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Kathleen Watt (2023). *Rearranged: An Opera Singer's Facial Cancer and Life Transposed*. New York City: Heliotrope Books. ISBN: 978-1956474343

Andreae Callanan, PhD
Framework Coordinator, Office of Public Engagement
Memorial University
andreae [sot] callanan [at] mun [dot] ca

“So, *this is cancer*,” our narrator says to herself. “*The Big C. In me*” (Watt 30). In *Rearranged: An Opera Singer's Facial Cancer and Life Transposed*, author Kathleen Watt offers her readers an exclusive backstage pass to a very particular kind of performance. When we meet Watt, she is an opera singer by trade, newly thrust into the real-life role of cancer patient. As she passes through this new world of tests, screenings, interviews, medications, and surgeries, she brings us along for the ride. Drawing on memories, transcriptions of notes scribbled while hallucinating in her hospital bed, and highly detailed descriptions of surgical procedures, Watt delivers a memoir in micro-chapters—eighty-six chapters in all, most only a few pages long. The effect is intimate, warm, anecdotal, informative, and frank.

In the opening pages of *Rearranged*, we learn that Watt has discovered a bump on her gum; the bump is painless, so she isn't immediately alarmed. A series of dental encounters (and mishaps) reveals that the bump is in fact the node of a malignant tumour that has “filled and then outgrown the cavity” behind Watt's right cheekbone (50-51). The original diagnosis is medium grade chondrosarcoma, but further study reveals a highly aggressive osteogenic sarcoma (OS). Watt juxtaposes her private concern around “the bump” (a concern shared by her partner, Evie) with the bustling and somewhat chaotic

spectacle of her professional life. We are treated to a glimpse of a New York Metropolitan Opera staging of Pietro Mascagni's *Cavalleria Rusticana*. Recalling her time as a member of the Met's "Extra Chorus," Watt describes the stage magic created by the interplay of the real—strewn sand, authentic wine casks, live donkeys—and the illusory—sophisticated opera professionals posing as raucous villagers, soda standing in for wine, and a cathedral belfry constructed from "plastered plywood, buttressed by two-by-fours, secured with sandbags and sub-contracted stagehands standing by with Phillips-head drill-bits" (Watt 25). *Cavalleria Rusticana*, Watt tells us, is an exemplar of the *verismo* genre in opera, a style that "gives to ordinary human drama the same high-art treatment once reserved for ... rarified demigods and royalty" (25). With this, Watt charts out her own tale of ordinary human drama writ large, complete with a cast of eccentric medical professionals, devoted loved ones, and intriguing minor characters. As we move from diagnosis to treatment to reconstruction, Watt's face becomes the site of a verisimilitude more intricate, more complex, and more vital than any stage performance. Skin and bone from elsewhere on her body are re-cast as cheek and eye socket; mesh and screws, plaster, false teeth and a prosthetic palate are all "subcontracted" in the reconstruction effort.

Up until the moment of her diagnosis, Watt is, like many of us, blissfully ignorant of the reality of facial cancer. When an oral surgeon phones to deliver the news, she struggles to take in all the details; upon being instructed to "get to a head and neck surgeon! Right away!" Watt responds to herself, "*A head-and-neck surgeon. Is that even a thing? Do people know about this?*" (40). The implications of Watt's diagnosis are not immediately clear to Watt or to Evie. The medical terminology is too specific, the names of drugs and

tools are too alien, and the proposed procedures from craniofacial “brainiacs” (57) consulted by the couple are at times contradictory. Watt starts out hoping to preserve her voice and her career; as an opera singer, her trachea, her palate, her teeth, even the hollows of her sinuses are all parts of her instrument. Complications in the surgical and healing processes make it so that Watt has to make decisions to preserve her hearing and her right eye. After the removal of the tumour, Watt’s mouth is fitted with a palatal obturator: a prosthesis that fills the space where her palate used to be. She must learn to chew and swallow again, how to manage the peril of sneezing, and how to speak clearly; the “residual paralysis” in her tongue creates an effect sometimes mistaken for “a rakishly mysterious accent” (285).

Any memoir about facial cancer is bound to draw comparisons to Lucy Grealy’s critically acclaimed 1994 *Autobiography of a Face*. Grealy’s memoir tells of the author’s treatment for Ewing’s sarcoma, another form of bone cancer; Grealy survived cancer but had to have most of her jaw removed and her lower face rebuilt. Both Grealy and Watt write lush, evocative prose, but these are two very different books. Grealy’s book, like Watt’s, is threaded through with wisdom and insight, but her life, and her death at 39 (from an overdose of heroin that she had been using for pain management), was marked by anguish and insecurity. Grealy’s diagnosis and treatment occurred in childhood; her early life was spent in and out of a children’s hospital ward, and her formative memories were of being taunted by cruel peers for her appearance. Sensitivity about her perceived ugliness underscored her troubled life. Watt’s story, by contrast, is one of laughter through the delirium of her experiences. Watt is in her early forties when her diagnosis comes in 1997,

newly “hitched” to her lawyer partner (though not legally married—New York’s same sex equality act was still a few years away), with hectic freelance employment in the opera and a varied set of workplace skills accrued on the way to the Met. As a stage performer, she is well acquainted with the social and professional risks of physical imperfection. Early in *Rearranged*, recounting her life before cancer, Watt brings us with her to a studio where she is having professional portraits taken for her promo portfolio; the woman at the front desk sells her on a retouching package to erase emergent wrinkles. Watt accepts, knowing that any visual marker of age is a threat to a female stage performer’s chances of success. Later in the book, Watt recalls a comment from an opera critic who had written, of Watt’s performance of Sieglinde from Wagner’s *The Valkyrie*, that the singer “kept making awful faces” (238). Watt writes that, between the critic’s blow and the next performance, she had “Mere days to hurt, heal, and reclaim my battered self-image. To relearn to love my face—the organ of my expression ... To follow through as I was, I would have to locate a definition of beauty *for myself*, to ferry me forward, whatever storms may howl” (238-239). This concerted practice at appreciating the contortions of her face while channeling the mad Sieglinde comes in handy through Watt’s post-cancer facial reconstruction. The fear of ugliness that so torments Greal is something Watt is able to take, if not in stride, then at least with a sense of resigned good humour.

What is striking about Watt’s retelling of her cancer diagnosis and the ensuing treatments and recovery is her genuine curiosity about the process. The experience of being injected with intravenous iodine in preparation for CT scans is described as “pleasantly detectable,” a “subtle but distinct bloom of radiant heat” that results in

sensations that make Watt blush (48). Of the many tests and scans she endures, Watt's favourite is the MRI, about which she waxes rhapsodic: "the rhythmic hum and clacking percussion of spinning magnets became my unlikely lullaby, rocking my senses into an hour of peace" (49). The changes to the internal workings of her sinuses are a source of wonder and comedy. After describing an incident where a false tooth comes loose from her oral prosthesis in the washroom of a posh London restaurant, Watt concludes, "Thus did a daily theater-of-the-absurd keep me alive. More useful to me than the trauma of loss and disfigurement, and surely as powerful, were these minutiae of everyday life. I became accustomed to outrageous anomalies. What a treat, at midlife, to see everything everywhere from new angles" (321). This is not to say that Watt evades self-pity entirely; she is candid about her tearful moments, her bouts of social anxiety and loneliness, her phase of too much drinking. But these flirtations with despair are brought on, largely, by questions around Watt's changing identity—as a professional, as a romantic partner, as a member of a community—and not so much by concerns about outward appearance.

While Watt is seeing "everything from new angles," she is at the same time offering her reader a view they are unlikely to have seen before. Just as she leads us to see for ourselves the architecture that creates the stage magic at the Met, so too does she show us the internal construction of the human face—indeed, of *her* face. Watt indulges in exquisitely (sometimes excruciatingly) detailed accounts of her surgeries, her methods of wound care, her experiences of ICU psychosis, and her battles with surgery-sabotaging infections. For readers unused to the intricacies of surgical successes and failures (and I am one such reader), the descriptions can make for uncomfortable reading. When sharing

the tale of a surgeon known as “The Carpenter,” who operates to excise Watt’s tumour, Watt gives us a full-colour report, complete with the surgeon’s use of “a drill and an oscillating saw” to access the cancer. Watt follows the itemized list of facial bones and sockets with phrasing you won’t likely find in most medical texts: “With a zip-zip here and a tap-tap there, the cheekbone came out, exposing the orbital floor” (85). It is this sort of irreverence that makes the book so captivating and so readable; if Watt can look without flinching, then we owe it to her to do the same. The mercifully short chapters are helpful here for readers who need to put the book down for a spell before soldiering on. Watt’s focus on the technical details of her surgeries is rhetorically savvy; page for page, we spend much more time inside Watt’s face than outside it. When we do see Watt from the outside, we are most often directed toward how cool and piratical she looks in her eye patch, or to how well her chemo-induced baldness suits her, or to how adept she is at posing at an angle favouring her “good” side for photographs. There is a lurid fascination in western culture with facial difference; Watt deflects superficial gawking, giving us instead a look at the sophisticated architecture beneath the skin. Rather than being asked to look, we are asked to *feel*.

Facial cancers are rare; compelling books about them are rarer still. Watt is, first and foremost, a writer, and a deft one at that. *Rearranged* is a book about cancer, but it is also the story of a life, and as such it interweaves Watt’s medical narrative with tales about her family (each member a fascinating character in their own right), her relationship with Evie (and all the celebrations and trials that mark a partnership), and the time and place that was New York City at the turn of the millennium. As I was reading, I kept note of the

passage of time in the book, aware that Watt was leading us toward the fateful events of 9/11. True to form, Watt spares no detail of her experience, and adds a new background detail: in the wake of the attack on the World Trade Center, all transit is at a halt, and Watt finds herself having to walk home from an appointment wearing stylish but not entirely sensible pumps. She tries to buy a pair of flip-flops at a pharmacy, but the place has been cleaned out of cheap, comfy footwear, as has every other reliable source of flip-flops, slippers, and scuffs. Faced with the prospect of a long march in photo-ready but less-than-roadworthy shoes, fashionable Manhattanites had bought up every flip-flop in the vicinity. Watt is saved by her own stash of gauze, part of the array of medical necessities she'd been carrying with her since her earliest days of surgery. As she makes her way from point A to point B, Watt describes her trajectory, street, by street, passing "the monumental, traffic-snarling arch and colonnade, once believed to promote civic virtue and harmonious social order through sheer inspirational grandeur. On this day, the arch did exactly that. The democracy of the exodus that included me was a marvel of social harmony in its solemnity" (318). In the sea of humanity that swells the streets of New York, Watt, troubles and all, has been spared. Whatever differences might mark her are dissolved in a moment of collective sock, care, and mourning.

One interesting matter that *Rearranged* brings up, and which is relevant to the field of disability studies, is that of the relationship between illness and disability. When the memoir begins, the Watt we meet is, as far as she knows, healthy. A small bump in her mouth signals an illness by which she has not been bothered but which, if left alone, could kill her. The process of removing and treating the cancer means that Watt is free of that

illness, but now at the mercy of surgery after surgery. Several years in, Watt is “legally classified as seventy-five percent disabled—unable to return to the profession for which I was trained, visually limited for other work, and frequently hospitalized” (290). This is the only instance where Watt refers to herself as disabled, but by most definitions—including the legal one Evie turns to in order to secure medical coverage for Watt—she is. Strictly speaking, it is the cancer *treatment* that renders Watt disabled, not the cancer itself. This may feel like an arbitrary distinction, but for the purpose of theoretical work in the field of critical disability studies, it warrants discussion. Researchers in this area will find Watt’s story useful.

In terms of disability equality, Watt does something very powerful: she infuses an otherwise disquieting situation with humour, but without ever leading her reader into the toxic positivity that can sometimes accompany survivor narratives. Watt is a protagonist, but she is not a hero—indeed, there are points in the memoir where she behaves quite regrettably. Evie is self-sacrificing, but only to a point. Watt’s life is not saved by miracles, but by a combination of medical science, a supportive care network, insurance, and pure chance. Above all, she, like the rest of the figures who grace this book, is deeply human, and such gives a human face (scars and all) to the jargon-laden conversation about cancer and its attendant interventions.

Rearranged will be of interest to medical professionals, especially oncologists and anyone involved in facial reconstruction; an audiobook version would be a boon here, and the short chapters lend themselves to quick bursts of attention. People with lived experience of cancer and of reconstructive surgeries will also be interested, as will readers

of life writing and of queer history. It is a fine contribution to the disciplines of narrative medicine and health humanities, and an excellent example of the medical memoir as critical text.