Affliction in Autofiction: The Suffering Writer and the Rejected Metaphor[1]

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Abstract: *This article examines the autofictional representations of disease in the works of several writers from successive epochs and different continents and their responses to Susan Sontag's formulation of a metaphorical literary presence of certain high-profile diseases. Sylvia Plath, Alexandr Solzhenitsyn, Hervé Ghibert, Pascal de Duve and Max Blecher are the writers under scrutiny with their key works of fiction. The article aims to establish the traits their works share with emphasis on the writers' ailing selves by examining their newly emerged literary identities. It also proposes to prove that the common response from them features a sincerity of the reproduced lived experience which should not be confused with the authenticity of mock autofictional representations of disease as would be J. D. Salinger's* The Catcher in the Rye *and which largely rejects the metaphorical representation. Through this analysis, the article also aims to challenge claims for glorification or victimization which may be associated with life writing in its fictional manifestations.*

Keywords: *identification; victimhood; confessional; autofiction; life writing; lived experience;*

In her influential *Illness as Metaphor and AIDS and Its Metaphors* Susan Sontag accentuates on a self each one of us has:

> Illness is the night-side of life, a more onerous citizenship. Everyone who is born holds dual citizenship, in the kingdom of the well and in the kingdom of the sick. Although we all prefer to use only the good passport, sooner or later each of us is obliged, at least for a spell, to identify ourselves as citizens of that other place. (Sontag 8)

Sontag hastens to clarify that she is not about to describe the "lived experience" in that kingdom where we so reluctantly dwell, but the "punitive or sentimental fantasies concocted about that situation" (8). She also specifies that "illness is *not* a metaphor" (8), and that while regarding illness we should abstain from "metaphoric thinking" (8). In fiction, however, with its role to entertain among others, sometimes subconsciously, certain metaphors do

[1] Based on the author's published monograph *Feminine Selves in Sylvia Plath's Prose and Poetry: The Perspective of Compared Lived Experience in Fiction*.

appear, and they are quite steady, although they might also be period- or nation-based, and modifications may occur. Since this paper is about lived experience in fiction, which can also be autofiction, we are interested to know if these metaphors also appear in the autofictions under consideration. The illnesses to be examined as lived by the respective authors are *depression* (Plath), *cancer* (Solzhenitsyn), *AIDS* (Hervé Guibert, Pascal de Duve), and *osseous tuberculosis* (Max Blecher). Here it should be noted that Plath in *The Bell Jar* writes not only about the disease she was suffering from, but also about diseases that were not part of her own personal lived experience as a sick person. Thus, she also writes about cancer and tuberculosis. For these Sontag provides the following metaphors, which have changed over time, literary genres, and movements: *depression* unromantic, it “has supplanted the romantic notion of melancholy” (43). So, she defines it as “melancholy minus its charms – the animation, the fits” (43). *Cancer* – related to evasive talk both on part of the doctors and the relatives so that they would not be pitied unnecessarily since they are not the ones that are dying of it (10), synonymous with death and unromantic since its source is usually considered to be the food one consumes and so it is related to the lower extremes and excretory system. The earliest figurative uses Sontag indicates are related to “idleness and sloth” (16) due to its slow progression. Sontag contrasts it with tuberculosis which in the 19th century was portrayed as spiritual by several writers among whom Dostoyevsky in *Crime and Punishment* in the prostitute Sonia, Dumas-fils in the courtesan Marguerite from *La Dame aux Camelias*, Emily Brontë – in the dying Catherine, though arguably the least romantic of all since Brontë was to have the same death herself and was already consumptive when she was writing the fever scenes in *Wuthering Heights*. The romantic representation of tuberculosis as a disease of the “spiritual” was related to an inflammation of the respiratory tracts and the resulting extreme pallor on the faces of the afflicted with dramatic red flushing which suddenly made women appear even more frail and beautiful. If *tuberculosis* traditionally stood for passion, *cancer* has been associated with “the repression of passion” (Sontag 23). Today, *cancer* is the standard metaphor for harm that sprawls out of control, a malignant form which cannot be curbed as in *The Matrix* when agent Smith is interrogating Morpheus and memorably declares: “Human beings are a disease, a cancer of this planet” (*The Matrix*). Sontag likens *AIDS* perception to that of syphilis once (84) – as a slowly progressing stigmatized and deadly disease. The critic rightfully distinguishes between the perception of *cancer* and *HIV/ AIDS*, the former being associated with pity and injustice, while the latter with shame and guilt (87). *AIDS*, as Sontag suggests, could be viewed as someone being on a death row with the death sentence certain and only the execution date unclear (92). All in all, Sontag sees *AIDS* and *cancer* as related

metaphors that occasionally overlap, but mostly *AIDS* strikes fear and terror one would find in "premodern diseases like leprosy and syphilis" (100).

Most of the metaphors Sontag covers characterized the literature of the 19th century and with AIDS – the 20th; this metaphoric representation of diseases could be viewed as euphemistic of their true devastating nature and harrowing lived experience, because even when a word like *plague* is used, one cannot imagine the true horror of a person that is actually going through it, nor the superhuman strength that person needs to be able to transform it into literature. All one gets out of such metaphors is stigmatizing labels and pitying the sufferers, with the single exception of the 19th century's *beautiful tuberculosis*, which could occasionally receive an untypical modernistic metaphor-free literary treatment as in Dickens's early work *Sketches by Boz*.[2]

Plath's portrayals of depression in *The Bell Jar* and her *Journals* are as clinically precise as possible with descriptions of the onset of the condition, her inability to read and concentrate, her heavy migraines and insomnia, her incapacity to articulate meaningfully how she feels. In that Plath does not see anything romantic or melancholic and she tries to remain lucid and capture as much as possible from this lived experience so she can render it to paper. In *The Bell Jar* through the protagonist Esther Greenwood:

> The sweaty cotton gave off a sour but friendly smell. I hadn't washed my hair for three weeks, either. I hadn't slept for seven nights. My mother told me I must have slept, it was impossible not to sleep in all that time, but if I slept, it was with my eyes wide open, for I had followed the green, luminous course of the second hand and the minute hand and the hour hand of the bedside clock through their circles and semicircles, every night for seven nights, without missing a second, or a minute, or an hour. (Plath 111-12)

And in the *Journals* as her undissimulated self:

> May 14: Wednesday: Grim night. My eyelid's hot stinging itch has spread, in actuality, or by sympathetic imagining nerves, to all my body - scalp, leg, stomach: as if an itch, infectious, lit and burned, lit and burned. I feel like scratching my skin off. And a dull torpor shutting me in my own prison of highstrung depression. […] I am gone already in spirit, if lingering in a locust-itchy-crawly body. […] I am now flooded with despair, almost hysteria, as if I were smothering. As if a great

[2] See Hristo Boev's *Modern(ist) Portrayals of the City in Dickens and Dos Passos: Similarities, Differences, Continuities* (216).

> muscular owl were sitting on my chest, its talons clenching & constricting my heart. (Plath 440)

However, Plath's description of Esther's most extreme gesture – her attempts to kill herself, which finally results in her using sedatives, is one of the most unnerving and grotesque at the same time. Plath does that with so much absurdist humor and grim determination that she creates some of the most unforgettable moments of pure absurdism in World Literature, scouring longingly the ceiling for a fixture where to attach the rope which hangs useless from her neck (Plath 168). There is nothing romantic or glorifying in Esther's pitiful attempts, the very act becoming a parody of itself. The comic effect is also completely natural, but, of course, one could not even laugh, knowing that Plath did eventually do it only weeks after *The Bell Jar* was published in England. The matter-of-fact details she adds to the passage as is the name of her aunt and the construction of the walls and ceiling, with the imminent death of its author, make this description unique.

Tuberculosis in the 1950s USA was already not only a manageable, but also a curable disease after the invention of streptomycin in 1943. No longer the consuming disease from 1920s novels such as Dos Passos' *Manhattan Transfer* or *Three Soldiers*, tuberculosis is portrayed by Plath in Esther's boyfriend Buddy Willard, who is gradually weakening but also recovering from it. Far from being portrayed as spiritual, Buddy appears to Esther as hypocritical, weak, pragmatic, unattractive and uninteresting. As the Romanian autofictive writer Cella Serghi might have said, he does not thrill her, but Esther starts a relationship with him, thinking that as a good 1950s US girl she is supposed to have a boyfriend who would be a decent boy with a certain career before him, she could marry him and have an all-American family. And Buddy Willard has an exact prototype who recognizes himself in the literary character although he disagrees partly with the description Plath makes of him – the medical student at the time – Gordon Lameyer. Esther seems oddly unsympathetic to Buddy: "I thought the TB might just be a punishment for living the kind of double life Buddy lived and feeling so superior to people" (Plath 75).

All in all, Esther emerges as a cold witty overachiever who believes she deserves the best in the masculine department although she is white and poor. She is very intelligent, occasionally manipulative, often hard to understand in her actions. She can also become depressive to a vastly transformative effect. Rarely, when the drive to pursue high marks lessens a bit, a good tender nature shows through. Amazingly, through Esther, Plath has succeeded in describing herself as perceived by the others despite the narrative being in the first person. Indeed, the innermost Plath should rather be sought in the *Journals* and the *Johnny Panic* prose, as well as in certain poems. The

cold insensitive overachiever was a product of the Cold War and Eisenhower, it was the mask everyone wanted to see and embrace as the ultimate reality.

In *Cancer Ward* (*Ра́ковый ко́рпус*)[3] Solzhenitsyn portrays the languishing away of cancer patients as they fall victim both to their cancers and to the radiotherapy they are treated with. Solzhenitsyn himself probably suffered from lymphoma[4] but this type of cancer is not ascribed to the protagonist Oleg Filimonovich Kostoglotov, who has stomach cancer. Pavel Nikolayevich Rusanov, the personnel official, is the one who has the writer's presumed kind of cancer. Published in England only 5 years after *The Bell Jar*, *Cancer Ward* was a book that was written at almost the same time as Plath's novel. However, the approach that Solzhenitsyn took, while describing diseases, was very different from the American writer's. While we can certainly see *The Bell Jar* as symbolic – the depression that Esther has dominates the narrative and even before it starts, one could say that the main protagonist is prone to it, by seeing everything as dark – *Cancer Ward* is overly and deeply symbolic, with the symbols much easier to decipher. The overall recognition out of Solzhenitsyn's novel is that it condemns manifestations of Stalinism as malignant growths. As a human being enters remissions, yet with the cancer eventually returning with a vengeance and destroying the organism, so is a state destroyed from within by such a cancerous regime in which the remissions are occasional spells of glimmering hope. Overall, the Cancer Ward, in which the characters lose their lives and dreams one by one, reflects the soviet state and the Gulags it had built for torturing the bright and progressive citizens of the USSR. Solzhenitsyn's novel can be read as a cancer encyclopedia as well with the various kinds of cancer the patients have, and here we come to the other symbols. They fall very neatly in line with the multiple metaphors that Sontag proposes for this disease. Mainly, they all represent evil – and that is the evil within, unknown to the carriers, inhabiting each one of the citizens of the USSR, like Truman's doppelgänger living in every American from Anne Sexton's "Rumpelstiltskin" (Sexton 233).

The secret nature of this evil is revealed from the very first page of the novel:

> "It isn't, it isn't cancer, is it, Doctor? I haven't got cancer?" Pavel Nikolayevich asked hopefully, lightly touching the malevolent tumor on the right side of his neck. It seemed to grow almost daily, yet the tight skin on the outside was as white and inoffensive as ever. "Good heavens, no. Of course not." Dr. Dontsova soothed him, for the tenth time. (Solzhenitsyn 1)

[3] Translated from Russian by Nicholas Bethein and David Burg.

[4] There is no conclusive information as to what kind of cancer Solzhenitsyn had.

Not only does the skin mask the cancer so it is completely unseen even from a close distance, the medical specialist lies to the patient convinced that cancer patients, like the soviet citizens under the cruel totalitarian regime, should also be spared the truth. The illusions some patients have are also symbolic of the soviet citizens living in denial of the many evils that are visible, very much like the symbol of Plath's *The Bell Jar* – the hemisphere which has covered them in its pestilential fumes and out of which there is no escape. Just like Plath, Solzhenitsyn manages to use light humor accompanied by a good irony. For instance, in this remarkable scene:

> Outside it was a gloomy, still, colorless day. Kostoglotov came back from his morning X ray and without asking Pavel Nikolayevich opened a small window above his head. The air he let in was damp but not cold. Pavel Nikolayevich was afraid of his tumor catching cold. (Solzhenitsyn 42)

Unlike Plath's cold stance to disease, even her own, *Cancer Ward* shows numerous moving scenes of accepting the inevitable, sometimes in a dramatic but sincere farewell with a certain human faculty or body part as in Assya asking Dyomka to kiss her breast before it is cut off (392-5). Even though the girl does not particularly like the boy, she realizes that she must make do with what she has and so she repeats as if in a reverie: "'You'll remember?... You'll remember, won't you? You'll remember it was here, and what it was like?" (395). The unexpected intimacy of the doomed is both touching and terrifying: "No one came in, and so he kissed and kissed the marvel hanging over him. Today it was a marvel. Tomorrow it would be in the trash bin" (395).

Although Plath's depression was a private thing – it was with her before her marriage and was resumed with a new vehement flare after Hughes left her – in her works it traverses and marks consistently her represented 1950s and so casts a dark shroud over the entire decade in which Eisenhower was president. For us, the readers, Plath's works present a largely depressive America of the decade of Eisenhower. In a similar manner, Solzhenitsyn offers harsh criticism of the USSR and Stalin, and his *Cancer Ward* does just that. Written after Stalin's death, it reveals the heavy legacy that had to be borne. Like the multiple references to the American president that Plath makes, so does Solzhenitsyn and they culminate in the Zoo scene, a place the patients dream of visiting in Tashkent, Uzbekistan. When he is finally out of the Ward, not completely cured, impotent from the therapy and with the option of spending a night with one of two attractive women as a guest, Solzhenitsyn takes Kostoglotov to the Zoo where all the animals look miserable and tortured,

like the citizens of the USSR, but here it is much more visible, as if evil has suddenly gained visibility. Standing before the cage of the macaque rhesus he reads that some cruel visitor has blinded the monkey on purpose by throwing tobacco into its eyes (506). The notice is strangely devoid of propaganda – no blame put on the American imperialists (506). That visitor is called “evil” and as pure unadulterated evil, Kostoglotov can think of only one – Stalin. Although not expressly metaphorical as the represented lived experience in Plath’s and Solzhenitsyn’s characters, cancer and depression become global metaphors for both novels, condemning the political regimes and hypocrisy-infested societies.

Hervé Guibert killed himself – he attempted to end his life a little before his 36th birthday and died from the injuries two weeks later in 1991. However, he only did it because his eyesight had been taken away from him by the disease that was killing him, and which had become his writing focus in the last series of books he produced. Guibert thus made the so-called AIDS trilogy consisting of his bestseller – *To the Friend Who Did Not Save My Life* (*A l’ami qui ne m’a pas sauvé la vie*[5]) (1990) followed by *The Compassion Protocol* (*Le protocol compassionnel*) (1991) and *The Man with the Red Hat* (*L’homme au chapeau rouge*) (1992). Dying a month after Freddie Mercury, as with him, his incurable disease had served as a powerful artistic stimulus. Born in 1955, Guibert was a child of the Cold War from France. An author of numerous books, an established writer in France, he became instantly famous with *A l’ami qui ne m’a pas sauvé la vie* because the book presented a detailed account of the death of no other but Michel Foucault, who is presented to the reader as Muzil. In this autofictional presentation of his contracting the virus, his hope that there might be a cure and the dramatic death of Foucault, Guibert did not even try to mask his own name. When asked on a TV interview how he had dared to write about Foucault’s health decline and subsequent death, Guibert answered that being sick himself, in Foucault he saw his own death, he felt that “this death belonged to him” (“Apostrophes: Hervé Guibert, *A l'ami qui ne m'a pas sauvé la vie”*). A little before his death, he filmed himself in his apartment and titled the short movie *La Pudeur ou l’Impudeur* (1991) where he talks openly about his disease, looks extremely gaunt, presents filmed moments of his everyday existence that is strained by his condition, the movie challenging the reader’s senses if they can go on and see it to the end sharing with him his *horreur au quotidien*.

As can be seen from this short presentation of Guibert, in this book he managed to do away with some of the AIDS metaphors discussed by Sontag, but others remained and the book he started writing became in many ways what *The Bell Jar* became for Plath. Heavily stigmatized in the 1980s and beginning

[5] The translations from this text as well as from others are mine unless indicated otherwise.

of 1990s, AIDS was a death sentence, and the sick were treated like lepers once were, so Guibert writes about the fact that he has remained without friends and the book becomes “his sole companion” (Guibert 12). Writing *The Bell Jar* in England, Plath was likewise abandoned by just about everyone. In that, depression and AIDS have a lot in common, they are the definitive diseases of solitude. The personal experience for both writers resulted in their providing detailed medical information about their condition and its consequences. So, we learn about the exact T4 count Guibert had 3 months after having the disease (13), etc.

Falling sick, Guibert feels he has become “a dead man walking” (15) and so observes:

> I felt death come in the mirror, from my reflection in it, way before it had taken firm hold. Was I already that dead man through my look in the eyes of the others? I did not tell it to all. For the time being only to the book. (Guibert 15)

Just like Plath (Esther) who delays telling her mother, so does Guibert tell his friends a bit later, but he feels that this is just a matter of time, and not much time. The moment he does so, however, he feels he instantly loses control over his illness (15). Muzil (Foucault), when learning from Guibert about “a cancer that attacks exclusively the homosexuals” (21), starts wallowing on the floor with laughter, being already contaminated with the virus, but he protests that it is too good to be true (21). However, soon Muzil (Foucault) lapses into “a severe depression” and that laughter turns out to be a pretense. As Guibert indicates, depression can be related to other conditions, one of them being the terrible news that one had AIDS. The two passports that Sontag speaks of are related to the fact that a life-changing disease like AIDS gives one a new identity (25). So Muzil (Foucault) decides to invent a new writer’s self so that that grand critic’s name somehow remains untainted. The name he comes up with for an article of his is “Julien de l’Hôpital” (26), but as it can be expected, this writer’s avatar instantly makes the article obscure. The heavily debilitating disease has Muzil (Foucault) lose his identity completely and we no longer recognize the great critical mind in the suffering man (32).

And again, like Plath, Guibert makes fleeting marks of the deaths of others from other diseases, for example lung cancer – one of the doctors (40), being transfixed by AIDS and the unexplored new human geographies of sickness it opens for himself as lived experience and for Muzil (Foucault), whose passing he recalls introducing detail after detail (40). There is a lot of sick dark humor in his description – as in Muzil (Foucault) visiting one of the local GPs to be examined for his interminable coughing, only to be reassured

by the doctor that he is “in perfect health” (Guibert 47) – and that only one month before his death. Being a totally different disease from depression although able to trigger depression, as in Foucault’s case, AIDS has allowed excellent writers like Guibert to provide thrilling, scientifically accurate observations and poignant remarks while watching their own bodies become stripped of the identities they associated with them, taking on a totally new identity – *l’(im)pudeur* of everyone who could watch Guibert’s last film about himself. If AIDS brought a reinvention of the writer’s self in Guibert, it saw the birth and death of a writer such as Pascal de Duve with his *Cargo vie* (1993).

A writer who discovered his writing powers at the end of his short life was the Belgian Pascal de Duve. De Duve was writing his second novel when he found out that he had AIDS. He immediately stopped work on the novel and started recording his sensations and impressions of the transformations his body was experiencing. More importantly, he was registering his reactions to the incurable disease. So, he found that it gave him a new outlook on life, that he could see, as if for the first time, and discovered amazing beauty all around him on a ship in the middle of the ocean, which he related to what he lovingly calls “*mon sida*” (my AIDS). This appropriation of the transforming disease is not surprising. So did Keats, writing some of his best poetic pieces with the imminent white death in mind; in “Ode to a Nightingale”, “Ode to a Grecian Urn”, “La Belle Dame Sans Merci” he aspired to an ultimate communion with nature, which went beyond what could be felt and experienced while one lived. That is, until death came too near and staring Keats in the face, he wrote his “When I Have Fears That I May Cease to Be”, which effectively negates everything he had achieved as a poet with emptiness looming large ahead. With her intense insistence on the dark colors in *The Bell Jar* and in most of her poetry, Plath, too, loved her recurring depression. At least she does in literature, if not in real life, and that is the major difference between actual lived experience (lived by the author) and literary lived experience (lived by the reader, presupposing certain transformations and modifications of the actual lived experience, Jacqueline Rose’s term – “fantasy” (Rose x), or realized *intentionality*).

On the cruise ship, having left the novel unfinished, de Duve started a diary in which he has passages such as this:

> Before I got sick, I’d never felt so close to the stars. Now I pass the hours contemplating their silent twinkling coming from the Night of Times. Some of them certainly don’t exist anymore, but their sweet mute glowing, like a posthumous present, still caresses our eyes. So, in communion with Eternity, I forget what differentiates Life and Death,

> and I imagine that I am, myself, a star. *Sidéen sidéral*[6] I dream of preserving my shining over those who will have loved me. I will be a dead *star*, but always luminous in some people's hearts. (de Duve 30)

Dying is not uncommonly perceived as a star losing its brilliance and becoming dark matter; de Duve's connection to the cosmos, however, is very strong and creates a sensation of astral poetics. He starts exploring the potential of the French word *sida* to render derivatives and comes up with *sidérable* and *sideré*, referring to different stages of the advancement of the disease, the first meaning "covertly having the marks and signs", while the second "visibly having the looks" of full-blown AIDS. The advancements from stage to stage are as important to him as are Plath's spirals to ever deeper depression which she meticulously recollects. De Duve permits himself, from the position of the dying star, to give the following advice:

> Become romantic again, think that fidelity – the present of reciprocity of the self and his/ her life companion – is far from being ridiculous, it is the key to the vault of the most beautiful love adventure. (de Duve 35)

De Duve starts seeing that life inevitably moves towards death and says with conviction: "a human being is born with the certainty of death. What we call a danger of dying are but the circumstances favoring the demise" (36). De Duve's journal entries alternate between poetic contemplations of the surrounding sea, occasionally of other passengers, some of whom present the newly forbidden fruit of a homosexual encounter and delving into the past when love scenes were possible and passionate, without realizing the danger. Thus, his thoughts are beautiful and philosophical:

> Are we born in the world? No, the world is born in us. When we give up the soul, that's the end of the world. So, every day, the world disappears for some, and at the same time, is born for others. (de Duve 42)

Other thoughts have a temporal tangent: "What is Eternity? They explain to us that it is not indefinite Time, but rather the absence – the simple and pure abolition of Time" (43). Life on Earth means feeling and savoring every moment as people move towards the death of sensation: "We get then, by the bias of the etymology, to conclude that Eternity is incompatible with emotion.

[6] Untranslatable since both words refer to AIDS in French but their repetition indicates de Duve's embracing his fate bravely identifying himself with the disease, being a star with that name and the name itself makes him that star.

Eternal life, that is immobility. Immobility is death" (43). De Duve disagrees with Marguerite Duras that writing means "being no one". He insists, fully aware, that he was to become that "luminous dead star", "by writing, one is revealed to oneself and to the others" (49), keeping this luminescence alive; that is, provided the writing and reading subjects are aware of the text in question. De Duve quotes and agrees with Husserl's phenomenological postulate that nothing exists outside the perceiving subject: "So, one day, not far from now, for my spirit that is becoming extinguished, even the sea will flow into its own depths. When I die, so will the sea be drowned" (de Duve 50). Philosopher by education and profession, de Duve appreciates the unique opportunity that he is presented with – to enter a virtual discussion with his favorite philosophers about the significance of life and death from the perspective of the youth with the theoretical knowledge and practical experience, so he is eternally grateful while being humanly afraid. In discoursing his condition and forthcoming death, de Duve offers a play of words that reflects his cosmic identification of the body breaking up. He does not want "*enterrement*" (burial in the earth) but "*encielèment*" (burial in heaven) – "a dispersal to all the winds of the ashes of [his] being" (63).

For de Duve AIDS becomes the ultimate experience which is as revealing as a meeting with God; it becomes his religion which involves the final transformation of his body and self and all the changes are worth writing down. And they might as well have been: de Duve became a famous writer himself with his *Cargo vie*. After the book was published, he was invited to a TV interview which certainly frightened some of the spectators and presenters with the young writer collapsing a couple of times in front of the camera, looking visibly sick, with markings of Kaposi sarcoma on his forehead and excusing himself, since, as he explained, the cancer had already affected his brain ("Pascal de Duve 1964-1993").

To this list I also add Max Blecher's *Scarred Hearts* (*Inimi cicatrizate*)[7] from 1937, now a major movie from 2016. Both the book and the movie explore tuberculosis (in Blecher's case, Pott's Disease) more in the vein of Solzhenitsyn – with the love in the time of cholera trope of people trying to remain as lively and open to experiences and sentiments as possible, with a lot of humor and laughter through tears in the face of impending doom, and last, but not least, Romanian sensualism and eroticism. Max Blecher, also called "the Romanian Kafka", died one year after the publication of this autofictional work of his.[8] Blecher finds himself in Mihail Sebastian's widely acclaimed

[7] The English translation by Henry Howard is used, Old Street Publishing, 2008.

[8] A modern example of life writing, also worthy of consideration for the valuable lived experience captured to paper is Matei Călinescu's *Un altfel de jurnal* (*A Different Journal*) published in 2010, with its writer dying the previous year of lung cancer. Executed with the capacity of a university professor who had been given one year to live and filling the pages

Jurnal, 1935-1944 (Journal 1935-1944), and Paul Bailey, author of the “Introduction” to the English edition of Blecher’s novel, quotes from Sebastian’s book to illustrate the sick writer’s condition. Published for the first time in Bucharest in 1996, 51 years after its creation, Sebastian’s *Journal* provides intimate details about Blecher’s physical and mental state, which are shown to be at variance with the transcendental superhuman humor in the novel, but not with the physical description of the suffering protagonist: “[Blecher] is living in the intimate company of death. It is not a vague, abstract death in the long term, but his own death, precise, definite, known in detail like an object” (Bailey v). So, Sebastian is further quoted:

> What gives him the courage to live? What keeps him going? He is not even in despair. I swear I don’t understand. How many times have I been on the verge of tears when I looked at him. At night I could hear him groaning and crying out in his room – and I felt there was someone else in the house apart from us, a someone who was death, fate, or whatever. I came away feeling shattered, bewildered. (Bailey vi)

According to Bailey, this courage was “the novel he was in the difficult process of writing” (vi). That is, the novel in question – and indeed one may only wonder at the spirit one would need, under such circumstances, to see the endeavor through.

The protagonist, as in Plath’s novel, is a fictional character based on the writer, Emanuel, here in a third-person narrative. He is absolutely sure that “he was gravely ill. The evidence was plain from everything around him. What was the significance of all these machines? They were clearly not made for the healthy” (Blecher 4). After an X-ray, the patient learns from a French doctor that part of his vertebra is “eaten away by microbes” (5). The young patient’s initial lack of understanding is supplanted by a horrific realization:

> His chest had become a chasm in which he could hear a loud noise like the roaring in a seashell when you put it next to your ear. The thumping of his heart resounded in the emptiness. It would be possible, he realized, for his body to disintegrate between one moment and the next. (Blecher 6)

Faced with the prospect of portending disintegration, like Esther, who does not want to live “another 50 years in a cage”, Emanuel thinks of suicide (7). The irony in his case is that he is too weak to even lift his hand, being tied

with a poetic amalgam of existential reflections, disease progression data and memories, it remains a fascinating read.

to supporting metal bars. Emanuel, like Esther, lovingly imagines it: “It was certainly a fine idea, just as fine as, for example, the [trapped] mouse returning to its hole, but equally vague and unrealistic” (7). Yet, facing death, Emanuel vibrantly declares that “I [he] am [is] only interested in life now” (9). Still, in the TB clinic, patients commit suicide, and Emanuel quotes an Englishman who has done it leaving a note that begins with: “all this buttoning and unbuttoning” (16), referring to the many daily examinations a patient goes through with the subsequent dressing and undressing.

Blecher’s light humor and elegant style, under the impossible circumstances of the literal disintegration of his body, are among the finest of the major Romanian novelists of the epoch. Another example of Blecher’s finesse is the following: “She [Colette] and Emanuel would make antiseptic love together, without any great sense of pleasure” (16). As more procedures are applied to him, like Plath’s Esther, Emanuel learns more and more about his condition and so he tells Colette: “I am doing my apprenticeship in illness” (21). As Esther travels to different clinics with the declared scope of receiving better care for her condition, so does Emanuel who is moved to Berck.[9] Just like in Solzhenitsyn’s and Plath’s novels, Emanuel is able to establish connections with the multinational patients in the new sanatorium and find out about various forms of tuberculosis, thus offering a similar encyclopedia-like tragic-comic content through the prism of life possibly being cut short at any moment. Alongside the witty conversations among the patients, we get a palpable sensation of Emanuel’s reactions to the sanatorium and the cast: “During the night the dampness became a cloak of fever and nightmares. Each time Emanuel lapsed into sleep for a moment, he plunged into a swamp” (77). When an act of lovemaking is about to happen with one of the nurses – Solange, Emanuel is painfully and ironically reminded by his “corset” of the new inverted gender reality, which is a threshold to a celestial world where everything material will be gone and to which Victorian women were once forced into lifelong compliance: “For a brief moment Emanuel had forgotten about the corset, but now wrapped in Solange’s arms, its weight bore down on him intolerably. Solange was embracing a bust of stone” (94), his pitiful attempt at lovemaking reduced to “an embarrassing simulacrum” (95).

With vivid descriptions of the changing seasons at Berck and the patients dying one after the other, Emanuel is both inside the sanatorium and out of it, but almost always assisted by others, especially by his beloved Solange for whom he keeps showing his feelings whenever he can. Eventually they have to part as she is also relapsing into sickness, never having been fully cured. So, the French coastal town becomes a symbol of melancholy and

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[9] Also known as Berck-sur-mer in Northern France, which was a famous location for treating tuberculosis in the 19th and early 20th centuries.

hopelessness (222) and he, on a stretcher-bed is being taken to yet another destination in Switzerland for a change of the atmosphere and of the nurses, with darkness becoming the overwhelming symbol of simulacra of life: “In the distance the town, like a sinking ship, was disappearing in the darkness” (Blecher 227).

As shown, the autofictional ailing self in Plath, Solzhenitsyn, Guibert, de Duve and Blecher focuses exclusively on the disease marking the lived experience of the suffering writer and it colors the writing in such a manner that the other subjects of the work come out as marked by it. In the mock-autofictional *Catcher in the Rye*, an American novel of the 1950s, the main protagonist is not obsessed by any specific illness, although he makes multiple indirect references to leukemia and for a reason. His brother Allie, whom he describes as having been “terrifically intelligent” (Salinger 37), has died of it. As a result, cancer in the book acquires a certain romantic aspect – that of the tragically lost youth with a lot of promise and unrealized potential. By induction, Holden himself starts thinking he might have cancer based on the vague symptoms he has (168), and which could be signaling other diseases as well. In his desire to connect romantically to his brother whose death comes out as beautiful in his repeatedly reconstructed memory of him, but also as a perceived failure to play his self-appointed role of the catcher in the field of rye who saves children from falling over into the precipice, Holden devises a curious touch of cancer for himself. Failing his self-assumed purpose in life, he fantasizes about becoming a romantic character in collective memory, but since he is unsure if people would perceive him that way if he had the real disease, he invents a small tumor that could be easily removed from him and uses it with a girl:

> “I have this tiny little tumor on the brain.” “Oh, *no*!” She put her hand up to her mouth and all. “Oh, I’ll be all right and everything! It’s right near the outside. And it’s a very tiny one. They can take it out in about two minutes.” (Salinger 54)

In that and on other occasions, Holden, the champion against phoniness, is guilty of being phony himself since he uses his supposedly terminal disease for a psychological advantage with gullible representatives of the female sex who lower their guard, taking pity on him. One might argue that he presumably tries to downplay the gravity of the said disease not to provoke the inevitable pitying on part of the others, but that is exactly what he provokes – trying to experience the romanticism of the dying youth without being afflicted with the disease. The illnesses (depending on the occasion) Holden invents for himself can also be read as a mask he decides to wear following the

growing realization that he cannot save the kids from making mistakes in life, and, more importantly, that they themselves do not want to be saved.

The autofictions examined here by comparison never treat the disease the writer is suffering from lightly. Nor is it a mask. It is always painfully real and always transformative of the main protagonist, allowing the readers to see him/her in a new light as a reminder to everyone that this could happen to us, too. The main protagonist in all examined autofictive writers is realistically and truly on the brink of death (the mentioned years of the deaths of the writers testify to this). Despite this fact, nowhere in the texts is despair to be found. Instead, we have a transcending humor, a real displacement or detachment of the narrator in the Bakhtinian sense of his “*отстранение*”[10] who narrates from the perspective of the autofictional ailing self, but is, nevertheless, capable of seeing beyond, of imagining more, the writing selves acquiring a certain sense of transiting into another world while being, at the same time, firmly immersed in the world of the characters struggling for their lives. We can also observe an acceptance of the inevitable by all, thus creating a certain writing standard for autofictive writers in World Literature who, through their uplifting texts, are taking their farewell with the world as we know it, yet remaining convinced that there is more to life than this.

It would be a terrible understatement and an unforgivable cliché if we said that all discussed writers have shown heroism in the face of imminent death, writing against the clock for it was as terrifying and real for Plath as it was for the others. Although she wrote in such detail about her depression in 1953, she was no less depressive 10 years later. Even more remarkable is the writer’s stance – the masterful construction of the events, the social commentaries, the palimpsestic narrative which jocularly includes intertextuality with other works by her indirectly referenced by Esther. It is through this frolicsome winking at the reader and the unquestionable depth of the novel as regards culture, politics, and femininity that one could also argue that Plath is *never* truly depressive in her novel. There are so many layers of ironies accompanying the darkest of moments in it that we can clearly distinguish between Plath as a writer and Plath as a sufferer of depression – the clearly divided self of Esther Greenwood, which reflects Plath’s (Esther’s) final loss of identity and disintegration and can also be observed through Guibert’s account of Foucault’s (Muzil’s) last days, as well as Blecher’s autofictive representation of himself through Emanuel and du Duve’s through his own self.

[10] Detachment or estrangement should be considered adequate translations in English.

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