

Illness and its Metaphors: Conceptualizing Cancer in *Une mort très douce*

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*But in our own flesh, though we bear diseases [...]
Though we are eaten up of lice and worms,
And though continually we bear about us
A rotten and dead body, we delight
To hide it in rich tissue: all our fear,
Nay, all our terror, is lest our physician
Should put us in the ground.¹*

Written in 1964, shortly after her mother's death from intestinal cancer, Simone de Beauvoir's *Une mort très douce* is a short but intensely moving auto/biographical² account in which the writer as daughter (Beauvoir) bears witness to her ailing mother's final journey in life.³ *Une mort très douce* is one of Beauvoir's most accessible but also audacious texts due to the uncompromising nature of its treatment of cancer and the inconsolable loss of a mother. Indeed, it is this honest if, at times, disturbing portrait of the mother's physical decline and eventual death in *Une mort très douce* that has attracted the attention of a number of Beauvoirian scholars, such as Ursula Tidd,⁴ Alison

1. John Webster, *The Duchess of Malfi*, ed. by Elizabeth M. Brennan (London: A & C Black, 2000), II.1, p. 33.
2. Susan Bainbrigge describes *Une mort très douce* as a text that blurs the boundaries between autobiography and biography in the way that it moves from reflections on the 'self' (Beauvoir as daughter) to a focus on the 'other' (Mme de Beauvoir), marking an important 'shift of emphasis in Beauvoir's œuvre'. Susan Bainbrigge, *Writing against Death: The Autobiographies of Simone de Beauvoir* (New York: Rodopi, 2005), p. 166.
3. Simone de Beauvoir, *Une mort très douce* (Paris: Gallimard, 1964; repr. 2008), hereafter *MTD* in the text.
4. Ursula Tidd, *Simone de Beauvoir: Gender and Testimony* (Cambridge: CUP, 1999). Tidd examines the way in which the spectacle of the suffering mother in *Une mort très douce* forces Beauvoir to confront a corporeality that is radically other to her own

Fell,⁵ Susan Bainbrigge⁶ and Oliver Davis⁷, among others. However, the focus of much of the discussion on *Une mort très douce* has, until now, been principally directed towards the mother-daughter dynamic and the impact of the mother's death on the daughter's sense of identity. Where this article will differ from previous studies of *Une mort très douce* is by veering away from the topos of interplay between 'self' and 'other' in the narrative, and, in particular, the complex nature of the mother-daughter bond, towards a keener analysis of the role played by illness in the text, the affliction in question being cancer.⁸ This article will examine the physical realities of terminal cancer as depicted in *Une mort très douce*, from the point of diagnosis through to treatment and then the final stages of the illness, charting the pain and suffering of the patient as the body gradually disintegrates. However, the article will not limit itself to a discussion of cancer as simply a biomedical story. On the contrary, it will draw attention to the illness as a lived

experience, thus calling the boundaries of her own subjectivity into question.

5. Alison Fell, *Liberty, Equality, Maternity in Beauvoir, Leduc and Ernaux* (Oxford: Legenda, 2003). Fell highlights the existence of two maternal narratives in *Une mort très douce*, the public maternal narrative which criticizes the patriarchal institution of motherhood and the role that it has played in the artificial construction of femininity and the private maternal narrative, which, on the other hand, seeks to understand the dying mother as an individual and sees the daughter using the text as a means to gain some control over her devastation at the mother's death.
6. In *Writing against Death*, Bainbrigge considers the impact of the mother's illness and impending death on the previously conflictual relationship between Beauvoir and her mother, with Beauvoir, in a reversal of attitudes, now firmly positioning herself alongside the mother and identifying with her, as opposed to defining herself against the mother.
7. Oliver Davis, *Age, Rage and Going Gently: Stories of the Senescent Subject in Twentieth Century French Writing* (Amsterdam: Rodopi, 2006). Davis discusses Beauvoir's role as biographer of the ailing 'other' and her efforts, through writing, to project a coherent image of the mother now that the latter is no longer, due to her illness, able to do this for herself.
8. Tidd, Fell and Bainbrigge have all discussed at length the impact of the mother's terminal illness and impending death on the mother-daughter relationship. They point to a change in the way that the daughter relates to the mother (ironically growing closer to her as the latter slips further and further away from life) and a reconciliation of sorts at the maternal deathbed. Rather than enter into this aspect of the text therefore, which has already been well documented, this article will take the illness itself as its focal point.

experience from the point of view of both the sufferer and the witness to the disease (in this case, the mother and the daughter-narrator respectively). In addition, the article will consider the way that cancer is viewed by society and the extent to which the failure of language to express adequately the horrors of the disease has led to the emergence of a whole series of cancer metaphors which themselves have punitive consequences for the patient. Finally, this article will attempt to argue that although *Une mort très douce* is undeniably innovative in its overt treatment of a taboo subject such as death and illness, the text is perhaps more conservative than one might initially perceive it to be. By using Susan Sontag's *Illness as a Metaphor and AIDS and its Metaphors* as a theoretical backdrop to our analysis of the text, this article will demonstrate that, in stark contrast to Beauvoir's more usual tendency to set about the deconstruction of commonplace myths in her writing (for example, the myth of femininity in *Le Deuxième Sexe* and myths relating to old age in *La Vieillesse*), her representation of cancer in *Une mort très douce* reproduces rather than challenges the gamut of 'lurid metaphors' that control the way that we think about the illness.⁹

The discussion of cancer in *Une mort très douce* will be organized around three core concepts: physical, social and existential, categories selected by Beauvoir herself in *La Vieillesse*¹⁰ when examining the process of growing old. Indeed, much of what Beauvoir says about ageing is applicable to the way that that illness is experienced in *Une mort très douce*, most notably the fact that the phenomenon is not just biological, but also cultural.¹¹ The old person, like the sick person, is the absolute 'Other', alienated due to his/her associations with degeneration

9. Susan Sontag, *Illness as a Metaphor and AIDS and its Metaphors* (London: Penguin, 2002), p. 3, hereafter *IM* in the text. *Illness as a Metaphor* first appeared in 1977, followed by *AIDS and its Metaphors* in 1989. Both essays were published in a single volume by Penguin Books in 1991 and then reprinted by Penguin Classics in 2002.

10. Simone de Beauvoir, *La Vieillesse* (Paris: Gallimard, 1970; repr. 2009).

11. Beauvoir, *La Vieillesse*, p. 19. Ursula Tidd identifies *Une mort très douce* as containing the seeds of the arguments on the topics of old age and illness that would later come together in 1970 in Beauvoir's *La Vieillesse*. Ursula Tidd, *Simone de Beauvoir* (London: Routledge, 2004), p. 102.

and decay and treated as worthless.¹² In the same way that ‘rien ne devrait être plus attendu, rien n’est plus imprévu que la vieillesse’,¹³ illness is inevitable (our bodies cannot hold out forever) and yet often, when it strikes, especially in the case of cancer, it does so in a way that is secret and insidious.

When we first meet the mother in *Une mort très douce*, she is in a state of physical and emotional distress, having just fallen in her own home, alone and unable to seek assistance. Although from this point onwards the mother will be associated with rapidly declining health, it should be pointed out that this is a relatively unexpected deterioration that seems to have crept up unbeknownst not only to her but to those around her too. In fact, prior to this fall and since her widowhood, the mother had been enjoying what could only be described as a second lease of life, travelling, studying, moving house and even getting a job volunteering in a library. While before the mother ‘se flattait de ne pas paraître son âge, maintenant on ne pouvait plus se tromper: c’était une femme de soixante-dix-sept ans, très usée’ (*MTD* 12). Here we see the cunning and stealth associated with cancer, as the disease that ‘doesn’t knock before it enters’ (*IM* 5). According to Sontag, it is the medical industry’s repeated failure to find a cure or even a satisfactory explanation for its cause that has led cancer, like tuberculosis before it and, more recently, AIDS, to be conjured up in the popular imagination as an implacable thief of life, a mystery disease that lies dormant before suddenly wreaking havoc.

Indeed, at this early stage of the narrative, although the cancer has not yet been detected, it has already begun to take hold of the mother and commenced its erosion of the body, to the extent that, when the mother is hospitalized as a result of her fall, it is not long until she is reduced to a state of complete physical dependency which, ironically, is similar to that of a new-born baby but at the opposite end of the

12. Of course, this is not the first time that Beauvoir has shown an interest in examining the position of the ‘Other’ in society. Her discussion of women in *Le Deuxième Sexe* (1949) as the ‘Other’ to ‘the One’ (man) has been well charted.

13. Beauvoir, *La Vieillesse*, p. 10.

life cycle. Many of the descriptions of the mother in *Une mort très douce* bring to mind this image, for example the way she is fed by the daughter in small spoonfuls and the type of food she is limited to — liquids, creams, purées and broken-up biscuits (*MTD* 102–03) — as her digestive system has more or less ceased functioning. Even her manner of speaking takes on the air of a child, ‘une voix d’enfant’ (*MTD* 115). She also needs one of her daughters to be continually present at her bedside (although not both, as this worries her by suggesting that she must be in a bad way), just like an infant fearing abandonment by the mother.¹⁴ It is during this spell in hospital that the mother’s cancer is diagnosed. When the doctor declares his discovery and names her illness, it is as if he has just pronounced the unspeakable; the word ‘cancer’ is repeated by the daughter-narrator (*MTD* 36) as she attempts to absorb all the meaning that comes with this term.¹⁵ Even though the mother had been convinced all her life that she would one day be afflicted with cancer, such predictions had been lightly dismissed by her children. However, it now becomes obvious to the narrator that the cancer has been developing for quite a while, and was perhaps the cause of a number of past minor ailments. Cancer, it would seem, due to the fact that ‘in the popular imagination, cancer equals death’ (*IM* 7), is a reality that is better to deny than face. Consequently, the mother, despite years of believing she would be afflicted with the disease, does not even contemplate the fact that she might have it when it actually happens (*MTD* 128), for admitting it would be to resign oneself to nothing less than a death sentence.

As the mother’s cancer progresses in *Une mort très douce*, there is a sense that the body begins to escape all control, not only internally but also externally:

14. ‘Tu sauras me mettre la main sur le front si j’ai des cauchemars?’, the mother asks the daughter in what appears to be a reversal of roles (*MTD* 94).

15. As Sontag states, the word ‘cancer’ does not just refer to the disease but to a whole range of metaphors that take it beyond its original meaning (for example the way that we use the adjective ‘cancerous’ to describe something that has a noxious effect). Consequently, hearing the word ‘cancer’ gives rise to a host of negative feelings and reactions that have become embedded in our minds in relation to this term.

Ne pas savoir ce qui se passe sous notre peau, c'est normal. Mais l'extérieur même de son corps lui échappait: son ventre blessé, sa fistule, les ordures qui s'en écoulaient, la couleur bleue de son épiderme, le liquide qui suintait de ses pores; elle ne pouvait pas l'explorer de ses mains presque paralysées et quand on la soignait, sa tête était renversée en arrière. (*MTD* 109)

The body becomes a site of chaos and boundaries that were once fixed (the skin, for example) begin to dissolve. The mother gradually becomes more and more psychologically distant from her body, for she can no longer recognize the self in its physical state. It is with great difficulty, therefore, that the mother acknowledges the reflection in the mirror as her own (*MTD* 79) and towards the end of her illness, despite her initial struggle to recover, she renounces all further attempts to gain mastery of the cancer and the body: 'Elle reposait et rêvait, à une distance infinie de sa chair pourrissante' (*MTD* 109).¹⁶

The way that the illness and its treatment are described in *Une mort très douce* is interesting in that it brings to mind the punitive battlefield metaphor of cancer highlighted by Sontag where the patient finds its body under attack by the enemy disease. Sontag writes:

The controlling metaphors in descriptions of cancer are, in fact, drawn [...] from the language of warfare: every physician and every attentive patient is familiar with, if perhaps inured to, this military terminology. Thus, cancer cells do not simply multiply; they are 'invasive'. [...] Cancer cells 'colonize' from the original tumor to far sites in the body, first setting up tiny outposts ('micro-metastases') whose presence is assumed, though they can not be detected. Rarely are the body's 'defenses' vigorous enough to obliterate a tumor that has established its own blood supply and consists of billions of destructive cells. However 'radical' the surgical intervention, however many 'scans' are taken of the

16. With regard to relinquishing control over the body, we recall the scene where the mother relieves herself in the bed, as advised, rather than forcing herself to get up to go to the toilet in a bid to preserve her dignity.

body landscape, most remissions are temporary; the prospects are that ‘tumor invasion’ will continue, or that rogue cells will eventually regroup and mount a new assault on the organism. (*IM* 65–66)

In *Une mort très douce*, cancer assaults — ‘ce vieux corps ravagé qui était le corps de ma mère’ (*MTD* 42) —, colonizes — ‘la tumeur était un sarcome d’une extrême virulence, qui avait commencé d’essaimer dans tout l’organisme’ (*MTD* 89) — and destroys — ‘le travail des mystérieux essaims qui, entre la peau et les os, dévoraient ses cellules’ (*MTD* 107). The mother is depicted as the unwitting victim of this vicious onslaught and the medical staff resemble Sontag’s ‘battle-weary officers’ (*IM* 68) who desperately try to restrain the enemy illness and triumph when their counter-attack succeeds, albeit temporarily (*MTD* 42). Although Ellen Annandale concedes that the use of metaphor plays an important role in our sense-making of illness, there is no doubt that it contributes to the stigmatization of the disease and, by extension, of those who are ill, as we shall see when we discuss how the mother’s illness has led to her relegation to the margins of society.¹⁷

A second myth surrounding cancer identified by Sontag and invoked in *Une mort très douce* is that certain personalities are more predisposed to the illness than others. Cancer is regarded as a ‘disease to which the psychically defeated, the inexpressive, the repressed — especially those who have repressed anger or sexual feelings — are particularly prone’ (*IM* 98), a misconception that leads to a transfer of fault from the illness to the patient.¹⁸ In the case of *Une mort très douce*,

17. Ellen Annandale, *The Sociology of Health and Medicine* (Cambridge: Polity Press, 1998), p. 255. On the contribution of metaphor to the stigmatization of the ill, see *IM* p. 97.

18. Thus, in *Mémoires de l’inachevée* (Paris: Gallimard, 2011), Grisélidis Réal makes a link between sexual inhibition and the number of ‘vieilles filles’ and ‘vieux refoulés’ who ‘crèvent de cancer, c’est logique’ (p. 329). Similarly, Audre Lorde, on learning that her cancer has returned, exclaims in disbelief, ‘What had I been busting my ass doing all these past six years if it wasn’t living and loving and working to my utmost potential? And wasn’t that all a guarantee supposed to keep exactly this kind of thing from ever happening again?’ Audre Lorde, ‘A Burst of Light’ in *Feminist Theory and*

we are constantly reminded by the daughter-narrator of how the mother, until recently, lived a life of self-sacrifice and suppression of personal ambition. The daughter-narrator tells us that the mother ‘a dû renoncer à beaucoup de rêves: les désirs de papa passaient toujours avant les siens’ (*MTD* 48) and yet ‘ne se plaignait pas de son sort’ (*MTD* 49), even when her husband was blatantly and unashamedly betraying her with a mistress. The mother had no emotional outlet for any discontent or despair that she may have felt and instead kept negative feelings tightly bottled up: ‘Elle ne pouvait parler à personne, pas même à soi. On ne l’avait habituée ni à voir clair en elle, ni à user de son propre jugement’ (*MTD* 59). With regard to repressed sexuality, we are informed by the daughter-narrator that the mother, as a child, had been taught ‘le mépris du corps’ and that on growing older was increasingly denied any physical pleasure: ‘sévrée des joies du corps, privée des satisfactions de la vanité, asservie à des corvées qui l’humiliaient’ (*MTD* 53). In existentialist terms, the mother’s life is a prime example of ‘mauvaise foi’: ‘Elle a vécu contre elle-même. Riche d’appétits, elle a employé toute son énergie à les refouler et elle a subi ce reniement dans la colère. [...] Contrefaite, mutilée et étrangère à soi’ (*MTD* 60–61). Although never explicitly stated in the novel, the fact that we are given such information about the mother’s life of self-denial illustrates the fallacy exposed by Sontag that cancer stems from excessive self-denial and that responsibility for the disease lies with the patient. Further supporting this myth is the stance that the doctors adopt vis-à-vis the mother, authoritatively standing over her as they examine her, like ‘des magistrats des Assises en face d’un accusé’ (*MTD* 29) who is guilty of crimes against the self.

A third point that Sontag makes about cancer relates to the concealment of the disease from the patient, on the part of medical staff and relatives, as if the very pronouncement of the word could, in itself, kill (*IM* 6). Unsurprisingly therefore, the daughters in *Une mort très*

the Body, ed. by Janet Price and Margrit Shildrick (Edinburgh: Edinburgh University Press, 1999), pp. 149–52 (p. 151). That repressed emotions cause cancer is, of course, a fiction, but one that is widespread in the popular imagination.

douce decide to keep the reality of the mother's illness hidden from her in the belief that it is for her own good, 'that dying people are best spared the news that they are dying' (*IM* 6). When wondering what the mother's prognosis would have been had the cancer been detected earlier, Beauvoir comes to the conclusion that although it might have given her a couple of extra years 'elle aurait connu ou du moins soupçonné la nature de son mal et elle aurait passé la fin de son existence dans les affres' (*MTD* 133). However, the prevention of further suffering and anxiety on the part of the patient is not the only reason that cancer is kept secret, Sontag reveals:

Cancer patients are lied to, not just because the disease is (or thought to be) a death sentence, but because it is felt to be obscene — in the original meaning of that word: ill-omened, abominable, repugnant to the senses. (*IM* 8–9)

This image of cancer as 'repugnant to the senses' is quite clearly present in *Une mort très douce*. There is a smell of decay associated with the mother — 'sa chair pourrissante' (*MTD* 105), 'elle pourrit vivante' (*MTD* 118) — that Poupette, the second daughter, cannot bear, while the daughter-narrator sprays her mother with perfume, perhaps to disguise the odour of cancer, until the scent of the perfume itself becomes a reminder of the disease (*MTD* 102). Visually, the mother's appearance is disturbing to herself (she is shocked by her reflection in the mirror) and to those around her who witness her gradually mutate into an almost non-human physical form that incites horror with all its openings and protruding tubes and 'le macabre rictus d'un squelette' (*MTD* 108).

Given the extent of the physical deterioration that cancer wreaks in *Une mort très douce*, rendering the mother's sick body a disgrace and a source of shame (just like the ageing body in Beauvoir's *La Vieillesse*), the only space deemed fit for it is on the margins of society.¹⁹

19. See Beauvoir, *La Vieillesse*, p. 11.

Consequently, it is only very briefly at the beginning of the novel and before the diagnosis of cancer that we see the mother occupying an authentic position in society. For the majority of the narrative, she is relegated to the heterotopic space of the hospital where she lies in limbo, ‘dans la pénombre’ (*MTD* 72), between life and death, with the thick curtains that cover her hospital bedroom window, blocking out light from the exterior, symbolically representing her restricted if not extinct link to the ‘real world’ now that she is terminally ill. The term ‘heterotopia’ was appropriated by Michel Foucault to designate ‘des sortes de lieux qui sont hors de tous les lieux, bien que pourtant ils soient effectivement localisables’.²⁰ There are different categories of heterotopic spaces and the one that is relevant to this article is Foucault’s ‘hétérotopie de déviation’: ‘celle dans laquelle on place les individus dont le comportement est déviant par rapport à la moyenne ou à la norme exigée’.²¹ In this case, the abnormal behaviour is cancer and the anomalous space the hospital. In a similar vein to the alignment of the hospital with spaces of deviance, Beauvoir draws an interesting analogy between the hospital in which the mother resides and airports, calling to mind Marc Augé’s theory of ‘non-lieux’.²² The term ‘non-lieux’ refers to specific kinds of space designed to be passed through and bearing little or no trace of our relationship with them. A perfect example of a common *non-lieu* in contemporary society for Augé is the airport with its associations with the fleeting, the temporal and the ephemeral and its lack of connection to the personal history of those who frequent it. That Beauvoir should compare her mother’s hospital to an airport is telling in that it conjures up an image of transience, thus reinforcing the idea that the mother’s position in society is unstable as

20. In medical terms, a heterotopia specifically refers to the displacement of an organ or other body part to an abnormal location. By extending this definition further, one could suggest, perhaps, that the cancer-ridden mother is not only assigned to a heterotopic space (the hospital) but inhabits a heterotopic body given that cancer is associated with cell abnormalities and displacements.

21. Michel Foucault, ‘Des espaces autres’, *Architecture, Mouvement, Continuité*, 5 (1984), 46–49.

22. Marc Augé, *Non-Lieux: Introduction à une anthropologie de la supermodernité* (Paris: Seuil, 1992).

a result of her illness:

On pourrait se croire dans un aéroport: des tables basses, des fauteuils modernes, des gens qui s'embrassent en se disant bonjour ou au revoir, d'autres qui attendent, des valises, des fourre-tout, des fleurs dans des vases, des bouquets enveloppés de papier glacé comme pour accueillir les voyageurs qui vont débarquer... Mais sur les visages, dans les chuchotements, on pressent quelque chose de louche. (*MTD* 67)

Not only is the mother in *Une mort très douce* assigned to an in-between, deviant or non-place due to her cancer, she is also deprived of any significant status in society in terms of her needs and desires and her life is reduced to a mere half-existence, 'une petite vie' (*MTD* 20). In a very poignant scene where Beauvoir attempts to purchase some new nightwear for her mother, she is faced with shops full of flimsy negligées wholly unsuitable for an elderly and ailing woman in hospital (*MTD* 28). In the material world where youth and good health are the strongest currencies, the unwell are invisible, deliberately erased, for no-one wants to have to face mortality, and any shameful sign of degradation should be covered up by the 'parfums, fourrures, bijoux' and the 'luxueuse arrogance d'un monde où la mort n'a pas sa place' (*MTD* 111).²³ Furthermore, the vocabulary employed on numerous occasions in *Une mort très douce* to refer to the mother's body while she is in hospital struggling to recover ('une carcasse', 'un cadavre', 'une dépouille' — terms that remind us of Sontag's statement that in the public imagination, cancer and death are synonymous) suggests that a person who is terminally ill does not even have a liminal place to inhabit, but, rather, has already been relegated, in the eyes of society, to a state of nothingness.

Unsurprisingly, therefore, the mother is treated as an object as opposed to a subject at the hands of the hospital doctors. On several

23. This idea of disguising illness and deformity out of horror at our own mortality ties in with the quotation from *The Duchess of Malfi* selected as an epigraph to the article.

occasions we witness her being prodded and probed against her will — ‘On va encore me secouer, me transbahuter: je voudrais tant que l’on me laisse tranquille’ (*MTD* 34) — as the doctors lean over her and examine her as if she is merely ‘l’objet d’une intéressante expérience et non un être humain’ (*MTD* 73), ‘une pauvre carcasse sans défense, palpée, manipulée par des mains professionnelles’ (*MTD* 23). The various medical procedures that can be tested on her become more important than the mother’s own well-being — what counts is the surgeon’s superb technique (*MTD* 43) rather than the actual impact of the operation on the patient — ‘les conséquences, sans aucun doute il s’en lavait les mains’ (*MTD* 43). The cancer sufferer is thus robbed of all sense of autonomy and self-possession and the body becomes a mere work space for medical trials. Sartre remarks to Beauvoir when she laments the way her mother is being treated in the hospital that: ‘On est pris dans un engrenage, impuissant devant les spécialistes, leurs prévisions, leurs décisions. Le malade est devenu leur propriété’ (*MTD* 81).

Having discussed the physical and social issues relating to terminal illness, the third area that this article will examine is the existential dimension, in terms of how the cancer challenges the mother’s relationship with the self and the world around her. With regard to her impending death, the mother is trapped in a position of ambiguity. At times she appears terrified of it, clinging to life with all her might, persistently crying out ‘Vivre, vivre’ and determinedly refusing to die: ‘Elle s’agrippait au monde, comme ses ongles s’étaient agrippés au drap’ (*MTD* 111). While prior to her hospitalization her efforts to look after herself, especially where eating was concerned (*MTD* 17), were poor, she now goes to great lengths to finish meals and consume as many vitamins as she can in a desperate bid to recover: ‘Je dois me nourrir’ (*MTD* 103). On the other hand, there are moments when the mother appears to have given up the fight for life and resigned herself to her impending death with ‘un consentement insouciant’ (*MTD* 27) which distresses the daughter-narrator. This fluctuation between wanting to live and accepting death has implications for the mother’s religious beliefs in that she both understands and wants to thwart God’s will:

‘Elle croyait au ciel; mais malgré son âge, ses infirmités, ses malaises, elle était farouchement accrochée à la terre et elle avait de la mort une horreur animale’ (*MTD* 19). The final stage of life is depicted in *Une mort très douce* as one of extreme solitude. Although one or other of the daughters (Poupette or Beauvoir) is almost constantly by their mother’s side during her stay in hospital, as the latter’s physical condition deteriorates, her link to her earthly existence similarly disintegrates: ‘Maman nous croyait auprès d’elle; mais nous nous situions déjà de l’autre côté de son histoire’ (*MTD* 82). Beauvoir remarks, later in the text: ‘Comme elle était seule! Je la touchais, je lui parlais, mais impossible d’entrer dans sa souffrance’ (*MTD* 115) and at the end of the text, having witnessed the last steps of the mother’s journey through life to death, she concludes that death, while it may be ‘cette aventure commune à tous, chacun la vit seul’ (*MTD* 143).²⁴

At the same time, this last month of the mother’s life and her rapid descent into serious illness ironically mark a period of emancipation. This woman, whose entire existence up until now has been primarily devoted to the service of others (as a mother and a wife), appears to undergo a rebirth of sorts. With no other activities to distract her while in hospital and aware of her poor health (although not that she is dying), she is forced to turn her attention entirely towards the self in a bid to recover and this, in turn, instigates a certain rediscovery of the self and, ironically, a pleasure in living as death draws closer: ‘Ce qui nous a émues [...], c’est l’attention qu’elle portait aux moindres sensations plaisantes: comme si à soixante-dix-huit ans elle s’éveillait à neuf au miracle de vivre’ (*MTD* 71). This rediscovery of the self also leads to a sense of harmony with the self, now that the mother can fully give herself over to her own needs:

24. While on the one hand, these quotations highlight the unshareability of pain and death, we must also remember that part of this void between mother and daughter is due to the fact that the mother is unaware of the severity of her illness (the truth has been deliberately kept from her) in contrast to those around her who are fully informed of the reality.

Plus question de renoncement, de sacrifice: le premier de ses devoirs était de se rétablir, donc se soucier de soi; s'abandonnant sans scrupule à ses désirs, à ses plaisirs, elle était enfin délivrée du ressentiment. Sa beauté, son sourire ressuscités exprimaient un paisible accord avec elle-même et, sur ce lit d'agonie, une espèce de bonheur. (*MTD* 85)

However, it is a cruel renaissance of and reunion with the self as it occurs during the final stages of cancer when the opportunity to benefit from this awakening is limited to thirty days. The existential implications of terminal illness extend to the witnesses of death as well as the dying. While her mother is in hospital, Beauvoir becomes acutely aware of human physical frailty and sees it everywhere she goes: 'Je regardais les gens d'un œil neuf, obsédée par la tuyauterie compliquée qui se cachait sous leurs vêtements' (*MTD* 106). No matter how much we may try to disguise and ignore our mortality, it is there, lurking underneath a façade of protective armour.

To conclude, cancer in *Une mort très douce* is undeniably an illness comprised of many myths and one can understand why Susan Sontag felt so strongly about exposing their destructive nature. First of all, we have seen how even mentioning the word cancer is taboo, hence the mother is kept in the dark by her daughters for fear that knowledge of the disease would do irrevocable damage but also because of the feeling of revulsion and shame to which the illness gives rise. Secondly, the text illustrates the way that cancer is transformed in the public imagination into a metaphor for war, an unexpected assault on the body, which in turn renders the disease even more powerful and terrifying. Following on from this, *Une mort très douce* discusses the stigmatization not only of the illness but of the patient himself/herself and the transferral of blame onto the sufferer in a bid, possibly, to find some way of explaining a disease that is largely beyond our control. This stigmatization of the disease and the diseased, as we have seen in the text, leads to the person being treated as, at best, an infant, at worst, an object, a non-person relegated to a non-place, whose body

becomes a site of medical manipulation and experimentation. In addition to evoking the horror and abjection that cancer incites, *Une mort très douce* considers the existential implications for the sufferer and the observer of suffering alike. By reproducing most of the negative fallacies associated with cancer, including the most pernicious one, namely that the sufferer is partly to blame for his/her own condition, Beauvoir's text inadvertently draws attention to our need to debunk terminal illness of those metaphorical trappings which, according to Sontag, cause irreparable damage to the patient in that s/he is led to see himself or herself as being punished, attacked and humiliated:

Until cancer is regarded as what it is, a disease and nothing else, albeit a very serious one, until it is devoid of meaning and metaphor [...] the person afflicted with this illness will not be liberated from prejudice and will suffer the consequences. (*IM* 98)

A final point to be made concerning *Une mort très douce* and its conception of cancer relates to the importance of narratives of illness. Although Beauvoir reproduces a number of the damaging metaphors that surround the disease, it must be conceded nonetheless that by tracing the trajectory of the mother's cancer, both physically and emotionally, *Une mort très douce* allows illness to take 'its place with love and battle and jealousy among the prime themes of literature'.²⁵ And this is not all that it does: the importance of narratives of illness in terms of reparation and reconstruction, not only for the patient but also those who witness the illness, has been commented on by a number of illness theorists.²⁶ The role of illness as central narrative theme in *Une mort très douce* is therefore, it would seem, exactly this: as well as serving as

25. Virginia Woolf, 'On Being Ill', in her *Selected Essays* (Oxford: Oxford University Press, 2009), pp. 101–10. In this essay, Woolf draws attention to how infrequently the topic of illness is dealt with in literature. This, of course, has changed since the publication of Woolf's essay with *Une mort très douce* being a key example of a text that places illness at the centre of its narrative.

26. See for example Annandale, *The Sociology of Health and Medicine*.

a trigger for the reconfiguration of the mother, giving her a voice (albeit via the daughter) and according her literary immortality ('Françoise de Beauvoir: elle devenait un personnage, cette femme effacée, si rarement nommée' (*MTD* 144)), it functions as a therapeutic outlet for Beauvoir's own suffering at the inconsolable loss of her mother.

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