers immediate explant surgery, and James asks Amy to choose it after telling him the full truth; Amy appears to agree to one final night before admission.

CHAPTER 35 Spare James without surrendering the heart to Hartley.

Catastrophe · Catastrophe · Fear. Amy must mutilate herself while the graft is actively pulling James toward her chest, and the successful rescue becomes frightening because Amy immediately chooses to keep the danger alive.

During explicit farewell intimacy, Amy's chest opens and begins drawing James inside; Amy rejects James's attempt to pin her safely, drives Evelyn's curved needle through her own breast and sternum, and ties the widow's hitch from inside until the heart releases him. Amy then refuses Hartley's waiting explant, threatens to expose Hartley's concealment, and accepts James's decision to leave the bakery room and ask Amy not to follow.

CHAPTER 36 Resume an independent life without surrendering the appetite that sustains it.

Finale · Denouement · Dread — Amy Fletcher's quiet competence makes the ending frightening because every ordinary act of recovery now prepares her to choose another victim.

With Nina answering Khan, Hartley trapped by his falsifications and James gone from the bakery room, Amy transfers to another consultant and resumes exact tacrolimus dosing while the widow's hitch heals. The KEEP IT alarm sounds as Amy answers a message from a man whose collapsed assault case Khan described, touches the black stitches beneath her scar and leaves for the date while raw meat waits in her refrigerator.

PART XV

The Emotional Arc

The shape of the reading experience, chapter by chapter.

What each chapter is doing to the reader, planned before any of it was written.

CHAPTER 1

Amy Fletcher feels proud, physically pleased and defensive because the transplanted heart lets Amy move into her own flat without Julie Fletcher or Nina Clarke managing the work. James Murray's question about what Amy wants irritates Amy because the question offers respect while requiring Amy to admit that independence is a desire rather than a medical capacity.

Hopefulness — Amy Fletcher's restored strength, private home and first exchange with James Murray make an independent life feel materially possible at the opening of this story. · The reader comes to love Amy Fletcher's pleasure in climbing the stairs and James Murray's respect for what Amy wants rather than what Amy can endure. Chapter 35 uses that comfort against the reader when Amy exercises the same bodily autonomy to spare James with the widow's hitch but refuses Jonathan Hartley's explant. The exact cost is the end of Amy and James's imagined shared future: James survives, leaves the bakery room and asks Amy not to follow.

Opens: During rainy daylight on day -13, Amy Fletcher is already carrying a box containing the kettle and protected medication up the stairs to the new flat above Murray's Night Bakery while the bedding waits below.

Closes: Later on day -13, Amy Fletcher stands in the claimed flat after an unnecessary final climb, with the scheduled tacrolimus taken, Julie Fletcher and Nina Clarke still excluded from the move, and James Murray's empty flour sack lying beside the unpacked kettle.

Risk: The main risk is making Amy Fletcher's transplant dependence either sentimental recovery material or obvious supernatural menace. The chapter must concretely join hunger, exertion, medication, another person's organ and Amy's pleasure in autonomy while keeping hope dominant and the heart apparently passive. Anchor the reader before any phone display or message with a conventional first-person framing paragraph in Amy's immediate physical experience, beginning mid-gesture as Amy carries a box on the stairs; no unconventional format is used. There is also a source contradiction that must not be silently executed: "Opening bookend: Amy stands half-dressed in Lewis Pritchard's room while her tacrolimus alarm sounds, hiding the scar between her breasts as he watches." This specified opening conflicts with the later Chapter 1 skeleton, the linear chronology and Lewis Pritchard's Chapter 5 date and Chapter 6 humiliation. Use the later Chapter 1 moving-day event as the literal opening situation; retain only the separately specified KEEP IT alarm promise in Chapter 1.

CHAPTER 2

Amy Fletcher moves from defensive irritation to sexual interest because James Murray accepts Amy's physical competence, argues with Amy as an equal and exposes an ambition that does not depend on Amy. Amy is pleased to acquire a reason to return to the bakery and unsettled that returning will now be a choice rather than an errand.

Anticipation — Amy Fletcher discovers that James Murray can offer disagreement, physical attraction and future contact without asking Amy to surrender independence. · As an exposition relationship beat, the chapter builds affection for Amy Fletcher and James Murray arguing honestly over work, and for James's bakery ambition as a life independent of Amy. Chapters 29 and 35 use that investment against the reader when Amy's desire endangers James and Amy saves James without choosing their shared future; the eventual cost is the loss of the ordinary life made plausible here.

Opens: Near the end of Murray's Night Bakery's overnight production, Amy Fletcher pushes through the bakery door with the empty branded flour sack while James Murray is already folding butter into pastry for a wholesale trial.

Closes: Amy Fletcher pauses at the stair door after agreeing to judge James Murray's replacement croissants, while James returns to the bench and a cooling loaf opens along the seam James scored.

Risk: The main risk is letting clever bakery banter substitute for embodied attraction: Amy Fletcher must notice the handling, temperature, fat and texture of the pastry before Amy transfers that attention to James Murray's hands. There is also an explicit instruction conflict: the committed chapter skeleton requires a Warm Hook after Chapter 1 also used a Warm Hook, while the recent-cliffhanger instruction requires a different mechanism; retain the committed Warm Hook but distinguish it by ending on Amy's active decision to return rather than on simple welcome or comfort.

CHAPTER 3

Amy Fletcher begins with defensive impatience because the routine biopsy places Southmead back in authority over a body she now experiences as capable and private. Jonathan Hartley's visible alarm and immediate dismissal turn Amy's impatience into suspicion, and Amy treats Hartley's concealment as permission to conceal her own theft.

Tension — Jonathan Hartley's pause, implausibly quick reassurance and extra blood order make a routine biopsy feel deliberately incomplete while Amy Fletcher remains physically dependent on the institution Amy now distrusts. · Chapter 2 established Amy Fletcher's restored body as a source of competence, attraction and ordinary future contact with James Murray. Chapter 3 makes the same restored body subject to invasive examination and hidden clinical knowledge, costing Amy her assumption that Southmead will tell her what matters about the heart keeping her alive.

Opens: Amy Fletcher is already on the biopsy couch at Southmead, pulling the gown away from the access site while refusing sedation so Amy can complete the scheduled follow-up and leave without an escort.

Closes: Amy Fletcher leaves Southmead alone with the duplicate heart image hidden inside her discharge papers, while the old circumferential scar, glossy black filament and Jonathan Hartley's reason for concealing them remain unresolved.

Risk: The main risk is making Jonathan Hartley's concealment so sinister that the chapter jumps from tension to dread or makes Hartley an obvious villain on first appearance. Hartley must remain attentive, medically credible and plausibly reassuring while Hartley's involuntary pause and contradictory actions establish that the scar and black filament matter.

CHAPTER 4

Amy Fletcher feels vindicated when the information Jonathan Hartley concealed leads to Caroline Cors, then feels a private excitement because Caroline's history makes the unexplained alteration seem knowable rather than random. Amy suppresses unease about Caroline's missing partners by treating the discovery as information Amy alone is entitled to manage.

Dread — Caroline Cors's history turns the hidden alteration in Amy Fletcher's heart from a medical anomaly into a possible pattern of violence, while Amy's decision to preserve the discovery for private use makes that pattern actionable. · This chapter spends the ordinary trust established between Amy Fletcher and Nina Clarke: Nina celebrates Amy's independent life and assumes Amy's search is harmless curiosity, while Amy uses Nina's presence as cover for a discovery Amy immediately conceals. The cost is Amy's first deliberate use of Nina's friendship to preserve private control over the inherited heart mystery.

Opens: During an evening takeaway dinner celebrating Amy Fletcher's new independence, Amy is in her flat with Nina Clarke and is already hiding the stolen cardiac imaging printout beneath the ordinary clutter on the table.

Closes: After Nina Clarke leaves Amy Fletcher's flat believing the donor search failed, Amy remains alone with Caroline Cors's Cliftonwood address saved on Amy's phone and Caroline's possible connection to the altered heart unresolved.

Risk: The main risk is turning Caroline Cors's history into a compressed dossier that proves too much. The search must unfold through Amy Fletcher's selective attention during an ordinary dinner, the reports must preserve the distinction between suspicion and evidence, and Amy's decision to save Caroline's address must carry more dramatic force than the volume of information discovered.

CHAPTER 5

Amy Fletcher feels defiant hope because exposing her scar and arranging sex allow Amy to treat desire as evidence that the transplant restored a life rather than merely prolonged one. Amy's fear of disgust remains active, but James Murray's jealousy and Lewis Pritchard's interest let Amy mistake other people's desire for control over that fear.

Hope — Amy Fletcher chooses visible sexual risk and receives enough desire from James Murray and Lewis Pritchard to believe that Amy's restored body can support a life organized around pleasure rather than protection. · The reader comes to value Amy Fletcher's pleasure in choosing her clothes, displaying her scar and being approached as sexually available rather than medically fragile. Chapter 6 uses that confidence against the reader when Lewis Pritchard changes from attentive to cruel; the cost is that Amy has placed the scar and Amy's new confidence within reach of Lewis's contempt.

Opens: Amy Fletcher stands inside the flat above Murray's Night Bakery with a coat already on and Caroline Cors's address open on Amy's phone, deleting the planned visit time because Amy has no safe explanation for approaching Caroline's Cliftonwood house.

Closes: Two evenings later, Amy Fletcher enters Lewis Pritchard's flat while Lewis closes the door, with sex anticipated, Amy's fear of humiliation unresolved and James Murray still working in the bakery without knowing where Amy has gone.

Risk: The main risk is allowing knowledge of chapter 6 to make Lewis Pritchard obviously predatory or to keep Caroline Cors's dread dominant. Lewis's initial attentiveness and Amy Fletcher's sexual confidence must feel genuinely promising, while the danger remains limited to Amy's ordinary fear of humiliation; otherwise Lewis's later cruelty becomes confirmation rather than a violation of the hope built here.

CHAPTER 6

Amy Fletcher moves from sexual confidence to humiliation when Lewis Pritchard treats their intimacy as charity, then to immediate fear when Amy's transplanted heart develops a second pulse and Amy's sternotomy scar opens. Amy tries to preserve control by refusing Lewis's help and leaving, but Amy's body physically prevents the exit.

Fear — Amy Fletcher's sternotomy scar opens from inside and prevents Amy from leaving, converting a recognizable sexual humiliation into an immediate threat that neither Amy nor Lewis Pritchard can control. · Chapter 5 built Amy Fletcher's belief that exposing the scar and being desired could restore sexual confidence. Chapter 6 spends that confidence by making Lewis Pritchard's desire conditional and turning the scar Amy displayed by choice into the site of an involuntary physical opening.

Opens: At night in Lewis Pritchard's Bedminster bedroom, Amy Fletcher is already undressing for the consensual sex anticipated at the end of chapter 5 while Lewis waits for Amy's permission to touch the exposed scar.

Closes: Later that night at Lewis Pritchard's bedroom threshold, Amy Fletcher is pulled backward by a contraction inside Amy's opened chest and loses consciousness while Lewis remains alive, present and within reach of the emerging danger.

Risk: The main risk is making Lewis Pritchard's cruelty function as moral permission for the coming violence. Lewis's insult must arise credibly from Lewis's wounded vanity without making Lewis's response proportionate or excusable, and Lewis must remain recognizably human when Lewis sees Amy's medical crisis and tries to help; otherwise the chapter turns Lewis into a disposable target and weakens the horror of what Amy's heart is beginning to do.

CHAPTER 7

Amy Fletcher moves from disorientation and disgust at Lewis Pritchard's mutilated remains to practical fear of discovery. When Amy realizes that the feeding has left Amy stronger rather than dying, Amy chooses concealment and medication because surrendering the heart would return control of Amy's life to other people.

Dread — Amy Fletcher's calm, sequential cleanup turns an involuntary feeding into a voluntary concealment, while Lewis Pritchard's unanswered family contact makes discovery certain rather than hypothetical. · Chapters 5 and 6 built Amy Fletcher's pleasure in physical strength, consensual sex and being wanted, while Lewis Pritchard's initial respect made Lewis more than the insult that triggered the heart. This chapter converts Amy's reclaimed bodily competence into the ability to handle Lewis's remains, erase evidence and preserve the organ that consumed him.

Opens: Near the end of the morning, Amy Fletcher regains consciousness on the floor of Lewis Pritchard's bedroom with Lewis dead and mutilated beside Amy, Lewis's tissue between Amy's teeth and the flat still empty because Owen Watkins has not returned.

Closes: Later that morning in Amy Fletcher's flat above Murray's Night Bakery, Lewis Pritchard's identifiable remains have entered commercial refuse, Nina Clarke believes Amy spent the night alone, and Amy swallows tacrolimus while blood remains trapped in Amy's laundry-bag seam.

Risk: The largest risk is presenting the cleanup as satisfying competence or allowing Lewis Pritchard's insult to make Lewis's killing feel deserved. Keep Lewis's bodily destruction physically consequential, keep Lewis's earlier attempt to call an ambulance in Amy Fletcher's reasoning and make Amy's medication choice clearly voluntary without adding external moral judgment.

CHAPTER 8

Amy Fletcher feels temporary relief because ordinary work, food she can tolerate and James Murray's unforced attention let Amy treat Lewis Pritchard's killing as an isolated catastrophe. James's immediate withdrawal when Amy stiffens also leaves Amy wanting contact that Amy cannot pursue honestly or safely.

Relief — James Murray's practical work, shared food and respect for Amy Fletcher's physical boundary give both Amy and the reader a credible interval in which ordinary tenderness appears possible after Lewis Pritchard's killing. · The reader comes to trust that James Murray will notice Amy Fletcher's physical response, stop without argument and let Amy decide whether contact resumes. Chapter 29 uses that trust against the reader when James follows Amy's requests and does nothing cruel, but Amy's transplanted heart wakes because Amy desires James and fears losing him. The cost is the loss of Amy and James's belief that consent, patience and clear procedure can make their intimacy safe.

Opens: Near the end of James Murray's night production shift, Amy Fletcher stands in the kitchen of her flat above Murray's Night Bakery trying and failing to swallow fried bacon while the fabric laundry bag containing Amy's blood-stained green dress remains nearby.

Closes: As daylight reaches the bakery shopfront, Amy Fletcher remains beside James Murray after eating the repaired wholesale sample, James's flour mark is still visible around Amy's bruised wrist, and Amy has postponed the planned visit to Caroline Cors's house without telling James what Amy is avoiding.

Risk: The main risk is allowing Amy Fletcher's memory of Lewis Pritchard's remains to keep the chapter at dread instead of delivering genuine relief. The bakery work, repaired sample and restrained touch must be satisfying in themselves, and James Murray must retain his wholesale ambition and personal limits rather than becoming a caretaker whose only function is soothing Amy.

CHAPTER 9

Amy Fletcher feels controlled apprehension while Farah Khan tests Amy's account against Lewis Pritchard's messages and notices the stained laundry bag. Amy's relief after Khan leaves becomes frustrated unease when Amy learns that Lewis had no recorded history of assault and cannot be made retrospectively deserving through evidence.

Apprehension — Farah Khan's precise questions make every ordinary object and truthful fragment in Amy Fletcher's flat capable of supporting or exposing Amy's lie, while Khan's departure provides no certainty that Amy convinced her. · Chapter 8 established Amy Fletcher's flat and Murray's Night Bakery as places where ordinary work, food and James Murray's restraint could make Amy feel temporarily safe. Farah Khan's visit brings Lewis Pritchard's disappearance into Amy's home and turns domestic details into possible evidence, so the relief built around Amy's new independence now carries the cost of police scrutiny.

Opens: Amy Fletcher is in her flat carrying the fabric laundry bag away from the bathroom when the entry buzzer announces Farah Khan's arrival about Lewis Pritchard.

Closes: Later in her flat, Amy Fletcher has ended a call in which Farah Khan confirmed that police found no recorded assault pattern involving Lewis Pritchard, while Khan's card lies beside Lewis's missing-person appeal and the stained laundry bag remains unwashed.

Risk: The main risk is making Farah Khan either implausibly omniscient or too easily deceived. Khan must follow limited missing-person procedure, notice the laundry-bag stain without illegally searching or seizing it, and leave Amy uncertain; Lewis Pritchard must remain an ordinary missing person with a distressed family without the chapter recasting Lewis as secretly admirable or supplying Amy with moral permission.

CHAPTER 10

Amy Fletcher feels defensive dread when Jonathan Hartley shows her human tooth enamel inside tissue removed from her transplanted heart. Amy's fear sharpens when she remembers that Jonathan Hartley took the biopsy before Lewis Pritchard's killing, meaning the enamel survived inside the donor heart from an earlier carrier.

Dread — Human tooth enamel inside Amy Fletcher's pre-Lewis biopsy proves that the transplanted heart has carried physical remains across bodies, while Jonathan Hartley's concealment removes any expectation that medical scrutiny will produce safety. · Chapter 8 established that James Murray could notice Amy Fletcher's injured body, touch Amy carefully and accept Amy's silence without claiming authority over her. This chapter places Amy's body under Jonathan Hartley's clinical authority and makes Amy's hidden interior physically legible to him; Amy loses both the reassurance of an uncomplicated recovery and the possibility of treating Jonathan Hartley as merely overcautious.

Opens: During a daylight appointment at the Southmead Transplant Unit, Bethan Gough is already replacing Amy Fletcher's biopsy dressing while Amy waits for Jonathan Hartley to explain the unexpected result mentioned in Bethan's voicemail.

Closes: Amy Fletcher stands dressed at the consultation-room door while Jonathan Hartley locks Amy's enamel-bearing fifth biopsy block in his desk and leaves only four routine samples on the pathology transfer form.

Risk: The largest risk is turning Jonathan Hartley's pathology explanation into an exposition dump that either overexplains the heart or makes the enamel medically abstract. Keep the enamel physically specific, preserve the fact that no one can explain its route into cardiac muscle and make Jonathan Hartley's concealment visible through his handling of Amy Fletcher's fifth biopsy block and the four-sample transfer form.

CHAPTER 11

Amy Fletcher begins with defensive determination to prove that Jonathan Hartley's discovery has not returned her to a life governed by medical fear. After Dean Sallis drugs her, Amy's fear of helplessness becomes contaminated by relief when the heart saves her, followed by horror because Amy remains conscious while her own hands help consume Dean.

Fear — Dean Sallis removes Amy Fletcher's physical control, and the heart restores Amy's survival by making Amy consciously assist in explicit violence she cannot stop. · Chapter 8 built the possibility that Amy Fletcher could return from Lewis Pritchard's killing to ordinary work, attraction and care with James Murray. Chapter 11 makes that possibility more costly by turning Amy's attempt at ordinary dating into another feeding and by leaving Amy with conscious memories that she must hide from James and Nina Clarke.

Opens: On the evening of story day 21, Amy Fletcher sits with Dean Sallis in the quiet bar off King Street and reaches for the drink Dean has replaced while Amy was away from the table.

Closes: On the morning after the date, Amy Fletcher is alone in her flat after Nina Clarke has treated Amy's visible injuries, with Dean Sallis dead in his flat, contaminated blood left behind and Amy newly certain that the heart's feeding can recur.

Risk: The main risk is presenting Dean Sallis's killing as a cathartic punishment that permits the reader to enjoy Amy Fletcher's survival without contamination. Dean must remain an ordinary, practiced predator rather than a theatrical villain, the failed intervention by the bartender must leave Amy genuinely isolated, and Amy's conscious decision to use her hands must make the feeding more morally compromising than Lewis Pritchard's killing rather than merely more graphic.

CHAPTER 12

Amy Fletcher wants ordinary tenderness after Dean Sallis's killing and feels relief when James Murray tends Amy's injuries without taking control. James's immediate withdrawal when Amy freezes makes Amy feel safe enough to kiss James again, even though Amy knows James does not understand the danger Amy is asking him to share.

Hope — James Murray's immediate respect for Amy Fletcher's physical refusal allows Amy to choose renewed contact, proving that tenderness remains possible even though tenderness is not safe. · The reader comes to love James Murray's habit of stopping at the first sign of Amy Fletcher's discomfort without demanding an explanation or treating the interruption as rejection. Chapter 29 uses that trust against the reader when James follows Amy's requests and does nothing cruel, but Amy's fear of losing James still wakes the heart. The cost in chapter 29 is that James becomes a potential victim and Amy permanently loses the belief that respectful behaviour can make intimacy with James safe.

Opens: Near the end of James Murray's next night shift, Amy Fletcher is partway down the bakery stair with bruises still visible and Nina Clarke's dressing beginning to bleed through over Amy's cut palm.

Closes: Amy Fletcher and James Murray remain on the bakery stair after Amy's second initiated kiss, with the second pulse quiet again, Dean Sallis's killing still concealed and James newly committed to an intimacy whose physical risk James does not know.

Risk: The main risk is allowing the second pulse to dominate the chapter so completely that the planned hope disappears, or treating James Murray's respectful behaviour as protection from the heart. The pulse must become physically real and then subside before the threshold, while the emotional climax remains Amy Fletcher choosing the second kiss and creating a false sense that clear consent and early withdrawal can manage the danger.

CHAPTER 13

Amy Fletcher feels controlled apprehension when DI Farah Khan reveals that Dean Sallis's blood contained tacrolimus. Amy's fear shifts into calculation when Khan describes the two prior complainants, because Amy begins treating institutional failure as possible cover for future killings.

Apprehension — DI Farah Khan's toxicology disclosure turns Amy Fletcher's exact medication routine into evidence while Amy must remain composed enough to learn what else the police know. · Chapter 12 established that Amy Fletcher can still experience wanted tenderness with James Murray and can preserve the transplanted heart without surrendering ordinary intimacy. This chapter makes the medication sustaining Amy's body and possible future with James into evidence against Amy, while Amy protects that future by deepening the secrecy that makes James unsafe.

Opens: Amy Fletcher is already seated opposite DI Farah Khan in a police interview room during a voluntary interview about Amy's last known contact with Dean Sallis.

Closes: Amy Fletcher is back in her flat with no immediate charge against Amy, but Amy is comparing dating-app profiles with the kind of failed allegations DI Farah Khan described while the tacrolimus link remains unresolved.

Risk: The main risk is turning DI Farah Khan into an exposition source or making Amy Fletcher's use of failed assault cases feel like a righteous vigilante breakthrough. Stage every disclosure as part of Khan's controlled test, preserve the two prior complainants as harmed people rather than target-validation material, and let Amy's practical reasoning sound plausible without supplying moral approval or escalating the chapter from tension into dread.

CHAPTER 14

Amy Fletcher feels watched when the raw-liver parcel proves that someone knows enough about the altered heart to intervene at Amy's home. Amy's fear becomes covert curiosity when Amy chooses to test the liver rather than discard it or show Nina Clarke.

Dread — the raw-liver parcel shows that an unknown person can enter Amy Fletcher's building, knows about the altered heart and is attempting to manage Amy's appetite without approaching Amy openly. · Chapter 8 made shared food and bakery work a source of relief after Amy Fletcher's first killing. Chapter 14 uses that domestic safety against the reader by placing raw organ meat behind Nina Clarke's cake and making Amy's refrigerator part of the heart's concealment system.

Opens: Four days after DI Farah Khan's interview, Amy Fletcher is outside her flat above Murray's Night Bakery with one hand already lifting an anonymous butcher-paper parcel from the floor.

Closes: Amy Fletcher is alone in her flat after Nina Clarke has left, with the second pulse temporarily subdued, the raw liver consumed and the glossy black thread laid against the matching filament in Amy's stolen scan printout while the sender's identity remains unknown.

Risk: The largest risk is identifying Jonathan Hartley too clearly through the parcel or treating the liver as a useful solution. The sender must remain genuinely uncertain, while the physical relief must be clear enough to tempt Amy Fletcher but incomplete enough to preserve the need for future feeding.

CHAPTER 15

Amy Fletcher feels useful and desired because Amy's argument helps James Murray protect the business he wants rather than asking James to reorganise his life around Amy. Success makes Amy willing to risk another kiss, but Amy limits honesty to the fact that touch can frighten her and treats choosing a later invitation as sufficient control.

Hope — Amy Fletcher and James Murray win a concrete business success through complementary stubbornness, and the success lets Amy choose future intimacy without requiring the chapter to pretend that Amy has told James the whole truth. · The chapter gives the reader Amy Fletcher and James Murray as equal collaborators whose disagreement improves James's work and whose attraction grows from mutual competence. Chapter 29 uses that investment against the reader when Amy's fear of losing James wakes the heart despite James doing nothing cruel, and chapter 35 makes the final cost the ordinary future their shared work made credible.

Opens: After dawn on day 36, Amy Fletcher is already carrying a labelled pastry box from Murray's Night Bakery to James Murray's delivery vehicle while James checks the forty-eight-pastry hotel order before the buyer's tasting window closes.

Closes: After returning to Murray's Night Bakery in the rain, Amy Fletcher goes upstairs alone after kissing James Murray and inviting James upstairs on another night, leaving the invitation accepted in principle but Amy's full medical and violent danger undisclosed.

Risk: The main risk is allowing Amy Fletcher to win the hotel account for James Murray so completely that James becomes passive or grateful rather than an independent baker. Amy must expose the bad bargain and create friction, but James must decide which terms matter, state those terms himself and secure Felix Rowe's agreement; the kiss must follow mutual respect rather than function as payment for Amy's intervention.

CHAPTER 16

Amy Fletcher feels exposed while entering Caroline Cors's house, then increasingly vindicated as Caroline's records turn the inherited appetite into something that can be organised. Amy treats Caroline's secrecy and preparation as evidence of competence rather than as a warning.

Tension — Amy Fletcher searches a house she has entered illegally while DI Farah Khan's investigation moves closer to Amy's dating history, and every useful discovery creates evidence of Amy's own presence. · Chapter 15 established that Amy Fletcher and James Murray could build an ordinary future through useful disagreement and partial honesty. Chapter 16 spends that hope by having Amy deepen a criminal secret immediately after inviting James toward greater intimacy, making the future James believes he is approaching different from the future Amy is privately preparing.

Opens: In weekday daylight, Amy Fletcher is already forcing entry through a rear window of Caroline Cors's apparently empty Cliftonwood house after approaching on foot.

Closes: Amy Fletcher leaves Caroline Cors's street with photographs of the files, empty needle case and nursing invoice, aware that a doorbell camera may have recorded Amy and resolved to obtain Caroline's restricted Southmead record before approaching Edith Salter.

Risk: The main risk is turning Caroline Cors's house into a convenient serial-killer museum that explains too much. The evidence must remain partial, domestic and open to Amy Fletcher's self-serving interpretation; the tension should come from Amy's trespass, traceability and growing admiration, not from an invented intruder or a jump scare.

CHAPTER 17

Amy Fletcher feels vindicated when Caroline Cors's file proves that Southmead recorded the old scar and omitted any operation that could explain it. Hartley's warning frightens Amy, but Amy converts that fear into greater urgency rather than accepting Hartley's authority over her body.

Dread — Amy Fletcher obtains the proof Amy wanted, but the proof is paired with confirmation that the inherited abnormality is becoming part of Amy's body rather than remaining a removable object inside it. · Chapter 15 established that Amy Fletcher's restored strength and growing intimacy with James Murray might support a workable future. Hartley's confirmation that altered tissue is spreading into Amy makes that physical recovery and intimacy newly dangerous rather than merely hopeful.

Opens: During a busy Southmead clinic day, Amy Fletcher is already asking Nina Clarke by phone how older transplant records are labelled while concealing Amy's plan to enter Jonathan Hartley's office.

Closes: Amy Fletcher leaves Hartley's office with photographs of Caroline Cors's restricted record, a new raised line beneath Amy's biopsy dressing and the unresolved knowledge that altered tissue has crossed into Amy's body, while Hartley remains unable to report Amy without exposing his own concealment.

Risk: The main risk is turning the chapter into a records-procedure explanation or allowing Jonathan Hartley to disclose the full illicit operation prematurely. Keep the file evidence limited to the unexplained scar and Hartley's prior knowledge, make the bodily invasion the source of dread and reserve Evelyn Hartley's operation, Caroline Cors's carrier status and the widow's hitch for Edith Salter in chapter 18.

CHAPTER 18

Amy Fletcher begins frightened that the spreading tissue proves she is losing ownership of her body. Edith Salter's account gives Amy relief and growing confidence because Amy interprets Caroline Cors's temporary restraint and victim selection as evidence that a carrier can direct the appetite without surrendering the heart.

Apprehension — the mystery produces usable answers, but every answer makes Amy Fletcher more confident that she can preserve the heart by choosing its next victim. · Chapter 15 built the possibility that Amy Fletcher could use her restored health for intimacy and a shared practical future with James Murray. This chapter turns that restored agency toward preserving and directing the heart, making Amy's coming choice of Gareth Pike cost the distinction between building an independent life and organising that life around predation.

Opens: Amy Fletcher stands at Edith Salter's door with Caroline Cors's invoice and procurement photographs, silencing another call from Nina Clarke while the firm line beneath Amy's biopsy dressing pulls painfully toward her collarbone.

Closes: Amy Fletcher leaves Edith Salter's home with the widow's hitch understood as temporary restraint, Caroline Cors recast as a predecessor rather than an origin, and a saved public report naming Gareth Pike open on Amy's phone.

Risk: The main risk is turning Edith Salter's disclosure into a medical-history lecture or making the widow's hitch sound like reliable control. The reveal must remain driven by Edith's recognition of Amy Fletcher's exposed sutures and by Amy's increasingly selective questions, while the chapter clearly preserves the heart's unknown origin and the difference between temporary restraint, victim selection and control after the threshold.

CHAPTER 19

Amy Fletcher begins with controlled anticipation, expecting Gareth Pike's documented behaviour to let Amy trigger the heart without becoming helpless. When the heart does not respond to Gareth's guilt alone, Amy accepts genuine sexual danger, then feels exhilarated and vindicated after Amy refuses an available escape and survives Gareth's consumption.

Fear — Amy Fletcher knowingly gives Gareth Pike enough power to frighten her, then refuses a clear escape and becomes the person keeping Gareth within reach of the feeding heart. · Earlier intimacy with James Murray established that Amy can want a man who respects withdrawal and leaves Amy free to choose. This chapter makes the cost sharper by having Amy deliberately seek sexual contact with Gareth Pike, whose entitlement can convert desire into fear, because the heart is easier to use with a man who ignores boundaries.

Opens: In her flat above Murray's Night Bakery on the evening after leaving Edith Salter, Amy Fletcher is already answering a dating-app message from Gareth Pike while the fresh dressing remains over the exposed filament at Amy's biopsy wound.

Closes: Amy Fletcher leaves Gareth Pike's bloodied car with Gareth's phone after the heart has consumed most of Gareth, while Gareth's remaining tissue and mixed blood remain in the vehicle and Amy believes Amy has proved that careful victim selection constitutes control.

Risk: The largest risk is making Gareth Pike so plainly monstrous that the reader can treat Amy Fletcher's choice as uncomplicated justice. Gareth's threat must be credible and consequential, but Amy must receive a genuine opportunity to leave and must choose to continue before Amy reads the messages that confirm Gareth's abuse; otherwise the corruption payoff becomes self-defence and the heart appears morally selective.

CHAPTER 20

Amy Fletcher feels competent and rewarded because Amy removes the visible remains from Gareth Pike's car, gives Gareth's evidence to DI Farah Khan and discovers that the fed heart permits sustained intimacy with James Murray. Amy's confidence survives Khan's forensic link because Amy believes Gareth's injuries and messages support Amy's partial account that Gareth assaulted Amy and later disappeared.

Apprehension — Amy Fletcher experiences cleanup and intimacy as successful control, while the repeat tacrolimus result shows the reader that each successful feeding makes DI Farah Khan's pattern more specific. · Earlier chapters made James Murray's careful withdrawal and Amy Fletcher's interrupted kisses desirable but unsafe. This chapter delivers the temporary intimacy those chapters built, while the cost is that Gareth Pike had to die before Amy could accept James's touch without waking the heart; chapter 29 uses that apparent safety against Amy and James when tenderness wakes the heart without any cruelty from James.

Opens: Amy Fletcher is inside Gareth Pike's abandoned car near St Philip's, removing the visible fragments and blood Gareth's feeding left behind while Gareth's unlocked phone remains in Amy's possession.

Closes: Amy Fletcher is in Amy's flat with James Murray asleep beside Amy after sustained safe touch, while Khan's message establishes that Gareth Pike's car has connected Amy's dating profile and tacrolimus to another disappearance and Gareth's empty phone case remains unnoticed in Amy's coat.

Risk: The main risk is allowing Amy Fletcher's intimacy with James Murray to feel like emotional absolution or allowing DI Farah Khan's forensic advance to occur outside Amy's viewpoint. Amy must receive genuine physical safety and pleasure because Gareth Pike's feeding has quieted the heart, while Khan's direct contact with Amy must make clear that the same feeding has produced a traceable pattern; neither consequence should cancel the other.

CHAPTER 21

Amy feels relieved and possessive of the ordinary life James is offering because Gareth Pike's feeding has left her body quiet enough to work, touch James, and imagine staying. She avoids examining the relief too closely because explaining it would require admitting what she did to Gareth Pike.

Relief — Amy and James can briefly inhabit a working, affectionate morning because Amy's heart is satiated and James does not demand the truth Amy is withholding. · The reader comes to love Amy and James's shared work in Murray's Night Bakery: they can tease each other, solve a small problem together, and treat access to the bakery as an ordinary part of a possible shared future. Chapter 29 uses that safety against the reader when consensual intimacy and clear requests still wake the heart. The cost is Amy's and James's belief that tenderness, procedure, and good behaviour can keep James safe.

Opens: On the morning of day 56, after several unshown days in which Amy and James have continued seeing each other, Amy comes downstairs from her flat after an uneventful night with James and finds him beginning pastry work in Murray's Night Bakery.

Closes: By the end of the bakery morning on day 56, Amy has accepted James's key and remains in the bakery with James's misshapen dough heart cooling nearby, while Gareth Pike's empty phone case stays concealed in Amy's coat and Amy's unanswered medical pressure remains deferred.

Risk: The main risk is allowing DI Farah Khan's tacrolimus finding, Dr Jonathan Hartley's unanswered urgency, or Gareth Pike's evidence problem to overwhelm the promised relief. The chapter must let Amy and James's ordinary competence feel genuinely enjoyable, while keeping Amy's concealment present only as a quiet structural fault beneath the warmth.

CHAPTER 22

Amy feels dread at seeing the invasion made visible, but also grim satisfaction that Hartley is frightened enough to need her cooperation. The approaching need for uninterrupted tacrolimus forces Amy to use Hartley's concealed procurement decision as leverage rather than accept the inpatient control he offers.

Dread. The scan turns Amy's private bodily danger into proof that an invasive process is advancing toward a place where neither secrecy nor ordinary self-management can plausibly contain it. · Chapter 21 built Amy's belief that a fed heart and James's bakery key could make ordinary life workable. This chapter makes that relief costly by showing that the same body Amy used to work beside James contains measurable invasive tissue that may end the ordinary future before Amy can decide whether she wants it.

Opens: On day 61, Amy Fletcher arrives at Southmead Hospital for an urgent outpatient review with Dr Jonathan Hartley, carrying the black thread from the anonymous liver parcel and needing continued tacrolimus without surrendering herself to the hospital.

Closes: On day 61, Amy Fletcher leaves Southmead with renewed tacrolimus provision and Hartley's inpatient order refused, while her phone still holds evidence against Hartley and the scan has established tooth-bearing tissue advancing toward her lungs.

Risk: Do not let Amy's successful refusal of admission read as a clean triumph or let Hartley's explanation become a medical lecture. The scan must make the spread concrete and frightening, while the prescription victory must feel like Amy has protected the organ that is becoming harder to survive rather than solved the danger.

CHAPTER 23

Amy feels controlled fear and proprietary satisfaction because Khan has assembled a pattern around Amy's dates, improved health and the disappeared men, but cannot turn that pattern into a charge. Amy chooses a medical explanation that protects her freedom while recognizing that Khan understands more than Amy can safely deny.

Tension — Khan's evidence narrows around Amy Fletcher while remaining just short of the proof needed to restrain her, so every measured answer risks becoming either a usable lie or an admission. · Payload: Chapter 21 built Amy Fletcher's apparent recovery, physical ease and possible ordinary future with James Murray as genuine relief. This chapter lets DI Farah Khan treat Amy Fletcher's renewed strength after each disappearance as part of a suspicious pattern, making Amy Fletcher's private use of that recovery feel less like escape and more like evidence.

Opens: On day 65, Amy Fletcher arrives at the police station for the rescheduled recorded account with DI Farah Khan, carrying the knowledge that Hartley's scan has made her body newly vulnerable but not disclosing it.

Closes: Amy Fletcher leaves the police station still legally free after giving Khan no testable account of the deaths, while Khan retains a clear stated suspicion and has turned Amy Fletcher's medical recovery into a line of inquiry that points back toward Southmead.

Risk: Do not let Khan become either a moral spokesperson who condemns Amy Fletcher from outside the story or an approving vigilante ally; Khan must recognize the institutional failures around Dean Sallis and Gareth Pike while insisting that those failures do not transfer decision-making power to Amy Fletcher. Do not force anecdotal dialogue or a monologue into an evidentiary confrontation whose strength is its restraint.

CHAPTER 24

Amy feels frightened by the credible possibility that keeping the heart will kill her, then furious when Hartley treats that risk as a necessary correction to his own concealment. Amy refuses because accepting the explant would place the final value of Amy's life in Hartley's hands.

Fear — Hartley's evidence makes the graft's invasion medically urgent, while his proposed cure requires Amy to accept a serious chance of death at the hands of the man who concealed the danger. · Payload: the calm domestic and sexual safety Amy experienced with James Murray after Gareth Pike's death makes Hartley's demand more costly because Amy is not only being asked to survive surgery but to surrender the independent life and future that the fed heart has briefly made possible.

Opens: Amy Fletcher stands beneath the Southmead entrance canopy after the recorded police interview and opens the new Clinical Correspondence document in Amy's patient portal before going to Dr Jonathan Hartley's consultation room.

Closes: Amy Fletcher leaves Southmead with copied images of Evelyn Hartley's operative notes and a refusal to accept Hartley's explant, while the advancing tissue remains untreated and Hartley's demand has made Amy's survival an explicit point of conflict.

Risk: Do not make Hartley either a purely monstrous murderer or a neutral medical lecturer: the chapter works only if the reader believes that invasive graft tissue truly threatens Amy and future transplant patients, while also seeing that Hartley has made Amy's death acceptable because it would erase evidence of his own family's concealment.

CHAPTER 25

Amy feels relief that James still wants her to remain with him, and resentment that his request for honesty makes her continued control depend on lying more carefully. She wants James's informed commitment but cannot risk giving James the information that would let him refuse her.

Hope — James Murray asks Amy Fletcher to stay and answer rather than treating Amy Fletcher's partial truth as an automatic reason to leave, creating a limited but real possibility of connection after Hartley's threat. · Chapter 21 made the bakery key a practical sign that James imagined Amy inside his ordinary future. Amy returning that same key now makes the shared future feel conditional, while James's request that she stay preserves a narrow hope instead of restoring the earlier ease.

Opens: Four days after refusing Dr Jonathan Hartley's explant recommendation, Amy Fletcher enters Murray’s Night Bakery's production room during James Murray's work night, carrying the unresolved medical evidence and intending to give James Murray the steel bakery key back before he can ask what happened.

Closes: Amy Fletcher remains in Murray’s Night Bakery with James Murray after James Murray asks Amy Fletcher not to disappear before answering, while James Murray holds the returned key and Amy Fletcher still withholds Amy Fletcher's deliberate role in Gareth Pike's death.

Risk: Do not let James Murray’s request that Amy Fletcher stay read as forgiveness, romantic rescue, or consent to the version Amy Fletcher gives him; the chapter works only if James Murray’s tenderness becomes a boundary and Amy Fletcher’s continued omission remains an active corrupt choice.

CHAPTER 26

Amy feels briefly relieved that Nina can understand the scans without forcing her back to Hartley, then feels violated when Nina refuses to treat Amy's secrecy as a condition of friendship. Amy believes Nina's preservation of the evidence is another person deciding that Amy's survival is an acceptable cost.

Tension — Nina Clarke's assistance gives Amy Fletcher a temporary reprieve from Hartley while quietly creating the evidence trail that can be used against Amy Fletcher. · Payload: Chapter 14 established Nina Clarke as someone who can make Amy Fletcher's medication and practical care feel manageable without demanding disclosure. That earlier usefulness makes Amy Fletcher's expectation of obedient technical help credible, and makes Nina Clarke's preservation of evidence feel like a breach of the friendship's private rules.

Opens: On day 75, after leaving Murray's Night Bakery without giving James Murray the full answer about Gareth Pike, Amy Fletcher is back in her flat when Nina Clarke arrives in response to Amy Fletcher finally sending the scan material Nina Clarke had been requesting.

Closes: On day 75, Nina Clarke leaves Amy Fletcher's flat with copies of Amy Fletcher's scans and Gareth Pike's messages, having delayed contact with Hartley only for the night and refused Amy Fletcher any promise that the evidence will remain secret.

Risk: Do not turn Nina Clarke into either a medical expert or an uncomplicated betrayer. Nina Clarke must understand the practical evidence well enough to act, but Nina Clarke's decision must remain visibly limited, frightened, and owned as a choice that harms Amy Fletcher's trust rather than a clean rescue.

CHAPTER 27

Amy feels relief at identifying the person who used her hunger to control her, followed by cold satisfaction when Hartley's fear gives her a way to control him instead. Hartley's admission confirms that even his apparent care was conducted without her consent and outside any system that could restrain him.

Dread — Hartley's explanation makes the parcels understandable as medical panic, but Amy's successful coercion turns that panic into protection for her continued predation. · Payload chapter: Hartley's private containment makes the ordinary safety Amy and James attempt in chapter 28 more fragile, because Amy enters that domestic interval newly convinced that procedure and leverage can keep the heart contained.

Opens: On day 78, Amy leaves her flat above Murray's Night Bakery and goes to Southmead carrying the black silk knot and parcel wrapping to confront Hartley about the liver deliveries.

Closes: On day 78, Amy leaves Southmead with Hartley still pressing for explantation but privately committed to preserve her outpatient medication and conceal his parcel intervention, while Amy holds the evidence that can expose him if he breaks that arrangement.

Risk: Do not let Hartley's admission become either a full medical explanation or an absolution. The scene must retain the horror that he treated Amy's flat and body as an unconsenting extension of his clinical management, while making his fear of another feeding credible enough that Amy's leverage feels dangerous rather than convenient.

CHAPTER 28

Amy feels relieved by being useful beside James and wanted without being treated as fragile. She also feels falsely secure because James's explicit boundaries let her believe that agreed procedure can contain the heart as well as it can contain ordinary fear.

Relief — Amy and James complete the hotel work successfully, enjoy each other's competence, and make a hopeful agreement about intimacy after the dread of Hartley's confession. · The reader comes to love Amy and James as competent partners who can complete a demanding hotel order, disagree without cruelty, and make explicit requests feel like a workable shared practice. Chapter 29 uses that safety against the reader when James follows every request and stops immediately, but the heart wakes anyway. The cost is that their carefully negotiated consent procedure cannot protect James from Amy's fear of losing him.

Opens: On day 80, Amy Fletcher joins James Murray in Murray's Night Bakery as James begins the production and packing work for the Wetherby Hotel trial order, two days after Amy Fletcher left Southmead with Hartley's private promises.

Closes: By the end of day 80, Amy Fletcher and James Murray have completed the Wetherby Hotel order and agreed that they can try intimacy again only through explicit requests and immediate stopping, while Amy Fletcher still withholds Hartley's confession and Nina Clarke's copied evidence.

Risk: Do not let Amy and James solve the relationship problem or make the warmth ironic at every moment; the bakery success, their humour, and James's stated desire must feel genuinely restorative enough that chapter 29's failure of their consent procedure hurts.

CHAPTER 29

Amy Fletcher begins with hopeful control because James Murray has accepted her stop rule without demanding more disclosure. When the second pulse intensifies around James Murray's tenderness, Amy Fletcher feels immediate terror and then shame because she can no longer believe that James Murray's behaviour determines whether he is safe.

Fear — James Murray's careful consent fails to protect him because Amy Fletcher's desire and fear of losing James Murray satisfy the graft's trigger without any cruelty from James Murray. · Chapter 28 built the belief that Amy Fletcher and James Murray could use competence, explicit requests and immediate stopping to make closeness workable. This chapter makes that belief costly by proving that James Murray's careful consent cannot prevent Amy Fletcher's fear of losing him from waking the graft.

Opens: On the day after the Wetherby production, Amy Fletcher and James Murray are alone in Amy Fletcher's flat after James Murray has deliberately returned from the bakery only because Amy Fletcher invited him to try the intimacy they discussed.

Closes: James Murray has left Amy Fletcher's flat at Amy Fletcher's insistence, believing Amy Fletcher panicked at being rejected, while Amy Fletcher remains alone with the renewed second pulse, newly afraid of James Murray's proximity and unwilling to tell James Murray why.

Risk: Do not let James Murray make a mistake, apply pressure, ignore a boundary or become sexually ambiguous in order to create the horror. The chapter fails if Amy Fletcher's fear can still be explained as a response to misconduct rather than as the collapse of Amy Fletcher's rule that only cruel men awaken the graft.

CHAPTER 30

Amy feels controlled alarm rather than panic because the new growth is visibly consuming her body, but Hartley's records offer a method that might let her preserve James without surrendering the heart. Amy treats learning the method as a way to retain authority over the cost of her survival.

Tension — Amy Fletcher gains a usable method at the same moment she learns its severe bodily cost and its strict limits, leaving every apparent solution conditional. · This is payload. Chapter 28 made shared procedure, clear requests and skilled work feel like a workable way for Amy Fletcher and James Murray to build a life; chapter 29 proved that consent cannot control the graft, and chapter 30 replaces that hopeful procedure with a private method that requires Amy Fletcher to injure herself alone.

Opens: On day 82, Amy Fletcher is alone in her bedroom above Murray's Night Bakery after James Murray leaves, with the flat door bolted, James Murray's untouched water glass in the kitchen, and the damp biopsy dressing lifting over renewed movement beneath her skin.

Closes: Later on day 82, Amy Fletcher leaves Southmead without signing consent for Dr Jonathan Hartley's explant, carrying Evelyn Hartley's curved ligature needle and knowing that the graft may be restrained only by a temporary stitch driven through her own opened chest.

Risk: Do not make the widow's hitch feel like a newly discovered solution or stage the consultation as a climactic confrontation. The chapter must hold at tense, practical anticipation: Amy Fletcher obtains a frightening capability, but the bodily injury, temporary effect, and continuing spread must remain concrete enough that the reader cannot mistake it for a cure.

CHAPTER 31

Amy feels determined relief at the prospect of restoring a rule that could keep James safe, then sick recognition when she realizes that Oliver Venn's fear exists because she has deliberately produced it. Amy still permits the feeding because admitting that distinction would require giving up the power she has built around the graft.

Dread — Amy deliberately creates Oliver Venn's fear in order to awaken the graft, so the feeding removes the last credible distance between Amy's appetite and the heart's violence. · Payload: Chapter 28 built the possibility that Amy Fletcher and James Murray could create safety through explicit stop requests and practical cooperation; Amy's decision to manufacture Oliver Venn's fear destroys Amy's private belief that another selected feeding can protect James without making Amy the active source of danger.

Opens: On day 83, Amy Fletcher is back in Bristol after leaving Southmead without consenting to explantation, carrying the stolen curved ligature needle and preparing to meet Oliver Venn through the dating account while the graft continues to damage her chest.

Closes: Late on day 83, Amy Fletcher leaves the site of Oliver Venn's completed feeding with the graft temporarily quiet, Nina Clarke's unanswered contact still waiting on Amy's phone, and Amy unable to deny that Oliver's terror was created by Amy.

Risk: Do not let Oliver Venn's prior collapsed case turn his death into uncomplicated vigilante satisfaction. Oliver may be threatening and may have escaped accountability, but the chapter must show that Amy could have let Oliver leave and instead produces the fear needed to kill him; otherwise the corruption-arc payoff and the threat-rule payoff both fail.

CHAPTER 32

Amy feels violated and furious because Nina has brought Farah Khan into Amy's flat and made Amy's wound, medical history, and concealed evidence available to an authority Amy cannot control. Under the anger is abandonment fear: Nina has chosen intervention over Amy's refusal, and Amy experiences that choice as confirmation that her body becomes public property whenever she is difficult to manage.

Fear — Nina's intervention puts Amy's closest friend beside an activated graft, and the reader can see the physical danger before Amy can accept that Nina belongs inside it. · This is payload. Chapter 28 built the flat and bakery routine into a temporary shared domestic space where Amy could believe practical care and agreed boundaries made intimacy safe; Khan's photographs and Nina's copied evidence turn the same private life into an evidentiary scene, and the cost is Amy's belief that Nina's care remains separate from surveillance or restraint.

Opens: On the morning after Oliver Venn's feeding, Amy reaches the flat above Murray's Night Bakery injured, blood-stained, and still carrying Caroline Cors's curved ligature needle, intending to remove evidence before anyone can enter.

Closes: Later that morning, Khan has left with photographic corroboration, but Nina remains in Amy's flat despite Amy's demand for solitude as Amy's sternotomy seam begins reopening and the graft's second pulse gathers force.

Risk: Do not turn Nina into a secretly triumphant informant or Khan into an all-powerful police threat: Nina must own the injury of intervening, Khan must gain only limited corroboration, and Amy's anger must remain emotionally credible even while the reader fears what Amy may do next. Also do not depict literal raw meat in the flat, because the established liver was eaten; use the parcel wrapping and residue.

CHAPTER 33

Amy feels terrified, ashamed and cornered because Nina's refusal to leave turns Amy's fear of abandonment into the trigger Amy has been trying to deny. After Nina is injured, Amy believes that her secrecy has destroyed both Nina's safety and James's ability to want her.

Dread — Amy's closest friend is injured by the hunger while James sees Amy fail to stop it, making Amy's private system of selection and control visibly untenable. · Chapter 28 built the bakery as a place where Amy and James could make work, touch and stopping rules function together. This chapter uses that investment against them when James leaves his production work to answer violence upstairs and discovers that Amy's private rules cannot keep Nina safe.

Opens: On the afternoon of day 84 in Amy Fletcher's kitchen above Murray's Night Bakery, Nina Clarke approaches Amy Fletcher's reopened, bleeding sternotomy wound with a clean towel and sealed dressing after DI Farah Khan has left.

Closes: In Amy Fletcher's flat later that afternoon, James Murray has pulled the injured Nina Clarke clear of Amy Fletcher's opened chest and is treating Nina's torn shoulder while Amy remains bloodied, keeps the curved ligature needle concealed, and believes neither Nina nor James can remain hers after what James has seen.

Risk: Do not render Nina Clarke's mauling as an arbitrary monster attack that absolves Amy Fletcher, or as a clean act of conscious murder that breaks the threat's established limits. The chapter must keep both truths visible: Amy cannot command the graft after the threshold, and Amy still makes the desperate, self-protective choice to hold Nina in a position Amy believes she can manage.

CHAPTER 34

Amy feels trapped and unexpectedly relieved because Nina, Khan and Hartley can each name a consequence of Amy's choices without being able to force the final medical decision. Amy treats the remaining freedom as proof that she can still arrange the outcome, even after Nina's injury has disproved her private rules.

Tension — Amy is surrounded by people who can name the damage she has caused, but none of them can yet take the next choice from her. · This is a payload chapter. Chapter 28 built the possibility that James and Amy could create a workable private life through shared bakery work and direct honesty; James's request that Amy accept Hartley's operation now makes that domestic future dependent on Amy giving up the heart she has chosen to preserve.

Opens: On day 88, Amy Fletcher is under medical observation at Southmead after the emergency response to Nina Clarke's shoulder injury, while Nina survives nearby, James Murray remains present, and DI Farah Khan returns to speak with them.

Closes: Amy Fletcher leaves the immediate ward arrangement with the curved ligature needle still concealed and has told James Murray that Amy Fletcher will accept Hartley's operation after one final night outside the hospital; Hartley's urgent admission and explantation plan remain standing, Nina Clarke will speak accurately to Khan, and James Murray believes Amy Fletcher has chosen surgery.

Risk: Do not let Khan's evidential explanation become either a procedural lecture or an exoneration of Amy; each limitation must land as a concrete reason Amy remains free, while Nina's testimony, Hartley's compromised handling and James's knowledge keep the moral pressure immediate. Amy's stated final night before admission must remain undated so chapter 35 can occur on day 91 without a timing contradiction.

CHAPTER 35

Amy feels desperate to keep James alive and fiercely determined not to let James, Hartley, or the hospital take the heart from her. The pain of stitching herself becomes acceptable to Amy because it lets Amy save James while preserving the power to decide what happens next.

Fear. Amy must mutilate herself while the graft is actively pulling James toward her chest, and the successful rescue becomes frightening because Amy immediately chooses to keep the danger alive. · Chapter 28 built the pleasure of Amy and James functioning as a capable pair in Murray's Night Bakery, completing the Wetherby order and imagining ordinary shared work. This chapter makes that earlier competence hurt because James chooses to abandon the room and routine that had begun to make their future seem practical.

Opens: On day 91, Amy Fletcher and James Murray are in Amy's flat above Murray's Night Bakery after Amy has delayed the Southmead admission that James believes Amy accepted, with the curved ligature needle still concealed in Amy's returned belongings.

Closes: By the end of day 91, Amy Fletcher has a fresh black widow's hitch holding her reopened sternotomy seam temporarily closed, has refused Dr Jonathan Hartley's explantation after returning to Southmead, and is alone above Murray's Night Bakery after James Murray leaves the bakery room beneath her flat and asks Amy not to follow; Hartley's urgent operation remains medically available but is no longer accepted by Amy.

Risk: Do not let Amy's self-mutilation read as cleansing redemption or as a medical trick that solves the threat; the scene must make James's rescue real, the pain and bodily damage concrete, and Amy's later refusal of explantation unmistakably self-serving.

CHAPTER 36

Amy feels physically sore but satisfied by the return of routine, and she treats the healing hitch, the consultant transfer, and James's absence as proof that she can keep herself alive without surrendering the heart. Her confidence depends on treating temporary restraint and selected targets as enough control.

Dread — Amy Fletcher's quiet competence makes the ending frightening because every ordinary act of recovery now prepares her to choose another victim. · This is payload. Chapter 28 built the pleasure of Amy Fletcher and James Murray sharing work, medication alarms, bakery timing, and a plausible domestic future; the empty bakery room and James's missing shift routine make Amy's competent return to private ritual cost the reader the life she has chosen not to keep.

Opens: Amy Fletcher, healing from the widow's hitch and alone above Murray's Night Bakery after James Murray's departure, attends a Southmead follow-up arranged under another consultant while Dr Jonathan Hartley remains excluded from her immediate care.

Closes: Amy Fletcher stands dressed for another date in her flat above Murray's Night Bakery, takes tacrolimus when KEEP IT sounds, leaves the black-stitched scar uncovered in the mirror, and leaves to meet the man whose collapsed assault case DI Farah Khan described; raw meat remains in her refrigerator and the hitch remains only temporarily secure.

Risk: Do not make Amy Fletcher's transfer, healing, or medication routine read as recovery, absolution, or a stable solution. The chapter must remain quiet enough for the aftermath of James Murray's injury and departure to register, while making Amy's self-management visibly inseparable from her decision to hunt again.

PART XVI

Threads and Promises

Every question the book opens, and where each one is answered.

MYSTERIES

Who is leaving warm raw meat tied with black surgical thread outside Amy's door?	paid-off · first clue ch12 · payoff ch27
What killed Lewis Pritchard, and did Amy consciously participate?	paid-off · first clue ch4 · payoff ch11
Why does Caroline Cors's donor heart bear an older surgical scar?	paid-off · first clue ch9 · payoff ch17
Why did Hartley transplant an organ he knew was abnormal?	paid-off · first clue ch9 · payoff ch24
Can the heart be made to spare James once it begins feeding?	paid-off · first clue ch16 · payoff ch35

PLANTED AND PAID

ARCHIVED	Amy discovering that firm pressure beneath the lower end of her scar briefly slows the second pulse in chapter 16
ARCHIVED	A second pulse that appears during pleasure rather than exertion in chapter 4
ARCHIVED	Raw meat arriving warm enough to suggest it travelled from a laboratory in chapter 13
ARCHIVED	Hartley's careful removal of black thread from Amy's biopsy dressing in chapter 9
ARCHIVED	James describing a scored loaf as choosing where the pressure escapes in chapter 12
ARCHIVED	Nina noticing Amy smile before Felix Rowe says anything cruel in chapter 27

CALLBACKS

James's remark that dough opens where it has been scored	plant ch10–12 · payoff ch34–34

James asking whether Amy wants the bakery light left on	plant ch10–15 · payoff ch34–34
Amy saying she is tired of people carrying things for her	plant ch2–6 · payoff ch29–29
Nina calling Amy's medication alarm her smallest tyrant	plant ch1–5 · payoff ch33–33

LEFT OPEN ON PURPOSE

AMY'S DANGEROUS POSTPONEMENT

Amy has rejected definitive treatment after transferring her care. This is an active moral and medical choice rather than an unanswered question about what she wants.

Sequel potential: A later story can examine what agency means when the spreading tissue changes the available choices and Amy can no longer pretend that delay affects only her.

THE BOUNDARY JAMES KEPT

James remains separated from Amy after refusing to support her decision against surgery. Their love is real, but it has not overridden his right to protect himself.

Sequel potential: Their lives may intersect again under changed conditions, but reconciliation would require new conduct and accountability rather than a romantic declaration.

NINA'S BOUNDED LOYALTY

Nina still cares about Amy but has moved from protective secrecy toward independent testimony and limited contact.

Sequel potential: Nina can become a witness, advocate or protagonist forced to decide whether helping Amy means preserving her life, stopping her violence or exposing institutional wrongdoing.

THE TRANSPLANT UNIT'S RECKONING

Hartley's authority has been reduced, but the programme still faces the consequences of concealed risk, compromised records and evidence that could frighten patients away from legitimate treatment.

Sequel potential: A disclosure crisis could place innocent recipients, clinicians and whistleblowers in conflict without requiring Amy's original case to be relitigated as a mystery.

FARAH'S UNEASY JUSTICE

Farah understands why the dead men escaped ordinary accountability, yet she remains committed to stopping killings that create further victims and destroy evidence.

Sequel potential: A new case can force her to police both predatory men and institutions tempted to turn anomalous violence into a useful secret.

THE EARLIER SURGICAL LINEAGE

Caroline was not the beginning of the appetite, and Evelyn Hartley's procedure belongs to an older medical history. The first story resolves what happened to Caroline's heart without exhausting that history.

Sequel potential: Archived operations, previous hosts or another preserved organ can support a separate story in another period or city.

SURVIVAL WITHOUT INNOCENCE

Amy has stopped apologising for wanting to live, but she has not solved whether survival purchased through chosen violence can be defended.

Sequel potential: Future stories can confront characters whose right to life is genuine even when the means sustaining that life harm others.

THE EVIDENCE IN LIVING TISSUE

The anomaly has produced biopsy, dental and pharmacological evidence that can be studied, suppressed, exploited or misunderstood.

Sequel potential: Medical institutions, private researchers or law enforcement may pursue the tissue for incompatible reasons, creating new forms of danger beyond Amy's individual hunger.

PART XVII

Chapter Summaries

The book as written, chapter by chapter.

CHAPTER 1 Keep It

2,306 words

Amy moves her belongings into the flat above Murray's Night Bakery, carrying medication, bedding and flour despite exertion-related tremors and fatigue. She meets James, accepts his practical help and a misshapen bread roll, takes her tacrolimus on time, and privately relabels her medication alarm KEEP IT; the chapter ends with Amy choosing to remain in the new flat while beginning to accept its connection to the bakery.

CHAPTER 2 The Dark Batch

2,463 words

Amy returns the damaged flour sack to James at the bakery, but stays to taste-test burnt croissants and watch him work. She learns about his hopes for daytime bakery hours and accepts an invitation to return at 8:15 the next morning, while an intense, unspoken sexual attraction develops between them.

CHAPTER 3 Small Precautions

2,992 words

Amy undergoes an unsedated endomyocardial biopsy at Southmead, experiences brief rhythm disturbances and renewed bleeding, and notices that an excised fragment of her heart contracts in saline. Hartley then finds an older ridge and black filament beneath the documented transplant sutures, conceals the image behind a reassuring explanation, and orders extra blood tests; Amy leaves with a stolen duplicate image and heightened suspicion.

CHAPTER 4 No Immediate Action

2,833 words

Amy hosts Nina after her biopsy, conceals the duplicate cardiac image, and uses its procurement details to identify the donor as Caroline Cors, who died at Southmead shortly before retrieval. Research reveals Caroline was linked to five disappearances, while Amy experiences a second pulse during pleasure and secretly plans to visit Caroline's former address.

CHAPTER 5 The Visible Edge

2,842 words

Amy abandons her planned unauthorized visit to Caroline Cors's address, hides the stolen heart image, and accepts a date with Lewis Pritchard. She discloses her transplant, experiences desire without the feared cardiac failure, and ends by entering Lewis's flat, while James remains an emotionally significant but uninformed presence.

CHAPTER 6 Hard Tissue

3,122 words

Amy and Lewis have sex in his Bedminster flat, and Amy experiences sustained exertion and orgasm without her former cardiac symptoms. After Lewis insults her scar and implies she used him, a second pulse makes the scar split open, revealing a black filament; Amy refuses medical help and is pulled backward into the room as she blacks out.

CHAPTER 7 Aftercare

4,941 words

Amy wakes to find that her abnormal heart has consumed and killed Lewis, then conceals his remains and cleans the flat instead of calling emergency services. She returns home, lies to Nina, and finally takes her overdue tacrolimus while the bloodied laundry bag leaks behind her.

CHAPTER 8 Second Bake

1,551 words

Amy suppresses her physical reaction to bacon, eats bread, takes her overdue medication, and continues concealing Lewis's death while preparing to investigate Caroline Cors's address. She joins James in repairing failed croissants, and his careful response to her bruised wrist deepens their mutual attraction; she ends the chapter choosing to remain beside him as daylight arrives.

CHAPTER 9 Last Known

2,898 words

DI Farah Khan interviews Amy about Lewis Pritchard's disappearance, and Amy gives a carefully constructed account that conceals his death while admitting their sexual encounter and his violence toward her. Khan notices the bloodied laundry bag, Amy improvises a false explanation, and Amy learns that Lewis has no known prior assault reports; a transplant-unit voicemail also summons her over an unexpected biopsy finding. The chapter ends with police scrutiny, medical uncertainty, and the evidence of Lewis's death still exposed in Amy's flat.

CHAPTER 10 Foreign Body

3,443 words

Amy learns that the fifth biopsy specimen contains a 0.7 mm fragment of human dental enamel embedded in living myocardium, with fibrosis around it, and that the finding predates her encounter with Lewis. Hartley recommends admission and conceals the fifth block and slide after Amy refuses, leaving Amy more certain that the abnormal heart and Caroline Cors's history are connected, while Hartley's controlled secrecy becomes an immediate threat.

CHAPTER 11 Poor Tolerance

3,342 words

Amy goes on a date with Dean Sallis, is drugged or otherwise incapacitated by the drink, and is taken to his locked flat, where he attempts to assault her. Her abnormal heart opens her chest and deliberately consumes Dean while Amy consciously positions him for feeding, after which she conceals the evidence and returns home. Nina finds her injured and insists on staying involved, while Amy ends the chapter stronger, terrified, and committed to hiding what she has become.

CHAPTER 12 The Quiet Interval

1,571 words

Amy returns to the bakery after Dean's death, and James cleans and redresses her cut hand while recognizing that the date became dangerous. James and Amy kiss, but a second pulse beneath Amy's sternum interrupts them; after he immediately gives her space, she chooses to resume the kiss, and the pulse does not recur.

CHAPTER 13 Therapeutic Range

3,413 words

Amy gives DI Khan a carefully limited account of Dean's death, but Khan reveals that Dean's blood contains tacrolimus and that two women previously reported similar drugging, memory loss, and coercive behaviour. Amy leaves unarrested, returns home, and begins investigating dating-app identities that might connect to Dean's other victims while carrying the new fear that her medication entered Dean through her.

CHAPTER 14 House Meat

2,607 words

Amy receives a warm, unlabeled parcel containing raw liver tied with black thread, then cooks and eats it after recognising the sender's implied test. The second pulse quiets and her ordinary heartbeat resumes, but the hunger remains; comparing the thread with her heart image points the mystery toward the locked front door.

CHAPTER 15 Trade Terms

2,888 words

Amy accompanies James to deliver Murray's Night Bakery samples to the Wetherby and helps him secure a four-weekend trial on terms that preserve the bakery's name and overnight schedule. Back at the bakery, Amy and James kiss, but the second rhythm returns and frightens her; she stops, asks him to leave, and tells him to come upstairs another night when she asks.

CHAPTER 16 Domestic Provision

2,774 words

Amy breaks into Caroline Cors's Clifton Wood Road house and finds records linking Caroline to Richard Penrose, Simon Vickery, and Hugh Redman, blood staining, postoperative supplies, and an invoice naming Edith Salter and Evelyn Hartley. She photographs the evidence, declines Farah Khan's call, and leaves for Southmead after discovering that firm pressure can suppress the second rhythm. The chapter ends with Amy more determined to investigate Caroline's surgical history while fearing police scrutiny and the heart's growing responsiveness to restraint.

CHAPTER 17 Recipient Side

3,575 words

Amy secretly accesses Caroline Cors's restricted donor file at Southmead and discovers that Caroline's heart had an undocumented prior intervention, including the same healed circumferential scarring, and that Hartley knowingly approved the heart for transplant. Hartley confronts her and reveals that the abnormal matrix now extends through the surgical join into Amy's own tissue; Amy refuses examination or admission and leaves with a firm new line beneath her biopsy dressing while Nina travels to meet her.

CHAPTER 18 The Widow’s Hitch

4,560 words

Amy visits Edith Salter, who treats the biopsy wound and confirms that the black silk is part of a recurring restraint used by Evelyn Hartley on Caroline Cors's abnormal heart. Edith reveals that the donor heart already carried an older surgical scar and filament, that Evelyn repeatedly tied the growing tissue to Caroline's sternum, and that Caroline used feeding and selected victims to obtain temporary relief. Amy leaves with a fresh dressing, refuses hospital care, and decides to target Gareth Pike.

CHAPTER 19 Reasonable Force

4,843 words

Amy arranged and attended a date with Gareth Pike, then confronted him about allegations that he threatened women and misused police systems. When Gareth assaulted and threatened her in his car, the abnormal heart opened her chest and consumed him; Amy recovered his phone and found messages corroborating the allegations, then left the blood-soaked vehicle with the heart still active and a medication dose taken. The chapter ended with Amy recognizing that the heart's response had been delayed and deciding she must account for that delay in future encounters.

CHAPTER 20 Accessible Surfaces

3,869 words

Amy kills Gareth Pike in his car, removes some remains, cleans the vehicle, leaves Gareth's unlocked phone for DI Khan, and returns injured to the bakery. James treats her bite and wound, then they have sex without the abnormal second pulse; the chapter ends with Khan warning that Gareth's messages connect him to Amy's dating profile and that tacrolimus was found in the car.

CHAPTER 21 Useful Shapes

1,330 words

Amy and James work together on the Wetherby pastry order, settling into an unspoken domestic and professional rhythm while their relationship remains physically uncomplicated. Khan summons Amy for a recorded account about Gareth Pike and the tacrolimus evidence; Amy agrees to attend tomorrow, hides Gareth's phone case, and accepts a key to the bakery. The chapter ends with growing intimacy and trust between Amy and James set against Amy's concealed evidence and intensifying police pressure.

CHAPTER 22 Lower Fields

2,835 words

Amy underwent urgent imaging at Southmead after confronting Hartley over tacrolimus and the concealed pathology specimen. The scan showed rapid progression of the abnormal tissue through her own chest, with at least eight mineralised tooth-like structures extending towards but not invading the left lung; Amy refused admission but secured a twenty-eight-day tacrolimus supply and twice-weekly monitoring. She left with the evidence photographed and the highest tooth-like projection turned towards the lung.

CHAPTER 23 Material Changes

2,571 words

Amy voluntarily attends Khan's recorded interview and refuses to explain the deaths, the assaults, or the tacrolimus evidence, while Khan presents stronger links between Amy, Dean, Gareth, and the preserved dating-app account. Khan reveals that Gareth's blood appears tacrolimus-positive and intends to seek Amy's medical chronology; Amy leaves with her medication supply intact but finds a new clinical document waiting on the Southmead portal.

CHAPTER 24 Corrective Surgery

3,052 words

Amy returns to Southmead after reading the final scan, learns that the abnormal tissue is advancing toward the lung, and refuses Hartley's recommendation for explantation despite the risk of rapid deterioration. Hartley admits he knew Caroline's heart came from an unauthorised transplant performed by his mother, accepted it anyway, and protected both himself and the programme; Amy leaves with copied procedural notes, renewed tacrolimus, and a deeper refusal to trust him.

CHAPTER 25 Holding Temperature

2,708 words

Amy returns James's bakery key after refusing Hartley's recommendation to remove her transplanted heart, carrying a renewed month of tacrolimus while considering leaving. In the bakery she reveals that the abnormal tissue consumed Dean and Gareth, admits she selected Gareth despite knowing the allegations against him, and finally stays when James asks why Gareth, leaving their relationship more honest but far more dangerous.

CHAPTER 26 Duplicate Set

2,805 words

Nina visits Amy, reviews the worsening scan and learns that explantation could kill Amy, then discovers Amy's hidden evidence: Gareth's phone, his threats to four women, the black silk knot and the liver parcel. Nina photographs the evidence despite Amy's objections and leaves with copies of Gareth's messages, promising to call tomorrow but refusing to ask permission before acting. The chapter ends with Amy medically threatened, exposed to Nina, and afraid that Nina's decision to preserve the evidence may destroy her.

CHAPTER 27 Temporary Suppressant

3,382 words

Amy confronts Hartley at Southmead with the liver parcel, black silk knot, operative notes, and procurement evidence. Hartley admits he bought and delivered the liver, tied it with the silk, checked whether Amy consumed it, and knew it temporarily suppressed the abnormal activity; Amy forces commitments to continue tacrolimus and outpatient care without coercive admission. She leaves with the evidence, while Nina's dead-man switch and Hartley's admission make their conflict irreversible.

CHAPTER 28 Bench Rest

1,330 words

Amy and James complete the Wetherby croissant order through practical collaboration, then discuss Amy's worsening condition and the danger of withholding changes from him. Amy reveals that the abnormal tissue consumed Dean and Gareth and agrees to stop immediately if either of them asks, ending with James respecting her command to step away before she chooses to resume intimacy.

CHAPTER 29 Contact Pressure

3,726 words

Amy invites James upstairs and they have consensual sex under their agreed stop rule; her abnormal tissue remains inactive through orgasm but then begins pulsing and forms tooth-like pressure beneath her sternum. James stops and obeys her demands to leave, but Amy experiences his compliance as abandonment, lies about the worsening dressing, and sends him away while the abnormal rhythm persists.

CHAPTER 30 Locking Pass

3,301 words

Amy's biopsy tract opens and black silk emerges as the abnormal graft advances through her breast tissue toward her lung. At Southmead, Hartley confirms that Evelyn's restraint method used silk through breast tissue and sternum, shows Amy the curved ligature needle, and urges explantation; Amy refuses admission, steals the needle, and leaves with the means to attempt the failed procedure herself.

CHAPTER 31 Single Occupancy

4,169 words

Amy lures Oliver Venn to a serviced flat to test whether fear will activate the graft, confronts him about the sexual-assault complaint, and blocks his exit when he tries to leave. The graft consumes Oliver while Amy consciously aligns his body and refuses to use Hartley's needle to restrain it; she leaves the blood-soaked room injured, ignores Nina's calls, and returns by bus toward the bakery.

CHAPTER 32 Plain Sight

2,856 words

Nina brought DI Farah Khan into Amy's flat after Amy stopped answering, allowing Khan to photograph the visible medical and blood evidence. Amy's wound reopened dramatically and the abnormal tissue pulsed toward Nina while Amy refused medical help; Khan left, but Nina stayed and moved to dress the wound despite Amy ordering her out.

CHAPTER 33 Lateral Force

3,476 words

Amy's reopened sternotomy graft attaches to Nina's right shoulder and pulls tissue into Amy's chest. James arrives, witnesses the predatory tissue, and forcibly separates Nina, leaving Nina severely injured while Amy's wound re-closes; James calls emergency services and places himself between them. Amy conceals the ligature needle as paramedics approach, ending the chapter in a rupture of trust and imminent medical and police intervention.

CHAPTER 34 Present Account

3,404 words

Amy is treated in hospital after the graft tears tissue from Nina's shoulder, while James and Nina give DI Khan accounts of the attack. Amy confesses to James that she deliberately enabled the deaths of Lewis, Dean, Gareth, and Oliver, and agrees to Hartley's operation after James confronts her, but she leaves for one night with the stolen needle still concealed. James remains loving but deeply distrustful, while Nina offers continued contact without minimizing what happened.

CHAPTER 35 Load-Bearing

3,613 words

Amy and James leave the hospital for one night, but the graft activates during sex, attaches to James, and begins tearing into his abdomen. Amy uses Evelyn's needle, black silk, and widow's hitch to sever the attachment and temporarily restrain the graft, then refuses Hartley's proposed explantation at Southmead. James leaves the bakery after telling Amy he loves her but cannot remain while she decides whether he is worth giving up the operation for.

CHAPTER 36 Maintenance

3,507 words

Amy attends Southmead, where Dr Ruth Lennox takes over her follow-up, confirms that the widow's hitch is cutting through viable breast tissue, and continues tacrolimus without requiring surgery. Nina gives Khan a fuller account while maintaining limited contact with Amy, and Amy leaves the hospital to meet Mark Hales, carrying spare black silk and leaving the hitch exposed. The chapter ends with Amy choosing further danger and concealment over explantation, despite a fresh episode of tissue movement and bleeding.

PART XVIII

Timeline

The order things happen in, including what happened before page one.

WEEK 2 First feeding — ch 7

Amy wakes after Lewis Pritchard's death.

WEEK 5 Second feeding — ch 11

Dean Sallis drugs Amy and reveals the repeatable trigger.

WEEK 9 Central climax — ch 18

Edith identifies the inherited restraint around the heart.

WEEK 9 Gareth Pike's death — ch 19

Amy deliberately summons the heart for the first time.

WEEK 14 Nina attacked — ch 33

The hunger breaks Amy's chosen victim category.

WEEK 15 James spared — ch 35

Amy applies the widow's hitch to herself.

WEEK 16 Final date — ch 36

Amy resumes hunting while the stitch heals.

SPAN	four months
SHAPE	linear

PART XIX

The Writing Brief

What the prose was actually written from, every chapter.

WHAT KIND OF BOOK THIS IS

A first-person, past-tense body-horror novel following twenty-three-year-old Amy Fletcher through rain-dark Bristol after a heart transplant. Its register is intimate, physical and exact: clinical discipline rubbing against appetite, shame, sex and newly exhilarating strength. The book grieves the way illness turns a person into a cost others calculate, while distrusting any freedom built on deciding whose body should pay instead. Tenderness increases the danger rather than cleansing it; violence is never a punchline, and neither cruel men nor failed institutions make killing uncomplicated fun.

THE RULES

Amy narrates every chapter in first-person past tense. Facts outside her presence can reach the reader only through witnessed behaviour, physical consequences or what other people choose to tell her.

Story time moves forward without flashback chapters or repeated scenes. Dates, ages and elapsed time appear only where a character would naturally mention them. Do not open chapters on time stamps or have characters count time merely to establish chronology.

Amy takes tacrolimus on a fixed twice-daily schedule. Delays are measured in hours, never casual missed days. Tacrolimus must remain in Amy's body on schedule; missed doses can turn strength into fatigue, arrhythmia and breathlessness within days. Taking it leaves tremor, bruising and vulnerability to infection. Its chemical presence is specific enough for toxicology to identify if it reaches somewhere it should not be.

Donor identity and transplant records are restricted. Breaching them can cost staff their work and place Southmead's other recipients under suspicion.

The transplanted heart can answer desire that curdles into humiliation or fear with physical hunger. Amy can approach danger and select whom she approaches, but once that bodily change passes a threshold, intention no longer governs force. It is not Caroline speaking through her. Whatever Amy's body does leaves ordinary blood, tissue and trace evidence behind.

Sexual-offence reports become video-recorded accounts, forensic searches and long waits for a charging decision. Documented targeting can establish a pattern without establishing a prosecutable assault. Police and CPS processes remain slow; patterns of suspicion do not produce instant charging decisions.

Transplant survival is not a clean second chance. It remains tethered to medication alarms, blood levels, follow-up care and the possibility that the body may reject what saved it.

THE PLACES

Amy's flat above Murray's Night Bakery: Amy's first private territory after years in Julie's spare room. Warm yeast rises through cold floorboards before dawn, and the bakery mixer sends a low vibration through her bed. Amber streetlight is trapped by rain on the sash windows. A single flour-gritted stair serves the flat; flour-fine grit coats its rail, and every visitor, stain and parcel is difficult to hide.

Murray's Night Bakery: Below street level, with burnt flour on the oven floor and butter and hot metal gathering in the basement heat. Cooling racks tick as they contract. A yellow work light leaves the shopfront glass black. The bakery runs on reversed hours, active while most neighbours are absent.

Southmead Transplant Unit: Blue-white examination light flattens bruises and makes them look deliberate. Vinyl chairs grip the backs of bare legs. Alcohol hand rub overlays the mineral smell of radiator heat. Muted monitor tones leak through closed curtains.

Caroline Cors's Cliftonwood house: A steep, under-occupied limestone house. Damp limestone cold persists behind expensive wallpaper. Footsteps are magnified by the steep empty stairwell. Gorge wind worries the old window catches. Traffic can be heard below without any easy road toward it. Difficult road access makes every entry conspicuous.

Cliftonwood: A pinched slope below Clifton, entered by Ambra Vale or Clifton Wood Road. Damp steps and footpaths cross it more easily than cars. Rain darkens the limestone terraces; gradients, overlooking houses, difficult roads and very few exits make movement visible. Traffic is heard more easily than reached.

Bristol streets: Seen through wet glass, with amber streetlight caught in sash windows, black shopfronts and limestone darkened by rain.

HOW PEOPLE TALK AND BEHAVE HERE

Speech is contemporary Bristol English without decorative dialect spelling. Class appears through restraint, euphemism, professional vocabulary and what a speaker assumes need not be explained.

Southmead speaks of transplant as a "second chance," as though survival begins cleanly once the sternum closes. Clinicians use consultant authority, medication changes, blood levels, biopsies, follow-up care and restricted records rather than mystical language. Amy's body is liable to be discussed as a clinical responsibility while she experiences that discussion as public management.

Clifton's professional class calls silence discretion. Awkward knowledge is divided among people who each claim to know very little. Calls are returned late, keys withheld and reputations traded privately. Money presents concealment as privacy and vanished people as unfortunate private history.

Police speech distinguishes suspicion, pattern and fact. Recorded testimony, Crime Reference Numbers, forensic searches, toxicology, digital traces, grooming evidence and the CPS charging threshold matter. Knowing that a man targets frightened women is not the same as possessing evidence sufficient to stop or charge him. Exact questions and procedural caution carry more weight than declarations of certainty.

Care is practical more often than eloquent: overnight bags, medication reminders, waiting, driving, food and making room. Exhaustion may be voiced outside a curtain and covered by a smile on returning. People avoid naming resentment directly when they can call it worry, responsibility or realism.

Sexual patience is behavioural, not rhetorical: asking what someone wants, waiting through silence and stopping when a body goes rigid. Tenderness must not be treated as permission, cure or moral absolution.

The dead are not punchlines. Men with histories of cruelty are not written as simple permission for the reader to cheer. Institutional failure does not make private violence innocent.

TEXTURE

Rain on sash windows; wet glass; amber streetlight; black shopfronts; damp limestone; gorge wind; steep steps; rain-dark wool.

Cold floorboards over bakery heat; flour-fine grit; burnt flour; warm yeast; butter; smoke; hot metal; cooling racks; scored bread opening along a seam; butcher's paper.

Alcohol hand rub; radiator minerals; gripping vinyl; blue-white examination light; muted monitor tones; medication alarms; blood levels; bruises; biopsy wounds; surgical scars.

Amy's sternotomy scar echoes bread split along a scored seam. Skin, crust and stitched openings share a physical vocabulary without becoming decorative metaphor every time they appear.

Tacrolimus carries medicinal bitterness, fine finger tremor, bruising and bodily vigilance. Alarms interrupt sleep and make care audible.

Black surgical thread is glossy when wet. Blood, tissue and trace evidence remain materially ordinary even when the violence is not.

James's working world carries warm flour in forearm hair and butter, smoke and night air in clothes. Farah Khan's world carries rain-dark wool and the sharp peel scent of untouched satsumas.

Use sensory anchors sparingly. A recognisable detail should locate a scene, not recur on a schedule or harden into a tic.

WHAT MUST NOT BE CONTRADICTED

Amy Fletcher is twenty-three years old when the story opens.

Amy has survived years of severe cardiac illness and has received Caroline Cors's heart in a transplant at Southmead.

Before obtaining her flat above Murray's Night Bakery, Amy lived for years in Julie's spare room. The flat is her first private territory.

At nineteen, Amy collapsed during Nina Clarke's birthday meal and was taken to Southmead Hospital. Outside the curtain, Amy heard Julie tell a nurse that every good day ended with everyone paying for Amy's body. Julie returned smiling with Amy's overnight bag and does not know Amy heard her.

Amy’s phone labels her tacrolimus alarm KEEP IT. Amy considers the label a private joke and embarrassingly dramatic.

James Murray works nights in Murray’s Night Bakery beneath Amy’s flat and is awake while most neighbours are absent.

Three husbands and two lovers disappeared from Caroline Cors’s life. Public suspicion hardened into the name Black Widow of Clifton, but suspicion did not become proof before Caroline died.

Repeated sexual-assault investigations already exist as recorded interviews, grooming evidence and Crime Reference Numbers without chargeable cases. Avon and Somerset Police already knows that officers can themselves become subjects of sexual or domestic abuse investigations.

WHAT IS PLANNED BUT HAS NOT HAPPENED YET

No future plot events, revelations, reversals, deaths, resolutions or character outcomes are included in this cached brief.

PART XX

The Production Record

Every check each chapter passed through.

What each chapter went through after it was written.

CHAPTER	Words · continuity gate · prose passes · AI score · narration
CHAPTER 1 Keep It	2,306 words
narration ready (11m09s)	
CHAPTER 2 The Dark Batch	2,463 words
narration none	
CHAPTER 3 Small Precautions	2,992 words
narration none	
CHAPTER 4 No Immediate Action	2,833 words
narration none	
CHAPTER 5 The Visible Edge	2,842 words
narration none	
CHAPTER 6 Hard Tissue	3,122 words
narration none	
CHAPTER 7 Aftercare	4,941 words
narration none	
CHAPTER 8 Second Bake	1,551 words
narration none	
CHAPTER 9 Last Known	2,898 words
narration none	
CHAPTER 10 Foreign Body	3,443 words
narration none	
CHAPTER 11 Poor Tolerance	3,342 words
narration none	

CHAPTER 12 The Quiet Interval — 1,571 words
narration none

CHAPTER 13 Therapeutic Range — 3,413 words
narration none

CHAPTER 14 House Meat — 2,607 words
narration none

CHAPTER 15 Trade Terms — 2,888 words
narration none

CHAPTER 16 Domestic Provision — 2,774 words
narration none

CHAPTER 17 Recipient Side — 3,575 words
narration none

CHAPTER 18 The Widow's Hitch — 4,560 words
narration none

CHAPTER 19 Reasonable Force — 4,843 words
narration none

CHAPTER 20 Accessible Surfaces — 3,869 words
narration none

CHAPTER 21 Useful Shapes — 1,330 words
narration none

CHAPTER 22 Lower Fields — 2,835 words
narration none

CHAPTER 23 Material Changes — 2,571 words
narration none

CHAPTER 24 Corrective Surgery — 3,052 words
narration none

CHAPTER 25 Holding Temperature — 2,708 words
narration none

CHAPTER 26 Duplicate Set — 2,805 words
narration none

CHAPTER 27 Temporary Suppressant — 3,382 words
narration none

CHAPTER 28 Bench Rest — 1,330 words
narration none

CHAPTER 29 Contact Pressure — 3,726 words
narration none

CHAPTER 30 Locking Pass — 3,301 words
narration none

CHAPTER 31 Single Occupancy — 4,169 words
narration none

CHAPTER 32 Plain Sight — 2,856 words
narration none

CHAPTER 33 Lateral Force — 3,476 words
narration none

CHAPTER 34 Present Account — 3,404 words
narration none

CHAPTER 35 Load-Bearing — 3,613 words
narration none

CHAPTER 36 Maintenance — 3,507 words
narration none

PART XXI

Analysis

An independent read of the finished book.

The editorial verdict

> *Hungry Heart is distinctive, professionally publishable body horror with a genuinely consequential dark romance at its centre. It fuses transplant medicine, appetite, consent, bodily autonomy and predation into a coherent supernatural mechanism, then steadily implicates Amy in what first appears to be victimisation or self-defence. The bakery relationship provides warmth without neutralising the horror, and the ending correctly refuses a redemptive simplification: Amy can restrain the graft and has a nonhuman alternative, yet chooses continued human predation. The score reflects exceptional scene craft, escalation and thematic integration, held just below the very top tier by intermittent repetition, several conspicuously plot-enabling decisions, morally curated targets and a small but definite set of continuity errors.*

OVERALL	9.2 / 10
RECOMMENDATION	Publish after minor edits
READINESS	READY WITH MINOR EDITS
CHAPTERS READ	36
MODE JUDGED AS	standard

BY DIMENSION

PROSE	9.2 / 10
THEME	9.6 / 10
ENDING	9.4 / 10
PACING	8.8 / 10
ROMANCE	9.2 / 10
DIALOGUE	9.1 / 10
ATMOSPHERE	9.4 / 10
ORIGINALITY	9.5 / 10
CHARACTERISATION	9.5 / 10
EMOTIONAL IMPACT	9.3 / 10
SETUP AND PAYOFF	9.5 / 10
NARRATIVE CLARITY	9.2 / 10
PLOT CONSTRUCTION	9.2 / 10
READER ENGAGEMENT	9.3 / 10
SCENE CONSTRUCTION	9.4 / 10
SUPPORTING CHARACTERS	9.0 / 10

WHAT MUST CHANGE BEFORE PUBLICATION

- Correct the Chapter 7 timeline and the smaller glass-shard, tacrolimus-dose, word-count and repeated-anecdote continuity errors.
- Lightly trim recurrent restatement after the action has already established Amy's moral choice, the absence of the second pulse or the parties' leverage.
- Strengthen the immediate motivation for James's decision in Chapter 35 and the security logic that allows Amy to take the ligature carrier in Chapter 30.
- Reduce the dossier-like presentation of at least some later targets so the ending's moral force does not depend on repeatedly pre-curated victims.

WHERE IT IS WEAKEST

- Several scenes continue explaining a moral, medical or relational conclusion after the action has already made it clear.
- Some discoveries and confrontations present unusually complete clusters of evidence or exposition at exactly the point the plot needs them.
- Gareth, Oliver and Mark are selected through increasingly concentrated records of prior misconduct, which makes Amy's predation feel morally curated even as the novel argues that her justifications are collapsing.
- Hartley leaving the ligature carrier accessible and James agreeing to sex shortly after Nina's mauling and Amy's emergency treatment require more character motivation than the manuscript presently supplies.
- A handful of concrete timeline, medication and recalled-action inconsistencies need correction.

CONTINUITY PROBLEMS FOUND IN THE FULL READ

SERIOUS	Amy wakes at 11:37 and Lewis's phone later shows 11:46, but after a lengthy disposal and journey home her 8:00 medication is only 3 hours 31 minutes overdue, implying 11:31.
NOTICEABLE	Amy remembers Dean holding broken glass in his fist with the edge facing her, whereas Chapter 11 has Amy cut her palm on the glass and Dean briefly use a shard to cut her forearm before dropping it.
NOTICEABLE	Amy takes an evening tacrolimus capsule at home and later responds to another dosing alarm in Gareth's car by taking what appears to be a second capsule, without acknowledging a double dose.
MINOR	Amy calls the sentence 'I'm coming back to the unit now' six words, but it contains seven.
NOTICEABLE	James presents the story of a former partner leaving during a bake as a fresh disclosure although he told the material earlier.

RECURRING PROSE PATTERNS

WORTH FIXING

Physical action is followed by Amy's dry reinterpretation of its emotional or medical meaning.

This creates a distinctive controlled voice and keeps extreme events psychologically legible, but occasionally explains an implication the action has already delivered.

MINOR

Clinical language is contrasted with Amy's more possessive private vocabulary.

It dramatises the struggle over who owns and defines Amy's body while keeping the medical material emotionally charged.

MINOR

Care is characterised through what another person deliberately does not do.

It gives James and Nina behavioural specificity and makes consent visible without relying on declarations of virtue.

MINOR

Food preparation doubles as erotic imagery without being named as such until late in the scene.

It integrates the romance with the appetite motif and gives the bakery scenes narrative work beyond atmosphere.

MINOR

Amy technically tells the truth while withholding the fact that would change another person's response.

It creates sustained tension while charting her movement from self-protection into manipulation.

MINOR

A calm procedural sequence escalates through one anomalous physical detail.

This is the manuscript's most effective horror rhythm, grounding the supernatural in credible practical action before violating it.

WORTH FIXING

A repeated inventory of absent symptoms turns bodily success into suspense.

It makes Amy's recovered capacity emotionally meaningful, though repeated checks sometimes continue after the reader understands the result.

MINOR Bodily action is described through leverage, alignment and procedure rather than generalized gore.

The violence remains mechanically intelligible and therefore more disturbing, while also reflecting Amy's practical intelligence.

DOES THE ENDING PAY OFF

{'answer': 'yes', 'reasoning': 'The climax resolves the central practical and emotional question by showing that Amy can use the inherited restraint to stop the graft from consuming James, but only through another concealed choice that breaks their trust. Chapter 36 then resolves the deeper dramatic question—whether Amy will use regained control to stop choosing human victims—by answering no. Her decision to pursue Mark despite having animal tissue available retrospectively clarifies the whole moral trajectory: the graft remains coercive and dangerous, but Amy is no longer merely its captive.'}

Story analysis

CHART DATA

EMOTIONAL ARC

SUMMARY	The emotional movement is a tragic empowerment arc: liberation from fragility becomes exhilaration, then self-authorization, isolation and predation. The story delivers its contract by making Amy's strength and sexuality genuinely thrilling while steadily transferring the blood onto James, Nina and the ordinary life she hoped to protect; it deliberately ends before redemption, with Amy recommitting to the misbelief.
ARC SHAPE	Escalating with relief valleys: bakery warmth and consensual intimacy repeatedly lower tension, only for medical deterioration, police pressure and chosen violence to return at a higher moral cost.
BINGE ASSESSMENT	Binge pull is very high because most chapters introduce a concrete new threat, revelation or boundary crossing, and the romance supplies anticipation alongside the mystery. Quieter chapters generally deepen attachment or reposition evidence rather than stall, although repeated hospital refusals in the twenties and the intentionally unresolved final chapter may frustrate readers expecting either Amy's arrest, explantation or a decisive romantic resolution.

GENRE AESTHETIC

TONE	intimate, clinical, sensual, dread-soaked and morally corrosive, with intermittent domestic warmth
SUMMARY	The primary identity is body horror fused with dark romantic psychological horror, supported by medical dark fantasy and a police-investigation spine. Its strongest aesthetic contrast is between warm nocturnal bakery craft and invasive clinical or carnivorous imagery, making bread, flesh, hunger, care and appetite echo one another without turning the book into cosy horror.
GENRE CLASSIFICATION	body horror / dark romance / medical dark fantasy / psychological antihero horror / transplant Gothic / vigilante horror
WORLDBUILDING ASSESSMENT	Worldbuilding is moderate in density but high in functional specificity. Bristol locations, transplant procedures, tacrolimus routines, pathology findings, bakery labour and police interviews give the supernatural graft a persuasive material setting; the abnormal tissue's rules are revealed incrementally and remain frighteningly organic. Some institutional and forensic consequences are compressed for momentum, and the limited continuity bible understates the large number of established facts and entities.

LINGUISTIC STYLE

SUMMARY	The prose is precise, tactile and commercially readable while retaining literary control over image and implication. Medical objects and bodily sensations are rendered with the same exactness as baking work and sexual negotiation, allowing the central metaphors of appetite, cost and containment to emerge through concrete detail rather than explanation.
READABILITY	Commercial-literary and accessible to adult horror and dark-romance readers comfortable with explicit sex, medical detail, coercion and graphic body horror. The syntax is varied rather than difficult, while specialist terminology is usually grounded in immediate physical stakes.
VOICE SIGNATURE	Amy's voice combines dry, defensive wit with procedural self-monitoring and exact somatic observation. Long but controlled sentences accumulate physical details before landing on a morally revealing qualification, as in her distinction between preserving evidence and merely extending it by arranging another death. Recurring practical language around medication, dressings, cleaning and timing makes denial itself sound competent.
STYLE CONSISTENCY	The available samples and chapter-level voice scores indicate exceptional consistency, generally at 9-10. The opening's controlled bodily vigilance develops naturally into the midpoint's forensic rationalization and the closing's exhausted clinical candour; the voice darkens without losing its practical cadence. No major stylistic drift is evident, though later medical scenes may risk familiar rhythms because examination, refusal and concealment recur frequently.

NARRATIVE STRUCTURE

PACING	The pacing is fast and highly controlled, with quieter bakery and intimacy chapters acting as relief valleys between killings, medical revelations and interrogations. The repeated cycle of activation, concealment, investigation and renewed feeding creates strong propulsion, although the middle-late sequence of hospital confrontations and refusals risks repetition; the summaries of chapters 19 and 20 also overlap around Gareth's death in a way that suggests a continuity or segmentation problem.
SUMMARY	The novel uses a four-stage escalation: Amy discovers the graft's appetite, investigates its history, begins selecting victims, and finally loses the ability to keep violence separate from the people she loves. Medical mystery, police pressure, bakery romance and body horror converge effectively, but the final chapter functions as a deliberately unresolved negative ending rather than conventional closure.
ACT STRUCTURE	Act I is clearly defined through chapters 1-7, moving from fragile independence and attraction to the first death and concealment. Act II, roughly chapters 8-18, expands the Caroline-Hartley mystery and turns accidental monstrosity into informed possibility; chapters 19-30 form the moral descent, as Amy chooses targets and repeatedly rejects intervention; chapters 31-36 deliver the collapse of her private moral court when Nina and James become prey. The climax is powerful, but the denouement withholds legal, medical and relational resolution and instead confirms Amy's failure to meet her need.
STRUCTURAL VERDICT	This is a compelling, well-braided negative-arc horror structure whose converging climax fulfills the thematic design, but its finished ending reads more like an intentionally brutal series launch than a fully resolved standalone, and the Gareth sequence needs continuity clarification.
SUBPLOT COMPLEXITY	The romance, bakery expansion, transplant conspiracy, donor history, police investigation, Nina's intervention and Amy's medical deterioration are tightly interwoven rather than operating as detachable side plots. The principal mysteries are paid off, especially Hartley's knowledge, the liver parcel and the silk restraint, but the continuity state records all six subplots as active and none resolved; James's condition, Khan's case, Hartley's accountability, Nina's recovery, the Wetherby arrangement and Amy's next intended victim therefore remain open at the end.

CLIFFHANGER PROFILE	Strong hooks appear in most chapters, commonly through bodily transformation, incriminating evidence, medical revelations, police escalation or interrupted intimacy. The variety is good because relational hooks and procedural discoveries offset the more spectacular gore, though repeated endings built around Amy refusing admission, hiding evidence or noticing renewed tissue movement become somewhat predictable. The strongest cliffhangers occur in chapters 6-7, 10-11, 18-20 and 29-35.

CHARACTER RELATIONSHIP

SUMMARY	Amy's relationships progressively test whether autonomy can exist without accountability: James offers consent and patience, Nina offers care with boundaries, Khan offers external judgment, and Hartley embodies coercive institutional control compromised by self-protection. The story refuses to let love excuse Amy, culminating in James and Nina remaining emotionally connected while withdrawing their trust and compliance.
POV USAGE	The supplied prose indicates a consistent first-person Amy viewpoint. Its tight bodily and cognitive focus is especially effective for transplant horror and moral self-justification: readers understand Amy's calculations without receiving an external guarantee that those calculations are ethical. The limitation also preserves uncertainty around Hartley, Khan, James and Nina until their actions force Amy to acknowledge them.
RELATIONSHIP ARCS	Amy and James move from practical neighbourly care to erotic trust, negotiated consent, confession and finally loving separation; his defining growth is learning that patience cannot become passive permission. Amy and Nina shift from protective friendship and secrecy to evidence preservation, physical victimization and cautious boundary-setting, giving Nina an effective autonomy arc. Amy and Hartley develop from guarded clinician-patient distrust into mutual leverage, with his admissions exposing institutional guilt without redeeming him. Khan's procedural pursuit steadily converts scattered disappearances into a corroborated case, while remaining concerned about Amy rather than becoming a simplistic antagonist.

PROTAGONIST ASSESSMENT	Amy is an antihero shading into villain-protagonist: sympathetic because of her medical history, bodily precarity and justified fear of confinement, but increasingly culpable as she researches targets, engineers activation conditions and treats the graft as an instrument of private judgment. Her trajectory is substantial but negative rather than redemptive; she gains strength, sexual agency and strategic competence while entrenching the misbelief that only she may choose the cost of her survival. Reader attachment is likely to remain high because her intelligence, dry self-awareness and vulnerability are vivid, although Oliver's killing and the attacks on Nina and James deliberately destroy any uncomplicated identification.

PART XXII

Publication

How the book is listed, and on what terms it is sold.

PUBLISHER	Serially
SUBTITLE	Some Men Deserve to Be Eaten
LANGUAGE	English
TRIM	5x8
PAPER	cream
COVER FINISH	matte
CATEGORIES	Fiction > Horror > Body Horror, Fiction > Fantasy > Dark Fantasy, Fiction > Romance > Gothic
KEYWORDS	female vigilante serial killer, cannibal heart transplant, medical monstrosity novel, morally gray female protagonist, dangerous sensual body transformation, Bristol supernatural thriller, women taking revenge on predators
FOR FANS OF	For fans of The Substance, A Certain Hunger and Promising Young Woman.

DESCRIPTION

The first man Amy Fletcher sleeps with is kind until morning.

Then he laughs at the scar between her breasts and tells her she should be grateful anyone wanted her. Amy wakes twelve hours later in his blood-soaked flat with something caught between her teeth. Most of him is gone.

Her transplant was supposed to give her an ordinary life. Instead, the donated heart beats twice when desire turns to fear—and opens when it is hungry. Amy cannot stop it once it begins. But she can choose which men bring it close to feeding. Men who drug women. Men the police could not touch. Men Amy is increasingly certain deserve what happens next.

Then a biopsy finds human tooth enamel inside her living heart. A parcel of raw liver appears outside her locked door, tied with black surgical thread. And James, the patient night baker downstairs, touches Amy with a tenderness that wakes the second pulse beneath her scar. If Amy chooses the meals, how much of the killing can she still blame on the heart?

RELEASE

CONTENT RATING	adult
CONTENT WARNINGS	Body horror and gore, Murder, Explicit sex, Dubious consent, Medical trauma, Drug use, Coercive control, Strong language
COMPLETION	complete
CADENCE	daily
FIRST RELEASED	2026-10-06
FREE CHAPTERS	5
AUDIOBOOK	Yes

PROMOTIONAL LINES

- Her new heart only wants one thing: cruel men, consumed whole.
- She finally fell for a good man. Her heart has never spared one.
- She woke up with someone caught between her teeth. Most of him was gone.
- Bristol's worst men keep disappearing. Amy keeps sleeping well.

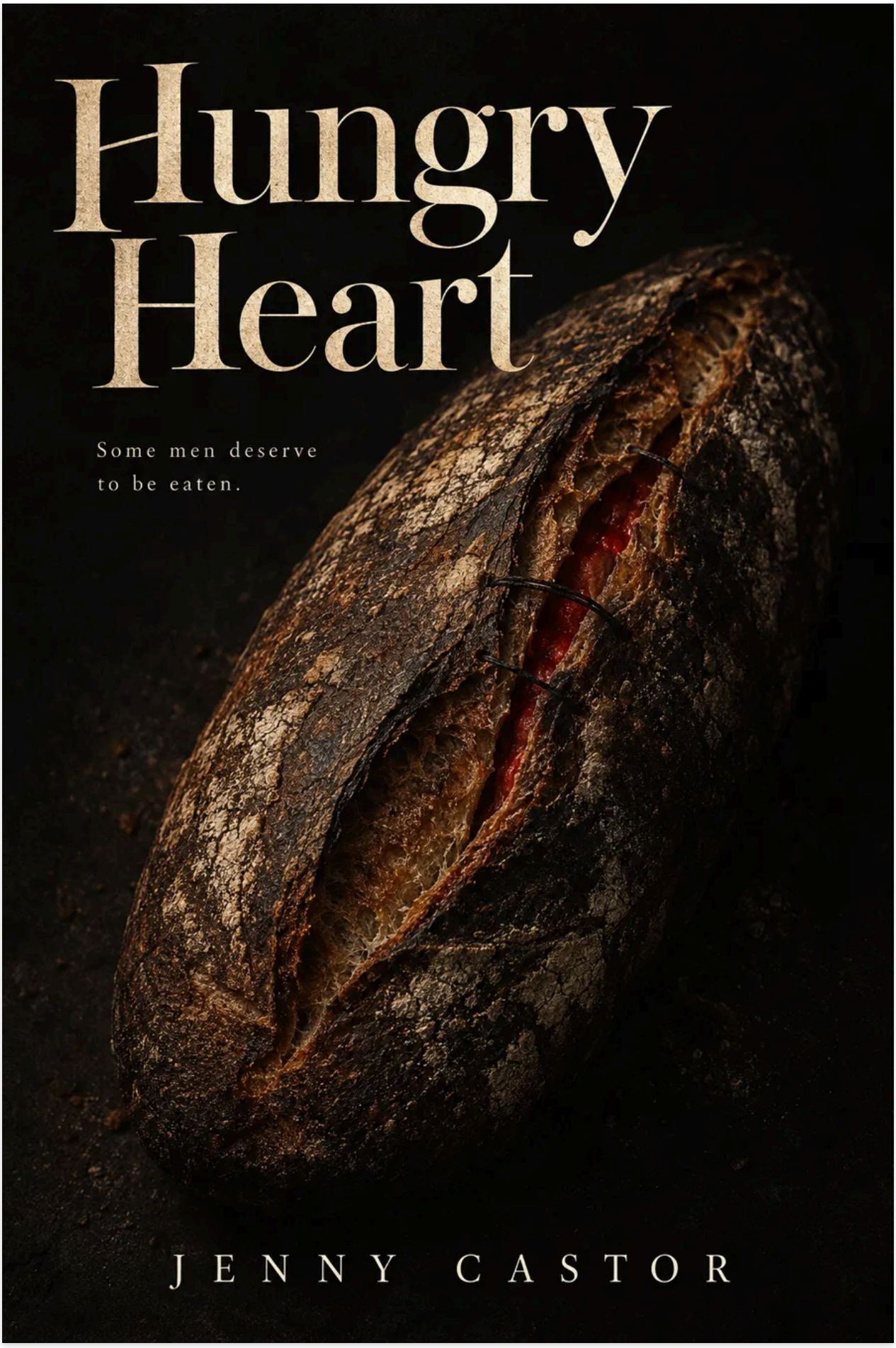
AI DECLARATION

{'text': 'ai_generated', 'images': 'ai_generated', 'translation': 'none'}

PART XXIII

The Cover

How the cover was arrived at, and what it was asked to do.


Hungry Heart
Some men deserve to be eaten.
JENNY CASTOR

GENRE	Horror / Dark Romance / Dark Fantasy
TITLE	Hungry Heart
SAVEDAT	2026-10-06T20:31:59.500Z
TAGLINE	Some men deserve to be eaten.
ARTSTYLE	graphic
SYMBOLKEY	eye
IMAGEFRAME	rounded
TITLECOLOR	#FFFFFF
ACCENTCOLOR	#C9A84C
COMPOSED URL	u/7e909d3a-21a8-4304-950b-be9766b22e02/covers/composed/a437c881-9b49-4b17-87c4-2c8cbfe006d1_1791303030095.png
COVER SOURCE	uploaded
TITLEFONTKEY	fell
RIBBONICONKEY	Horror
TAGLINEFONTKEY	cormorant
VISUALLANGUAGE	dark
IMAGEBORDERCOLOR	#C9A84C
CENTERSVGSTROKECOLOR	#FFFFFF

THE ART DIRECTION

Create a premium GRAPHIC front cover for an adult horror and dark-romance novel. The dominant image is one elongated, dark-crusted loaf isolated on a nearly black bakery work surface, simplified into bold flat forms with tactile, imperfect print texture. Its scored seam reads subtly as a sternotomy incision: part of the opening is held by a few taut black surgical stitches, while the unclosed section reveals one narrow, controlled glimpse of arterial crimson rather than crumb. This red opening is the primary focal point; the loaf is second, followed by the typography. A single low amber work light grazes the rough crust and catches the thread, leaving most of the object and surrounding frame withheld in deep shadow. Use matte charcoal, soot brown, toasted umber and warm ivory, with crimson as the only vivid accent. Keep the balance asymmetrical, spacious and severe, with no scene, people, medical equipment, teeth, splatter or extra props. Set the title Hungry Heart large in an elegant warm-ivory serif, integrated structurally with the negative space. Set Some men deserve to be eaten. separately in much smaller type. Centre JENNY CASTOR at the foot in widely letter-spaced uppercase serif, also warm ivory. Include no other text, signage, logos or marks.

PART XXIV

The Advertising

The campaign the book was sold with: three placements for Facebook and Instagram, each with the picture and the copy that runs beneath it.

Feel the thrill of Amy turning a monstrous appetite against cruel men, then the dread of watching her fall for someone she cannot afford to hurt.

HOOK	A transplanted heart that devours cruel lovers may also endanger the first man who treats Amy tenderly.
AUDIENCE	Women 20–40 who read feminist and transgressive horror, morally compromised heroines, erotic danger and dark romances where genuine tenderness raises the stakes.
PALETTE	Rain-black Bristol nights, warm bakery amber, surgical white and restrained arterial red, with tactile flour, scar tissue and wet glass.
TONE OF VOICE	Seductive, wicked and morally provocative, with danger tucked beneath every tender line.

Feed — square

FACEBOOK AND INSTAGRAM FEED · 1024X1024



PRIMARY TEXT	Some men deserve to be eaten. The terrifying part is what happens when Amy wants one who doesn't.
HEADLINE	Her Heart Has an Appetite
DESCRIPTION	Dark romance with teeth.
CALL TO ACTION	Shop now

Story / Reel — vertical

INSTAGRAM AND FACEBOOK STORIES AND REELS · 1024X1536

PRIMARY TEXT	Her new heart has excellent taste in cruel men. Then a kind night baker asks what Amy wants—and waits.
HEADLINE	Kindness Could Get Him Killed
DESCRIPTION	Tenderness is the newest danger.
CALL TO ACTION	Learn more

Link ad — landscape

FACEBOOK DESKTOP FEED AND LINK ADS · 1536X1024



PRIMARY TEXT	Amy finally has the strength to choose who gets close. The heart keeping her alive has its own criteria.
HEADLINE	What If Hunger Chooses Too?
DESCRIPTION	A horror romance about appetite.
CALL TO ACTION	Shop now

PART XXV

Where the Book Leaves Things

The state of the world, the cast and the open questions on the last page, as compiled on 2026-10-28.

THE BOOK, AS IT TURNED OUT

Amy Ferris moves into a flat above Murray's Night Bakery, run by James, after a heart transplant. Her transplanted heart harbours an abnormal second pulse with tooth-like mineralised structures and a black filament. A biopsy reveals the donor, Caroline Cors, had an undocumented prior intervention; cardiologist Hartley conceals evidence. Amy investigates Caroline's history, finding links to five disappeared men and to Hartley's mother Evelyn, who had performed an unauthorised transplant and used black-silk restraint (the 'widow's hitch') on Caroline's abnormal heart. Across a string of dates — Lewis Pritchard, Dean Sallis, Gareth Pike, Oliver Venn — Amy's graft opens her chest and consumes each man after he threatens or assaults her; she conceals the deaths, cleans scenes, and deflects DI Farah Khan's mounting investigation. Meanwhile Amy and James develop a sexual and domestic relationship, interrupted repeatedly by the graft's pulsing. Nina, Amy's friend, discovers hidden evidence (Gareth's phone, the silk knot, a liver parcel sent by Hartley to test suppression) and photographs it as a safeguard. Hartley admits complicity in covering up Caroline's origins and in supplying the liver. Imaging shows the graft progressing toward Amy's lung; Amy repeatedly refuses explantation. The graft attacks Nina, tearing her shoulder, after which James intervenes and forces hospitalisation. Amy confesses to James that she knowingly orchestrated the deaths; he confronts her, she agrees to surgery but delays. During a final night together, the graft attaches to James and begins consuming him; Amy uses Evelyn's stolen ligature needle and black silk to sever and restrain it, saving him, then again refuses surgery. James leaves, unable to stay while she keeps choosing the condition over the relationship. Dr Ruth Lennox takes over Amy's care, confirming the hitch is cutting into her own tissue but continuing tacrolimus rather than surgery. Nina gives Khan a fuller statement while keeping limited contact with Amy. The book ends with Amy leaving hospital to meet a new man, Mark Hales, carrying spare silk, still concealing the condition and still refusing to stop.

THE TONE IT ENDED UP HAVING

What begins as a tender, slow-burn romance between a transplant patient and a baker curdles into a body-horror serial-killer narrative in which intimacy, medical procedure, and predation become interchangeable, told with a flat, clinical matter-of-factness even at its most violent.

WHERE IT LEAVES OFF

Amy is ambulatory but deteriorating, her sternotomy wound held together by Evelyn's widow's-hitch silk which is cutting through her own living tissue; she refuses explantation and remains on tacrolimus under new physician Ruth Lennox. James has left her, having saved her life and then declared he cannot stay while she keeps the graft active; Nina is injured, estranged but still in contact, and has given Khan an expanded (though not complete) statement. DI Khan has physical evidence (Gareth's phone, blood, tacrolimus findings) connecting Amy to four deaths (Lewis, Dean, Gareth, Oliver) but no confession or arrest. Hartley's complicity in Caroline Cors's unauthorised transplant and the cover-up is known to Amy but not to the police. Amy is leaving to meet a new target/date, Mark Hales, carrying spare black silk, continuing the pattern unresolved.

WHERE THE CAST STANDS

PRIMARY Amy Fletcher

She has formally transferred care yet rejects definitive treatment, choosing agency and dangerous postponement over explantation.

PRIMARY Dr Jonathan Hartley

His authority over Amy's treatment has been formally reduced, though he remains implicated in the medical and evidentiary conflict.

PRIMARY James Murray

Absent from the chapter's main confrontation but remains separated from Amy after setting a boundary against her refusal of surgery.

PRIMARY Nina Clarke

She has moved from protective confidentiality toward independent testimony and bounded contact with Amy.

SECONDARY Caroline Cors

Her history remains the source of the restraint method and the graft's documented precedent.

SECONDARY DI Farah Khan

Her investigation is gaining an additional eyewitness account, while Amy's medical deterioration increases the urgency of preserving evidence.

MINOR **Bethan Gough**

She remains a practical clinical advocate while Amy's care is transferred to Dr Lennox.

MINOR **Dean Sallis**

DEAD.

MINOR **Edith Salter**

Edith has shifted from an uninvolved witness to a reluctant source of medical and criminal history, though she still withholds information and rejects responsibility for Amy's choices.

MINOR **Evelyn Hartley**

Her failed restraint procedure has been reproduced by Amy, making her past intervention directly consequential to the present crisis.

MINOR **Felix Rowe**

He remains a commercial opportunity and source of production pressure.

MINOR **Gareth Pike**

DEAD

MINOR **Hugh Redman**

At their starting position; the story has not begun for them yet.

MINOR **Julie Fletcher**

She continues attempting to monitor Amy's medical care despite Amy withholding a response

MINOR **Lewis Pritchard**

His death has shifted from a concealed private event toward an impending missing-person response.

MINOR **Oliver Venn**

DEAD.

MINOR **Owen Watkins**

An absent housemate whose expected return is likely to expose Lewis's disappearance.

MINOR Richard Penrose

At their starting position; the story has not begun for them yet.

MINOR Sheila Tovey

At their starting position; the story has not begun for them yet.

MINOR Simon Vickery

At their starting position; the story has not begun for them yet.

STILL RUNNING AT THE LAST PAGE

- **Amy's adjustment to independent life above Murray's Night Bakery.** The shared domestic space becomes the site of both intimacy and a dangerous rupture; James leaves the flat and Amy locks the door.
- **The consequences of Lewis Pritchard's disappearance.** Amy's phone continues receiving contact from family and Nina while the police investigation remains active.
- **The Wetherby bakery order.** Amy and James complete the forty-eight-croissant order with six extras held as a damage margin.
- **Amy's conflict with Dr Jonathan Hartley.** Dr Lennox has taken over Amy's immediate care and Hartley no longer conducts her reviews or medication changes.
- **Gareth Pike's misconduct allegations.** Nina reads messages corroborating Gareth's intimidation of four women, while the phone's possession by Amy creates additional investigative risk.
- **Oliver Venn's closed sexual-assault investigation.** Amy used the unresolved allegation to select Oliver as a target; Oliver denied wrongdoing and was killed by the graft.
- **The heart's predatory feeding.** The graft fed from James during sex and was forced back into Amy by the widow's hitch.
- **Nina's concern for Amy.** Nina remains injured but gives an independent account, accepts limited contact, and refuses to let Amy control her testimony.
- **Amy's concealment of Gareth Pike's death.** Nina now knows Amy took Gareth's phone from the car and has seen messages that may connect Amy to the forensic investigation.

- **Amy's concealment of Dean's death.** Khan's evidence now places Amy's preserved dating-app account in contact with Dean and connects Dean's tacrolimus toxicology to the wider pattern.
- **Dean Sallis's prior victims and police complaints.** Khan reveals two earlier materially similar complaints, and Amy begins searching dating-app identities for further information.
- **Amy's concealment of Lewis Pritchard's death.** The emergency response will bring additional witnesses and records into the flat where evidence connected to Lewis remains.
- **Amy's relationship with James Murray.** James remains away from Amy after his boundary; Amy messages him clinically but continues choosing the graft and secrecy.
- **Amy's investigation of her transplanted heart.** Amy has personally reproduced Evelyn's restraint method and confirmed that it can release an attached victim but cannot safely control the graft.
- **The unknown sender's raw-meat deliveries.** Hartley admits he sent the liver parcel and checked whether Amy had taken it.
- **The consequences of Gareth Pike's disappearance.** Amy completes the recorded account without confessing, but Khan now has identified remains, vehicle blood evidence, a preliminary tacrolimus result, preserved messages, and a direct link to Amy's account.
- **James Murray's bakery expansion.** James and Amy complete the Wetherby trial order of forty-eight pastries, increasing the commercial opportunity and production pressure.
- **Hartley's concealment of transplant evidence.** Amy explicitly identifies the retained pathology and documentary evidence as leverage against Hartley.
- **Amy's transplant medication and physical recovery.** Amy remains on tacrolimus under Dr Lennox's supervision, but the hitch is cutting through tissue and the graft continues to contract.
- **Amy's concealment of Lewis's death.** Amy's decision to meet Mark Hales adds another potentially dangerous encounter while the police investigation remains active.

QUESTIONS THE BOOK LEAVES STANDING

- Who is leaving warm raw meat tied with black surgical thread outside Amy's door?
- What killed Lewis Pritchard, and did Amy consciously participate?
- Why does Caroline Cors's donor heart bear an older surgical scar?
- Why did Hartley transplant an organ he knew was abnormal?
- Can the heart be made to spare James once it begins feeding?

WHAT CAN NEVER HAPPEN AGAIN

- The reveal that the donor heart (Caroline Cors) had undocumented prior surgery and an abnormal filament/tooth structures — already fully uncovered and explained via Hartley and Edith Salter.
- Amy's discovery of Caroline Cors's house, records, and the five linked men (Penrose, Vickery, Redman, plus Hartley/Evelyn connection) — already investigated and documented.
- The pattern of Amy dating, being threatened/assaulted by, and having the graft consume a man (Lewis, Dean, Gareth, Oliver) — staged four times already; further repetitions would be redundant unless the pattern itself changes (Mark Hales must not simply be a fifth identical beat).
- James discovering/witnessing the graft's predatory nature and the resulting rupture of trust — already climaxed with Nina's injury and James's confrontation/confession scene.
- Hartley's confession of complicity in the unauthorised transplant and liver-parcel suppression test — already extracted and confirmed.
- Nina discovering and photographing the hidden evidence as insurance — already done; cannot be restaged as a new discovery.
- Amy refusing explantation surgery when offered by Hartley — repeated multiple times already as a recurring refusal; the dramatic weight of 'refusing the operation' is spent as a surprise and now reads as established characterisation.
- The graft attacking a loved one (Nina's shoulder, then James's abdomen) and being restrained with the stolen needle/silk — already used twice as the emotional high point; a third near-identical rescue would repeat the beat.
- Amy's confession to James of deliberately orchestrating the deaths — already made and already cost her the relationship.

- The initial seduction/courtship and first-kiss/first-sex beats between Amy and James — already fully played out across the bakery scenes.

PART XXVI

What Comes Next

The books this one makes possible.

Where this book could go next, drawn from what it left open.

DIRECT_SEQUEL

Tender Meat

Months after the criminal and clinical consequences of her killings have begun to settle, Amy lives under new medical supervision and strict boundaries that keep her away from James. Her heart has remained quiet, but the spreading tissue begins reacting to fear that is not Amy's own. When vulnerable patients connected to a private cardiac trial start disappearing, Amy must decide whether to disclose what her body can sense or enter the trial as bait. Doing so may save recipients who never chose violence, but it also places Amy near people willing to manufacture cruelty as a clinical stimulus.

Who it follows: Amy Fletcher

The turn: The appetite is no longer limited to Amy's private encounters; altered tissue can resonate with or detect the distress of other recipients, making her body both evidence and an instrument others want to use.

Amy discovers that the trial is not attempting to cure the appetite but to trigger it predictably, and the first intended target is a patient whose only apparent cruelty is refusing to surrender ownership of her own body.

COMPANION

The Good Witness

Nina Clarke tries to rebuild an ordinary life after giving an independent account of Amy's behaviour. She is approached by a woman whose sister died after receiving tissue processed through the same clinical network, but whose death has been dismissed as rejection and psychiatric instability. Nina has no police powers and no wish to become Amy's keeper again. Her attempt to help instead draws her into a conflict between frightened recipients, institutional lawyers and campaigners who want a simple monster they can use to condemn transplantation altogether.

Who it follows: Nina Clarke

The turn: The horror is experienced by someone who cannot blame an altered organ for her decisions; Nina must act through testimony, care and investigation while resisting the old role of sacrificing herself to keep another person alive.

The supposedly dead recipient contacts Nina from hiding and insists that the dangerous thing inside her has never killed anyone—but that her family is trying to force it to.

COMPANION

Lawful Remains

DI Farah Khan investigates a series of deaths staged to resemble Amy's killings after the public learns only a distorted fragment of the transplant scandal. The victims are men accused of abuse, and online supporters celebrate an imagined successor. Farah must separate imitation, opportunism and genuine anomalous violence while protecting survivors whose confidential reports are being used as a target list. Her central adversary is not a charismatic vigilante but a system that finds selective killing easier to publicise than the failures that preceded it.

Who it follows: DI Farah Khan

The turn: The apparent supernatural copycat does not possess an anomalous heart; someone is using knowledge of Amy's biology and the public appetite for righteous violence to disguise calculated human murders.

One corpse contains unmistakably altered cardiac tissue even though the victim was never a transplant recipient, proving that the imitation killings have accidentally intersected with a second, independent lineage of the condition.

SAME_WORLD

Black Thread

Decades before Amy's transplant, a gifted but professionally constrained surgeon encounters a patient whose cardiac episodes coincide with the mutilation of abusive partners. With no language for inherited cellular appetite and every reason to fear scandal, the surgeon devises the black-thread restraint procedure. The operation offers a chance to save a life while binding doctor and patient into secrecy, and it reveals how medical paternalism can resemble care even when the physician believes she is acting mercifully.

Who it follows: Evelyn Hartley

The turn: The origin story is not about creating the appetite but about creating the medical practice of concealing it; the enduring inheritance is as institutional as it is biological.

After the restraint appears successful, Evelyn learns that the patient's removed tissue is still contracting in storage—and that another clinician has already arranged for it to be used.

SAME_WORLD

Second Pulse

In another British city, a recipient receives a conventional transplant and begins recovering without violence, only to develop a second pulse whenever she tells a lie that protects someone she loves. As the bodily changes worsen, she uncovers no connection to Caroline Cors but finds evidence of a much older donor chain. Her story tests whether the inherited phenomenon always expresses itself as hunger or whether transplanted tissue magnifies the compromises by which a host has chosen to survive.

Who it follows: A new transplant recipient

The turn: The anomaly manifests through protective deception rather than sexual humiliation, expanding the universe without making every recipient a version of Amy.

The recipient finally tells the complete truth, expecting the second pulse to stop, but it moves into the body of the person she has been protecting.

Hungry Heart

Commission Package

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