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DeShazer, M. K. (2013). *Mammographies: The Cultural Discourses of Breast Cancer*. Ann Arbor: University of Michigan Press 978-0-472-11882-3

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Women's breasts hold a complex place in contemporary Western culture—as objects of fascination, sexualisation, fetishisation, adornment, nourishment, consternation, and regulation. For women themselves, they often serve as sites of anxiety and fear related to appearance, function, or health. For an unfortunate percentage, they also become the locus of cellular changes that will ultimately prove life-altering or even fatal. Over the last several decades, the once-taboo topic of breast cancer has become a common and accepted subject of discussion in both professional and public spheres, with much of this discourse focused on the nebulous concept of "awareness," as well as a desire to raise funds for biomedical research with hopes of a "cure."

What is often minimized or altogether excluded from such discussions is a critical examination of the ways that discourse and other representational practices shape our understanding of the nature of this disease, its probable causes, its appropriate treatment, its expected outcome, and, especially, the lived experiences of those diagnosed with (or even simply fearful of) breast cancer. Mark K. DeShazer's monograph, *Mammographies: The Cultural Discourses of Breast Cancer Narratives*, seeks to respond especially to this latter lacuna, through a series of interlinked but also self-sufficient chapters, each focusing on a specific dimension of contemporary written and/or visual narratives by and about those affected by the disease as an existing reality or a future possibility.

Such narrative-focused work has increasingly become the province of the emergent, interdisciplinary field of medical humanities, a category into which this book comfortably fits.

DeShazer, a Professor Emerita in English and Women's Gender, and Sexuality Studies at Wake Forest University, builds here on her earlier work, *Fractured Borders: Reading Women's Cancer Literature* (2005), narrowing her focus in terms of both disease and time period. Indeed, central to this subsequent work is DeShazer's contention that breast cancer narratives—which she here terms "mammographies," a clever play on words that also conveniently encompasses both written *and* visual accounts—from the United States and United Kingdom after the year 2000 exhibit significant differences from their predecessors.

These "postmillennial" accounts, DeShazer claims, place greater emphasis on interrogating environmental factors in carcinogenesis, questioning the role of corporations in creating a "pinkified" and commodified cancer culture, confronting medical authority's detection-oriented responses and often-violent therapeutics, engaging with the increasing reality of genetic testing and prophylactic breast-tissue removal, and openly acknowledging the loss of life that is frequently the ultimate outcome of even the most-aggressively treated cancers. Though the interpretive nature of her scholarship necessitates selectivity in source material, the author's study is wide-ranging in its thematic explorations and bears significance beyond its subject matter proper, gesturing toward much broader issues in environmental health, medical ethics, and the politics of health, illness, research, and treatment.

Despite being a theoretically informed text, DeShazer avoids "theory stuffing," instead skillfully weaving conceptual insights drawn from a multidisciplinary assortment of key critical thinkers (Ahmed, Bakhtin, Benjamin, Freud, and Sedgwick among them) into chapters that are coherently structured by a more sustained focus on particular sociocultural processes (medicalization, technologization, commemoration, and the like). This approach, combined with the author's lucid prose, makes this monograph an accessible source for upper-year undergraduate students, as well as a useful and engaging one for graduate students and researchers in the areas of medical humanities, sociology of gender and health, and representations of illness experience in critical disabilities studies.

In many ways, DeShazer's work could be branded thoroughly queer. The studied narratives (many of them online blogs and diaries) frequently address questions of sexual and gender identity in ways that depart from the heteronormative discussions that dominate more-mainstream contexts, in which negotiating fears of a "loss of femininity" from mastectomy and chemotherapeutic hair loss is often presented as an inevitable, and often central, struggle for women facing a breast cancer diagnosis. The first two chapters are centred upon a 21st century perspectival departure from earlier memoirs, highlighting—among other aspects—the memoirists' engagement with the loss of such culturally gendered markers as long hair and pronounced mammary tissue, in ways that contemplate the role of 'beauty' vis-à-vis the technologized body of the 'patient', explore the aesthetics of androgyny and the complexities of butch/femme identities for the bald and mastectomized individual, and challenge the limitations of existing feminist imagery (such as the single-breasted Amazon woman) offered to those seeking empowering identities while living with cancer. Taking Audre Lorde's classic writings on her own struggles with breast cancer as a black lesbian feminist as one of her key points of departure, DeShazer identifies and explores the work of a series of "successors" to Lorde, whose own accounts challenge heterocentrism and conventional constructions of femininity, while simultaneously deconstructing the illusionary boundary between individual subject and societal structures. In doing so, these "mammographers" advance critiques of lax environmental policy and unchecked industrial pollution, pharmaceutical iatrogenesis, the hegemony of the biomedical complex with its "torturous medical interventions" (53) and forcible exclusion of safe and promising alternative therapies, the politics of coerced breast reconstruction, the incessant reiteration of the female beauty imperative within mainstream cancer culture, and the obscuration of social determinants in lesbians' disproportionate cancer risk and black women's higher cancer mortality (despite a lower rate of occurrence)—in short, the many systemic aspects that make breast cancer not a "female" issue, but a resolutely *feminist* one.

Of particular interest to those working within the sociology of risk and the study of health and medical rhetoric will be DeShazer's chapter, "Narratives of Prophylactic Mastectomy." Addressing the choices made by women who carry a cancer-linked BRCA mutation, the author attends carefully to the framing and discourse used by such mammographers in discussing their decisions to opt for or against "preventative" bilateral mastectomies and/or oophorectomies (ovary removal). Identities as BRCA-positive, surgery-choosing "previvors," references to genetically vulnerable breasts as "time bombs," and remarks on carcinoma as a familial "inheritance" all reflect the rhetorical landscapes of contemporary genocentric and biologistic risk-oriented health discourses, and, as DeShazer points out, can and often do function to obscure the role of environmental factors in carcinogenesis—not only potentially misleading women about their own "genetic destiny," but also serving the interests of those invested in cancer's depolicitization.

Notably, DeShazer grounds her varied analyses by continuously returning to the lived experiences of pain, suffering, anxiety, and other realities discussed within these sources; for none of these writers, photographers, and artists do representational issues exist apart from the embodied struggles of cancer fears, invasive treatments, disease progression, and/or reconstructive decisions. A committed and engaged reading of these narratives, and of DeShazer's studies thereof, repeatedly pulls the audience into an interactional space of disease and dis-ease, of intentional discomfort and indeterminacy, in which one's own mortality is (re)called to the fore through shared biological, social, cultural, political, economic, and environmental realities: those inherent to human embodiment as well as those specifically characteristic of life under late capitalism.

Though the subject matter is raw, many of the narratives examined by DeShazer are peppered with darkly humourous, even comedic, elements. Her fourth chapter tackles this subject directly, in which she reads written and visual narratives for evidence of humour as an act of "rebellion" against the grim realities of illness, the disfigurements of treatment, and the threat of death. Consistently, these humour-streaked mammographies (including, in these cases, comics and graphic memoirs) mark their creators' distaste for the near-compulsory optimism and often-maudlin sentimentality of mainstream cancer culture. DeShazer casts a particularly wide net in this chapter, unpacking the ways that humour variously functions as a psychological defense, a transgressive cultural tool, a sociopolitical critique, and an aid to uniting both the author and the reader in a shared encounter with the farcicality of corporeal experience.

The levity of these narratives aside, it will perhaps come as no surprise that many of the accounts and representations analyzed here are unnervingly graphic in their depictions of living, and sometimes of dying, with breast cancer. The erasure of death from public discussions of breast cancer, and, conversely, its active and willing reclamation in mammographers' accounts, serves as a thread connecting the final three chapters of DeShazer's monograph. In a media landscape where images of smiling, wig-adorned survivors complete with clothed, reconstructed breasts (or at least convincing prostheses) are the norm, the post-mastectomy photographic work explored in the fifth chapter might at first shock; fleshy landscapes marked by jagged, puckered scars force the viewer to contemplate the realities of breast excision, and, in at least some cases, the apparent lack of aesthetic concern by the surgical oncologist. DeShazer, however, pushes her analysis beyond the novelty of such stark depictions, emphasizing the way these photos not only provide a rare glimpse of non-sexualized unclothed female torsos, but variously challenge the dominant cultural focus on young, white, conventionally attractive, heterosexualized, cis female bodies as the "face" of breast cancer. Centring visual representations as primary sources, while attending to the ways in which their meaning is also constituted in interaction with written narratives, the author tackles affectively loaded themes—including caregiving, spirituality, and memorialization—in these works as potentially transformative engagements for the reader-viewer.

DeShazer opts in her penultimate chapter to pick up this latter theme—chronicling and commemorating the dying and deceased cancer sufferer—through an ethical lens, examining moral dilemmas and their negotiations in the work of esteemed 20th century writer and photographer Susan Sontag (who survived breast cancer only to die of iatrogenic malignancy), her lover, Annie Leibovitz, and Sontag's son, David Rieff. Leibovitz's unflinching photographic record of Sontag's physical decline and post-mortem body, coupled with the lack of explicit consent for publication by Sontag and Rieff's criticism of the latter images as carnivalesque and humiliating, raises the prospect of morally illicit spectatorship—but so too, notes DeShazer, does Rieff's graphic description of his mother's private sufferings in his written memoir. (It is nevertheless interesting that DeShazer opts to quote quite-intimate passages from Rieff's memoir, yet her book contains no reproductions of the images in question.) Turning to Sontag's own writing on trauma photographs (especially *Regarding the Pain of Others*, 2003) for possible insights into her unknown thoughts on this memorialization of her own final sufferings and death, DeShazer ultimately deems the images and their publication ethical, on account of their love-motivated origins, their ability to aid us in dealing with the unidealized mortality of others and ourselves, and—most importantly and indispensably—their potential to move us to action, specifically to political engagement in the face of the significant death toll of breast cancer and its existing therapeutics. (In this regard, we might recollect the successful AIDS treatment activism of the late 1980s and early 1990s, with its mobilization of stark rhetorics of mortality—photographs of the disease-wracked bodies of the dying and the inescapable activist mantra "Silence=Death"—as key tools in the struggle for well-funded and democratized HIV/AIDS research agendas.) The author's claim that such representations might "evoke a transformational mode of spectatorship characterized not by voyeurism but by compassionate witness" (174), also reinforces the value of the textual and visual narratives at the centre of her own study.

In concluding with a chapter devoted specifically to autothanatography—breast-cancer narratives specifically about death and dying—DeShazer reconfirms her commitment to honouring her subjects' refusal to acquiesce to a "fiction of invulnerability" (194), while invoking Judith Butler's work on grief and mourning. Public grieving, as Butler and DeShazer remind us here, retains the powerful potential to effect simultaneous personal and political change through empathetic witness to our shared humanity and mortality.

References

DeShazer, M. K. (2005). *Fractured Borders: Reading Women's Cancer Literature.* Ann Arbor: University of Michigan Press.

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