



www.ucalgary.ca/hic/ · ISSN 1492-7810
2003 · Vol. 3, No. 1

The Therapeutic Psychopoetics of Cancer Metaphors: Challenges in Interdisciplinarity

Ulrich Teucher

Abstract

Narratives of life with illness occupy a rapidly growing field in interdisciplinary health studies. Among illnesses, cancer is the one most often addressed. It is obviously an experience that is enormously difficult to put into language, and it comes as no surprise that cancer discourse abounds with metaphor. Given the pervasiveness of metaphor in cancer discourse, it is important to examine how these tropes are used in a struggle for meaning that appears to be particularly crucial in cancer. Metaphors that may seem constructive and therapeutic to one patient or writer (or to his/her readers) can be destructive and further traumatizing for others. Because our meanings vary so radically, we need to analyze the range of metaphoricity in cancer discourse and map the resources of language for conceptualizing cancer. This study of semantic properties in cancer metaphors makes use of an interdisciplinary "therapeutic psychopoetics" to focus on cancer metaphors in Fritz Zorn's 1981 cancer autobiography *Mars*. An introductory discussion identifies a methodological basis for such interdisciplinary work, which makes use of both quantitative and qualitative research methods, all in order to improve our sense of the complexity of problems involved in cancer therapy.

Narratives of life with illness, disability, or trauma occupy a rapidly growing field in interdisciplinary health studies, and have done so increasingly over the last thirty years. Among illnesses, cancer is the one most often addressed through narrative. It is obviously an experience that is enormously difficult to put into language: how should the lived experience of suffering, uncertainty, and the fear of dying be stated? Not surprisingly, cancer discourse abounds with metaphor. In fact, as Anatole Broyard has noted in *Intoxicated by My Illness* (1992), his autobiographical narrative about life with cancer, "the sick man sees everything as metaphor" (7). Broyard's text, replete with metaphors, is itself a metaphor of his experience. Given the pervasiveness of metaphor in cancer discourse, it is important to examine how these tropes are used in the struggle for meaning. The texts as metaphor and the metaphors in the texts can reveal a writer's general orientation towards the body and self, illness, life and death. As such factors and orientations differ, often radically, each cancer narrative tells a distinct story. Moreover, the language of each narrative reveals an astonishing variety of attributed or assumed meanings that appear particularly crucial in cancer. Metaphors that may seem con-

structive and therapeutic to one patient or writer (or to his/her readers) can be destructive and further traumatizing for others. Because our meanings vary so radically, we need to analyze the range of metaphoricity in cancer discourse and map the resources of language for conceptualizing cancer.

This paper establishes the crucial importance of metaphor in narratives of life with cancer, examining the therapeutic, psychological, and literary properties of metaphors. This interdisciplinary “therapeutic psychopoetics,” as it were, is based in part on a quantitative, cross-cultural study of metaphors in cancer discourse that sets up a cultural background for the qualitative literary analysis of published and unpublished cancer narratives. The combination of quantitative and qualitative methods in interdisciplinary research is not without risks. Therefore, this paper begins by proposing a working basis for such kinds of interdisciplinary work before introducing an empirical study of cancer metaphors and the detailed analysis of battle metaphors in Fritz Zorn’s cancer autobiography *Mars*.

A Show of Flags: Interdisciplinary Methodologies

In my work, I pursue an interdisciplinary “therapeutic psychopoetics” that involves both quantitative and literary, qualitative analysis — that is, research methods from both the sciences and the humanities. However, these two fields of research have existed in a state of alienation ever since the birth pains of the “scientific revolution” in the seventeenth century (Gould), an alienation that was periodically reinvoked and fanned, for example, by C. P. Snow’s infamous *Two Cultures*, if not raised to the status of outright war (e.g., Brown; Weinberg). Indeed, much interdisciplinary practice at the university shows that, despite recent commitments to such research, unproductive stereotypes and frustrations abound between the arts and the sciences. Therefore, any interdisciplinary investigation that uses research procedures across this traditional divide must carefully justify its methodologies and underlying theoretical assumptions.

Usually, the differences between the sciences and the humanities are conjured up as divisions between “realists” and “relativists”: relativists depict realists as hardnosed scientists who perceive only objective facts, universal truths, and laws of nature, while realists paint relativists as obfuscating postmodernists who consider all knowledge to be subjective social constructions rather than fact-based. However, such distinctions exist only in the minds of “extremists on both sides” (Gould 95). Most scientists do not obsess over universal laws, but view their discipline as an opportunistic enterprise that is driven by solvable problems and not by final solutions (Rheinberger 2003, personal communication). Medical doctors, for example, often use anecdotal evidence to back up quantitative conclusions (“Once, I had this patient who . . .”; see also Hunter). Literary scholars, on the other side, rigorously study and evaluate authors, works, poetics, or genres in a systematic fashion in order to produce credible analyses. In fact, some branches of literary scholarship involve the use of computational algorithms to study the complexity of language and sentence structure in literary works (e.g., Siemens and Winder; Siemens). In other words, the dichotomy of objective versus subjective work does not adequately reflect the differences between the arts and sciences; in fact, there may be more differences within rather than between the disciplines (Salter and Hearn).

History of Intellectual Culture, 2003

Still, some have argued for the existence of contradictory, opposing philosophies that are believed to have existed since the beginning of the literary record and that may underlie individual scholars' fundamental research assumptions, whether they are in the sciences or the arts. The philosopher Marquard (e.g., *Farewell, In Defense, Philosophie, Zukunft*), for example, identifies two basic assumptions, namely the concepts of unity versus plurality or, in contemporary words, globalization versus pluralization. These assumptions are said to express two quite opposing fundamental human longings in our cultural lives. Rather than taking sides in one or the other of these camps and being worn down by the "culture wars," however, Marquard suggests that we commit ourselves to neither, for these assumptions exist in a compensatory relationship (Marquard, *Skepsis* 30). For example, contemporary technological and scientific standardizations are compensated by historical and aesthetic multiplications, including the religious pantheon of denominations or the abundance of cuisines (*Skepsis* 34-35). Thus, Marquard can accept these assumptions as two ways of making meaning of the world; yet, he can also be critical of claims to unity, whether in the guise of Plato's One Being or Habermas's goal of the emancipatory-egalitarian normative human and universal consensus, as well as of claims to multiplicity, ranging from the Sophists to Lyotard and Rorty (Marquard, *Skepsis* 32). Compensatory relationships are not without tension — but such tensions are to be endured, argues Marquard (*Skepsis* 44).

Marquard's brand of philosophical skepticism would obviously not pursue forms of interdisciplinary research that, in the words of Klein (*Interdisciplinarity*; see also *Crossing Boundaries*), attempt to create a unity of knowledge across different disciplines, in "a process for achieving an integrative synthesis" (188). Such attempts, echoed in Somerville's recent title *Transdisciplinarity: Recreating Integrated Knowledge*, have been criticized by Salter and Hearn in *Outside the Lines: Issues in Interdisciplinary Research*. The latter draw a much more heterogeneous portrait of interdisciplinarity that respects traditionally grown disciplines as pragmatic expressions of different research practices and that claims not an integrative but an "instrumental view of knowledge." Such "problem-oriented" interdisciplinarity is limited in scope; it borrows and applies tools across disciplines without claiming to producing a synthesis of knowledge, and it leaves existing disciplinary boundaries unchallenged (Salter and Hearn 9, 173).

Aiming for more humble designs, "instrumental" interdisciplinarity does not ignore the considerable difficulties of those who negotiate between the disciplines. It identifies new problem fields that are not sufficiently addressed by traditional disciplines, as these new fields may "seep" across traditional disciplinary boundaries. The discourse of health, particularly with regard to narratives and metaphors of cancer, constitutes one such new field that makes use of, and analyzes, the specific discourses of illness prevalent in established fields that range from medicine, biology, and psychology, to philosophy and literature, all in an effort to learn more about the complexities of life with cancer. Given the different disciplines that make up this field, research in this new field may use both quantitative and qualitative methods in a compensatory way while acknowledging the tensions that may exist between these approaches. This is the aim of my "therapeutic psychopoetics" of metaphors in cancer narratives.

Cancer Narratives and Metaphors

Cancer narratives occupy a rapidly growing part of life-writing, covering the full literary spectrum from popular literature and self-help manuals such as Gilda Radner's *It's Always Something* to highly crafted books like Audre Lorde's *Cancer Journals* or Maja Beutler's *Fuss Fassen* ("Finding a Foothold"). While cancer autobiographies have been published since the early 1970s, there are earlier letters, for example, by the novelist Fanny Burney about her unanesthetized mastectomy in 1812, or by Alice James, about life with breast cancer before her death in March 1892. All of these autobiographical narratives are of interest to scholars for psychological, social, and literary reasons, for they tell us much about individual and cultural concepts of health, illness, and mortality as we struggle for meaning when living with a life-threatening illness. Moreover, they tell us how difficult it is to find words and metaphors for this experience and to find a narrative thread for an experience that itself tears through the narrative fabric of our lives.

One of the most common metaphors in the language of cancer is that of war, as noted already by Susan Sontag (1977). Cancer is perceived as the enemy, and the treasonous body accused of betrayal. There are medical battles that cut, burn, or corrode the landscape, and internal battles that rout perceived personal faults. These battles may be historicized with allusions to historical wars (World War II, Vietnam War, Gulf War), crimes against humanity (holocaust), or natural disasters. The imagery of war is rousing and gives voice to the anger that one feels, and it provides a focus for one's energies in times of chaos. However, the imagery of war is also divisive. Searching for fault, it sets up the body or psychological imperfections as the enemy. It demands that one be strong and fight hard to be victorious and it leaves those who have an incurable disease feeling like losers who have not done enough and must die defeated. A different metaphor used to conceptualize the chaos and uncertainty of the experience is the metaphor of the journey. It suggests an imaginative scope and open-endedness that is therapeutic to some, but in its uncertainty disturbing to others.

What is it about metaphor that produces this abundance of meaning? Put simply, metaphors are expressions that suggest some kind of similarity between essentially dissimilar terms. They can be used to embellish language ("Life is a bowl of cherries") or in moments when words are hard to come by, as is often the case with cancer; thus, people may say "Cancer is war." Blumenberg, Gendlin, Goatly, Lakoff and Johnson (*Metaphors, Philosophy*), Ly-can, Olney, Ricœur, and others show how metaphors function as vivid, embodied gestures that mediate between lived experience and familiar everyday life. According to Ricœur, metaphors elicit "seeing something as something else," inviting a move from an act of linguistic analysis to phenomenological experience, where hidden similarities and differences are uncovered between the constituents of a metaphor (188, 207). It is this play between difference and similarity, and between cognitive act and experience, that evokes new meanings in metaphor (189, 205). For Ricœur, "it is by means of metaphor that our deepest insights into reality can and must be expressed" (qtd. in Gill 35). This existential importance of metaphor is relevant in situations of crisis, when people struggle to find words and explain a reality that seems to escape literal language. James Olney and Hans Blumenberg explore the use of metaphor as a fundamental human response to crisis. Providing a means of distancing oneself from a terrifying experience, metaphor appropriates the terror of the unknown in terms of more calculable,

known magnitudes. As metaphor reinterprets the unknown in terms of the known, and substitutes order for chaos, it helps to dissolve panic or paralysis and, at least momentarily, makes existence more bearable. But consider how difficult it must be to express the experience of cancer if the comparison is war, an experience that many have said is itself impossible to relate.

In a crisis, metaphor functions primarily to stabilize our selves in uncertainty and change and to distance us from fearful chaos. Therefore, it is not surprising that the discourse of cancer abounds with metaphors. Cancer presents one of the most terrifying epitomes of the unknown: it is disorderly, unpredictable, and resists our attempts to impose order on its progression. Another important aspect is that those who are in the midst of crisis and faced with disorder and the unknown have, as Olney argues, a heightened sensitivity for metaphor and its meanings, compared to those who imagine themselves safely in the order of the known. For those who are healthy, cancer metaphors may provide a momentary window out into the disorder and fear of life with cancer; for those who have cancer, these metaphors are the only windows that open from enveloping chaos into a space of apparent order.

However, the order that metaphor suggests is always eroded by the disorder that is metaphor's motive, whether it be the contingencies of the universe, of life, or those of cancer. And if the desired order reveals itself as contingent upon the underlying disorder, it follows in turn that what we see as disorder is being constructed from our views of order. This means that both terms, order and disorder, are dependent on each other; order remains as elusive as disorder, keeping the meanings of metaphor forever fluid. In the end, then, metaphor and its meanings are open for interpretation and negotiation.

Cancer Metaphors: Empirical Analysis

To learn more about the cancer metaphors we use, I began my interdisciplinary research of cancer discourse with a cross-cultural, empirical study of cancer metaphors among people with and without cancer to generate a wider cultural background for the analysis of metaphors in cancer narratives. Also, I had noted that most published cancer narratives were produced by patients who already were in the habit of writing for personal or professional purposes before they became ill. To widen my basis for analysis, I approached hospitals and support groups to meet a much wider group of patients, many of whom would not ordinarily write. Standardized questionnaires were designed, providing anonymity and offering voluntary participation, and including questions regarding demographics. The questions were randomized and gender balanced, and relevant statistical checks were applied, and multivariate analyses (ANOVAs, MANOVAs) performed.

In the first part of the study, 126 participants were approached in Vancouver and Hamburg, including 60 cancer patients in cancer hospitals and/or support groups, and 66 people without cancer in local universities. The objective was to look for a heterogeneity of metaphors; standardized questionnaires were used to elicit as many different metaphors as possible. More than 1600 descriptors were gathered and, by eliminating various kinds of synonyms or redundancies, reduced to 184 different cancer metaphors and 145 cancer treatment metaphors. This separation seemed useful, as some cancer patients conceive of both cancer and its treatment, for example, in terms of war, while other patients use different metaphors for can-

cer and its treatment. Cancer patients were also invited to write personal narratives about their experiences, and 29 narratives of various lengths were collected.

This amount of data was still too large and needed to be further reduced to obtain a more manageable representation. A second study was designed in which a new set of participants (120 in total) rated how typical they thought the metaphors were on a scale from 1 to 7. Lists of the 50 highest rated cancer metaphors and cancer treatment metaphors were extracted from the results. For the third part of the study, these 50 metaphors were printed on cards, one metaphor per card. Another set of 151 new participants was asked to sort these cards into groups of any size, according to any kind of meaningful relationships that were perceived between any of these cards. Using statistical methods such as Hierarchical Cluster Analysis, Multidimensional Scaling, and other methods, I calculated how closely or far apart people related these metaphors to each other. The resulting numbers were transformed into a three-dimensional space organized around three axes: *internal/external*, *intangible/tangible*, and *static/dynamic*. As figures 1 and 2 show, distinct clusters of metaphors could be identified in this space. For the sake of clarity, I idealized the clusters as spheres and identified them by different colors and labels that summarize the meaning of the various metaphors within each cluster.

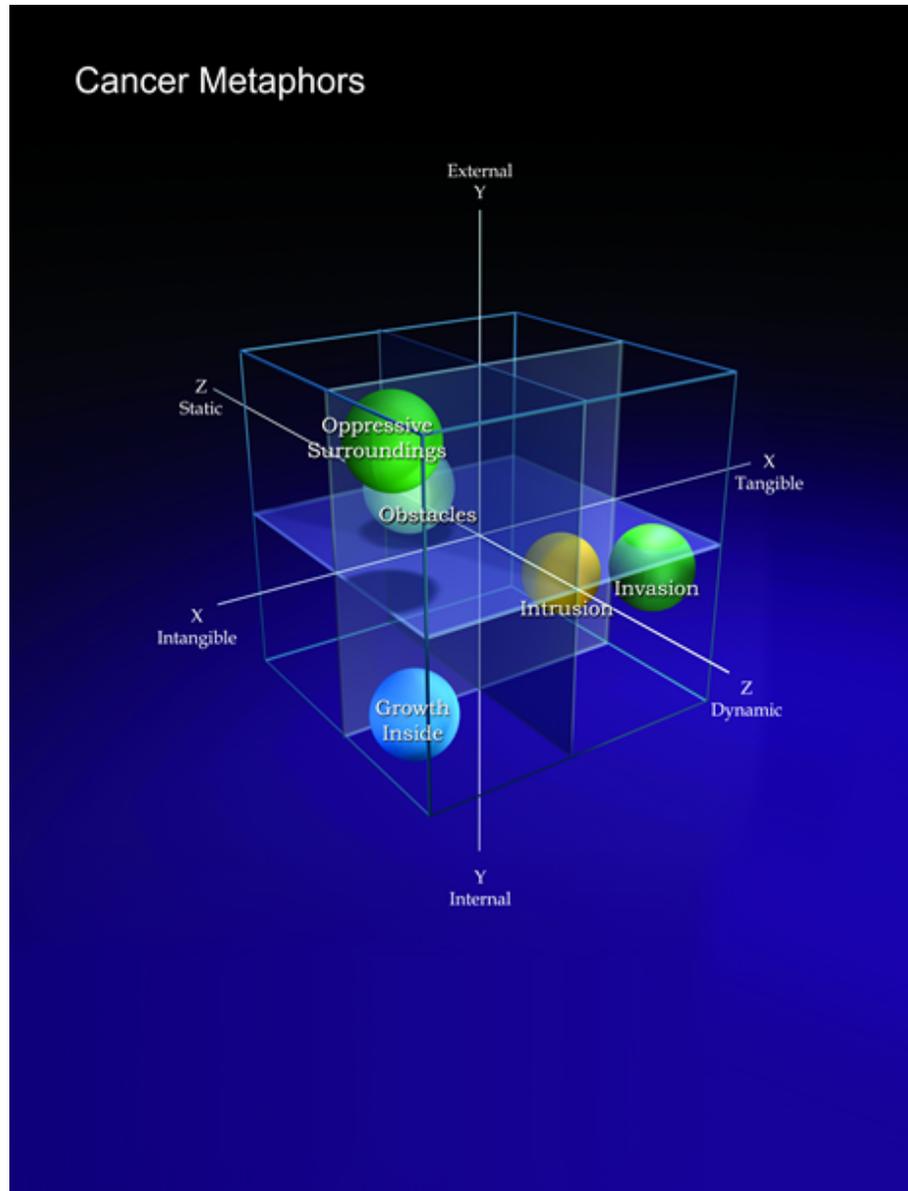
In Figure 1, "Cancer Metaphors," one cluster appears towards the forward, right side of the space ("Invasion"), while three other clusters occupy the center field. One cluster ("Intrusion") is located quite centrally while two others appear to the left side, one above ("Oppressive Surroundings") and one below ("Growth Inside"). The opacity of a fifth cluster ("Obstacles") signals its recessed position further back in the space.

The cluster "Invasion" contains metaphors such as "invasion," "attack," "opponent," "enemy who must be fought over forever," and "battle." The cluster "Intrusion" features less belligerent images, such as "unwelcome intruder in the body" and "thief that steals one's time, energy, and dreams." The cluster "Oppressive Surroundings" is made up of metaphors such as "dark, overhanging cloud," "dark scary cave," and "darkness," while the cluster below, "Growth Inside," features metaphors such as "being eaten from the inside out," "death growing inside," and "parasite." The recessed cluster "Obstacles" features images such as "stone wall that blocks my road and forces me to find other paths," "great burden," and "hard stroke of fate."

A closer examination of the underlying dimensional structure of the clusters reveals differences which otherwise share a general sense of an externalized opponent. Cancer as Invasion is *external*, *concrete*, and *dynamic*. Cancer being like an Intruder is similarly *concrete* and (largely) *dynamic*, but it is distinct from the Invasion cluster in that items are located more towards the *internal* pole. A "thief" enters one's house, where "house" represents the body, and thus is an "unwelcome intruder *in* the body." While externalized as an entity, the opponent remains internal or enters behind the boundary of one's skin, thus rendering it more "invisible" or lurking in the cinematic shadows of *film noir*, so to speak. The Internal Growth cluster is similarly *internal* and *dynamic* ("foreign body, unfortunately coming from the inside"), but is distinct from the two prior opponent clusters in its location towards the *intangible* pole. While externalized, the location of the organic metaphors *within* the body renders the tangibility of the externalizations more ambiguous. Thieves begin outside and then enter, whereas a

“growing being inside the body” or “death growing inside” confuses the boundary between self and non-self.

In Figure 2, “Cancer Treatment Metaphors,” six different clusters are discernible. A cluster of belligerent metaphors, “Battle,” appears in a similar position to the “Invasion” cluster in Figure 1. The “Battle” cluster comprises metaphors such as “fighting fire with fire,” “battle,” and “chemical weapons.” A chainlike arrangement of metaphor groupings works its way up from the recessed, lower parts of the space towards the front, including clusters such as “Hope,” with its more tentative images “hope renewed” and “a glimpse of light;” the more



agentive cluster “(Taking on the) Task,” with metaphors such as “exorcising one evil with another” and “a powerful light destroying bad cells;” the cluster “Work,” with metaphors such as “a long hard road with many ups and downs” and “pushing a stone up a hill though it always rolls down again (‘Sisyphus’);” and finally the cluster “Race,” with metaphors such as “race against time” and “racing against a time bomb.” A sixth cluster, “Contingency,” appears in the recessed upper left quadrant, containing metaphors such as “playing roulette or dice” and “a lottery win if a cure occurs.” As with Figure 1 (“Cancer Metaphors”), the relations between the various clusters in Figure 2 (“Cancer Treatment Metaphors”) can be helpfully interpreted along three dimensions (internal/external, tangible/intangible, and static/dynamic).

Figures 1 and 2, then, represent a semantic space of metaphoricity, providing a sense of a cultural background of metaphors that are commonly used in cancer discourse. The cancer metaphors unfold the fearful threat of cancer while the cancer treatment metaphors reveal the

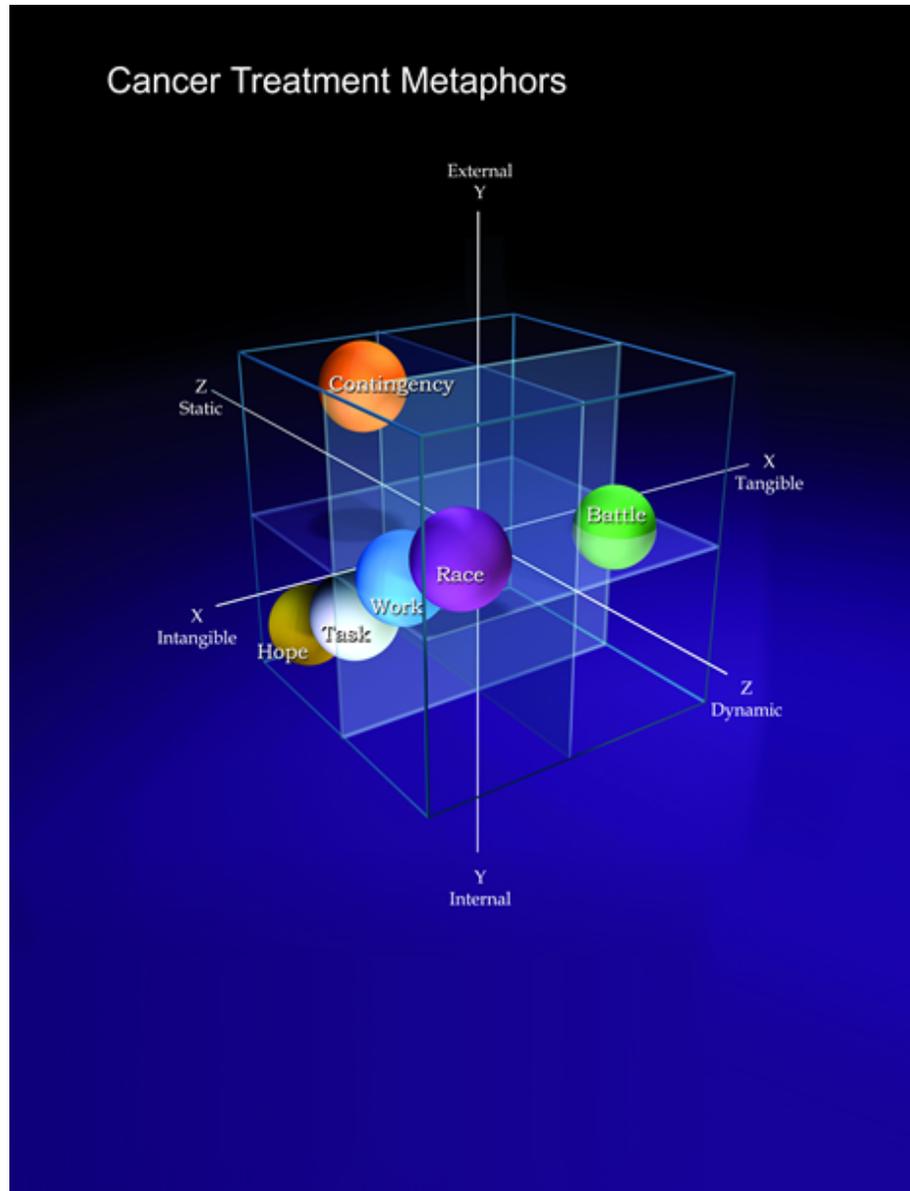
dangers of the treatment and some attempts to reinterpret its harshness in a more positive imagery. We can now come to conclusions about metaphorical representations in autobiographical cancer writing and compare various writers' metaphorical choices with those of others. The following section provides an analysis of the metaphors in the 1981 English translation of Fritz Zorn's *Mars*.

Metaphors of Battle: Fritz Zorn's *Mars*

Mars is Fritz Zorn's account of his life with cancer. A parable of life in a carcinogenic society, it is Zorn's declaration of war on a social environment that he believed had caused his cancer. Published in

1977 in Germany, the book became an immediate success. *Mars* provides an impressive example of the problems involved in the use of battle metaphors. It is also an example of the generic mutability of cancer narratives, beginning with the grand retrospective of an autobiography and ending in the immediacy of a diary.

Zorn, a Swiss teacher with a Ph.D. in Romance Studies, died on Nov. 2, 1976, of metastatic malignant lymphoma, only a few hours after receiving the news that his manuscript had been accepted for publication. The writer's name and the title of the book already indicate the main metaphor of the book. As the poet Adolf Muschg noted in his foreword to *Mars*, Zorn changed his real name, Fritz Angst, to protect the privacy of his family (Muschg 67; Zorn 7). Angst, whose name translates into "fear," chose the pseudonym "Zorn" ("wrath"). The title *Mars* refers to the Roman god of war, aggression and creativity. Zorn wanted his case to be under-



History of Intellectual Culture, 2003

stood as symptomatic, and as a war cry against the regimentation and repression of life in bourgeois society. Three months before his death, the defiant Zorn proclaims in the final line of his narrative, "I declare myself in a state of total war" (220).

Mars became an instant milestone in the developing genre of illness narratives in Germany and one of the rare accounts to be translated into different languages, including an English translation under the same title in 1981. A recent production of *Mars* as a play in Switzerland and Germany, staged by the playwright John Kresnik, demonstrates its continuing influence and importance. At the same time, Zorn's account is a disturbing example of the dangers that lie in combining battle metaphors with the concept of cancer as caused by psychological trauma. In Zorn's view, inspired by Wilhelm Reich's reinterpretation of Freud's work on the etiology of neuroses, cancer has psychosomatic and psychosocial causes, rooted in the repression of life energy owing to the forces of a repressive society. Zorn alludes to these links in the opening of his book, an opening that may be considered a classic example:

I am young and rich and educated; and I am miserable, neurotic, and lonely. I come from one of the very best families on the east ("right") shore of Lake Zürich, also known as the "Gold Coast." I had a bourgeois upbringing, and I have been a model of good behavior all my life. My family is fairly degenerate. It is likely that I have much genetic damage, too, and I am maladjusted. Needless to say, I have cancer. (3)

"Total War"

The central conceptual metaphor of *Mars* is obviously, as the title suggests, cancer as war, fashioning Fritz Zorn as a warrior against cancer and its causes, itself a belligerent enemy that gathers definition over the course of the book.

In the book's first of three chapters, the writer describes his upbringing as a boy under siege. He accuses his parents of having "raped" his fledgling childhood personality to prevent the harmony at home from attack. The parents fortified their home as if it were surrounded by hostile aliens (29). Zorn attributes to this mentality the fact that he came to think of his self and body as impenetrable. He could not bear the sight of doctors who might prick his skin and draw blood, mustering an "arsenal" of sharp and painful instruments (43). As a young adult, Zorn supported the hippie slogan "make love, not war" and condemned the Swiss concept of every citizen in uniform (61). When he detected a growth on his neck, he intuitively suspected it to be a sign of "swallowed tears," of repressed emotions, erupting violently. Redefining himself in light of his illness, Zorn takes pride in his astrological sign, Aries, the most "Martian" sign in the zodiac (144). According to the writer, people born under the sign of Mars need an external focus against which they can project their creative abilities; otherwise, their aggressive energies will turn inward against the self (145). This danger exists particularly for those whose birth sign is located in the fourth house of the chart, namely the house of parents and family: they come into the proximity of cancer, both astrologically and medically. Here, of course, Zorn proves his own case and his need to engage his illness by constructing an external focus (146).

History of Intellectual Culture, 2003

In the second chapter of *Mars*, there is no longer any mention of creative aggression, as the cancer progresses rapidly. Instead, Zorn concedes defeat in his war against a superior force, the anonymous “hostile principle” in a life under the repression of the bourgeoisie (167). Cancer is now a “monstrous foreign body” (166) that has made its way into his body, yet is delineated from Zorn’s “true” self (167).

In the third chapter, the earlier themes are reformulated and the “hostile principle” more clearly defined. In particular, Zorn judges his parents, society, and religion for the burden of guilt they must carry for causing his illness. It is a war within and without, against both the repressive forces he has internalized and their external representations. As the cancer pushes through the skin, the metaphorical enemy penetrates natural and even metaphysical realms, first assuming the shape of a “polluted biotope,” then an “infernal computer,” and finally the omnipresence of the Christian God. Taking on God as the arch-enemy, Zorn raises the stakes, declaring “total war.”

The battle metaphor organizes every aspect of Zorn’s life. He fights not only his self and his body, but illness in general, society, the world, God, and death. This fight is closely linked to the explanation of cancer as psychopathology, showing the problems of this concept when taken to its extremes. The view that cancer can be cured by introspection and vitalistic expression may seem supportive as long as the cancer is subsiding, with or without therapy. Where the causality of cancer is seen as psychological, the identification and resolution of past psychological trauma can foster the sense of a more defined, or even unified, healing self in control, justified and stabilized by the abatement of cancer. The dichotomy between conscious health and unconscious illness promises ideal health when all adverse conditions are resolved. Often, however, as is the case with Zorn, the cancer returns or progresses. Based on the metaphor of cancer as psychopathology, Zorn cannot but conclude that he has not defined his opponent clearly enough in the labyrinth of his own unconscious in order to fight it effectively. The self in control becomes suspect, turning against itself and, at the same time, fortifying itself with ever-increasing anxiety. The faster the cancer proceeds, the more the self is under siege, and the farther Zorn must cast his defenses. Every new metastasis seems to say that he was not working hard enough. His model of illness leaves him no escape hatch; he must, of necessity, attack all the foundations of his world, even the metaphysical world. Taking the metaphor to its extremes, he cannot avoid taking on and denouncing God. His only refuge is the very act and voice of denunciation, a voice that raises Fritz Zorn above God. As long as his cancer progresses, Zorn must denounce God and the world as well as everything in himself that does not denounce the world and God.

Similarly, elevating a “true self” as the master of his being, Zorn must fight not only the polluted self, but also his body. While he strives to overcome the denial of his body, he waits for his neurosis to abate first, and his body to heal from impotence and cancer, before he can hope to enjoy it. Riddled with cancer, the body is but a sign of pollution. Where health is constructed in a binary, as an ideal condition, there can be no relationship with death other than denial or forced battle. Based on such views, from whatever age, life appears as eternal and death far away, no more than an accident to be avoided. And while many cancer patients appreciate support, they must, on this account, bear their suffering and their fear of dying alone. Zorn saw this clearly:

Faced with death, I can do, more or less successfully, what a human being faced with death can. Before I die, I can review the thoughts that all humanity before me has ever had about death, but I'll have to die my individual death alone. The explanation for and the significance of my psychic illness can be grasped on a general level. The thoughts I have had about that illness have a certain validity for everyone. Anyone will, I think, be able to understand the causes of my death. But I am the only one who can experience my fear and pain. No explanations in the world can relieve me of them. When I am dead, I will be one more among many others, and the reasons I died will be understandable to many. But as a dying man, I am alone. (206-07)

Zorn quotes the defiance of Sisyphus in Albert Camus's *Myth of Sisyphus*. Camus imagines Sisyphus dying happy, even with the prospect of going to hell, just as the protagonist Meurseault approaches death happily in Camus's novel *The Stranger*. However, it seems impossible to imagine Zorn dying a happy death. The condemned Meurseault opens himself to the "gentle indifference of the world" (122) as he finds rest under the canopy of midnight stars and the smells of night, earth, and salt air. Zorn, on the other hand, declares total war on a hostile inner and outer world.

Evaluating the "Therapeutic Psychopoetics" of *Mars*

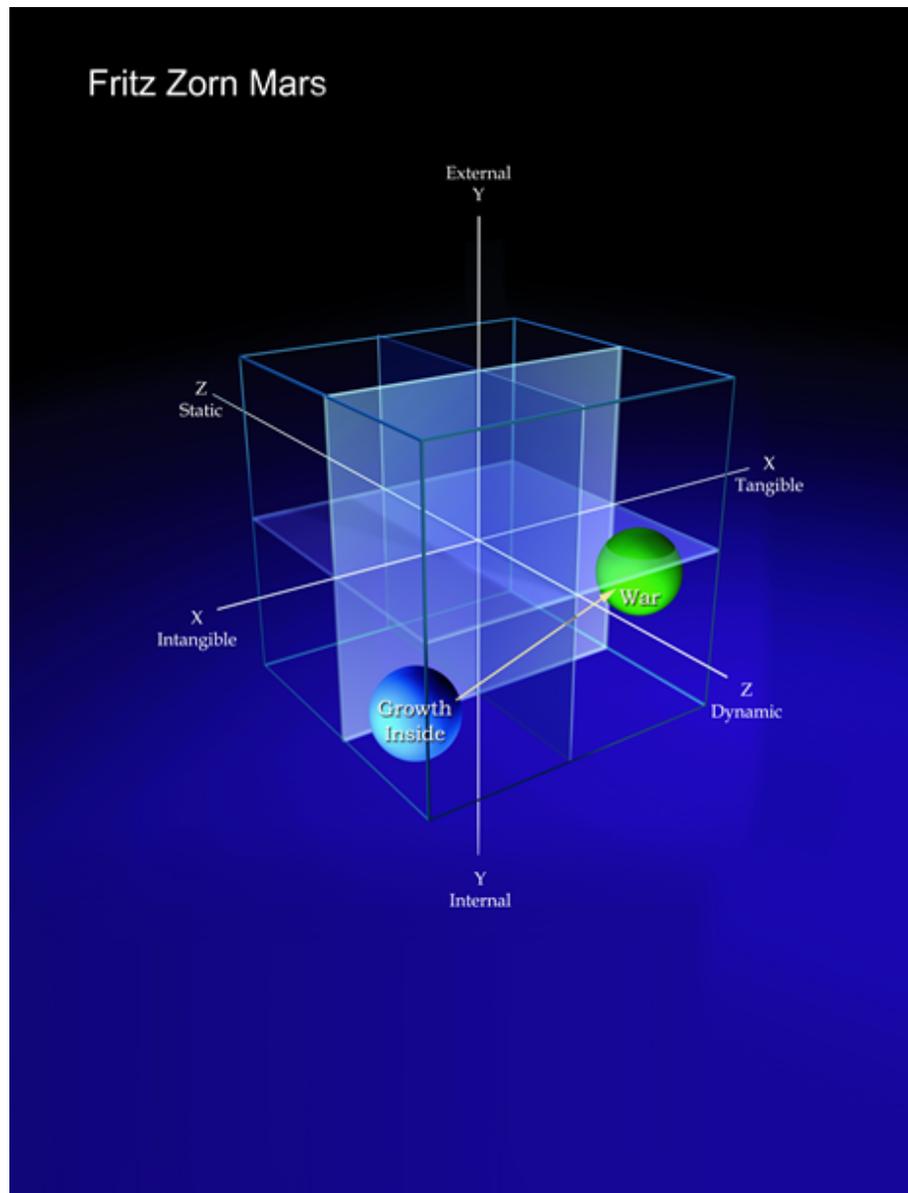
The literary reception of *Mars* over more than two decades has shown that most readers identify closely with the book and its writer. While the narrator at first speaks about his "carcinogenic" past from a great distance, the distance in time progressively narrows over the course of the book as the cancer takes over the present, the hopes for survival are shattered, and fear escalates. It is this sense of an impending apocalypse, the specter of an individual being vanquished by an anonymous force, which speaks to primal fears among many readers and precipitates the recognition that the narrator "is like us." The increasing alienation perceived in the writing of *Mars* enhances the drama of the action and further invites the audience to identify with the narrator. For many readers, the tragic irony in *Mars* (that is, the awareness that the writer will die despite his hopes) and the developing sense of an impending disaster will evoke a catharsis of pity and fear.

From a psychological perspective, it appears that the cancer imagery that Zorn uses is limited. The metaphoric space opens with the image of cancer, in chapter one, as an initially intangible, dynamic "growth inside" that signifies repressed emotions as a part of the self, referred to by another metaphor, "swallowed tears" (118). In chapter two, cancer becomes a "monstrous foreign body," considerably larger than his "true" self, still internal and intangible (166), and suggesting a dividing line between what is native or alien to the "true" self (167). In chapter three, cancer turns into a well-defined enemy which has enveloped Zorn internally and which is externalized as a dynamic biotope, an infernal computer, or a vindictive God. While these metaphors serve to define the alien from the true self, they still remain in the abstract. The engagement of the enemy occurs at the boundary between self and the world, more

internally than externally, dynamic and tangible in the visible, mutating protrusions from the body surface and the repressive constructs of culture and religion. All metaphors are located in the dynamic spectrum of the metaphorical space, revealing a lack of static imagery that could provide a balance. Figure 3 shows that Zorn draws from a narrow spectrum of metaphoricality.

The therapeutic characteristics of Zorn's metaphoric space for cancer, in combination with his belief that cancer is a physical expression of a neurosis, show the immense difficulties and dangers that such concepts and battle metaphors can present. Battle metaphors by themselves may function as a rallying cry and foster solidarity among the like-minded. They function particularly well for those who live to tell their stories, providing a dramatic, single-minded concentration of all efforts towards one goal. In addition, they provide an effective structure for a narrative of survival, subsuming all uncertainties and setbacks under the single image of adversity to be overcome. However, the battle metaphor loses its effectiveness when the illness turns chronic, or when the patient thinks of life not only in terms of overcoming adversities.

In his choice of literary, psychological, and therapeutic form, Zorn shows good control of his metaphors: the metaphor of self as a "true self," enacted in the form of retrospective autobiography, sets the narrating self up as a chronicler of its history and "victor" over the selves of the past, as Walter Benjamin had noted (qtd. in Sill 110). This perspective interweaves with the battle metaphors and the desire to challenge and control his illness. With this unified form,



Zorn sets out to “write off” cancer. Had Zorn’s cancer regressed, *Mars* would have been an exemplar of the “triumph over adversity” and “mind over matter” genre. We might have learned more about the woman whom Zorn met often for talks in the last months of his life. We might have seen another voice and its face, and intimations of the love, sexuality, and relationship that Zorn lacked and sought so desperately, viewing them as the true proof of the recovering of his soul. Tragically, his cancer outgrew the metaphoric form of *Mars*.

Conclusion

Two concluding observations should be made. First, I argued that metaphor moves between order and disorder, or unity and pluralization, and so does my work, applying both quantitative and qualitative methodologies in a compensatory function. In other words, I systematically collected and quantified metaphors, generating a quasi-embodied space of metaphoricity that organizes the general use and semantic dimensions of metaphors in our discourse, for example, in the use of cancer metaphors. Qualitative, interpretive analysis of cancer narratives, however, reveals the individual and culturally distinct uses of cancer metaphors. For example, we learn from qualitative analysis whether a patient employs cancer metaphors as constructive metaphors that support his or her sense of well-being, or as metaphors that express the devastation of his or her life. We also may learn about gendered uses of these metaphors. Audre Lorde, in *The Cancer Journals*, derives energy from her use of the battle metaphor for cancer, identifying it with her lifelong battles against racism, apartheid, and heterosexism. On the other hand, Stewart Alsop, in *Stay of Execution*, and Michael Korda, in *Man to Man*, are reminded of their bombing flights in WWII or the Vietnam War, respectively.

Thus, the general metaphoric space that I staked out is open to different meanings. This space is not meant to suggest the exact function and meaning of each metaphor, because they differ from patient to patient and should not be prescribed to any particular patient; rather, I meant to open up the limited knowledge and limited meanings that we have of metaphors, showing that there are not only battle metaphors but many others, and a large variety of meanings in various dimensions. In particular, I showed how literary, psychological, and therapeutic disciplines and practices can be usefully involved in cancer discourse and its metaphors, in a “therapeutic psychopoetics,” so that we can learn more about the language that we use when we try to make sense of, evaluate, or give voice to the experience of cancer.

Second, as I noted, metaphors can have different meanings for different people, or even different meanings for the same person at different times. Where does that leave us who may be friends, relatives, scholars, or health professionals? How can we talk? What language, what metaphors can we use? For some patients, cancer may be a plague; for others, such metaphors are a plague. I have not yet found support for the notion that particular metaphors are best suited for particular types of patients. To some extent, the usefulness of a particular metaphor depends on the particular ways in which we make meaning of our lives when we are faced with mortality. But patients can be ambivalent, approving of a metaphor at one time and disapproving of it at another.

It would be helpful if both patients and health professionals came to acknowledge that

the meanings of language are not tightly controlled and that we cannot be expected to use language that is free of misinterpretation. This means that misunderstandings are to be expected and re-negotiated. What I mean to have developed in this paper is a typology of cancer metaphors. Further studies will be undertaken to examine potential relationships between the use of these metaphors and (a) the nature of their therapeutic effects on patients' sense of relaxation or well-being, and (b) the outcome of patients' illnesses. A fuller awareness of metaphor and its ambiguities can help us to improve our sense of the complexities involved in cancer therapy.

Works Cited

- Alsop, Stewart. *Stay of Execution*. Philadelphia: J. B. Lippincott Company, 1973.
- Annas, J. *Ancient Philosophy*. Oxford: Oxford UP, 2000.
- Beutler, Maja. *Fuss Fassen*. 4th ed. Bern: Zytglogge, 1989.
- Blumenberg, Hans. *Work on Myth*. Trans. Robert M. Wallace. Cambridge: MIT Press, 1985.
- Broyard, Anatole. *Intoxicated by My Illness*. New York: Fawcett Columbine, 1992.
- Brown, James Robert. *Who Rules in Science: An Opinionated Guide to the Wars*. Cambridge: Harvard UP, 2001.
- Buckman, Robert, and Karl Sabbagh. *Magic or Medicine? An Investigation of Healing and Healers*. Toronto: Key Porter Books, 1993.
- Burney, Fanny. *Selected Letters and Journals*. Ed. Joyce Hemlow. Oxford: Clarendon Press, 1986.
- Camus, Albert. *The Stranger*. Trans. Matthew Ward. New York: Alfred A. Knopf, 1988.
- Gendlin, Eugene. "A Reply." *Language Beyond Postmodernism*. Ed. David Levin. Evanston: Northwestern UP, 1997. 168-175.
- Gill, Jerry H. *Wittgenstein and Metaphor*. Atlantic Highlands, NJ: Humanities Press, 1996.
- Goatly, Andrew. *The Language of Metaphors*. London: Routledge, 1997.
- Gould, Stephen Jay. *The Hedgehog, the Fox, and the Magister's Pox: Mending the Gap Between Science and the Humanities*. New York: Harmony Books, 2003.
- James, Alice. *The Diary of Alice James*. Ed. Leon Edel. London: Rupert Hart-Davis, 1965.
- Hunter, Kathryn Montgomery. *Doctors' Stories: The Narrative Structure of Medical Knowledge*. Princeton: Princeton UP, 1991.
- Klein, Julie Thompson. *Crossing boundaries: Knowledge, Disciplinarity, and Interdisciplinarity*. Charlottesville: U of Virginia P, 1996.
- . *Interdisciplinarity: History, Theory, and Practice*. Detroit: Wayne State UP, 1990.
- Korda, Michael. *Man to Man: Surviving Prostate Cancer*. New York: Random House, 1996.
- Lakoff, George, and Mark Johnson. *Metaphors We Live By*. Chicago: U of Chicago P, 1980.
- . *Philosophy in the Flesh*. New York: Basic Books, 1999.
- Lorde, Audre. *The Cancer Journals*. San Francisco: Aunt Lute Books, 1980.

History of Intellectual Culture, 2003

- Lycan, William G. *Philosophy of Language*. London: Routledge, 2000.
- Marquard, Odo. *Farewell to Matters of Principle*. New York: Oxford UP, 1989.
- . *In Defense of the Accidental*. New York: Oxford UP, 1991.
- . *Philosophie des Stattdessen: Studien*. Stuttgart: Reclam, 2000.
- . *Skepsis und Zustimmung: Philosophische Studien*. Stuttgart: Reclam, 1994.
- *Zukunft braucht Herkunft: Philosophische Essays*. Stuttgart: Reclam, 2003.
- Muschg, Adolf. *Literatur als Therapie? Ein Exkurs über das Unheilbare*. Frankfurt: Suhrkamp, 1981.
- Olney, James. *Metaphors of Self*. Princeton: Princeton UP, 1972.
- Radner, Gilda. *It's Always Something*. New York: Avon Books, 1989.
- Rheinberger, Hans-Jörg. *Personal Communication at Body as Interface Conference*. Bonn, Germany, 2003.
- . *The Concept of the Gene in Development and Evolution: Historical and Epistemological Perspectives*. Cambridge: Cambridge UP, 2000.
- . *Toward a History of Epistemic Things: Synthesizing Proteins in the Test Tube*. Stanford: Stanford UP, 1997.
- Ricœur, Paul. *The Rule of Metaphor*. Trans. Robert Czerny. Buffalo: U of Buffalo P, 1977.
- Rorty, R. *Contingency, Irony, and Solidarity*. Cambridge: Cambridge UP, 1989.
- . *Philosophy and the Mirror of Nature*. Princeton: Princeton UP, 1979.
- Salter, Liora, and Alison Hearn. *Outside the Lines: Issues in Interdisciplinary Research*. Montreal: McGill-Queen's UP, 1996.
- Siemens, Ray. "A New Computer-Assisted Literary Criticism?" *Computers and the Humanities*. 36.3 (2002): 59-378.
- , and William Winder. "Technologising the Humanities/Humanitising the Technologies." *Text Technology* 8.2-3 (1998): 1-76.
- Sill, Oliver. *Zerbrochene Spiegel: Studien zur Theorie und Praxis autobiographischen Erzählens*. Berlin: de Gruyter, 1991.
- Snow, C. P. *The Two Cultures and the Scientific Revolution*. New York: Cambridge UP, 1959.
- Somerville, M. *Transdisciplinarity: Recreating Integrated Knowledge*. Montreal: McGill-Queen's UP, 2003.
- Sontag, Susan. *Illness as Metaphor*. New York: Vintage Books, 1977.
- Weinberg, Steven. *Facing Up: Science and Its Cultural Adversaries*. Cambridge: Harvard UP, 2001.
- Zorn, Fritz. *Mars*. München: Kindler Verlag, 1994, 1977.
- Zorn, Fritz. *Mars*. Trans. Robert and Rita Kimber. New York: Alfred A. Knopf, 1981.