

Daniel Lea

The Alien Within: Cancer and the Creaturely

*European Journal of English Studies*, vol. 19 no. 1 (2015)

This version is available: <https://radar.brookes.ac.uk/radar/items/ff2e70b9-7e50-40b0-8c2c-34e6e14f8b40/1/>

Available on RADAR: 01.09.2016

Copyright © and Moral Rights are retained by the author(s) and/ or other copyright owners. A copy can be downloaded for personal non-commercial research or study, without prior permission or charge. This item cannot be reproduced or quoted extensively from without first obtaining permission in writing from the copyright holder(s). The content must not be changed in any way or sold commercially in any format or medium without the formal permission of the copyright holders.

## Daniel Lea, THE ALIEN WITHIN: CANCER AND THE CREATURELY

*Cancer is a disease for which the English language reserves some of its most sinister epithets: cancer is said to 'devour', 'ruin', 'ravage', and 'deform', and to relentlessly consume flesh with insatiable rapacity. Conceived of as an unknowable and uncontrollable force from the outside, cancer is paradoxically created within the cancer subject's own body, a body which profoundly questions the comfortable separation of the human from the animal. For many writing of their experiences of the disease, the ramifications can be multi-faceted: robbed of faith in the body's willingness to bend to regulation, objectified by economically straitened health bureaucracies, trapped in the headlights of mortality, unable to find adequate means for conveying contradictory emotional registers, and disabled by others' fear of the abject, these individuals often understand their subjectivity as inhabiting the liminal space between the human and the creaturely. This essay explores the ways in which cancer subjects represent the processes of defamiliarisation that diagnosis often initiates through three recent autobiographical accounts of men coming to terms with their incurable cancers. Philip Gould's *When I Die: Lessons from the Death Zone* (2012), Christopher Hitchens' *Mortality* (2012), and Tom Lubbock's *Until Further Notice I Am Alive* (2012) are autopathographies that give utterance to experiences of subjectivity that are increasingly compromised due to the effects of illness and the knowledge of the irreversibility of the cancer subject's condition. Through examining the writers' use of creaturely metaphors to describe both the nature and the effects of their cancers, this essay argues that in an age of advanced medical intervention, the language we use to describe cancer still reveals potent anxieties about the exceptionality of the human and the proximity of the animal.*

Keywords: cancer; cancer subject; subjectivity; autopathography; Christopher Hitchens; Philip Gould; Tom Lubbock; creature metaphor; animality; abjection

Soon Allen had become THAT. And nobody was going to fault anybody for avoiding THAT. Sometimes he and Mom would huddle in the kitchen. Rather than risk incurring the wrath of THAT. Even THAT understood the deal. You'd trot in a glass of water, set it down very politely, Anything else, Allen? And you'd see THAT thinking, All these years I was so good to you people and now I am merely THAT?

(Saunders, 2013: 225)

In George Saunders' story 'Tenth of December', Allen, in the final throes of an aggressive cancer, is transformed from a thinking, feeling being into THAT - an object so emphatically beyond description that his abhorrent status can only be captured in capital letters. No longer can he be considered part of the family, or of the subject world; his cancer pulls him towards death as an obscene pronominal. THAT identifies him, to himself as much as others, as an abjected space whose living-death infects everyone around him with a profound discomfort. The pain, degradation, isolation, and self-loss through which Allen must make his final journey reduce him to a state of animalistic necessity that sets him beyond the definition of the human. By all measures, he has become the bare creature that the layers of culture and sophisticated subjectivisation had convinced him he wasn't, and his expression of angst at his nonhumanity can no longer be read or recognised by those outside his suffering. Saunders' story displays a man confronting 'the abyss beneath illness' (Foucault 1973: 195) - the unavoidable, unnegotiable fact of the human's animality.

Cancer has the peculiar diagnostic and discursive power to trip switch the imagination's panic response in a way that very few other diseases can. It retains such an emotive stigma despite not only its comparatively common occurrence within countries of the industrialised West, but also increasingly effective treatments and better survival rates. However, what is at stake with cancer is not primarily its pathological aetiology but rather the public's perception of the disease as essentially unknowable, which continues to persist at a time when the range of illnesses is gradually becoming demystified. Cancer provokes the fears that underlie Allen's abject status: the treacherous body, the unsubmitive enemy within, and the horror of the body in pain. These fears derive, I would argue, from the difficulty to acknowledge the creaturely as a dark other to humanness, an unassimilated and recondite animality that subtends the material version of our being but is nonetheless fundamentally discomfiting.<sup>1</sup> The cancer subject experiences the creature both as a part of the body (in the form of cancerous growth), and *of* the body itself in a more profound way in the crushing acceptance that humanness provides no refuge from suffering.<sup>2</sup> The indeterminate space between the human and the creature might be one which, as critics, we would want to problematize and mine for hidden potentialities, but for the subjects of this essay, that space is rarely experienced as consolatory or liberating. Instead the creature is more often interpreted as the Other which must be

---

<sup>1</sup> In this essay I use the terms 'creature' and 'animal' synonymously, but do not do so unthinkingly. Rather my intention has been to reveal the extent to which the subjects whose writing I explore tend to elide the monstrous, the alien, the animal, and the creaturely.

<sup>2</sup> I deliberately use the term 'cancer subject' in this essay to describe the individual with the disease. This choice is a conscious response to the way in which cancer interrupts nomenclature: those with cancer are frequently referred to as 'victims', 'sufferers', or 'patients', all terms which assume passive endurance, but at the same time rob the individual of agency either for the causation of their illness or for its outcome. The term 'cancer subject' draws attention to the subjectivity of the person who happens to have developed cancer, not as an attempt to ennoble them, but to emphasise how cancer represents a crisis of self-identity and social subjectivity.

abjected in order to preserve for as long as possible the integrity of the dying body. My interpretation of creatureliness is, consequently, one which focuses more on an always tenuous binary difference than on liminal bleeding, not because the 'cancer creature' is not a productive imaginative concept, but precisely because its possibility is so disturbing for the writers I explore. My contention, however, will be that for those without the disease, the cancer subject is so threatening as a signifying entity because it represents exactly the kinds of liminal crises at our common boundaries of being and social intersection that the writers abject. What is it that the cancer subject signifies? What place does s/he hold within the symbolic? Is s/he living-death or dying-life? For both people with cancer and those with whom they interact, the borders between the creaturely and the human are no longer clear cut, and, whilst the site of the disease may be nothing more than a pathological nexus of identically proliferating cells, the social meaning of that dysfunction can become compromised by our fears of the alien Other.

The imaginary connection between cancer and the animalistic goes back at least as far as the middle ages. By the fourteenth century, as Marie-Christine Pouchelle notes, the disease's progression was widely understood in rapacious terms. To have cancer was 'to be eaten alive by a savage animal,' by a force which 'clings firmly', whose 'malice increases until it consumes the limb' (Pouchelle, 1990: 168) and which utilises the body for 'hatching' (Lupton, 2003: 70). In imagistic terms little has changed: Claudine Herzlich and Janine Pierret point out that cancer is still fraught with 'phantasms of rot invading the body, animals that gnaw and destroy it' (Herzlich and Pierret, 1987: 56). Cecil Helman cites recent surveys of cancer subjects in which the disease was described as an "amoeba", "octopus", "spider", "worm" or "parasite" – that "eats up" the victim's body from within' (Helman, 2007: 133). For Susan Sontag, whose *Illness as Metaphor* is the most sustained consideration of the disease's cultural history, cancer is frequently 'experienced as a form of demonic possession' (Sontag, 1991: 69).<sup>3</sup> That cancer so regularly takes the metaphorical shape of a creature invites two interpretations: on the one hand, the disease is represented as a presence *in* the body, which is disturbingly alien and unknowable. On the other hand, cancer is indisputably *of* the body, generated from within, and housed by the body. Both Helman and Patrice Pinell note cancer subjects' claims that their illnesses derive from the outside world but are incorporated within the body and the self (Helman, 2007: 133-34; Pinell, 1987: 33). Like a creature it is thus simultaneously outside and inside experience, recognisably familiar and yet terrifyingly archaic. This

---

<sup>3</sup> Sontag's study rejects the metaphorical description of illness, but as Richard Gwyn points out 'illness is never simply illness, but is the focus of a culturally experienced phenomenon' (Gwyn, 2002, 127). While the protocol of academic writing would demand that this essay was written with a critical neutrality in sympathy with Sontag, my aim throughout has been to highlight the problems of speaking and writing about cancer with objectivity, and I have, at times, allowed a degree of affective metaphorisation to develop. This is not intended as a summative encapsulation of any cancer subject's experience, but rather my intervention in a discussion about both public and academic discourses used to describe cancer.

intertwining problematizes extirpation because the borderline between body and world has become so psychically compromised. In *Teratologies*, Jackie Stacey eloquently describes this indetermination: 'The malignant cell of the cancer tumour is not an invader, an outsider, like a virus or a bacterium; rather it is produced by the body, it is of the body, and yet it is a threat to the body'. 'Neither self nor other', she concludes, 'it is both the same as and different from its host' (Stacey, 1997: 77).

This essay explores the cancer subject's experience of this liminality through the genre of the cancer memoir – or 'autopathography' as Jeffrey Aronson (2000) terms it - and specifically through three recent autodiegetic narratives by men with terminal cancer. Christopher Hitchens' *Mortality* (2012), Philip Gould's *When I Die: Lessons from the Death Zone* (2012), and Tom Lubbock's *Until Further Notice, I Am Alive* (2012) variously articulate the delicate balance between being alive and becoming dead, and between the notions of ourselves as self-commanding subjects and vulnerable biological phenomena.<sup>4</sup> All three men offer poignant accounts of their declining health from diagnosis to the final days, charting the flux of hope and despair as they seek to manage the physiological and psychological effects of their increasingly untreatable illnesses. As one might expect, each cancer subject wrestles with the meaning of his death in mid-life and the indignity of submitting his body to intrusive medical procedures, but each writer also regards cancer as a specific form of tearing away selfhood from its moorings within recognisably human structures. The crisis of humanness that the presence of cancer brings about is manifest in their fear of bodily infestation by a cancer-bearing Other, but also in two other key arenas of subjectification: the diminishment of linguistic abilities and the social status of the cancer subject among the healthy. Hitchens, Gould, and Lubbock understand their selfhood as an intertwining of somatic, psychological, linguistic and social factors which normally operate symbiotically to distance their awareness of the creaturely, but which, in illness, combine to weaken their certainty of human exceptionalism. Whilst all resist being reified as passive, enduring cancer 'victims', and all seek to retain their self-determination for as long as feasible, each nevertheless reproduces a normative cultural hard-wiring that collapses the symbolic space between cancer and the creature. Fighting for one's cancer subjectivity might mean abjecting the alien within, but what these accounts reveal is that, even in the twenty-first century, that alien still commonly has a creature's demeanour.

### **'Rodent Carcinomas': Metaphors of Animality**

To varying degrees, each of the writers under consideration employs metaphors of an animalistic presence within the body to describe his cancer. The absence of significant debilitating symptoms in

---

<sup>4</sup> Christopher Hitchens (1949-2011) was an author, journalist and a literary critic; Philip Gould (1950-2011) a British political strategist and Peer; and Tom Lubbock (1957-2011), an illustrator and art critic for *The Independent*.

Lubbock's brain cancer means that his conceptualisation of the growth is the least material, leading him to acknowledge: 'I realise that I never personify it, or think of it as an agent or as an enemy. I don't really visualise it as a solid presence (lump) or an area of events (growing). ... it is just an abstract process' (Lubbock, 2012: 104). He nevertheless describes 'the wicked magic of cancer' (19) as 'invading everything' (132), terms that identify the tumour with malignancy. Gould's oesophageal cancer causes more severe symptoms and a concomitantly more aggressive use of metaphor: 'I had had an image of a couple of stray cancer cells floating around my gullet, not some out-of-control tumour working its way up my throat like a malignant alien' (Gould, 2012: 53). Hitchens' account repeatedly references his oesophageal tumour as a 'colonizing' alien (Hitchens, 2012: 4), and endows the 'rodent carcinoma' (12) with animalistic qualities: it is 'blind, emotionless' (9), 'single-minded' (85), and is 'burrowing' (86) into him for no obvious purpose given that 'if it kills me it dies' (85). Interestingly, Hitchens elides the alien and the animalistic, constructing both as malign and intent on his destruction; for him the creaturely is an alien state, and one which profoundly threatens his sense of humanness. Neither Lubbock nor Gould fall into the same compression of the creaturely and the uncanny; Gould's 'alien' is agonistic, but its shape is undetermined and does not prompt the same kind of fear as Hitchens' Other. Like Lubbock, Hitchens allows that the temptation to invest the non-human with agency is an unconsciously pervasive one, but he 'couldn't help awarding it some of the qualities of a living thing' (11). This he knows to be a mistake, but he cannot prevent himself from defaulting to the norm: 'Its whole malice – there I go again ...' (11).

Undoubtedly this conception of the cancer as an alien creature derives in part from a kind of secrecy that Stacey (1997: 42) considers characteristic of cancer. Carcinomas are considered to inveigle themselves stealthily throughout the body, deceiving the inborn defences, and quietly replicating themselves before catastrophically announcing their presence. Such characterisation maps onto our anxieties about those animals (rodents, reptiles, parasites) that tend to stimulate primitive fears. How these creatures view us, and what they want from us is a secret, a desire we cannot penetrate, and thus transform into a fear of colonisation and infestation. Hitchens' 'blind, emotionless alien' encapsulates this anxiety well: the creaturely cancer consuming us from the inside displays no motive sensible to rationality, for it cannot exist without the body on which it thrives, yet it multiplies with a virulence confident of continuous self-enlargement. The seeming illogicality of an efficiently reproducing system which is nevertheless unaware of the inevitability of its self-destruction, demands some kind of explanation, but that is always beyond our comprehension, locked away in the contradictory logic of the cancer's pathology. Conceiving of cancer as a creature might therefore be one way of drawing its irrationality closer to the familiar without fully robbing it of its uncanny affect. According to this reading, the cancer's animalistic

qualities are a form of mediation which allows the horror to be brought within the symbolic without diminishing the alienation and deracinating effects of the disease. Being able to visualise metastatic cell growth as an animal enables an imaginative defence at the same time that it unleashes primitive human fears of the threat posed by the animal predator. The creature metaphor thus performs two functions on the level of the body: it renders the cancer intelligible, and simultaneously registers its essentially unknown quality, which is always *outside* the human.

Such a reading provides a framework for understanding the writers' endowing of the cancer with agency that goes beyond biological necessity. 'Emotionless' might be Hitchens' summary of his cancer, but that does not accord with the aggressive, martial, and cruel imagery in which he casts it. The disease 'cunningly' (Hitchens, 2012: 4) wages war on his body, taking 'your taste buds, your ability to concentrate, your ability to digest, and the hair on your head' (6) in a pitiless campaign against the body's vital structures: 'cancer isn't interested in eating your flab. It wants your muscle' (91). Gould similarly employs militaristic metaphors for his cancer's action.<sup>5</sup> Cancer is analogous to an invading horde laying waste as it rampages: 'cancer is a savage and unrelenting disease that strikes down children, young people, mothers and fathers, wives and husbands in ways that are unspeakably cruel and brutal' (Gould, 2012: 97), and like a military commander 'the tumour was about to make its final decisive move' (55). Gould also uses militaristic metaphors for resistance: 'The cancer had to be stopped' (54) and records that 'Alastair Campbell called the cancer Adolf, and me Churchill' (20). Lubbock's response is less bellicose, but he is in no doubt that his tumour has a malign purpose and acts as 'a standing reproach to the well, a bringer of danger, bad news, the living moribund' (Lubbock, 2012: 19). All three privilege an explanation that goes beyond the material malfunctioning of cells, and reveal in doing so the necessity of visualising a challenge that can be faced down, an enemy that can be met. However, by generating a malevolent internal agent and endowing it with a subjective mission, they have to accept that they are sharing their bodies with another, and one seemingly with more vitality and drive than they can themselves muster. As cancer subjects, they are forced to give up their familiar sense of self, and must shape a new subjectivity which is profoundly bodily, pathological, schizophrenic (because it must incorporate the cancer), and tended toward death. They must, in other words, reframe their sense of self into a duality, at once human and creaturely. Defeating the Other must therefore include the loss of their selves, as their

---

<sup>5</sup> In the last half-century, militarism has become a widely used metaphor for engaging with cancer in both popular and some scientific discourses. This is due in no small part to the significant channelling of funding in the United States towards oncological research during the 1960s and 1970s, and particularly after the signing of the National Cancer Act in 1971. Though never termed as such in the legislation, this act has commonly been referred to as part of the 'War on Cancer', and reflected a significant shift not only in the funding of biomedical research, but also in the terminology used to describe the cancer subject's experience of the illness. See Siddhartha Mukherjee, *The Emperor of All Maladies: A Biography of Cancer* (2010).

subjectivity is intricately entwined with the cancerous agent which has become, literally and metaphorically, part of them.

### **Kill and Cure: Treatment and the Cancered Body**

If the cancer's embodiment poses a challenge to its host's subjectivity, then the treatment required to combat it is equally testing. Aggressive pathology demands aggressive intervention, and each man undergoes a rigorous regime of chemotherapy, radiotherapy, or surgery. For all, the treatment is physically and mentally debilitating and, at times, more invasive than the cancer which, for all its malignancy, tends to do most of its work unnoticed and with few symptoms. Without doubt, part of the anxiety that cancer often generates lies in the notorious severity of its treatment, and submitting oneself to the multitudinous side-effects brings into clarity the cancer subject's position between a rock and a hard place. Chemotherapy targets all fast-reproducing cells, bringing about a managed destruction of many of the body's healthy processes alongside those that are causing the cancer. Radiotherapy, in its turn, is similarly a cost-benefit balance with treatment increasing the possibility of secondary cancers and permanent damage to non-cancerous tissues, even if radiotherapy is, unlike chemotherapy, a targeted, site-specific treatment that does not cause widespread cell death. Treatment thus involves intensive biomedical intervention, the body becoming the locus for a debilitating exchange between chemical and pathological toxins. Hitchens expresses this particularly acutely: his chemotherapy makes him feel 'swamped with passivity and impotence: dissolving in powerlessness like a sugar lump in water' (Hitchens, 2012: 7). It is less the enervation that perturbs him than the submission to an additional alien invasion. The 'transparent bag of poison' to which he is attached becomes a 'venom sack' which 'gradually empties itself into your system' (7). His metaphor is creaturely and articulates his feeling of being caught between 'the death-dealing stuff and life-preserving stuff' (8) which render him equally inhuman.

Gould's experience of treatment is similarly one of disempowerment: 'The challenge of chemotherapy is that it engulfs you; it is in you, in a way that is totally different from the pain and discomfort of surgery. ... You fuse with your treatment, your blood becoming a kind of poison that reaches every part of you' (40-1).

Both men identify the lack of distinction between the body and the 'poison' as disturbing; where surgery and radiotherapy represent biomedical precision, chemotherapy feels like an apocalyptic solution that pollutes the entire system, mimicking in reverse the indiscriminate spread of the cancer. Without the ability to discern positive effects, the treatment becomes not just as damaging as the disease, but actually worse, because its negative effects are so apparent. For Hitchens the

consequences rob him of a significant part of his subjectivity: his masculinity. The treatment makes him 'strangely neuter':

I was fairly reconciled to the loss of my hair ... But I wasn't quite prepared for the way that my razor blade would suddenly go slipping pointlessly down my face, meeting no stubble. Or for the way that my newly smooth upper lip would begin to look as if it had undergone electrolysis. ... I feel upsettingly denatured. If Penélope Cruz were one of my nurses, I wouldn't even notice. In the war against Thanatos, if we must term it a war, the immediate loss of Eros is a huge initial sacrifice. (8)

The loss of gendered identity and sexual libido robs him of his familiar external features at the same time that he is being internally reshaped, pushing him towards a state of misrecognition that is profoundly unsettling both for his social subjectivity and his sense of humanity. He interprets this as a denaturing, part of the realisation that 'I don't *have* a body I *am* a body' (41), which in itself is a step on the path away from embodied subjectivity and towards the creaturely. Lying in a hospital bed post-surgery, Gould experiences a similar metamorphosis whilst listening to his surgeon 'going through detail after grisly detail, totally oblivious to the fact that I could hear every word. I had moved in the blink of an eye from being a subject to an object' (Gould, 2012: 73).

All three accounts focus on the body as a bare thing, cast out from human kinship for flagrantly succumbing to vulnerability and revealing to others the illusory nature of the belief that the creaturely can be kept a safe distance. There is resentment that 'we are not in our own hands' (Lubbock, 2012: 13), that humans are subject to laws of decay, and that their highest aspirations are undermined by their corporeality. But there is also realism and resignation. Lubbock in particular is open to the creaturely self that he inhabits. There is less fear of being invaded and overtaken by the creaturely than we find with Hitchens and Gould, and less dread of our bodies giving way to the expressions of animalistic agony as they are 'ripped up' (17). Lubbock accepts that the creature is constantly alongside the human, but that a veil of imaginary exceptionalism customarily masks one from the other: 'Consolation of animalism: we are animals, we are operating systems, simple economies of need, pleasure, pain, energy, misfortune; this brings relief from our larger griefs, losses' (17-18). His humanness is ultimately conceived of as an operating system, an internal economy, which, notwithstanding flights of grandeur, imagination, and ambition, is primordially functional. This image offers Lubbock some consolation, whereas for Hitchens it represents an unbearable reduction. Lubbock holds on to this image of animality as a coping strategy: 'I'm trying to be an acceptor of ... the condition of being a body in all its ways. Feeling attracted to the level, the steady, the undramatic. The prosaic, material, solid, opaque, secular, untranscendent, this-worldly'

(Lubbock, 2012: 20). The pathos of the transcendent possibility of human life may be too much for Lubbock to contemplate at a moment in which the erroneous functioning of his cells is determining the limits of his vision. Yet his pragmatism is also a form of resilience that accepts that all life is underpinned by an indifferent materialist logic. In fact Lubbock goes beyond the reduction of the human to the creaturely to identify the roots of both in the material. He repeatedly emphasises his thingness, recalling that the possibilities of his being are secondary to his existence as a body: 'I am a living and dying thing, a limited thing now, and no longer a bundle of indefinite possibilities' (87). Unlike Hitchens, who sees himself as being exiled from 'Wellville' to 'Tumortown' (Hitchens, 2012: 44), Lubbock regards the destruction within him as somehow making him more truly alive, for it pushes him towards the abject borderland and renders his perspective on both sides intensely acute.

Where Gould and Hitchens see their physical depredations and the fear of painful death as stripping them of their human qualities and bringing them close to the condition of the animal, Lubbock experiences a comparable anxiety in the loss of language. His particular cancer of the brain brings about lapses in speech function that cause him to stumble over everyday, idiomatic sentences without affecting his ability to express himself inventively and creatively. This inhibition renders him 'very remote and detached from words. I'm no longer fluent. ... It's as if it's not me that's speaking, but some kind of inefficient proxy forming the words' (Lubbock, 2012: 22). For him, connection with language equates to connection with subjectivity, and though Lubbock can accept the decline of the pure animal gristle of the body, the decline of the mind is a greater problem for him because he interprets it as inorganic and therefore irreparable. The body is a fleshy system, and it is therefore no surprise that it fails, but the mind is frequently referred to as a mechanism which he associates with anti-entropic efficiency: 'what we call self-command is really a matter of having reliable automatic mechanisms, unthinking habits or instincts' (23). Coping with the loss of his powers of speech is thus all the more worrying, as it involves a loss of faith in the reliable robustness of processing technology:

I think that loss of speech, and of understanding of speech, and of understanding of writing, and of coherent writing, these losses will amount to the loss of my mind. I know what this feels like, and it has no insides, no internal echo. Mind means talking to oneself. There wouldn't be any secret mind surviving in me. (103)

Hitchens' descriptions of his cancer display a much less distinct separation of body and mind. Yet, he is as distressed as Lubbock about the toll his oesophageal tumour takes on his ability to speak. His most alarming moment is the point at which he loses control of the timbre of his voice, producing only 'a childish (or perhaps piglet-like) piping squeak' which moderates 'to a papery,

plaintive bleat' (Hitchens, 2012: 46-7). The animal metaphor is reinforced by his self-description as 'a silly cat that had abruptly lost its meow' (47). 'Childish' and 'piglet-like' are revealing as they modulate the metaphor between growth (the development of the child into maturity and voiced subjectivity) and demise (the swinish squeak as an indicator of slaughter). What is clear is that the loss of his voice represents for Hitchens a movement towards the creaturely and away from subjectivity. To a certain extent, this is again framed as a diminishment of masculine identity, as when he suggests the experience is like 'an attack of impotence'; yet again, the loss is wholesale and cataclysmic - 'in public and private, I "was" my voice' (48). Speech, as a physical act of sound production and performance, is as important for Hitchens as the content of what he says, and in running together vocal dynamics, intellectual expression and self-staging he reveals how much he identifies his fullest humanity with articulation. Being robbed of voice is 'to die more than a little' (54), but it is more intensely to feel a deep loneliness and lack of companionship. He describes the vocal cord as reaching out to touch its twin (53), and there is a strong sense that the failure of the cords to function forces a retreat into an aloneness that is a living death as terrible as physical decline. Not surprisingly, he articulates this through a creaturely frame, revealing how overriding is his fear of being reduced to an animalistic dumbness: 'We may not be, as we used to boast, the only animals capable of speech. But we are the only ones who can deploy vocal communication for sheer pleasure and recreation, combining it with our other two boasts of reason and humor to produce higher syntheses' (Hitchens, 2012: 54). All three men despair at the possibility of silence their cancers impose upon them, but despair more at the fall into nonhumanity that such silence represents.

### **Cancer and the Limits of Expression**

Elaine Scarry suggests that in our fear of pain lies a deep anxiety about the adequacy of language; pain, she says, 'does not simply resist language but actively destroys it' (Scarry, 1985: 4), breaking the empathetic bond between self and Other. What is unsharable becomes exposed by pain, and in these cancer subjects' dread of the retreat to creaturely being lies the abject horror of being incapable of conveying the loss of self that pain induces. This is particularly acute for three men whose lives and careers—as journalists, strategists, or critics—have been fashioned around words, and for whom the loss of precise descriptive language represents a moral as well as a physical blow. Each cancer subject invests heavily in his facility to use words for polemical, political or aesthetic purposes and identifies his selfhood with the power of his writing to persuade others. The cancers, but more specifically the sites of these subject's cancers in the oesophagus and brain, are experienced as personalised attacks on intellectual commitments, and as ironic judgements on the

outspokenness of their opinions and values. Cancer robs them of their ability to express themselves purposefully, and powerfully toxic chemotherapy undoes their capacity for thinking clearly, causing a separation from the social that further iterates their status as exiles from the human. The fear of losing control over one's voice is never just a rejection of inarticulacy; nor is it as simple as a terrified reaction to the prospect of a 'half-aware imbecile' (14) death in incommunicable pain. It also includes social and cultural protocols surrounding the communicability of disease and the tradition of secrecy about cancer in particular. Without the ability to describe the experience of her/his illness, the cancer subject cannot resist the silence that attaches itself to the disease, a silence that is frequently associated with shame and moral contagion. Sontag says that 'any disease that is treated as a mystery and acutely enough feared will be felt to be morally, if not literally, contagious' (Sontag, 1991: 6), and for Stacey the 'truth' of cancer is that it is routinely kept from patients or their families as a misconceived 'kindness'. But that masking of the suffering and pain of cancer works with the mystery of its aetiology to inhibit productive dialogue and effective psycho-social care for cancer subjects, rendering them further beyond the pale of social integration. 'Sickness' may be, as Nancy Scheper-Hughes and Margaret Lock remind us, 'a form of communication ... through which nature, society and culture speak simultaneously' (quoted in Gwyn, 2002: 137), but it is also a form through which the cancer subject is interpolated within a particular marginal subject position.

All three men describe the alienating sense of being positioned as sickly within societies that are unsettled by disease. Prior identities, achievements, values, interests, plans, and opinions become secondary to the bare fact of their having cancer, thus reducing the hard-won shape of the self to a manifestation of ill-omen and morbid fantasy. Being afflicted with cancer means not only to secede one's subject position but also to have a less desirable position imposed upon oneself. The position of the cancer subject as 'victim' or 'sufferer' is most frequently articulated through expressions of sympathy and compassion. Yet, it is also a position which attracts outright negative condemnation. Cancer has the ability to bring about an empathetic seizure in others that manifests itself in platitudinous clichés, which, for Hitchens in particular, represent further forms of diminishment. He scathingly attacks the glib determinism of those who seek logic in the malfunctioning body, and retains a specific venom for those who attribute cancer to fate or divine justice; for them, the 'rodent carcinoma really is a dedicated, conscious agent – a slow-acting suicide-murderer – on a consecrated mission from heaven' (Hitchens, 2012: 12). The cancer subject fights not only the cancer, but also the rigour of others' prejudices and ill-wishes. Pinell's research into attitudes towards cancer subjects in France revealed the extent to which social narratives of health push the individual with cancer to the extremities of communal belonging. He quotes one subject's comment that: 'One does not forgive a person with cancer for recovering' (Pinell, 1987:

36), an intolerance also detected by Lubbock who sees the cancer subject being perceived as a reproach to the healthy:

People in my state, neither well nor dying, are in a halfway house of life, inherently transitional, difficult to deal with ... one could wish that we went away, were put out of circulation, until the matter had been decided one way or the other – and we were either back in the land of the living, or certainly headed for the grave. (19)

There are a number of conflated issues at work in this aggression: the perceived contagiousness of the ill; the mysteriousness of cancer's origins; the abjection of the different; the maintenance of public health; and the moral load attached to disease. Together, these elements function to expel the cancer subject from the healthy body politic, into a position of subjective nomadism from which death is the only resolution.

For all the bitterness and scapegoating that accrues to the cancer subject, however, the most isolating responses frequently come from those well-wishers for whom the indeterminate status of the loved one reveals their own limitations in expression. Outright aggression or gestures of distance from the cancer subject are relatively easy reactions to accommodate, but the loving sympathy of the well exerts an emotional cost. Each man details the linguistic blight that overcomes friends and family when informed of the diagnosis; the collapse to stumbling cliché and considerate *non sequitur* as an approximate empathetic response is sought and not found. Gould's experience is particularly interesting, as those who were informed of his illness included Tony Blair and Alastair Campbell, grandees of the New Labour movement, which was known for its slick communication style and ready political spin. There is irony in Blair and Campbell being reduced to inarticulacy by personal crisis, but their response is fairly typical. Finding a suitable register to share the losses that cancer introduces is a point of tension to which the writers often return. Such expressions represent an effort to push them further towards the isolation of Tumortown. Lubbock tries to string 'words together like ropes across voids' (Lubbock, 2012: 3), but most commonly these writers describe genuine empathy giving way to well-intentioned pity, and to exhortations of positive encouragement that rehearse the militaristic metaphors of battle. But as Hitchens makes clear, while such good-will emanates from sympathy, it frequently carries a negative moral load:

friends have told me encouraging and flattering things like, 'If anyone can beat this, you can'; 'Cancer has no chance against someone like you'; 'We know you can vanquish this.' On bad days, and even on better ones, such exhortations can have a vaguely depressing effect. If I check out, I'll be letting all these comrades down. (18)

Far from drawing the cancer subject into a community of the well, expressions of sympathy can reinforce an underlying sense of failure and moral shame, pushing her/him ever further into exile. Whether it is motivated by positive or negative intentions, what the above indicates is that the cancer subject's retreat from the human towards the creaturely involves the stepping away of others (literally, ethically and linguistically) as much as it involves the physical and psychological deprivations that the cancer subject must undergo.

### **Conclusion**

To read cancer autopathography is to engage with a view of the human condition in which anthropocentrism has been decentered - not totally undermined, but certainly defamiliarised. The continuous abjection of 'the permutations of necessity and materiality that condition and shape human life' (Pick, 2011: 5) in order to maintain the myth of human exceptionalism is revealed starkly by the force with which those permutations return in the figure of the cancer subject. Cancer is a pathology brought about by a crisis of definition – the body's over-production of identical cells. The cancer subject represents a problem of definition for the social body, a problem that generates a powerful dis-ease. S/he represents a fracture in the social symbolic, both part of, and excluded from the communal body; worthy of sympathy and yet somehow complicit with their illness; part of a social discourse and yet difficult to talk to or about. These problems of determination trouble the relationship between the human and the creaturely, and as the three writers considered here demonstrate, cancer, more pointedly than any other disease, brings that borderline into focus on the levels of the corporeal, the linguistic, and the body political. Hitchens' and Gould's rejection of the creaturely, in particular, emerges from the expedient need to distance the Other in order to maintain their selves. In the process, they show how cancer's ability to rend us from subjectivity reveals deep-lying fears about the fragility of our myths of soulfulness, and about the suppressed private and public horror of becoming THAT.

### **Works Cited**

- Aronson, Jeffrey K (2000). 'Autopathography: The Patient's Tale'. *British Medical Journal* 321. 23-30  
December: 1599-1602.
- Foucault, Michel (1973). *The Birth of the Clinic: An Archaeology of Medical Perception*. London:  
Tavistock Publications.
- Gould, Philip (2012). *When I Die: Lessons from the Death Zone*. London: Little Brown.
- Gwyn, Richard (2002). *Communicating Health and Illness*. London: Sage.
- Helman, Cecil G (2007). *Culture, Health and Illness*. 5<sup>th</sup> ed. London: Hodder Arnold.

- Herzlich, Claudine and Pierret, Janine (1987). *Illness and Self in Society*. Baltimore: John Hopkins University Press.
- Hitchens, Christopher (2012). *Mortality*. London: Atlantic Books.
- Lubbock, Tom (2012). *Until Further Notice, I Am Alive*. London: Granta.
- Lupton, Deborah (2003). *Medicine as Culture: Illness, Disease and the Body in Western Societies*. 2nd ed. London: Sage.
- Mukherjee, Siddhartha (2011). *The Emperor of All Maladies: A Biography of Cancer*. London: Fourth Estate.
- Pick, Anat (2011). *Creaturely Poetics: Animality and Vulnerability in Literature and Film*. New York: Columbia University Press.
- Pinell, Patrice (1987). 'How Do Cancer Patients Express Their Points of View?'. *Sociology of Health and Illness* 9.1: 25-44.
- Pouchelle, Marie-Christine (1990). *The Body and Surgery in the Middle Ages*. Cambridge: Polity Press.
- Saunders, George (2013). *Tenth of December*. London: Bloomsbury.
- Sontag, Susan (1991). *Illness as Metaphor; and AIDS and its Metaphors*. London: Penguin.
- Scarry, Elaine (1985). *The Body in Pain: The Making and Unmaking of the World*. New York; Oxford: Oxford University Press.
- Stacey, Jackie (1997). *Teratologies: A Cultural Study of Cancer*. London; New York: Routledge.