



UvA-DARE (Digital Academic Repository)

Brains with character: Reading and writing neuronarrative

Yaczo, T.F.

Publication date

2015

Document Version

Final published version

[Link to publication](#)

Citation for published version (APA):

Yaczo, T. F. (2015). *Brains with character: Reading and writing neuronarrative*.

General rights

It is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), other than for strictly personal, individual use, unless the work is under an open content license (like Creative Commons).

Disclaimer/Complaints regulations

If you believe that digital publication of certain material infringes any of your rights or (privacy) interests, please let the Library know, stating your reasons. In case of a legitimate complaint, the Library will make the material inaccessible and/or remove it from the website. Please Ask the Library: <https://uba.uva.nl/en/contact>, or a letter to: Library of the University of Amsterdam, Secretariat, Singel 425, 1012 WP Amsterdam, The Netherlands. You will be contacted as soon as possible.

Chapter Two

God Has Metastasized

Mutation, an apostate neoplasm, an assembling of cells, a presence: when or whence, exactly, does an unexpected, uninvited growth arrive? Tumors wound a body, but not exhaustively: the acknowledgement of their existence—that is, the knowledge that a body is and has already been working on, for, and against one’s sense of self, place, and presence in the world—also wounds the stability of autobiography. Here, the work of acknowledgment reveals a movement above or beyond the possibility of a fixed temporal location: from the site of growth to the sensorium of already having ‘been with’ that growth. A metamorphosis. One might say that one’s journey of overcoming a tumor inaugurates a new present, a new self. Especially with brain tumors, neuroscience and the mission to capture the brain now shape how we deal with uninvited cranial cell growth (Duffau et al.; Jones; Landsborough), how we imagine brains in our contemporary cultural gaze (Vrecko; Rose and Abi-Rached), as well as how governments meet and approach health, innovation, and population (Obama). Stories about brain tumors—from laboratory write-ups to pulp depictions—are entangled in this moment, both shaping and being shaped by contemporary conventions, questions, and quests. They therefore imagine curious confrontations between neurobiology and narrative, and exemplify problems of change and of dislocated senses of self through ruptured accounts and accounts of rupture. In this chapter, I explore what is freshly demanded of readers to understand the conceit of metamorphosis in an age of neuroscience.

Mark Salzman crafts a complicated tale of a heroine negotiating a brain tumor in his novel *Lying Awake*, published by Knopf in 2000. Focalized through the protagonist Sister John of the Cross, the novel narrates her twenty-eight years spent cloistered in a Carmelite convent in contemporary Los Angeles. While the book opens with a scene of deep devotion, described as Sister John drifting “up toward infinity” (5), her story is disclosed through flashbacks and fragmented presents. In the fateful scene of diagnosis, her oncologist, Dr. Sheppard, informs Sister John she has a “small meningioma—about the size of a raisin—just above [her] right ear” pressing on her brain and causing temporal-lobe epilepsy (68). He adds that the particular tumor is easily removable, and that, after surgery, the prognosis is for a “complete recovery” (69). Although excited upon first joining the convent, the initial twenty-five years of her time in the compound—a part of her narrative occurring much later in the

novel's sequencing—is marked by a curious distance from God. Only after twenty-five years when she has her first seizure—which is not recognized by her as such, but experienced as a deeply psychedelic change, an “understanding... as if a dam had burst in her soul”—does she feel finally a connection with God (115). For the next three years, she prolifically writes during these tumor-induced epileptic states, described as “light [being] poured out of her onto the pages” (116). This initial epiphany—a transformation for her—belies the real struggle awaiting. While the character's medical ailment is a meningioma, the tumor simultaneously sprouts a different psychic and spiritual infirmity: made aware that her connection to God has a biological culprit, she knows post-surgery she will not experience devotion, divinity, and herself the way she has only recently (both narratively and chronologically) come to acquire them.

The narrator, by partitioning her story, searches her past for meaningfulness in the present, and thus present concerns firmly root the text. After some existential soul-searching, she undergoes surgery to remove her tumor in the novel's final quarter. Her ecstatic seizures, as well as her intense spiritual connection to God, stop. Her response to the surgery complicates the doctor's cheerful outlook of “complete recovery,” for Sister John learns she cannot recover the person or the piety that that cell growth pressured into existence, into experience. Someone else, a different Sister John from the ones who preceded both the epilepsy and the surgery, would appear to emerge by the novel's close. “No matter what she did in the cloister from now on, it would always be followed by an asterisk and questions about the nature of her relationship to God,” the narrator relays while Sister John is in hospital after surgery (153). That asterisk—simultaneously the character's, the novel's, and the tumor's scar tissue—exhibits how *Lying Awake* triangulates a contemporary struggle amongst neuroscience, narrative, and the experience of metamorphosis. Sister John's benign fictional tumor departs, but what arrives—or looms—is the malignant “nature of her relationship to God.” That the novel ascribes her senses of self and one's experience of God as materially localized rather than simply psychological alibis engages a version of metamorphosis reliant upon biochemical and neurological believability. What about the notion of ‘materiality,’ here? Salzman's text helps me to problematize how that promiscuous concept comes to matter for practices of reading metamorphosis in this narrative: first, material refers to the physical medium that, here, stores her data of God (carrying the corollary implication is that this is *rewritable* data); second, matter indicates that her cerebral

architecture at a given moment has probative value in a legal sense of being evidentially material to her disposition toward a divinity (because the design of the novel partitions her life story, it endorses a suspicion that her tumor perjures her own autobiography); third, material from the philosophical sense inspires a rejection of supernatural cosmologies and a metaphysical soul by dignifying a physical world.¹² How can readers now apprehend and make sense of this distinctively material metamorphosis, with its interrelated psychic, physiologic, spiritual, and textual complexities? Here, God metastasizes to commensurate with a contemporary literacy of the brain.

A sense of metastasis—the migratory entangling of decay and growth, transference and modification—is why I consider the text’s ‘asterisk from now on’ an interesting and challenging proposition. In the frame of neurobiology, how do we come to hypothesize and to account for changes in personality? In the game of fiction, how do we come to believe narrative devices that illustrate transformations and anchor tales of metamorphosis? The text’s cultural circulation begs a critical interstitial question: how do accounts of change transform our accounts of change?

Salzman’s novel does cultural work to register the interconnectedness and interdependency of neurobiology and narrative in order to describe the character’s metamorphosis. The novel’s narrative skillfully moves both from one type of rhetoric to another as well as from one temporal location to another without privileging any single form or emplotment: it metastasizes. The book challenges Sister John’s behavior, outlook, and sense of being in the world yet to come. Therefore, a closer reading of the book through the concept of metastasis is helpful to open up with what the novel closes: the future-tense growths, changes, and transitions yet to be enacted on both her forthcoming experiences and bygone memories. While this chapter argues that metastasis registers the biological work culture does in knowledge transformation, it also seeds the biological and biographical conceits readers produce and reproduce in storytelling. Likewise, the ‘asterisk from now on’ acknowledges a post-lesional mutation that informs impending metamorphoses, versions, and transformations. At a time when neuroscientific claims are moving and relocating knowledge so rapidly, slowing down to take stock of the transformations and mutations they imply at

¹² The narrator describes Sister John’s outlook post-surgery: “Now that the brilliance of her seizure had faded, doubt lost its shadow-appearance and became solid again. The horizon between reality and illusion—between the spiritual and the material, between faith and self-interest, between love and self-love—vanished” (Salzman, *Lying* 137).

large and impart in objects like novels is an apt analytical task. In this chapter, I track how neurobiology disrupts the metaphorical conceit of metamorphosis in *Lying Awake*.

First, I look to the disciplinary tools available to confront metastasis and Salzman's text in a plea for interdisciplinarity. Here, the suggestion is that the brain enters literary fiction not merely as a biological or vital phenomenon with the neurosciences as the singular maven of neuro-rhetoric, but as a collection of imaginative possibilities, characterizations, and discursive complexities shared and negotiated. Appreciating the density of the text on its own terms enables an enriched reading while maintaining a disavowal of neuro-rhetoric as always already enthroning the neurosciences. An approach to the object considered in this section is the emerging genre of 'neuronarrative,' whose possibilities and uses for interdisciplinary analysis are at stake. While neuronarratives apprehend certain stories as adopting neuroscience's causes and debates as relevant to literary concerns, the act of classifying texts as such falls short of enriching understandings of what Salzman's text culturally engages.

The second section offers a different way of approaching metamorphic transformation in a neurobiological age. It takes up the concept of metastasis and tracks it to read the spiritual legacies, affiliations, and deteriorations of meanings important to analyzing how *Lying Awake* may implicate a contemporary understanding of metamorphosis through biography and biology.

The chapter concludes with an analysis of Catherine Malabou's theory of 'destructive plasticity' alongside the concept of metastasis. It questions the popularity and privileging of neural plasticity as a catchall to explain change in literary characters. This section analyses the two concepts of plasticity and metastasis to address where and how the sculptural power of metamorphosis is enabled or constrained in its relation to depictions in fiction.

Transforming Genre

The metamorphosis at issue that Mark Salzman's *Lying Awake* presents does not offer any solitary psychological, environmental, social, or biological culpability. Although published some fifteen years ago, the text takes up contemporary anxieties and struggles over the increasing territory the neurosciences survey (here religious, spiritual, and cerebral-subjective), and the subsequent biomedicalization of everyday life, as well as its emotional and affective atomization.

With the emergence and imbrication of neurobiology in narrative fiction taken up in this chapter, a particular line of questioning emerges from apprehending a text's emphasis on neurobiology for the ways by which that emphasis may challenge the form of narrative. Recall from the Introduction that several scholars offer analyses in the last decade to account for the motif of brains-in-literature and literature-in-brains, and that, when invoked as genre, neuronarrative describes how a character's actions are energized by particular neurological conditions, ailments, changes, or enhancements (see pages 14-20). Against this taxonomy, I discern that Salzman's text itself is not easily diagnosable as any one narrative genre or approachable from any acute angle. It unexpectedly transforms conventions of form and meaning. Moreover, the novel's appearance and interest in such myriad journals, periodicals, and online outlets attests to both the wide appeal and intermedial travel of the textual material (e.g., Kidd, Berlinger; "Famous Tumors"; Glannon; Wendorff). The object itself presents literature, psychology, politics, history, and devotion as relevant frames of reference, and as arbitrators to accomplish an engagement with cultural, political, medical, and religious concerns central to contemporary struggles and autobiographical anxieties.

First, Knopf categorize the text as Fiction/Literature. Sister John is not a real person, and the narrative certainly fabulates a nun-in-crisis story. The Sisters of the Carmel of St. Joseph, within which Sister John takes her vocation and with whom she "prayed from the very heart of Los Angeles," does not exist (Salzman, *Lying* 8). And yet the text pushes back against its encapsulation as mere fiction. The pivotal event at the Vatican near the end of the novel, to which Sister John is personally invited but cannot attend on part of her hospitalized recovery from surgery, is the proclamation of St. Thérèse of Lisieux as a Doctor of the Catholic church; that event and its date—October 1997—precisely align with the novel's calendration (John Paul II; Salzman, *Lying* 154-55). Additionally, the informational materials Dr. Sheppard provides Sister John upon diagnosis of her tumor identifies historical figures, such as Dostoevsky, Van Gogh, Tennyson, Proust, Socrates, and the apostle Paul, as likely candidates who suffered from temporal-lobe epilepsy (*Lying* 120-21). While the literary strategy of incorporating non-fiction into fiction tracks a broad trend in post-War US-American writing, one that goes back as far as Capote and Mailer and forward through DeLillo and Powers, Salzman's scene with Dr. Sheppard differently engages non-fiction: history and historical figures are not merely incorporated (to give readers spatial and temporal coordinates) but retextured and rehistoricized in an effort to reposition and ratify a

neurobiologized contemporary story. It represents an “act of memory” in the present, “in which the past is continuously modified and redescribed” through invention and imagination “even as it continues to shape the future” (Bal, Introduction vii). Here, Salzman appropriates neuroscience’s contemporary specificities to rewrite and redistribute history in an act of cultural memory.

Salzman’s strategy of cultural memory neighbors with interesting frames of recent academic writing. Paula Leverage, for instance, anachronistically re-reads Chretien de Troyes’s twelfth-century Arthurian knight of *Percival, Le Conte du Graal* as “struggling with a very specific cognitive deficit” in her article “Is Percival Autistic?” (134). For Paula Leverage, the autism she reads in the fictional Percival is authorized by the French poet’s “fine psychological portrayals of his characters and their relations,” which compels her to compare de Troyes “today to novelists such as David Lodge and Ian McEwen, who consciously explore the workings of their characters’ minds” (134). What one can take from this extraordinary rewriting of history and contemporaneity, is that its varying practices indicates one of the ways that the history of characters within the literary community does not necessarily correlate with histories within other communities and intellectual subcultures. In general today, this type of speculation, in the form of academic historicism, is widely “accessible via PubMed” to researchers (Belinger 690; cf. Glannon; Landsborough) as well as from more neurobiologically incisive scholars: for example, Orrin Devinsky, director of the epilepsy center at New York University, can claim that “Whatever happened back there on Sinai, Moses’ experience was mediated by his temporal lobe” (Hagerty). Finally, in a different way, in some of the last pages of the book another moment tugs at the margins of fiction. Sister John asks Dr. Sheppard why a police officer stands guard outside her hospital room when a new patient, with whom she now shares the space, is admitted. Sheppard tells Sister John that the patient, a teenage girl in a coma from a gunshot wound to her head, “was involved in a crime at the time of the shooting. The guard is there to be sure she doesn’t walk out of the hospital and disappear,” adding, “You don’t have to be Oliver Sacks to know that’s not going to happen” (Salzman, *Lying* 162). Though simply the butt of a joke, the reference positions the real Sacks and his work in the fictional world of the characters as a type of common knowledge from the non-fictional. The book exceeds and dislocates the boundaries of fiction, not simply by integrating non-fiction but by hailing and changing neuroscience as

well as the legacy of popularly narrating parables from the neurosciences through its textual delivery.

Secondly, the approach to *Lying Awake* as a medical story falls short of full explication. It plumbs the exciting abilities of brain-imaging technology, lends space to expositions of neuro-oncology (through the utility of the Dr. Sheppard character), and stages the overcoming of a tumor from which Sister John, without surgery, “would eventually fall into a coma and die” (Glannon). Underscoring a didactic quality, Ava Easton and Karl Atkin observe the prospect that “through [neurological narratives], health professionals can explore and engage with the experiences of people affected by neurological conditions in a way that it would not be ethically appropriate to do in conventional consultations” (36). Further, Nancy Berlinger writes about Salzman’s novel as part of this increasing trend to use religious figures to teach medical researchers, found in published medical articles like “A Differential Diagnosis of the Inspirational Spells of Muhammad” and “Joan of Arc, Creative Psychopath” (691). Berlinger observes that more than half of the total medical schools in the United States “address issues of spirituality in their curricula” (683). She adds that the pursuit of the “process of telling and retelling a story *in accordance with genre conventions*—whether they are the conventions of the prophetic narrative or the bioethics case study—fictionalizes the story to the point where it is no longer possible to determine what the real facts of the case are” (691; my emphasis). What one may take from her argument is that medical narratives themselves enfranchise an assembly of cultural practices that situate the psychic in pathology as well as anxieties where spirituality is successfully managed. These narratives “offer some insight into how ‘religiosity,’ as a form of religious spirituality, may be viewed by clinicians and clinical researchers” (691). To quarry *Lying Awake* for neuro-medical analysis partitions knowledge in a way that falsely distinguishes the narrative involved from its cultural histories in the present. The novel outsmarts this by insisting on the medical aspects thrown up as always already medical *story* complicated by medicine-*through-story*.

Third, framed as a spiritual or devotional novel, the book finds itself in a company of texts that interrogate historical and contemporary practices, rituals, and beliefs in the Catholic Church as well as the general perceived fissure separating religion and science. Emphasizing this genre, the novel indeed takes part in the tradition of storytelling the journey, the spiritual awakening, the overcoming through struggle, and all the metaphors of light and germination that accompany it. Sister John speaks her central, crucial choices in the

novel this way: “Should I automatically assume my mystical experiences have been false, or should I stand behind what my heart tells me? Is God asking me to let go of concerns for my health, or is he asking me to let go of my desire for his presence?” (Salzman, *Lying* 124). Though an “or” shrilly separates each question here, by the evening before her brain surgery, Sister John comes to submit not to the clauses on either side of the “or” but to the “or” itself. The narrator demonstrates how she resigns herself on the eve of surgery with a chapter-closing, italicized “*Into thy hands*”; yet, the non-capitalized “thy” promotes an entangled predicate: does she surrender herself to God’s hands and/or yield to the surgeon Dr. Sheppard’s hands (Salzman, *Lying* 148)? What productively complicates the set of expectations accompanying a typical spiritual novel is the enfolding of science and religion through the character of Sister John. The narrator communicates that she would have been “automatically rejected” from her application for cloistered nunhood had she known before taking vows that her spiritual devotion was mediated by a brain tumor (67). Rather than privileging one genre over another, the novel participates in contemporary debates about science and religion, typified by academic tomes like Patrick McNamara’s *The Neuroscience of Religious Experience* (2009) or Anne Runehov’s *Sacred or Neural?* (2007).

Sharing this textual company, the book as simply a religious novel might waver under the question of whether science and medicine can localize and diagnose religion. But the novel does more and different work than that: by focusing on the protagonist’s struggle with information and experience while not dodging the question of science’s threatened occupation of religion, the novel engages the cultural transformations of writing contemporary negotiations of neurobiology and psychology. Rescuing this aspect of the text’s “mystery” as inspiring for contemporary Catholicism, Thomas Wendorf writes for the Catholic journal *Logos* that “Salzman’s novel locates all the ways of knowing within faithful service and of mystery that characterizes Christian life” (62). Acknowledging medicine’s role in the text as a challenge, Wendorf concludes that in representing the “extraordinary religious experiences and the competing voices provoked by them,” the novel “provide[s] us with analogies for meeting mystery in ordinary life” (62). From this interpretation it is possible to read that Sister John’s confrontation with both her tumor and Dr. Sheppard ushers in one set of skills of knowledge, but not exclusively. Sister John’s Christian concepts also shepherd other models of knowing presence and life. *Lying Awake* does not empower one form of text or one sermonizer of knowledge. The novel privileges a sense that neither a strict fidelity to

her Catholic faith nor a sole surrender to a surgeon “recovers” her; rather, the space of growth *in the exchange* amongst neuroscience and religion transforms her.

Finally, the book may also welcome a reading as a patient case study. In the tradition of clinical writing, traceable through writers like Hippocrates, Luria, Freud, and Oliver Sacks, Salzman’s *Lying Awake* may fit comfortably. If one is to believe the author, Salzman reports “the history of the beginning of the idea” of the novel retroactively: “It started after I read an essay by Oliver Sacks about temporal lobe epilepsy where the person would experience an intensification of interest in religion and spirituality” (Salzman, Interview). As noted above, Salzman directly references Sacks in the novel. Further adding to a curious intertextuality, Oliver Sacks himself references *Lying Awake* as both “evidence” and “theme” of ecstatic, “religious or mystical” seizures in a chapter entitled “The ‘Sacred’ Disease” in his book *Hallucinations* (161-62). As a bit of a confession here, my interest in Salzman’s book initially occurred while listening to a segment of National Public Radio’s *Radiolab* entitled “Famous Tumors.” The hosts interview Mark Salzman between other stories of tumors, such as the one that killed nineteenth-century US President Ulysses S. Grant and the tumor cells from Henrietta Lacks’s biopsy that were crucial to medical advancements like polio vaccines and chemotherapy drugs. Though the show notes Salzman’s case study is fictional, the story of Sister John’s tumor in *Lying Awake* fits seamlessly in this series of real-life patient stories. Yet, even this desire to focus on the object as illustrative of a clinical case study—whether from Oliver Sacks or MacArthur Fellow and co-host Jad Abumrad on *Radiolab*—evinces how the text’s characters and issues breach the barrier of a case-study text and are already engaged and enfolded in competing cultural questions.

The interest here is to explain how the text on its own terms parries an urge to classify the novel through any one disciplinary or generic approach and to demonstrate how it precludes disjointed and facile conclusions about fiction, medicine, spirituality, and psychology. By overwhelming any single location in genre or form, *Lying Awake* problematizes and contaminates cultural conventions and expectations of narrative. And identifying certain texts as a means, or even a method, of analysis leaves one little but taxonomy by which to understand how specific texts implicate an understanding of contemporaneity.

As noted in the Introduction, genre typology as a methodology for critical reading offers little to encourage an engagement with *Lying Awake*’s specificity when addressing the

fact that today's fiction has evolved in dialogue with the neuroscientific revolution (see pages 25-28). Murat Aydemir, on the other hand, finds Clifford Geertz's contributions to a cultural analysis useful at this juncture, underscoring that Geertz's study through "thick description" reminds scholars that he "approaches his objects as densely textured: they don't reflect contextual givens but condense multiple frames of reference, [such as] discursive, social, aesthetic, economic, political, and so on" (39). Densely textured, "overdetermined" objects of culture challenge "full 'possession' by contextual and conceptual articulation," which is why they "can never be 'just an example'" of a theory or a political attitude or a literary genre (39). "Objects problematize rather than illustrate," insists Aydemir, which is why an analysis that ends with diagnosing texts as neuronarratives, therefore, is not an approach that helps understand what the stories and the characters in the story are a response to, an attack upon, a cherishing of, a transformation through, and so on (39).

This section displaces a convenient framework—genre classification—to highlight the productive contaminations the text performs: how different disciplines play their part in Salzman's text, and, adjacently, how the novel engages different methods of reading by resisting the exhaustibility of any single disciplinary approach of interrogation or exploration. Idealizing the text as a neuronarrative of metamorphosis sequesters neurobiology from narrative in order to distinguish the novel's particular tale from its cultural incubation. What the text engages and what engages the text do not follow a through-line of cultural concerns; rather, those engagements are marked by growth and decay, dislocation and migration, as well as the cooperative literacies necessary to read them. Salzman's uses of neurobiology interpenetrate the genre of metamorphosis by imagining new interstitial literary figures involved in the crafting of biography, recollection, and experience. The book metastasizes the site of genre and narrative, embracing different questions, forms, explanations, and cultural anxieties.

Metastatic Movements

In the space between the bodily operations of what benign and malignant signify the term metastasis finds its fuel and motility. Sister John's tumor is a "small meningioma ... in an excellent position for removal," but the act of removing the mass of cells does not recover a previous pre-epileptic state or produce an easy spiritual recovery in any psychic or narrative sense of the term (Salzman, *Lying* 68). She seems to become a different person, twice, in fact:

once from the moment of diagnosis, and once again post-surgery. Her brain lesion demonstrates the contemporary shift to underscore the biological-as-more-believable account of characterization. There is something about the movement and exchange among the biological and biographic—revealed only through her simultaneous physical and psychic wounding—that *Lying Awake* proposes as a central question throughout. I suspect this something is a transformation of the site of metamorphosis in stories, a conversion not marked by the mere integration of neurobiology into literature, but one which resituates the traditional literacy required to read metamorphoses.

In one way, this observation sketches the fortunes of the concept of metastasis: travelling back and forth between rhetoric—where it is first used—and medicine, where it now visualizes movements of illnesses. The term today generally connotes the insidious movement of cancerous cells from the site of neoplasm to another location in the body. Yet, in another way, the term denotes other movements as well. For Quintilian in the first century, *metastasis* usefully describes narrative resetting, a “removal from the scene”; Euripides, in the drama *Iphigenia in Tauris*, invokes the term to indicate a “change of course” (“μετάστασις”). In a contemporary diction, it is possible to submit that the term’s appearance in language was itself a type of metastasis: *meta* and *stasis*—together, gesturing a movement above or beyond a site or location—arrives conjoined in the English of rhetorical scholars in the mid-1500s after being enucleated from the Greek components and cultivated in the late Latin (“Metastasis”). Metastasis denotes a mutation of meaning across and beyond lexical components through a dislocation: an abrupt change, possibly an accident, but always unexpected. The sense of disease and cancer are first recorded in Boyle’s writings only in 1663, while the concept’s motility—its verb form, *metastasize*—is first trafficked in 1907 (“Metastasis”).

Metastasis also registers the spiritual legacies, affiliations, and deteriorations of meanings important to analyzing how *Lying Awake* implicates a contemporary readability and understanding of metamorphosis. *Lying Awake*’s narrator importantly positions Sister John’s dilemma by situating a history of religion (and art) within a newly inaugurated history of science. Recall that Dr. Sheppard’s informational materials for Sister John upon diagnosis put her in the company of others, like Teresa of Avila, Van Gogh, and the proselytizer Paul, who, we are told, likely had temporal-lobe epilepsy (121). By suturing her experiences with theirs, we are asked to balance the materiality of their conversions with a different historical

account of their metamorphoses.¹³ Aptly, Paul famously and suddenly converted his spiritual outlook and then turned to encourage others to transform likewise. In a letter to the church in Rome later attributed to him, the speaker pressures: “do not be not conformed to this world, but be transformed [*metamorphousthe*] by the renewing of your minds” (*New Revised Standard Version*, Rom. 12:2). Jesuit scholar Luigi Rulla’s exegesis of the “metamorphosis or transformation” in the epistle “is to be understood in the sense of ‘let yourselves be transformed’” in the context of the “idea of totality” (297). Unpacking the admonition “emphasizes the relationship of ‘mind’ (*nous*) and ‘body’ (*soma*)... [and] does not shrink away from addressing the physical aspect of the audience” (Bayer 43). The physical and mental become interconsequential in that document’s exhortation. Here, “transformed”—*metamorphousthe*—is unique in the Christian Bible, and is first traceable to *reformamimi* in Jerome’s Vulgate; however, this Latin verb form resonates with transform and reshape, both of which still suggest a biological and biographical plasticity, a sculptural power of psycho/somatic resetting. That *Lying Awake* intervenes to enfold these transformations through the narrative devices of a tumor and a God beckons questions of their contemporary trajectories. That is, new biographies of change—here, articulated through neurobiology—transform previous biographies of change.

To take this further, the issue of travel and translation that the concepts metamorphosis and metastasis describe *and* undergo resonates with the form and act of writing literature through media itself. In a scene near the close of Umberto Eco’s *Foucault’s*

¹³ Balancing accounts of their conversions is a tricky matter, not just in relation to the discussion of materiality I offer earlier, but because it involves reading several layers of historical-cultural inscription in the present. As Mieke Bal suggests, “the memorial presence of the past takes many forms and serves many purposes, ranging from conscious recall to unreflected re-emergence, from nostalgic longing for what was lost to polemical use of the past to shape the present” (Bal, Introduction vii). That the fictional character Dr. Sheppard encourages a reader of *Lying Awake* to infer that Paul, for instance, suffered from a neuropathology does indeed risk conflating a set of texts for the person himself. Yet, to retreat from that risk of inter-influence invites an unproductive line of questions about what texts are instead of asking what texts do. The ability for a reader to imagine that neuropathological possibility demonstrates that the diverse forms and purposes of memorial presence are often simultaneously present in one text. Because “memory is active and it is situated in the present,” I argue in this section that the potential for texts to transform what we thought we already knew of histories of narration is what makes them both exciting and analytically productive (viii).

Pendulum, the character Casaubon, a publisher, narrates a final exchange between a dying Diotallevi and Jacopo Belbo about the possibilities and pitfalls of “remaking our body through language” (565). It is the interaction between the language of sacred texts and one’s body and one’s mind that concerns Diotallevi. The two protagonists, also both publishers, affirm the idea that “What our lips said, our cells learned” (566). Diotallevi speaks to Belbo:

Have you ever reflected that the linguistic term ‘metathesis’ is similar to the oncological term ‘metastasis’? What is metathesis? ... The dictionary says that metathesis means transposition or interchange, while metastasis indicates change and shifting. How stupid dictionaries are! The root is the same. Either it’s the verb *metatithemi* or the verb *methistemi*. *Metatithemi* means I interpose, I shift, I transfer, I substitute, I abrogate a law, I change a meaning. And *methistemi*? It’s the same thing: I move, I transform, I transpose, I switch clichés, I take leave of my senses. (566-67)

The question of metastasis Eco’s novel observes does not strictly align with medical/biological or purely rhetorical/literary; like Salzman’s text it engages those contours by interpenetrating them. While the scene above plays into a crisis of academic postmodernism *Foucault’s Pendulum* takes up as a theme, I emphasize here the movement, the *metastasis* of the terms themselves: in translation, practice, and, with *Lying Awake*, devotion.

To be sure, this chapter also appropriates the concept of metastasis to describe my encounter with a shift, or a supplement, in generic clichés of metamorphosis. But highlighting this re-conceptualization propagates a metastasis of other assumptions, other deteriorations, and other promises. For instance, Diotallevi’s example of *methistemi* (in Col. 1:13) is translated variously across the New Testament as “transferred” (*New Revised Standard Version*, *New Living Translation*), “translated” (*American Standard Version*, *King James Version*, *Wycliffe Bible*), “brought” (*Contemporary English Version*, *Good News*), and even “re-established” (John Bertram Phillips’s *New Testament in Modern English* Anglican translation). Metastasis conceptualizes change and narrates movement. The concept helps one move across, or beyond, the acceptable perimeters of categories, and asks one to consider new locations, new sites of biological and biographical growth.

In other words, the concept metastasis is not culturally or historically benign, nor is its relations to the ways it is used to illustrate metamorphosis. It yields notions of transformation, change, mutation, and conversion. Its medical, and later oncological, appropriation transforms the very imaginaries the term’s invocation invites. And appreciating

the concept's density narrates its history in the present to deliver types of change—here, in Salzman's novel—as a site of cultural coincidence that enfolds rhetoric and religion. His novel helps me understand how our present shifts the place of metamorphic speech. This is what I find precious about metastasis through *Lying Awake* and would have missed in a cursory reading through metamorphosis: that we transform culture and history in our contemporary writing of changes of scene.

The analysis above underscores that while metamorphosis invokes a history of transformation in narratives—a sort of through-line from Ovid to Kafka—metastasis, rather, transforms histories of narration. Its presence transforms our understanding of biography and how biographies are articulated in culture. Not monopolizable by oncology, and more than a mere literary figure, metastasis makes neurobiology literate through contemporary biographies of metamorphosis.

The sculptural power of metamorphosis—currently embedded in the concept of plasticity in critical theory—and its relation to literature is the final aspect I wish to explore in *Lying Awake*. The following section asks what sort of mileage a metastatic literacy might clock.

Morphing Plasticity

Catherine Malabou opens *The New Wounded* with an anecdote about her grandmother's Alzheimer's disease. As Malabou phrases it, she watched Alzheimer's "operate" on her grandmother (xi). "Operate" is the verb of choice, because "it seemed to me that my grandmother, or, at least, the new and ultimate version of her, was the work of the disease, its opus, its own sculpture. ...Behind the familiar halo of her hair, the tone of her voice, the blue of her eyes: the absolutely incontestable presence of *someone else*" (xi). Malabou describes the strange sculptural power of the neurodegenerative disease changing her grandmother. While family and close friends might interpret the newness of her grandmother as a type of transition through the Alzheimer's, a mere difference of form, Malabou recognizes—and opts to theorize—this movement as the "presence of someone else," a difference of being. Thus, for Malabou, if brain wounds operate, they also transform, metamorphose through the annihilation of a previous presence. One transforms, it would seem, to inaugurate a new present, a new self. Plasticity is the name of this modification and the action of this modifiability.

Malabou located the concept of plasticity in reading Hegel's exploration of spirit, and brought it later to encounter the emerging brain sciences, who also make use of this concept as a biologically acting force. Biology, and specifically neurobiology, is neither (a) given nor hardwired. Adaptation, creation, and annihilation are plasticity's three fields of action Malabou identifies. The third, annihilation, is her object of interest in two recent books in English (*The New Wounded* and *Ontology of the Accident*), and is etymologically correlated to the term itself: *plastique*; the capacity to annihilate form, in the sense of plastic explosives: "destructive plasticity." Out of destruction, an entirely new subject emerges. Those with head trauma, epilepsy, tumors, autism, Parkinson's, Alzheimer's, people with post-traumatic stress or brain lesions, or those who chemically mutate their selves, she argues, have not regressed to some previous state psychoanalysis can alleviate. They are new people, the "new wounded," metamorphosed biologically and psychically. The brain, for Malabou, becomes the privileged site for the conceit of metamorphosis today. Malabou's theory of plasticity provides a useful set of questions to think through the philosophical implications of the neuroscientific revolution; however, my interest in her here is with regard to narratives and literary media. Her extensive and unique contributions deserve more analytical time and space than simply grouping her with literary critics who work with 'neuronarratives.'

Rather than the possibility of traces, or even asterisks, remaining as a result of brain wounds, Malabou insists on destructive plasticity's complete annihilation—characters severed from their history—as a way to radically rethink both psychoanalysis as a discipline and psychological representations of brain-wounded characters in fiction. Malabou considers narrative through her concept of the "neurological novel," and her focus is on "how to do justice, in the very writing of the cases, to the rupture of narrativity that ultimately characterizes each one, to the destructive power of the plasticity that they each manifest" (*Wounded* 55).

Malabou argues that there is no amount of therapy that would alleviate these altered identities, for there is no history to these new brains. She writes, "There is a postlesional plasticity that is not the plasticity of reconstruction but the default formation of a new identity with loss as its premise" (*Wounded* 48). Indeed, Sister John's experience of herself and her relationship with God as "followed by an asterisk" resonates with the idea of transformation premised by loss. Events like these reveal that we have a "sculptural power that produces form through the annihilation of form" (49). Malabou's theory of destructive

plasticity, she argues, demands that “we must all of us recognize that we might, one day, become someone else, an absolute other, someone who will never be reconciled with themselves again” (*Ontology* 2). This new self appears outside of history, shreds biography and autobiography, and begins a new way of being in the world while continuing to exist in a prior, but wounded, body.

Malabou’s theory about narrating a wounded subject is sharp, but slightly too seductive. An objection when regarding narrative literature: Malabou coins a term—destructive plasticity, or the “plastics of death” (*Wounded* 20)—and consequently everything we know about neurobiology and narrative is different, crystallized, tidied. As Hannah Proctor points out, “Malabou’s insistence on the homogeneity of the post-traumatic subjectivity risks suffocating the specificities of psychic damage beneath a singular conceptual blanket” (42). And while acknowledging and appreciating the metastatic operation this chapter’s take on her concept of destructive plasticity implies, I want now to test the image of biological and biographic traffic it resolves and stabilizes by analyzing destructive plasticity alongside the concept of metastasis made available in *Lying Awake*.

This question of how to do justice—how to *do* writing—to the personal, intimate, and immediate experiences of the world through neurobiology recalls Ramachandran’s argument toward the “need to reconcile the first person and third person accounts of the universe” (qtd. in Gaetdke 187). Neurobiological characterization now demands a departure from the speculative third-person and author-mediated first-person perspective, but it is unclear that “destructive plasticity” gifts the ideal prism for doing so. I read Malabou’s general looking backward—to the fiction of Beckett, Kafka, Ovid, and others—as an occupying gesture, one where she conscripts “neurological novels” in order to stabilize the story of her theory, where she can claim, for example, a scene in *Happy Days* “is the privileged expression of affective impoverishment and destructive metamorphosis” (*Wounded* 55), or that “Gregor’s awakening at the beginning of [*The Metamorphosis*] is the perfect expression of destructive plasticity” (*Ontology* 15). The risk in locating *Lying Awake* in concurrence with her theory, as an instance of it, is to universalize plasticity, to laud any cathartic outcome for a literary character as *mere* emergence or metamorphosis, and to foreclose Sister John’s asterisk in favor of diagnostic psychobiology.

In the account we read, Sister John’s sense of self and presence is not entirely overhauled. Her history is not erased; her autobiography does not vanish. She changes, is re-

established, but does not become ‘unrecognizable’ to herself. Her memories, the new account she gives of herself, and her recollections of her previously intense connection with God—though deteriorated and greyscale—now inform the very asterisk that *remains* with her. While this remainder certainly does not approach neuronal recovery or outright spiritual resurrection, there is residue in the forms of memories and practices she continues post-surgery, however stale or uninspired the narrator suggests they may be. “A normal adjustment? For three astonishing years she had lived and prayed from the inside of a kaleidoscope. Everything fit into a design of feeling, a pattern linking all souls and minds together,” the post-surgical passage reads; “She felt God’s presence in the design, and nothing seemed out of place. Every person was like a piece of glass in a giant rose window. Now the pattern was gone” (Salzman, *Lying* 158-59). Dr. Sheppard may have excised the pattern’s presence, but the memory, according to the narrator, transfers to a new presence, the type of transferred, re-established transformation *Lying Awake* itself proposes when saluting Paul. Further, Salzman’s pun, when Sister John prepares for surgery, is that she “removed her habit,” which acknowledges an undressing of the character’s textile and text (147). Upon exiting the hospital, however, she puts it back on and catches a glimpse of herself in the shiny elevator door, and thinks: “The garment she had cherished for so long looked strange, like a costume” (159). The scene’s setting in front of the mirror-like door is telling, for Sister John sees *herself* even if it is a recognition of a different self. Her change—here, a “strange” transformation—narrates the psychic dislocation and cerebral movement delivered by her surgery. Metastasis registers this metamorphosis as reorganization through growth more particularly than regarding it as the creation-through-“annihilation” that underpins Malabou’s concept of destructive plasticity in “neurological novels.”

Importantly, *Lying Awake* does not end its narration of Sister John’s story as she exits the hospital, for neither the tumor, nor Dr. Sheppard, nor God have the last word. In a sense, all three deliver Sister John’s emerging identity and future self. Notably, destructive plasticity as a result of brain trauma, for Malabou, “has the power to form identity through destruction—thus making possible the emergence of a psyche that has vacated itself, its past, and its ‘precedents.’ In this sense,” she continues, “such plasticity has the power of creation *ex nihilo*, since it begins with the annihilation of an initial identity” (*Wounded* 68). *Lying Awake* begets a different type of emergence, a creation from something already there. After returning to the Carmel, Sister John’s time in the compound’s infirmary is described as

“convalescence,” “a prolonged examination of conscience,” which implies to some degree a recuperation, a reterritorialization, a shift in scene after having taken leave of one’s senses (Salzman, *Lying* 170). Thus, her new identity is predicated on the very fact that she *has* a history, and is compelled to deal with it as it informs her present and presence. Her connection with God, inaugurated by tumorous cell growth, is severed, but remains a trace, not the radical break or “absolute other” Malabou considers a prerequisite to formation. Though the narrator acknowledges her estrangement from her epileptic and pre-epileptic self, it is clearly a dislocation and transference of her identity, from one space to another, and occurs *through* the knowledge of her previous self. This metastatic emergence registers a *mode* of emergence less discernable in Malabou’s model of “creation *ex nihilo*,” and is ultimately preferable because it makes readable the sculptural and psychic powers of biographic residue that remain with Sister John’s sense(s) of self.

Modes of emergence, through the traces that persists in identity, constitute a final encounter of Malabou’s theoretical treatment of the neurological novel with the concept of metastasis. Malabou’s agenda in *The New Wounded*—the book’s “principal wager”—is that “cerebral eventality will replace sexual eventality within the psychopathology to come” (xix). Psychoanalysis, in other words, requires an overhaul to remain useful and relevant in a neurobiological present. Though she valiantly succeeds in making this case with regard to Freud, her arguments are only narrowly tailored to a rebuttal and rethinking of Freud, which puts pressure on her more adventurous speculations about literary fiction. What Malabou’s approach obscures, in the instances where she warrants her claims through analysis of neurological novels, are the ‘novel’ aspects themselves: the narrative and narratological take a backseat to the ‘neuro-’ and the psycho. By emphasizing the stakes of psychoanalysis, “her references to literal brain injuries seem to serve as a metaphor for all disjunctions in subjectivity” (Proctor 42). Rather than remaining at the level of metaphor, *Lying Awake*’s narrative takes up a very specific drama—itsself an impossible premise without the presence of neuroscience—as a way to think through the contours of cultural projects like biography and autobiography today. Cerebral emergence is not coterminous with narrative and rhetorical emergence, a nuance to which “destructive plasticity” remains mute and to which metastasis makes audible.

For example, looking to Luria and the role of clinical case studies, Malabou observes “a very close relation between the metamorphosis of an identity that survives a wound and the

story of this metamorphosis—as if the plasticity of writing supported that of systems; as if writing itself repaired the wound that, as it repairs itself, nourishes writing” (*Wounded* 187). Writing itself appears as a mode of emergence, of identity- and world-formation, from neurological wounding. As if to comically puncture this image, while Sister John prolifically wrote in her epileptic fits before acknowledging her brain wound, Salzman’s narrator conveys that Sister John ceases writing *after* her tumor’s removal. The convent’s most senior nun, Mother Mary Joseph, tells Sister John, “God showed you what heaven could be like, and you shared it with others. Now you can do something even better. ...Walk in faith even though heaven seems out of reach. Think how good it would be if you could write about that” (Salzman, *Lying* 175). Not missing a beat, Sister John replies to the head Mother: “I need to *read* that book, not write it” (175).¹⁴ Here, emergence comes from her recognition—like Diotallevi—of taking leave of her senses. A politics of discourse, or narrating experience in order to articulate, share, and make sense of a dislocated and transformed self, arrives not from the “absolute break” of a brain wound but, for Sister John, from the recovery, from the *history* that wound both produces and acknowledges.

Without the need to psychoanalyze Sister John, what Salzman gifts readers in his narrative is the very complex entanglement of neurobiology, narrative, and identity through the conceit of a tumorous wound. The idea that narratives are world-forming is an idea I certainly cherish here. But “destructive plasticity” does not add anything new to an insight many, such as A.S. Byatt, David Lodge, or Nelson Goodman, have previously offered. Even

¹⁴ Keeping Sister John’s earlier hallucination-induced devotional writing in mind, this particular exchange summons the (textual) concerns in Gustave Flaubert’s *The Temptation of Saint Anthony* (eventually published in 1874) as analyzed by Foucault in “Fantasia of the Library.” For Foucault, the opening scene of *The Temptation* depicts Anthony turning to text the very moment his devotional connection with God falters: “Flaubert’s Saint Anthony seizes his book to ward off the evil that begins to obsess him and reads at random five passages from Scriptures” (94). Reading scripture only serves to trigger the nightmarish temptations Anthony experiences throughout the rest of *The Temptation*. The implication, Foucault notes, is that “evil is not given as the property of characters, but incorporated in words” (95). Flaubert’s *Temptation* is “a self-reflexive commentary on the dangers of books” (Thomas 137), where reading, according to Foucault, risks “dissipating” one’s “energies by telling” a reader “what they must do” rather than inspiring different forms of existence, or, in this case, devotions (108). Foucault writes: “The imaginary now resides between the book and the lamp. The fantastic is no longer a property of the heart, nor is it found among the incongruities of nature; it evolves from the accuracy of knowledge, and its treasures lie dormant in documents. Dreams are no longer summoned with closed eyes, but in reading; and a true image is now a product of learning...” (90).

deeper in literary theory, Bakhtin's analysis of how life-worlds produce a text, Jaus's formulation of the succession of life-world(s) in which a text is received, or, more broadly, Harold Bloom's theory of socio or cultural genesis, all relay in various ways the power of literature and emergence without recourse to capturing and codifying that insight into a matrix of neurons. At best, Malabou keeps Kafka, Duras, Ovid, and others in cultural circulation; she re-writes them to accord with a theory of neurobiology: a type of metastatic dialectics that only narrative, here, can make visible. Thus, while "destructive plasticity" skillfully reworks the present shortcomings of psychoanalysis, it is maladroit to help a theory of emergence in narrative.

What is wonderful about Malabou's theory is that it welcomes the possibility for radical, unexpected change. Like Gregor Samsa in Kafka's *Metamorphosis* Malabou ventures to the extreme to find important implications of a new understanding of neurobiology: the emergence of a new person from a brain wound—the absolute break, or the distance of an Alzheimer's patient—where the character does not recognize a previous self. However, different modes of emergence, and different metamorphoses, become possible to recognize through a metastatic reading she forecloses. Intervening in Malabou's theory by reading the concept of metastasis accounts for a type of propagation that registers the biological work culture does in knowledge transformation, and seeds the biological and biographical conceits readers produce and reproduce in stories. Rather than only theorizing shredded, "vacated" characters with no history, the critical promise of metastasis in narration is to read dislocated, emergent, metamorphosed characters beyond abstract psychology and authorial fiat (*Wounded* 68). Where microscopes and fMRI machines abstract and obscure, and where the notion of plasticity and the practice of psychoanalysis flattens and universalizes subjects, metastasis might help us account for and feel transformation and metamorphosis in particular lives. As the narrator in *Lying Awake* imparts, Sister John's "path was not to be a straight line after all, but a comet's ellipse" (177).

Metastasis, therefore, is a productive problem for narrative. It conceptualizes change, characterizes movement, and dialogues with notions of transformation, mutation, and conversion. Although rooted in rhetoric, its travels and implications in oncology and philosophy transgress those frames and speak to the narrative mediations those frames produce and shape. Though colloquially a pretty nasty vision of destruction, a slow, insurgent, cancerous spread of death, it analytically re-establishes an emergence of (cellular)

life as form and change. Life which is not centered on the stability of a 'soul' or a single identity, but a vision of life that pluralizes subjects figuratively and metabolically. Metastasis is the non-strategic travel of cellular growth, and an economy of material growth, pruning, forging, etc., constitutes both cancer and inscriptions of knowledge.

Through an analysis of *Lying Awake* that confronts metastasis, this chapter proposes a closer affiliation with the literary, social, and spiritual anxieties in our contemporary neuro-rhetoric. Rather than genuflecting to neurobiology or classifying the text as an integration of neuroscience, I take *Lying Awake* conceptually on its own terms to engage a more textured analysis. Unable to fully materialize Sister John's metamorphosis psychologically in the wake of neurobiology, the novel forces cooperation with narratives of neuroscience for the character to become legible. But this legibility dislocates a once-benign history of metamorphosed literary characters. Not a mere incorporation of neurobiology, Salzman's text transforms a history of narratives that depict character transformation: the trope of metamorphosis metastasizes. The concept and practices of God are dislocated, yet synaptically, electrically, textually, and narratively re-established. If God has a cranial postcode, as some neurosciences would have it, Salzman's character outwits this localization. The site of God and the engine of transformation metastasize a materialization of character. God is present before and after Sister John's brain wound, but the gravity, form, and meaning, are changed, and, importantly, are changing for the reader's imaginative projection of a future Sister John as well as a history of transformation.