



**BOOK 2 PREVIEW: SANITY V0.01**

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***v0.01***



# CHAPTER 1: INTRODUCTION

## INTRODUCTION

This manual is a preview of a section of Book 2: Advanced Options and has been released due to the overwhelming demand for these options. Please note that this document may be revised at any moment so please check the website for the latest revision. [www.sunderedepoch.com](http://www.sunderedepoch.com)

# CHAPTER 3: USING TRAITS & SCORES

## INTRODUCTION

In Book 1, this section only dealt with how to deal with basic skill and attribute checks. This time we are looking at more sections of the character and how those traits and scores can be used and manipulated.

## ATTRIBUTES

This section deals with how to use the Attributes, Sub-Attributes, and Combat Variables.

## SANITY

The Sanity score was introduced in Book 1, but nothing was discussed on how to use it. Sanity is simply a numeric value to represent how much mental trauma a character can take before suffering a mental breakdown.

Sanity is treated exactly like Physical Damage. A character can take damage directly to his mental health. When that happens, he rolls for Stun using the Sanity Stun Number. If he fails, he suffers from either a temporary or permanent traumatic symptom.

## TYPES OF TRAUMA

There are two main types of trauma that a character can suffer from:

**Violent Trauma** is where the character was the victim or witness to unspeakable violence. This could be torture, physical and mental abuse, or some attack that exposes the character to images of violence such as a magical illusion.

**Psychological Trauma** is when a character's beliefs in what is possible and real are broken. Such things are like severe isolation, the existence of UFO's, Ghosts, Alternate Dimensions, loss of faith in one's religion, monstrous entities, heart breaking betrayal, or finding out that everyone is out to get you (see the film Enemy of the State or Invasion of the Body Snatchers).



## ***TRACKING SANITY DAMAGE***

As with Physical Damage, there are two values for Sanity, Daily Sanity Damage, and Total Sanity Damage. Each day that a character takes Sanity Damage, they keep track of it just like Combat Damage. Each Traumatic Event that adds more damage to the character is added to both the Total Sanity Damage, and Daily Sanity Damage. After a character gets a good night's rest, their Daily Sanity Damage gets brought back to 0. However, if a character cannot get at least six hours of rest, that value continues to the next day.

Total Sanity Damage lasts for several months. If the character's Total Sanity Damage exceeds his Sanity Points, he is in danger of suffering from some permanent Post Traumatic Symptoms.

## ***RECOVERING SANITY POINTS***

Healing sanity requires months instead of days. A character can recover points at a rate equal to their Resolve Sub-Attribute score per month. Thus a character with a 5 Resolve can recover 5 sanity points each month or about 1 point each six days.

## ***SANITY STUN NUMBER***

Any time a character suffers Sanity Damage, they have a chance of snapping. Characters that are more experienced tend to suffer fewer effects from traumatic events. As a result, we have added a second Stun Roll for Sanity Related Damage. To find the Sanity Stun Number, add  $\frac{1}{2}$  of the character's Combat Rating to the character's Resolve Sub-Attribute. Round decimals of .5 up.

The Sanity Stun Number is treated exactly like the normal Stun Number and uses the same target numbers.

**For Example:** Samesh has a Resolve of 6 and a Combat Rating of 3. Thus his Sanity Stun Number is  $8 (3 \div 2 = 1.5) + 6 = 7.5 = 8$ .

### **Sanity Stun Number**

$(\text{Combat Rating} \div 2) + \text{Resolve}$

## ***SHORT TERM INSANITY***

If a character suffers from a loss of Sanity, they roll on the Stun Chart using their Daily Sanity Damage as the value. If the Character fails, they roll for a symptom on the Post Traumatic Symptoms table and suffer a mild case of that symptom for the extent of their Incapacitation from the Sanity Stun Chart.

### **Sanity Stun Chart**

Roll Missed By	Incapacitation Time
1	1 hour
2	2 hours
3	5 hours
4	10 hours
5	1 day
6	2 days
7	5 days
8	10 days
9	1 month
10	2 months
11	5 months
12	1 year

## ***MULTIPLE SYMPTOMS***

Each failed Stun Check results in another roll on the table. If the character rolls a symptom that he already is suffering from, then the symptoms increase intensity. A Mild symptom becomes a Moderate symptom and a Moderate symptom becomes Severe.

**For Example:** Samesh failed his Sanity Stun check by 5 so will suffer 1 day of some Post Traumatic symptom. Rolling on the table, Samesh got a 9 which is Insomnia. For the entire day, he will be unable to sleep and will be unable to remove his Daily Sanity Damage by morning.

## ***UNCONSCIOUSNESS & SANITY DAMAGE (OPTIONAL)***

When a character rolls for Sanity Stun, also compare this to their Stun Number. If their Daily Sanity Damage and the roll would have resulted in the character being Incapacitated, then they are.

**For Example:** Samesh has taken more Sanity Damage and his Daily Sanity Damage is 15 points, which puts him in the x2 SN category. If his Sanity Stun Roll was lower than his normal Target Number for that much damage, he suffers from Incapacitation as if he was just hit in the face.



## ***PERMANENT SYMPTOMS***

If the character's Sanity Damage exceeds his Sanity Points, they could suffer a permanent symptom. Each time a character fails a Sanity Stun Check while their Sanity Damage exceeds their Sanity Points, they suffer a permanent symptom and roll on the Post Traumatic Symptoms tables.

## ***SYMPTOM INTENSITY***

When a character rolls on the Post Traumatic Symptoms table, write the effect on the character sheet with the number of times the effect was rolled. At 1, the effect is Mild and has little impact on the character's life, but at 3, the effect is Severe. Thus a character that suffers from 3 Jitters can barely write, or sip soup from a spoon because their body shakes so much. A Suicidal character with a level 3 thinks of nothing else but killing himself and may make several attempts per day. The final state is an Extreme case of the symptom which is four or more rolls of the same symptom. At that point, the Narrator and Player need to decide if the character can be effectively played any more. If not, then the character becomes an NPC and suffers from debilitating levels of the symptom.

<b>Symptom Intensity</b>	
<b>1. Mild</b>	– The character can control the symptom either through medication or through sheer willpower. Generally the symptoms occur once or twice per day.
<b>2. Moderate</b>	– The character generally cannot control the symptom except with medication. The symptom causes a significant distraction no less than three times per day. The character can still control the symptom to a degree, but it is extremely difficult.
<b>3. Severe</b>	– Only the strongest medication can help the character control the symptom, but the side effects of the drugs are as bad as the symptom. The symptom seems to affect the character no less than ten times per day or is persistent throughout the day.
<b>4. Extreme</b>	– There is no medication available to suppress the symptom. The character is nearly debilitated due to intensity and frequency of the symptom.

**For Example:** Samesh is pushed over the limit and took a shock to his sanity. His player rolls on the Post Traumatic Symptoms table and suffers a mild case of Deep Depression. His player writes that down on his character sheet and puts a 1 beside it. During the same mission, Samesh takes more Sanity Damage and rolls on the chart and now suffers from Insomnia and gets another 1. A couple days later, he takes yet more damage and rolls a second case of Depression bringing his total to 2, a Moderate case.

## ***CONTROLLING SYMPTOMS***

Some psychological symptoms are triggered by situations that remind the character of the horrible things they have experienced. In most cases, the character needs to roll a Resolve based skill check vs. the severity of their Post Trauma.

A character will begin to learn to control their symptoms through meditation techniques or other practice that takes their mind off of the stress. The character can choose either a Skill Group called Control Psychosis, or a Specific Skill of Control (symptom), such as Control Jitters or Control Flashbacks.

Use the Symptom Target Number as a base for each symptom that needs to be controlled. The character must then roll a standard Skill check vs. the target number. If multiple symptoms can be triggered by the same event, then only one roll is necessary.

<b>Symptom Target Number</b>	
<b>Intensity</b>	<b>Target Number</b>
<b>Mild</b>	12
<b>Moderate</b>	24
<b>Severe</b>	36
<b>Extreme</b>	48



## ***MEDICATION***

Even with medication, some symptoms are unable to be overcome. In addition, almost all medication has some form of side effect which may or may not be as bad as the symptom to begin with.

(This section is still being defined)

## ***TRAUMATIC EVENTS***

There are a number of things that can cause a character to take Sanity Damage including the loss of close friends, a horrible experience in combat, magic, encounters with extraterrestrials, ghosts, or beings that should otherwise not exist. Damage is caused in the same way as normal combat damage where mildly traumatic events will cause 1d5 and severely traumatic events cause 5d5. Such loss of sanity can be the result of being horribly frightened, using mind-altering drugs, having one's basis of reality disproved (the dead don't come back to life), and any number of other things the Narrator thinks is so horrible that it could permanently scar a character.

So what kind of things can cause sanity loss and how much should it cause? While the following are guidelines only, the Narrator has the final decision.

**Note:** These are not the only sources for Traumatic Events. The Narrator can roll for Sanity Damage any time the character experiences some sort of horrible experience.

<b>Traumatic Events</b>			
<b>Type of Trauma</b>	<b>Sanity Damage</b>	<b>Type of Trauma</b>	<b>Sanity Damage</b>
Verbal Abuse by an Ally or Loved One	1d5	Killed Someone in Self Defense	3d5
Physical Abuse by an Ally or Loved One	3d5	Killed Someone in Cold Blood	5d5
Sexual Abuse by an Ally or Loved One	5d5	Ally or Loved One Killed in Self Defense	3d5
Victim or Perpetrator of Torture	5d5	Ally or Loved One Killed in Cold Blood	5d5
Seeing a Ghost, Alien, or "impossible" things	5d5	Witnessed a Murder of a Stranger	1d5
Life/Death Betrayal by an Ally or Loved One	3d5	Long Term Isolation	1d5 per week
Life/Death Betrayal of an Ally or Loved One	5d5	Imprisonment/Abduction	3d5
Loss of a Limb or Body Part	3d5	Suffers an Accident or Natural Disaster	3d5
Discovery of Bodies or Parts Unexpectedly	5d5	Disfiguring Injury	5d5

## ***POST TRAUMATIC SYMPTOMS***

The exact effect of going mad is up to the Narrator, but there are several possibilities available. The table below gives a small number of possibilities. If a character Sanity Damage is exactly the same as their Sanity Points, they are on the verge of a breakdown. Each time a character loses additional sanity points and fails a Sanity Stun Check, they suffer from some sort of side effect as listed below. Some effects are immediately evident where others lie dormant for days or even weeks. These effects last for the rest of the character's life.

**Note:** Though some of the following symptoms are actual documented symptoms of Post Traumatic Stress Disorder, many are simply added to add flavor to the character. Do not use this list as any sort of check list to diagnose or treat any disorder. Leave that to the professionals...

<b>Roll</b>	<b>Types of Post Trauma</b>
0-6	<b>Physical</b>
7-10	<b>Emotional</b>
11-15	<b>Psychological</b>



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Roll 3d5	Physical Effects of Post Trauma
0	<b>Roll Twice More</b> – The character suffers from more than one symptom.
1-2	<b>Chronic Headaches</b> – The character suffers from debilitating headaches. All skill checks are made with a penalty of 1. Any strenuous activity will increase the headache by 1 and continue to a maximum of 5. These headaches last until the character gets adequate rest or takes medication.
3	<b>Eating Disorder</b> – The character becomes bulimic or anorexic either by choice or by the trauma they have endured. Involuntary anorexics simply cannot bring themselves to eat where bulimics suffer from constant nausea.
4	<b>Impaired Vision</b> – Due to the amount of stress the character is under, their vision becomes impaired. Most often, their vision is simply dulled or blurred, but some times they suffer see objects or shapes in their peripheral vision, or might imagine that letters and numbers are moving on a page.
5	<b>Insomnia</b> – The character cannot sleep either because of nightmares or due to stress.
6	<b>Jitters</b> – The character suffers from uncontrollable shaking, either of a limb, or the whole body. These jitters usually do not affect combat, but could cause problems in non-combat scenarios.
7	<b>Blackouts</b> – After combat or high stress situations, the character often does not remember what happened. This will leave the character confused, disoriented, and often they obsess over the lost time.
8	<b>Tic</b> – The character has developed a nervous habit such as chattering teeth, humming, snapping his fingers, tapping out rhythms, spitting, and so on. Most often, this does not cause the character any discomfort and the character is often unaware of the habit, but can be very annoying to others.
9	<b>Phantom Itch/Pain</b> – The character suffers from imagined itching or pain, such as bug bites, that he is compelled to itch or massage. Extreme cases will result in scars, cuts, etc.
10	<b>Gastrointestinal</b> – The character develops stomach and digestive problems including an ulcer, indigestion, heartburn, uncontrollable belching or flatulence, etc.
11	<b>Allergy-like Symptoms</b> – The character suffers from stress that causes flu or allergy symptoms including congestion, watery eyes, skin rashes, and so on.
12-13	<b>Sexual Disorder</b> – The character either becomes easily aroused or has lost interest in sex. Sometimes, the character associates violence or traumatic events as points for arousal.
14-15	<b>Chronic Pain</b> – The character suffers from recurring pain, usually in the back, shoulders, or neck.

Roll 3d5	Emotional Effects of Post Trauma
0	<b>Roll Twice More</b> – The character suffers from more than one symptom.
1-2	<b>Panic</b> – Due to the trauma they endured, the character is easily startled and often is incapacitated with fear and dread.
3	<b>Violent Outbursts</b> – The character reacts badly to confrontation and will often explode in a rage if pressured.
4	<b>Deep Depression</b> – The character suffers from a lack of motivation, searches for seclusion, and often is pessimistic about topics.
5	<b>Rage/Short Temper</b> – The character has a short fuse and can be easily angered by even the slightest annoyance. Some times, the rage becomes violent, but usually it is expressed through shouting, accusations, cursing, or by throwing/destroying objects.
6	<b>Phobias</b> – The character develops an unnatural fear of something. This is usually severe enough that the character becomes incapacitated while the object is within view.
7	<b>Resentment</b> – The character seems to hate others for unknown reasons. They become jealous easily or begin to think that others dislike them.
8	<b>Anxiety</b> – The character suffers from panic attacks that cripple them and include tension, elevated heart rate, and thoughts of impending danger and so on. These attacks can be random or triggered by an event.
9	<b>Guilt</b> – Suffering from an unexplainable guilt caused by the Trauma. Either they feel guilty because they survived when they think they should not have, or they believe that they brought the trauma on them selves which resulted in harm to others.
10	<b>Shock</b> – The character shuts down and becomes emotionally numb. Positive and negative emotions only come through in extremes. Characters suffering from shock often seek solitude.
11	<b>Confusion</b> – The character cannot focus and often is found wondering about things unrelated to the situation and present time. When things do happen, they often do not realize their significance.

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12	<b>Weeping</b> – Without warning, the character is overcome with emotions that cause them to cry. Sometimes the weeping is mild and easily hidden while other times it is deep sobbing. Most often weeping is triggered by an event or seeing a highly emotional situation (like watching a movie).
13	<b>Inflexibility</b> – The character becomes stubborn to the extent that no course of action other than his own is acceptable. On the extreme side, if people disagree with the character, they will either do it alone or will become belligerent and hostile.
14-15	<b>Suicidal</b> – The character makes attempts to commit suicide. These are often not serious attempts, but may leave lasting scars or marks that might be noticed by others.

Roll 3d5	Psychological Effects of Post Trauma
0	<b>Roll Twice More</b> – The character suffers from more than one symptom.
1	<b>Schizophrenia</b> – People with schizophrenia often suffer terrifying symptoms such as hearing internal voices not heard by others, or believing that other people are reading their minds, controlling their thoughts, or plotting to harm them. These symptoms may leave them fearful and withdrawn. Their speech and behavior can be so disorganized that they may be incomprehensible or frightening to others.
2	<b>Narcolepsy</b> – The character will suddenly feel overwhelmed with a need for sleep. Narcoleptic attacks can be random or triggered, but usually do not last for more than ten to fifteen minutes.
3	<b>Self Abusive</b> – The character has a desire to cause himself pain. This is often accompanied with deep depression and sometimes visible scars. Other times, the character partakes in actions that will cause him harm.
4	<b>Obsessive-Compulsive Disorder</b> – The individual who suffers from OCD becomes trapped in a pattern of repetitive thoughts and behaviors that are senseless and distressing but extremely difficult to overcome.
5	<b>Trichotillomania</b> – The character has a building urge to pull out his hair one strand at a time. Usually, the hair is pulled from their head, but any hair is fair game.
6	<b>Paranoia</b> – Has the feeling that everyone is out to cause them harm in some way. This is usually accompanied with a withdrawal from close friends and family.
7	<b>Tourette's Syndrome</b> – The character suffers from uncontrollable outbursts of random words, noises, or physical movement. These can be twitches, sharp jerks, or combinations of movement and making noise.
8	<b>Chemical Dependence</b> – The character uses drugs to avoid or reduce stress. Unfortunately the character begins to suffer from addictions.
9	<b>Pyromania</b> – The character has the urge to burn things and becomes infatuated with fire, flames, etc.
10	<b>Recklessness</b> – The character takes unnecessary risks, and does things to endanger himself or his wellbeing including starting fights, reckless driving, or gambling.
11	<b>Kleptomania</b> – The character has the uncontrolled urge to steal things even if they do not have any value to the character. Often, the stolen item will be returned or given away.
12	<b>God Complex</b> – The character believes they are infallible and invincible. Any questioning of their actions results in denial, anger, or other reprisal.
13	<b>Gender Identity</b> – The character begins to have feelings that his physical gender does not agree with his emotional/psychological gender. This does not have any bearing on the character's sexuality.
14	<b>Shell Shock</b> – The character suffers from complete mental shutdown. In essence, the character slips into a coma and is unresponsive to the world around them. They can be led around and can sometimes take in food, but they are effectively dead to the world.
15	<b>Multiple Personality Disorder</b> – The character develops one or more alternate personalities. These other personalities may randomly appear or may be triggered into taking over because of an event. Also, these personalities may not be aware of each other.

