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Migraine as text - text as migraine: Diagnosis and literature

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Citation

Haan, J. (2020, May 13). *Migraine as text - text as migraine: Diagnosis and literature*. Retrieved from <https://hdl.handle.net/1887/136966>

Version: Publisher's Version

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Note: To cite this publication please use the final published version (if applicable).

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Issue date: 2020-05-13

Summary

The central question of this thesis is formulated from within the interdisciplinary field of medicine and literary studies: 'What is the relation between pain and language?' Sub-questions posed are how persons with pain may make their pain 'readable' and how fictional texts about pain can 'perform' the pain described. These questions are specifically applied to a certain type of pain, which comes in attacks: migraine.

Chapter 1 focuses on pain in general, using Wittgenstein's often cited metaphor of the beetle in the box: everyone has a box and knows that it contains a 'beetle' and by looking into their own box, everyone can see what their beetle looks like, but no one can look into anyone else's box. The same seems true for pain. We all know what it is and use the word 'pain', but no one can feel the pain of others. So communication about pain mainly depends on experience and words. These words (signifiers), however, lack an object in reality (signified), so symbolic language (in the form of metaphors, or call them signifiers without signified) is needed. In the diagnostic process patients describing pain can become a sort of 'text' to be read, and sometimes even a 'literary text'. The both epistemological and ontological problems can be tackled by using hermeneutics and semiotics as approaches in order to come to an interpretation of a 'patient as text'.

In **chapter 2** it is explained why migraine is a pain-syndrome with special characteristics, also in the context of the issues raised in chapter 1. This is mainly because it is a paroxysmal disorder in which the pain comes in attacks. Migraine pain also is pain with a signifier without a signified that needs its 'objectivation' through words. It is discussed how words are important for the 'reality' of being in (having pain), but also for being outside an attack (pain-free). Furthermore, the importance of the Aristotelian concept of 'phronesis' is introduced, which is the opposite of acting by means of a trust in technology, scripts and protocols. Instead, phronesis concerns 'practical wisdom'.

Chapter 3 describes how the diagnosis of migraine, being a signifier without a signified as it is pain that exists without there being any biological proof (or valid test), depends on artificial criteria that are internationally agreed on. A diagnosis is made by applying these criteria, which are mainly based on the words of the patient. The numerous articles that have used these criteria may be seen as a discourse, and even as a 'production' of 'reality'. Such a discursive process is known to lead to in- and exclusion and even to hierarchy, which appears also be the case here. The current discourse has consequences for migraine, but also for several forms of non-migraine headache.

Chapter 4 addresses the question whether migraine destroys language, as it is argued by Scarry in her landmark publication *The Body in Pain*, a study that deals with pain in general. Indeed, many patients with migraine stay silent due to their affliction. They are silent when they have headache because then the pain is too severe to talk, but often they are also silent when they do not have headache because then there is no reason to complain. So, this seems a 'double destruction' of words. In this chapter this unique situation is described, but also how migraine can also sometimes create words.

As aspects of time seem to play an important role in migraine, in **chapter 5** the 'temporality' of migraine is addressed, also in the context of philosophical theories about time. Comparing studies of time-perception in- and outside attacks, it is concluded that during an attack time seems to go slower, whereas outside an attack it goes faster, emphasizing the (philosophical) distinction between

subjective and objective time. These issues are also reflected in the 'duration neglect' and 'peak-and-end rule', which both strongly depend on the memory of pain.

Chapter 6 introduces the rationale for the analysis of four selected novels that include migraine. This is the 'text as patient' part. The analyses partially use issues discussed in the first 5 chapters but the question of how the words of migraine-patients relate to their pain will be turned around in an analysis of how fictional texts that include descriptions of migraine not only describe but also 'perform' migraine. The possibility of a construction or modelling of a migraine subject towards a 'migraine self' is introduced, to be worked-out in the following chapters, that deal with epistemological and ontological issues in focusing on author, narrator, character, and the use of language in literary texts dealing with migraine.

In **chapter 7** two works of Siri Hustvedt are analyzed: *The Blindfold* and *The Shaking Woman*. The first is a work of fiction, the second is a non-fiction essay. In both, migraine is an important topic, which in the novel can be recognized as that of the author. Therefore, *The Blindfold* is analyzed as an example of a work of fiction in which the author and narrator cannot be completely separated. In the seventies of the previous century, the concept of the 'death of the author' was postulated, which refers to the loss of the authorial voice. The way in which a 'real' author can be intrinsically related to characters and narrators, however, remains important, as exemplified in these two texts.

Chapter 8 deals with James Lasdun's novel *The Horned Man* which is built up as a thriller, with strong 'who has done it?' aspects and cliffhangers. The narrator suffers from migraine. In the end a horn protrudes from his skull where normally his headache occurs. An important aspect of this text is the longing for external visible signs as explanation for fundamental epistemological uncertainty. This text can even be read as a plea for the urgent need to develop a biological test for migraine, which probably will not turn out to be a materialization in the form of a horn or other structural abnormality, but rather, for instance, in the form of a genetic test.

The novel analyzed in **chapter 9**, Rivka Galchen's *Atmospheric Disturbances*, starts in the middle of a migraine attack and from that point on poses questions of ontology. What is true? What is to be seen and felt? What is the nature of subjective existence? Migraine is presented as one of the possible disturbances of perception, as its diagnosis is a 'shade' of a reality that cannot be perceived directly. It rather appears as a simulacrum. *Atmospheric Disturbances* describes embodied reality that cannot be grasped at the level of representation because it explores ontological confusion. It seems that the text instead of offering a modernist way of approaching the world shifts to a postmodern one. It reflects what migraine-patients feel during their attacks and can be seen as symptomatic for their ontological situation, which is full of disturbances of perception and doubt.

Irvin Yalom's novel *When Nietzsche Wept*, analyzed in **chapter 10**, contains a mix of fiction and non-fiction. It is argued that the philosopher Nietzsche even in 'real life' might have been 'double': a real and a fictional character created by words. There seems to be at least a strong connection between his writings and life and no straightforward distinction between fact and fiction. An important feature of the fictional Nietzsche described in this novel is how he deals with his migraine. It is shown that this was also important for the 'real' Nietzsche, who appeared to base several of the core-ideas of his philosophy on this affliction: eternal recurrence, amor fati and suffering.

Chapter 11 puts the 'patient as text' (chapters 1-5) and the 'text as patient' (chapters 6-10) in perspective and combines them to come to a conclusion about the performative strength of texts about migraine and notions of a 'migraine self'. It is concluded that the 'migraine self' can be translated in terms of a postmodern ontological uncertainty. The argument is that migraine can be seen as a state in which nothing is certain and in which language is both a last resort but also an untrustworthy vehicle of representation.