

In *Wild*, screenwriter Nick Hornby has turned an autobiography into a story, omitting and condensing minor characters, scenes, and entire stretches of trail to provide some much-needed structure. Themes

of vulnerability, self-reliance, and rejuvenation emerge. Despite the material deprivations of the trail—no soap, let alone makeup—Witherspoon seems transformed by the journey's end, as serene and peaceful as the

Californian mountains or Oregon forests that she has traversed. In doing so, *Wild* brings both the PCT, and Bobbi's memory, to life.

Hannah Cagney

Exhibition

A stoic irreducibility: *I Am Not The Cancer*

Without commotion or comment, Tim Wainwright and John Wynne's thoughtful installation, *I Am Not The Cancer*, discloses the experiences of women with metastatic breast cancer. Six video portraits are accompanied by the disembodied voices of their subjects, each recounting their own particular journey "through the fog [of disease]".

They tell anecdotes—about hiding their illness from friends and family for fear of social stigma or about how their children have tried to make sense of what they are told—and contemplate what kind of future awaits them (as well as how long that future will last). These stories, gathered from across Europe and told in several languages, are laced with words, like "hope" and "fear", which in another context might seem melodramatic, but which seem flat

and insufficient in relation to cancer's clinical and morbid lexicon.

Most of the women involved are preoccupied not with their physical condition per se, but rather with the effect that cancer has had on their whole life and the lives of those close to them. This holistic perspective pervades the whole piece, encouraging visitors to think again, and think more deeply, about the nature of illness, how we should treat people affected by it, and how we should talk about it.

Cancer frequently appears in the popular imagination in one of two contrasting guises. The most prevalent is as a challenge to be overcome. Race for Life campaigns are a typical example, inspiring defiance and optimism. The other guise is gaunt and wan, a cancer to be feared.

The women who feature in *I Am Not The Cancer* resist these stereotypes. Although plainly presented, their faces, filmed while the artists sat with them in silence, express the full range of life's emotions—humour, boredom, trepidation—and, as the work's title implies, why wouldn't they? Their stories, experienced almost as the listener's own internal monologue, vary but they all convey this stoic irreducibility.

The projection of separate sounds and images, and the whisper of noises off, creates a muddled ambiguity that anyone who has struggled to talk about cancer will be familiar with. A sense of suspended animation is created as time is simultaneously compressed and stretched. Quiet, thinking faces create a vacancy into which conjecture about appropriate thoughts and words spills. The artists have crafted this uncertainty very gently but it leaves a lasting impression, making the isolation encountered by people with

I Am Not The Cancer was held at the European Parliament, Brussels, Belgium, from Feb 27–March 1, 2015



Androniki, a woman featured in the exhibition



Tootje, a woman featured in the exhibition

metastatic cancer tangible to the audience.

I Am Not The Cancer enables its viewers to empathise with those whose experience is extremely difficult to comprehend for those without cancer. The exhibition not only invites reflection on what it is like to have metastatic cancer, but also makes the universality of the experiences of women with cancer plainly apparent. These women are confronting the prospect of death, often uncertain when it will come—a state intrinsic to the human condition and one of the fundamental themes in all creative endeavour. But these are real lives and there are no existential allegories or romantic contrivances: there is only the fact of the thing. This objectivity evokes an uncomfortable

but important truth about health care: that it is not as much about fighting for life as about managing mortality.

The organisers of *I Am Not The Cancer*, Novartis, have brought the installation into the lobby of the European Parliament to increase legislators' understanding of the needs of people with metastatic cancer and to invigorate their political will to do more to address these needs. In this sense, Wainwright and Wynne's artistic documentary (or documentary-esque art) is being used to lobby Members of the European Parliament.

It is striking that a large health-care company has chosen to get its point across through such unconventional means—though it is worth noting that Wainwright and Wynne have had

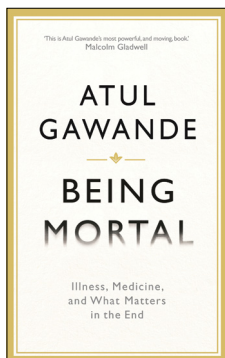
total control over their work—and that such a reflective piece is underpinned by a drive for pragmatic solutions. It would be easy for tensions to arise between contemplation and a demand for practical action, but the subtlety and frankness of the artists' approach dissipates any sense of conflict.

What parliamentarians will make of this unusual visitor to their inner sanctum remains to be seen but in view of the lack of accurate numbers about the number of people suffering from metastatic cancer, and uncertainty as to whether the European Union will meet its goal to establish specialised breast units in every region by 2016, these lobbying efforts could prove to be timely.

Josef James Pitt-Rashid

Book

The art of living to the last



Being Mortal: Medicine and What Matters in the End
Atul Gawande
Henry Holt and Company, 2014
Pp 304. US\$26.00. ISBN
9780805095159

Atul Gawande, a practicing surgeon and staff writer of *The New Yorker* has crafted his book, *Being Mortal: Medicine and What Matters in the End*, with utmost elegance. Based on strong research and wonderful stories of Gawande's patients and his family, the book speaks of accepting mortality while treating the dying and also shares how to live to the last day with joy, autonomy, and dignity.

Gawande learned about many things during his time at medical school, but not about mortality. The textbooks also carried nothing about "ageing", or "frailty", or "dying". "The way we saw it, and the way our profession saw it, the purpose of medical schooling was to teach how to save lives, not how to tend to their demise", noted Gawande. In his impeccable style of storytelling, Gawande describes how Joseph Lazaroff, a patient with incurable and

widely metastatic prostate cancer, died after undergoing a complicated and extensive neurosurgical intervention that was carried out not to cure him or to reverse his paralytic condition, but to halt the progression (due to metastases) of his spinal cord damage. The dangers of specific treatment options were explained to Lazaroff, but the doctors, as Gawande noted, "never really touched on the reality of his disease". Thanks to their reluctance to accept mortality, the doctors didn't discuss the larger truth about Lazaroff's condition or the limitations of their capabilities. In *Being Mortal*, Gawande shows how doctors become uncomfortable while dealing with the death-related anxieties of their patients, and how they speak about false hopes and treatments that, instead of improving patients' lives, yield detrimental effects.

The book also portrays the final years of Gawande's father, a surgeon who suffered malignancy near the top of his spinal cord and chose his own way of ending his life. "I do not want suffering", he told Gawande, "Whatever happens, will you promise me you won't let me suffer?" "Yes", said Gawande.

In describing the final days of his father and other patients, Gawande suggests that end-of-life care doesn't necessarily mean extending survival as such; it means improving and maximising the well-being of the patient. *Being Mortal* unveils the struggles and limitations of those in the medical profession while dealing with terminally ill patients, and, at the same time, suggests how to do better. Atawande's book promotes not only a good death, but a good life throughout until that death.

Sanjeet Bagchi