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Deflating the Culture of Optimism

Despite the seriousness of the disease, not all breast cancer narratives are somber; many are actually funny. Indeed, rebellious humor serves as an antidote to resignation and despair in postmillennial autobiographical writing by scores of U.S. women about their cancer experience, from diagnosis to surgery to chemotherapy and/or radiation to recovery and/or recurrence. My informal November 2008 survey of 210 books and items for sale on amazon.com under the heading “breast cancer products” revealed that more than half employ humor as a dominant motif, as seen in such titles as *Five Lessons I Didn't Learn from Cancer* by Shelley Lewis, *Cancer Is a Bitch* by Gail Konop Baker, *Just Get Me Through This!* by Deborah A. Cohen and Robert M. Gelfand, *It's Not About the Hair* by Debra Jarvis, and *Crazy Sexy Cancer Tips* by Kris Carr. In addition, cynical surveyors of the amazon.com list might find humor that authors do not intend in such titles as *Pink Prayer*, *Chicken Soup for the Breast Cancer Survivor's Soul*, and *Kitchen Aid Cook for the Cure*, whose cover features a pink mixer and measuring spoons, also for sale. During National Breast Cancer Awareness Month (NBCAM) in October 2008 Lifetime Television aired several made-for-TV films with humorous or tragicomic breast cancer themes, including a *Sex in the City*-style comedy produced by Renée Zellweger based on journalist Geralyn Lucas's memoir *Why I Wore Lipstick to My Mastectomy*. A recent google.com search using the heading “breast cancer humor” produced a staggering 1,640,000 links, and a brief trek through only 200 of them led to such diverse websites as www.boycottoctober.com, www.cancerplanet.com, and www.thecancerblog.com, as well as organizational websites from www.breastcancer.org to www.komen.org to www.bcaction.org.

To understand how and why rebellious humor is central to many women's cancer experience, and to their written accounts of that experience, it is useful to extrapolate from Jo Anna Isaak's analysis of “primary narcissism” in the self-portraits of two late twentieth-century photographers who died of the disease, Jo Spence and Hannah Wilke. Each artist

chronicled her decline photographically—medicalized, bald, naked, dying, *and* laughing, sometimes heartily, sometimes grimly. Isaak's argument about the power of these photographs stems in part from Freud's assertions in his 1927 essay "On Humour."

Humour is not resigned; it is rebellious . . . It also has something of grandeur and elevation. . . . The grandeur in it clearly lies in the triumph of narcissism, the victorious assertion of the ego's invulnerability. The ego refuses to be distressed by the provocations of reality, to let itself be compelled to suffer. It insists that it cannot be affected by the traumas of the external world; it shows, in fact, that such traumas are no more than the occasions for it to gain pleasure. (162–63)

Isaak rightly critiques Freud's sexism as revealed in an earlier essay, "On Narcissism," in which he claims that women in particular exhibit narcissistic behaviors, thereby engaging what she describes as "a lost state of self-sufficiency that the male has relinquished" (Freud, 89; Isaak, 53). Yet she notes that Freud does not decry narcissism when he associates it with defiant humor, which can lead to empowering forms of agency. Isaak views women photographers' strategic use of narcissism in their cancer self-portraits as a performative act, "a site of pleasure and a form of resistance to assigned sexual and social roles" that would posit ill women as victims and conceal their dying bodies (54). Spence and Wilke thus find pleasure in challenging both misogyny and medicalization through their cancer photographs. Bare-breasted to reveal her lumpectomy scar in *The Picture of Health?* Spence dons a helmet to signify resistance to hegemonic medical practices and to ridicule machismo. In her *Intra-Venus* series Wilke puns on the word *intravenous*; in one photograph she is nude, taped up for chemotherapy, and balancing a flower arrangement on her head to parody hegemonic femininity.¹ Isaak rightly concludes that "in assuming the role of the clown in the face of death," Spence and Wilke "take this humor through annihilation—humor is the attack, the dissolution of the ego and the subject" (66).

My assessment of postmillennial memoirists' use of breast cancer humor reveals their reliance on transgressive textual strategies that help them confront as vibrant, laughing subjects (not as abject objects) the vulnerabilities that accompany a life-threatening disease. Even when the writer does not so identify herself, rebellious humor seems feminist in its

resistant consciousness. In a culture that obsessively sexualizes women's breasts, that professes to revere the nursing mother (even if the reality of women breast-feeding in public remains off-putting for many), and that views thick, glossy hair as a quintessential feminine feature, mastectomy, lumpectomy, and hair loss during chemo might well threaten the gendered identity (as distinct from the hegemonic femininity) of even the most ardent feminist. For this reason, the travails of pre- and post-surgical breasts and the baldness of "wigged out" cancer patients are among the most prevalent subjects of women's humorous memoirs, along with the grueling side effects of cancer treatment: nausea, weight gain or loss, waning sexual desire, physical exhaustion, and the mental impairment known informally as "chemo brain."² Other recurring comic themes include the alienating machines and procedures that patients encounter during their diagnoses and surgeries, the actions and temperaments of medical practitioners, the inappropriate responses of well-meaning family members and friends, the blame-the-victim mentality that dies hard in U.S. culture, and the self-help and alternative medicine industries that recommend as antidotes to cancer everything from yoga to visualization to group therapy. For writers for whom survival seems unlikely, the use of "humor through annihilation" produces ironic accounts of their shocking metastases and virulent follow-up treatments (Isaak, 60).

Postmillennial breast cancer memoirists employ three strategies of representation to convey their humorous (and sometimes tragicomic) tropes: self-deprecation, self-division, and self-assertion. Self-deprecation offers a subversive challenge to what Isaak calls the "masquerade of femininity" (67). By approaching breast cancer through the guise of a woman proudly lacking in hyperfemininity, memoirists adopt a performative stance designed to evoke the reader's laughter through identification with body-centered foibles and fears. Self-division is used by cancer humorists to ironize dualism and incongruity, long identified as sources of classic comedy. As Isaak points out, Freud's "On Humour" was influenced by Baudelaire's 1855 essay "On the Essence of Laughter," which posits that laughter "belongs to the class of all artistic phenomena that show the existence in the human being of a permanent dualism, the capacity of being oneself and someone else at the same time" (Baudelaire, 160). For many cancer memoirists, an especially funny subject is human incongruity, an uneasy doubling often manifested in strategic dual personae. "I don't have breast cancer (or nausea or a bald head or

chemo brain),” this rubric of displacement implies, “*that woman* does.” Like self-deprecation, the divided self is often an emotional reality for these writers and a theatrical tactic, and the laughter that it generates thus becomes “diabolic in nature, both a symptom of loss and division and the means of redemption” (Isaak, 54). And self-assertion provides writers of humorous breast cancer narratives with a sense of boundlessness, for as Freud noted, “humour has something liberating about it” (“On Humour,” 162).

Humorous breast cancer memoirs also have sociopolitical dimensions. A frequent subject of critique is the survivor discourse encouraged by advocacy groups from the American Cancer Society to Susan G. Komen Race for the Cure. Narratives that interrogate NBCAM, for example, raise readers’ consciousnesses along with revealing the writers’ cultural misgivings about corporate disease philanthropy; they employ satire and self-assertion to dissect the breast cancer marketplace. In addition, many comic memoirists rebel against breast cancer culture’s tyrannical cheerfulness, as exhibited in discourses that highlight blissful survivors whose lives have improved dramatically and that criticize women who express anger or fear. While humor is a dominant strategy, few of these memoirists participate in the mass-produced optimism that characterizes mainstream cancer organization websites and brochures; they prefer a postmodern sense of contingency that deflects rather than embraces sentimental discourses.

In this chapter I analyze three types of humorous breast cancer memoirs: personal narratives that use linear retrospection to present their confrontation with this life-threatening illness, illustrated here by Meredith Norton’s *Lopsided: How Having Breast Cancer Can Be Really Distracting* (2008); graphic narrative depictions of the breast cancer continuum, represented here by Miriam Engelberg’s *Cancer Made Me a Shallower Person: A Memoir in Comics* (2006); and memoirs that began as blogs, illustrated here by S. L. Wisenberg’s *The Adventures of Cancer Bitch* (2009). These writers reflect diverse generations, ethnicities, and professions: Norton, an African American woman living in France, was thirty-four years old and the at-home mother of an infant son when diagnosed with inflammatory breast cancer; Engelberg, an Ashkenazi Jew, was forty-three and a professional cartoonist at the time her advanced breast cancer was discovered; and Wisenberg, also Jewish American, was a university professor in her fifties at the time of diagnosis. Regardless of whether their chosen form is linear retrospection, sequential art,

or blog-cum-memoir, these postmillennial mammographers use breast cancer humor to defy their disease's destructive power, question invasive medical interventions, and undermine the pieties of cancer culture.

Self-Deprecation and Cultural Critique in *Lopsided*

When Meredith Norton realized something was wrong with her breast, she was a nursing mother living in Paris—homesick, alienated from French culture, and frustrated by inadequate medical care. Having noticed that her breasts had become “comically askew,” she initially attributed this change to the perils of lactation.

Lactating breasts behave oddly. . . . One of mine was huge, throbbing, covered with a red rash, and radiating enough heat to defrost a frozen lamb shank in ten minutes. It was like an unpredictable little alien I carried around. Even in the kooky world of milk-making tits, this one worried me. (16)

When she stopped breast-feeding her year-old son, Lucas, her engorged breast remained so painful that she sought medical assistance, but receiving no help from four French physicians, whose recommendations ranged from a “waxy poultice” to antibiotics, Norton decides to return to California, take Lucas to visit “his loud, Black American family,” and “maybe see a real doctor about my boob” (17). These quotations illustrate Norton's primary strategies for inducing her readers' laughter: exaggeration combined with graphic imagery, a blunt interrogation of the Otherness that Blackness often signifies and illness intensifies, a satiric approach to unappetizing medical treatment, and a colloquial discourse of tits, boobs, and kookiness.

Diagnosed with stage-three inflammatory breast cancer that required chemotherapy, mastectomy, then radiation, and told by her consulting physicians that she had a 40 percent chance of surviving five years, Norton responds with numbness, tears, and reflection both poignant and comical: “These spectators watched as I visualized my death, with probable accuracy, for the first time. And the picture was so banal. . . . I'd never play Rummikub with Bill Clinton or have my own self-titled sitcom and theme song? My son wouldn't know his mother? I'd just be that unphotogenic woman pawing at him in all those pictures” (32). Ironic

self-deprecation is juxtaposed here with fantasies of thwarted fame and maternal loss, strategies that produce a tragicomic effect. However, since we know that Norton survives to write this book, readers can downplay the tragedy of her diagnosis and laugh at her self-representation. One of Norton's most salient themes is the grueling side effects of chemotherapy, which she recounts via the strategy of comic excess. Although nausea is the most immediate aftermath of chemo for many cancer patients, an effective medication allows Norton to bypass this symptom and concentrate instead on her stinky urine, about which she waxes poetic.

I took a tiny antinausea pill and within minutes, miraculously, simply felt hungover. I lay down, turned out the lights, and slept dreamlessly until morning. Then I got up and peed the most noxious-smelling urine imaginable. It wasn't even yellow, but grayish-brown, like water emptied from a steam cleaner. . . . Even though I drank till my belly felt stretched beyond capacity, the smell of my urine was so potent it made my eyes water. It slowly evolved into a meaty, rotten odor, slightly sweet and bloody smelling. (43)

Norton's graphic imagery and excessive bodily revelation produce in readers the horrified "ugh" that she no doubt anticipates as a writer adopting the style of stand-up comedians who use the comic grotesque to evoke laughter.³

Equally reliant on the comic grotesque is Norton's rendering of chemo-induced hair loss. "A hairless body has its appeal," she admits disarmingly, "but losing eyelashes and eyebrows just looks creepy" (44). An experience in the shower shortly after her second treatment robs Norton of the illusion that unlike other chemo patients, she will retain her hair. After noticing "an awful lot of hair on my bar of soap, and on my shoulders, and between my toes," she combs her hair only to find it "clogged full with each stroke. My scalp tingled. It was strangely satisfying. My hair felt so thin, my skull so close, but when I looked in the mirror I could hardly see the difference" (45). The difference emerges a few days later, however, during a trip to Target with a friend.

There, in front of the Hello Kitty party invitations, I reached to scratch over my ear and all the hair, clear to my temple, peeled off, like a piece of Velcro. It even made that ripping Velcro sound.

Rebecca stared in amazement, and then I peeled off the other one. We stood in the stationery and office supply section holding the two stiff patches and laughed until our cheeks ached. (46)

The use of simile drives Norton's chemo humor—urine smelling like a steam cleaner's filthy water, hair peeling off like Velcro—along with her ironic references to American consumer culture, here represented by Target and Hello Kitty. Although she admits to feeling traumatized when her friend cuts what little hair remains, Norton deflects her pain through strategic self-deprecation—"this baldness made me officially the least desirable woman alive"—and through sexualized humor: "She shaved off what was left of my ego and Thibault's id while I held Lucas on my lap" (47). Maternity as well as laughter sustains Norton, as her infant son chortles while his mother's hair falls, "lunging for the little disposable razor to shave my head himself" (47). Rebellious humor thus allows the narrator to highlight poignant domestic moments without evoking reader pity.

Her response to medicalization, an ambivalent blend of resistance and compliance, provides Norton with another humorous subject. The daughter of a urologist, she is predisposed to trust the judgment of her consulting physicians, yet their frantic pace and dubious bedside manners sometimes give her pause. The surgeon scheduled to perform Norton's mastectomy, for example, receives this blunt assessment.

She did the training, passed the exams, got the degrees, and had the authority to pump me full of toxins and chop off my breasts. I had no choice but to lie still and trust she wasn't too distracted by her house's termite problem to confuse me with the lobotomy patient at 9:30. (117)

Notwithstanding her apparent acquiescence, Norton brings in her father to interrogate Dr. Ree about the possibility of a nonsurgical approach: "Have you considered that?" His tone grew more combative. Dr. Ree's voice stayed controlled, but her clenched fists betrayed her defensiveness. "Some reports suggest higher locoregional failure rates—" When Dr. Norton interrupts Dr. Ree to protest that he doesn't "give a damn about local control" but is concerned only about his daughter's survival, Norton acknowledges her mistake in initiating this conversation and

watches in horror as her father risks alienating the surgeon—an alienation avoided by Dr. Norton's sudden tears of worry for his daughter and Dr. Ree's sympathetic response (116–17).

Norton also uses self-deprecating humor to mock the denial she engages as a stage-three breast cancer patient. She twice postpones her scheduled mastectomy in the wild hope that conversations with pathologists would prove she had actually never had cancer (those slides “could have said lupus or shingles or anything”) or that online research would offer some alternative. Realizing retrospectively that her resistance marks a terrified delusion, Norton reveals her gradual acceptance of mastectomy. In one instance of strategic self-deprecation, the narrator praises the long-suffering Dr. Ree: “Not once did she scream, ‘You moron with your Internet medical degree! Stop questioning me!’ She just nodded her head when I canceled my surgery and thought to herself, ‘You poor, stupid dolt.’ Then she quietly rescheduled it when I called her back” (125–26). In other passages Norton praises her surgeon's wizardry in comic terms, three days after surgery, for example, when the patient insists on viewing her post-mastectomy scar.

I led her into the little bathroom. She unswaddled my rib cage slowly. Finally, there it was. On the left side sat my smashed flat, deflated boob, and on the right side, nothing, just a thin line of steri-strip tape over the actual incision. Flat as a wall. There were no black stitches, no gruesome scar. . . . “You are a freaking magician! I so should have gone to medical school.” I looked at it from every angle. (140)

Agency rests here with the irrepressible Norton, who delights in her surgeon's feat, accepts her new body, and laments not her absent breast but her lack of a medical degree.

Another focus for Norton's satiric humor is her frustration with mainstream survivor discourse. One source of irritation is the theatrics of strange women she encounters in breast cancer support groups or public spaces, “cancer survivors who expected me to feel some sort of camaraderie.”

They would clasp my hands tightly and demand that I curse this disease, this awful scourge. I tried, but couldn't do it with any

heart. . . . But it seemed so disrespectful to tell another cancer patient, “Let go of my hands, you kook!” that I almost always acquiesced and lazily stamped my feet and said sternly “Bad cancer!” I felt like an idiot every time, and every time vowed to never do it again. Then some other random bald person would approach me at the grocery store or car wash and rope me into this lame ritual all over again. (58)

In this passage Norton nails the dilemma of patients eager to resist cancer culture’s oppressive cheerfulness yet caught up in its endless self-replication. Strategic self-deprecation takes the edge off her otherwise trenchant critique of New Age approaches to healing and empowerment.

Norton also locks rhetorical horns with one of survivor discourse’s most famous purveyors, Lance Armstrong, whose inspirational cancer memoir she receives as a gift from countless friends but with whom she feels no affinity.

Lance Armstrong and I are close to exact opposites, both physically and mentally. . . . If surviving this particularly deadly form of breast cancer required any of the Lance-like traits, such as willingness to physically exert myself, I was as good as dead. What I really needed to save me from utter despondency was to see somebody who’s never taken life by the horns, for no better reason than complacency, remain true to himself and still beat cancer, someone like every character ever played by Bill Murray. (book jacket)

This witty put-down of the compulsively driven Armstrong, victorious over multiple cancers and the Tour de France, in favor of the laconic losers played by Murray pivots on comic incongruity and the ironic deflation of the culturally sanctioned approach to beating cancer through willpower.⁴ A recurring figure in Norton’s text, Armstrong serves mostly as a whipping boy, as she determines to “poke a stick in Lance’s spoke” for upholding unrealistic standards of cancer patient behavior.

Lance Armstrong has excessive drive and talent. His motivation and discipline grow like crab grass and dandelions. I just don’t have it like that. Every day of my chemo that I ate a Krispy Kreme doughnut or took a nap instead of doing yoga I cursed Lance

Armstrong and his toned abs, tiny butt, and three kinds of cancer. “F you, Lance Armstrong,” I muttered as I sucked down my Dr. Pepper. “You can park your bike right here and kiss my ass.” (133)

Saucy defiance and colloquial vulgarity merge in this passage, as laughing readers relish Norton’s exaggerated representation. Near the end of her memoir, however, Norton rehabilitates Armstrong as a celebrity to commend—not because of his triumph over cancer or championship cycling but because of his angry claim that the players on the French 2006 FIFA World Cup Team all “tested positive . . . for being assholes” (92, 209). Because Armstrong mouthed off in public, Norton concludes, “he was officially my hero” (209). Here she comically redefines heroism as backtalk.

Norton’s memoir concludes by recounting two family celebrations: a “Meredith Kills Cancer Dead” party to celebrate her “victory” (a term she employs ironically), held unfortunately on the very evening her oncologist determines that she needs another aggressive round of chemo; and her son’s fourth birthday party, held on the third anniversary of her breast cancer diagnosis (157). Norton refuses to bring closure to her narrative—“Nothing else has happened, but it will. As my father says, ‘None of us gets out of here alive’”—yet she celebrates her temporary reprieve, since “statistics suggested I wouldn’t live to see my son turn four” (210–11). While she resists being labeled a survivor, she acknowledges wryly having lived through much, from the racist indignity of being repeatedly mistaken for a prostitute in Paris to a realization that despite the promises made by mainstream cancer culture, her illness had made her no wiser. Her memoir foregrounds not false cheerfulness but a wry wit and a bemused hope that she might live long enough to pursue a PhD and see her son grow up.

Comic Relief in *Cancer Made Me a Shallower Person*

A cartoonist by profession, Miriam Engelberg wrote for several years in the mid-1990s a widely circulated comic series, *Planet 501c3*, designed to inform and encourage employees of U.S. nonprofit organizations. When diagnosed with breast cancer, she understandably turned to comics as a mode of self-examination.

We all have issues that follow us through life, no matter how much therapy we've had. The big one for me is about feeling different and alone—isolated in a state of Miriam-ness that no one else experiences. That's what drew me to read autobiographical comics, and that's why I hope my comics can be of comfort to other readers who might be struggling with issues similar to mine. (xiii)

Although she describes her purpose as communal and therapeutic, her tone in *Cancer Made Me a Shallower Person* remains light and often self-mocking. Acknowledging in her introduction that perhaps “someday I'll have something profound to say” about cancer and suffering, at the initial moment of writing she privileges distraction over profundity: “right now I have to go—it's time to watch *Celebrity Poker*” (xiii). Strategic self-deprecation is evident in her positioning of the narrative *I* as addicted to popular culture and deficient in seriousness of purpose.

As Hillary Chute notes in *Graphic Women*, “some of the most riveting feminist cultural production is in the form of accessible yet edgy graphic narratives”—a postmillennial genre that offers a new aesthetics of gendered self-representation (2). As one salient example of this type of cultural production, Engelberg's narrative constitutes what Chute characterizes as a “cross-discursive form,” a capacious medium in which “words and images entwine, but never synthesize” (6, 9). Through the device of frames, or “boxes of time,” the graphic artist presents a visual/verbal text “threaded with absence, with the rich white spaces of what is called the gutter” and yet filled as well with the “subjective mark” of the maker's drawings and handwriting (Chute, 10). The result is a richly textured narrative that constitutes “an expanded idiom of witness”—a method of testimony, Chute concludes, that “sets a visual language in motion with and against the verbal in order to embody individual and collective experience, to put contingent selves and histories into form” (3).

To understand why and how graphic narratives can effectively represent not only the traumatic but also the irreverent aspects of the cancer experience, it is useful to consider the analysis of medical humanities scholar Martha Stoddard Holmes, who notes that the pop-culture genre of *comix*, used as a term to designate humorous sequential art, has links both to mainstream American domesticity, in that traditional U.S. families have for generations shared and enjoyed the Sunday funnies, and to radical underground works of political satire from the 1960s and be-

yond. “What attributes of this medium lend it so well to telling cancer stories?” she asks, pointing out that whereas the “connection between comics and humor is not hard wired, it is a default expectation because of the divergent terms”—the incongruity, that is, between having *fun* and having *cancer*. Yet many cancer patients engage humor not for therapy but because their bodily changes and medicalization inevitably produce moments worthy of laughter. According to Stoddard Holmes, autobiographical breast cancer comics typically feature four distinguishing characteristics: (1) they “figure the self iconically” rather than realistically, a strategy that allows the ill subject to reshape her identity as the disease progresses and invites reader identification with the patient’s cartoon face and shape-shifting capacity; (2) they “render time as space” by offering a narrative that is at once visual and verbal, one in which past and future are visible even as the present provides stress or release; (3) they create a “materiality of language” that erases the distinctions among speech, fantasy, and imagination and that may be especially apt for representing the disorienting effects of “chemo brain”; and (4) they both *use* closure, by concluding each cartoon sequence with a witty denouement, and *refuse* closure, by ending the final cartoon frame inconclusively to signify the uncertainties of living with/beyond cancer. In this regard, cancer comics “elide the cure narrative” that dominates more conventional forms of cancer memoirs (Stoddard Holmes).⁵

Cancer Made Me a Shallower Person presents a woman who survives mastectomy and chemotherapy only to learn that her cancer has metastasized to her bones and brain. Readers who look online can learn that Engelberg died in 2006, shortly after her book was published. Her cancer narrative displays many of the features discussed by Stoddard Holmes, as is evident from an analysis of three representative cartoons. The first, an eighteen-frame sequence positioned early in the book and entitled *Diagnosis*, transforms the conventional “why me?” mantra into an ironic “what did I do to cause this?” meditation. *Diagnosis* juggles playful self-deprecation and implicit cultural critique. “Before getting my biopsy results everyone was very encouraging,” explains the iconic Miriam, a black-and-white line-drawn Everywoman with shoulder-length curly hair, wire-rimmed glasses, and an indeterminate age. The word balloons that emerge from the mouths of eight well-meaning but clueless friends recount such banal anecdotes as “my mom and my sister both had calcification, and it wasn’t cancer!”; “I had the same thing and it was benign,

it's no big deal"; and "my cat had a lump, but . . ." (np). Miriam's narrative, rendered in a word stream at the top of each square frame, acknowledges her increasing irritation at such comments. Her downturned mouth and the thought bubble that appears in frame two raise the cartoon's blame-the-victim motif: "Are they saying I'm being overly dramatic? Am I worrying over nothing?" When the physician's phone call comes with the news that it is indeed breast cancer, Miriam has two simultaneous reactions: "Oh my God! I can't believe it. This is horrible!" (words she says to her doctor) and "Ha! *Now* they'll take me seriously!" (her fantasy as she imagines confrontations with disbelieving friends). Readers can identify with Miriam's cartoon face and her incongruous responses to the bad news, as Engelberg's effective blend of words and images allows representations of the "real" and the imaginary to coexist.

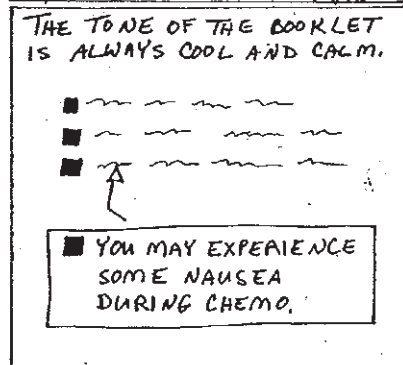
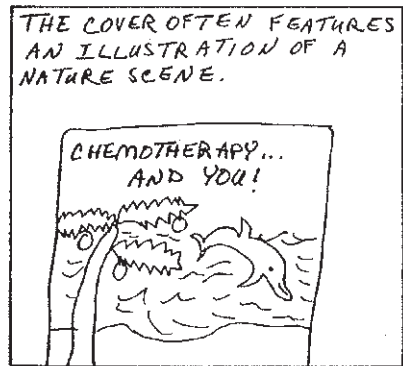
Having redeemed herself by contracting cancer, Miriam narrates her unsuccessful struggle "to restrain my tell-all tendencies"—in frame six she responds to a casual acquaintance's "Hi! How are you?" by sobbing "I have breast cancer!"—and to determine which of her behaviors might have caused her disease. Caricature abounds, as Miriam envisions the judgment of her health-conscious parents ("We walk 3 miles a day, do tai chi and take megavitamins," brags the wide-eyed, smiling maternal figure), parents who "for years . . . have been mailing me articles," from recipes for health to information about "fat linked to cancer" (np). Parody and self-deprecation abound as Miriam proceeds relentlessly past possible environmental causes and toward self-blame. "I caused this by eating too much cheese. . . . All their health stuff was right after all. I never should have relaxed and enjoyed life," she laments in one thought bubble, a numb expression on her face, hands lifted in disbelief (np). Grocery shopping in subsequent frames, she rejects toxic fish, hormone-filled meats, dairy products, and sugar, and ends up buying simply a bottle of water, only to wonder, "Uh oh, did I read that bottled water can have high levels of arsenic?" With characteristic hyperbole, Miriam (rendered in profile, grim and determined, as she pushes her cart past all temptations) concludes that "the only safe solution is to stop eating!" (np).

In the final four frames, reassured by friends that she is not to blame for her cancer, Miriam narrates her perverse discovery of new ways to affirm her guilt. To the concerned companion who reminds her, over tea, that "the Bay Area has one of the highest breast cancer rates in the world," the cartoon Miriam replies, "You're right. I never should have

moved here. It's all my fault!!" Thus she comically pretends to reject environmental causes in favor of lifestyle. To her cancer support group she confesses, "I think I caused this by eating too much cheese," only to be teased by comrades who acknowledge feeling guilty for repressing anger, taking birth control pills, or painting with oils. The final frame's discourse raises matters ontological—"It's hard not to keep wondering about the cause. But would it really help to know?" This frame consists of line drawings of a seated Miriam gazing up at a standing physician of ambiguous status and gender, recognizable by a stethoscope around his/her neck. Returning to ironic self-blame, Engelberg represents the verdict in a word balloon emerging from the doctor's mouth: "This DNA test reveals conclusively that a cheese-induced gene mutation caused your cancer. In layman's terms, it was all your fault" (np). Miriam's presentation of her grateful response parodies the hierarchical conventions of the doctor-patient dynamic and reinforces Engelberg's theme—the absurdity yet the cultural ubiquity of blaming cancer patients for contracting their disease: "Thanks for telling me. Now I'll be able to sink into a really deep depression" (np). This cartoon sequence illustrates the comic strategy of "amplification through simplification," in Scott McCloud's words, the presentation of a dominant idea through concrete detail and iconic abstraction to effect a "stripped down intensity" that promotes reader identification through laughter (30).

Midway through the book Engelberg takes on tyrannical cheerfulness in *Something Unpleasant and You*, which satirizes the ubiquitous educational booklets that represent chemotherapy as a benign process that will leave a compliant breast cancer patient feeling energetic and healed. In this twelve-frame sequence readers see the figure of Miriam change from curly-haired and smiling to bald and weeping; we experience time rendered as space, since both the hairless Miriam of "now" and the full-haired Miriam of "then" coincide in this sequence; and we recognize linguistic materiality in the juxtaposed representations of Miriam's world versus booklet world. The cover art invites particular comic scrutiny: a booklet entitled *Chemotherapy and You*, for example, rendered in frame two, features a calm ocean, a palm tree, and a cavorting dolphin on its cover, to which the iconic Miriam responds in frame three's word balloon, "I was dreading chemo, but now that I can associate it with this lovely beach scene I'm looking forward to it!" In frame four Engelberg critiques another booklet cover, *Breast Cancer Surgery . . . and You!* with

SOMETHING UNPLEASANT AND YOU

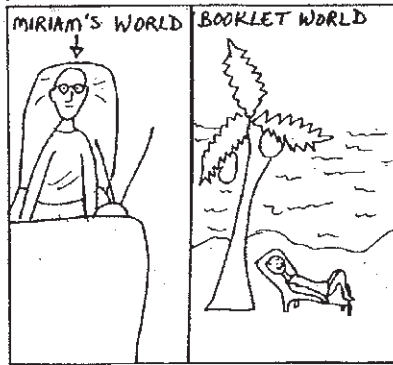
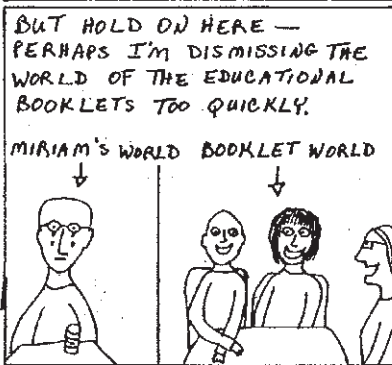
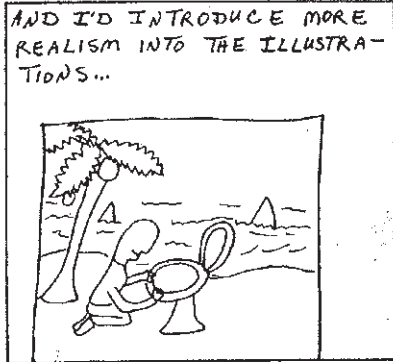


AT THE VERY LEAST I'D LIKE TO SEE AN EXCLAMATION POINT —

- YOU MAY EXPERIENCE SOME NAUSEA DURING CHEMO!

... AND I WOULD PROBABLY PHRASE THE STATEMENT A LITTLE DIFFERENTLY —

- YOU MAY EXPERIENCE HORRIBLE, DEBILITATING NAUSEA DURING CHEMO!



MIRIAM'S WORLD

↓

- I FEEL LOUSY.
- WHAT'S THE POINT OF LIFE AND DEATH?
- WOE IS ME.

BOOKLET WORLD

↓

- WITH JUST A FEW SIMPLE TIPS YOU'LL FEEL GOOD AS NEW!



Miriam Engelberg, "Something Unpleasant and You," pp. 40–41. From *Cancer Made Me a Shallower Person: A Memoir in Comics*, c. 2006. Reprinted by permission of HarperCollins Publishers.

three smiling women—one wigged, another scarved, a third bald—discussing how much they enjoyed their surgeries. “Plus we get all these great prescriptions,” the woman wearing the scarf intones, revealing another satiric subject for cancer memoirists, their debilitating drugs. “The tone of the booklet is always cool and calm,” Miriam’s pseudo-objective narration continues, as frame six advises the patient reading the booklet that “you may experience some nausea during chemo” (np).

Dissatisfied with this optimistic information, the iconic Miriam rewrites the booklet copy in frame seven—“You may experience horrible, debilitating nausea during chemo!”—and in frame eight depicts a bald woman about to vomit into a toilet on a shark-infested beach. In frames nine and ten Engelberg uses a split-frame device to differentiate her solitary grief from the forced cheerfulness of such booklets and to distinguish Miriam’s grim hospital room from the booklet’s idealized seaside setting. The language Engelberg employs here is terse and pessimistic, albeit exaggeratedly so: “I feel lousy,” Miriam exclaims, “What’s the point of life and death?” She also resorts to the cliché “Woe is me.” The contrasting language of booklet world is stereotypical, upbeat, and infantilizing: “With just a few simple tips, you’ll feel good as new” (np). Despite her doubts, the narrative Miriam admits sardonically in the final frame, “a trip to booklet world would definitely calm me down”—though at the price of becoming a “Stepford cancer patient” (np). As McCloud notes, “comic panels fracture both time and space,” and in this sequence Engelberg engages temporal and spatial imagery to launch an uproarious journey through the unrealistic world of breast cancer booklets.

Themes of recurrence and metastasis rarely appear in humorous breast cancer memoirs, since laughter is positioned culturally as a tool of the not-dying, and death is nothing to laugh about. For Engelberg, however, a recurrence in the form of bone and brain metastases provides opportunity for gallows humor. In *A Potpourri of Scans* the iconic Miriam reveals the distressing news of her dual “mets” but also jokes about the appalling noises of MRI machines, the confusing directions for putting on a “3-armed gown,” and the naive encouragement of friends. In this eighteen-frame cartoon near the end of the memoir Engelberg takes the trope of self-division to gruesome heights.⁶ Miriam confides in frame one that “there is a divide in the breast cancer community” and illustrates that claim with a circle divided by a lightning-bolt line, one side labeled “primary diagnosis only” (to which her response is “I’m OK—really”), the other side labeled “gone metastatic” (to which she responds

“damn!”). Despite attempts by the oncologist to reassure Miriam that a cancerous lymph node signifies local recurrence, a subsequent CAT scan reveals bone metastasis. The scan itself, however, is humorously rendered in frames four through seven, as Miriam struggles to don impossible garments required for the procedure, tries in vain to heed the warning printed on the machine—“laser beam, do not stare into aperture!”—and speculates that the laser beam “improved my eyesight” (np). A follow-up MRI, depicted in frames nine through eleven, presents a prone Miriam entering yet another alienating machine, grim in contrast to the smiling technician at her side. Through sound bubbles Engelberg represents the machine’s disconcerting noises—“BOOM-A BOOM-A-BOOM-A-BOOM-A,” “CLACK CLACK CLACK,” “PLINK PLINK”—which lead Miriam to “picture the Monty Python team out in the control room making sound effects” (np).

The last six frames, which reveal the presence of brain metastasis, unsettle reader-viewers as Engelberg uses strategies of comic disruption to shift her narrative trajectory from restitution to autothanatography. These drawings present an open-mouthed figure responding with horror to her oncologist’s phone call—“In my brain? Oh my God!”—as her wide-eyed husband cries “Oh no!” The narrowing world that the iconic Miriam inhabits is once again represented through a circular drawing; here the “gone metastatic” half of the earlier circle is further subdivided into a fragment that reads, “Anyone in there?” This lonely query reflects the isolation Miriam experiences at the news of her brain metastasis, as her odds of survival diminish. Grim irony prevails as the cartoonist represents her alter ego rejecting inspirational messages and confronting optimistic friends with a placard that reads, “Lance Armstrong had a different form of cancer!” Like Norton, Engelberg resists Armstrong as cancer’s fetishized spokesperson and claims agency by distinguishing her experience from his. Although denial can provide only temporary solace, she returns to it in the final frame, as the iconic Miriam tries to convince herself that if Monty Python was indeed operating the MRI machine, “maybe I didn’t *really* have brain mets.” Such allusions to popular culture reinforce Engelberg’s introductory claim that she would be not the “heroic type of cancer patient portrayed in so many television shows and movies” but one who “looked for pop culture distraction” (xii). In choosing transgressive humor over tragic angst as a strategy for representing metastatic cancer, the cartoonist confronts death with comic equanimity yet refuses to conceal her fear and grief.

Blogging and Kvetching in *The Adventures of Cancer Bitch*

If breast cancer often begins with a “whiff of criminality,” as S. L. Wisenberg alleges in a blog entitled “Cells Gone Wild,” so does her 2009 memoir *The Adventures of Cancer Bitch*, which boasts cancer as subversive muse and uses strategic narcissism as narrative strategy (2). Having posted nearly five hundred blogs between 2007 and 2010 on CancerBitchblogspot.com, this defiant memoirist invites readers into a landscape demarcated by spatial word coinages: Fancy Hospital, home of Fancy Surgeon, toward whom she feels ambivalent; Plain Hospital, where a Much Recommended Surgeon practices; Chemolandia, where Wisenberg wows her sister infusion patients with a tattooed bald head; and Cancer Bitch World Headquarters, where she seduces readers by kvetching about the sentimentality of mainstream breast cancer culture and the perils of teaching one-breasted. In a retrospective essay about her illness blogs, Wisenberg playfully acknowledges that contracting breast cancer fed her ego: “There is a delight? Can I say that? That I’m center stage? That something dramatic has happened. . . . That’s what it is. That’s what I don’t want to tell anybody. That I’m important because the killer has lodged in me” (“Bitching and Blogging,” 20). That ego is fragile at best, however, and quite possibly a performative ruse; in her subsequent memoir Wisenberg acknowledges fear, depression, and bodily insecurity, all of which she deflects through wit. A wily blend of self-aggrandizement and self-deflation thus fuels her comic voice.

Wisenberg engages a more anti-pink discourse in her memoir than does either Norton or Engelberg, in part because she writes from a more explicitly feminist standpoint. As an advocate of Breast Cancer Action (BCA) and its environmentally focused critiques of corporate cancer culture, Wisenberg challenges tight pink T-shirts that sexualize the disease and multinational corporations that “hop on the Pink bandwagon” by selling “Pink Ribbon Cupcakes and Support the Cause Brownies” (*Adventures*, 5). She uses irony to highlight the absurdity of buying pink M&M’s (“That’s all I eat. If I eat enough of them my cancer will go away”) or attending Avon Walks to promote breast cancer awareness (“Do I get a free Avon makeover before setting out: all those cameras, you see; I must look my best?”) (5). Instead of consumerism and walkathons, she recommends joining Code Pink, a feminist antiwar group, or reading Samantha King’s treatise *Pink Ribbons, Inc.: Breast Cancer and the Politics*

of *Philanthropy*, which posits that the “Komen Foundation and its corporate sponsors continue to pump money into a research and education agenda that is . . . actually doing more harm than good” (6). Wisenberg’s pink-bashing continues throughout the blog-turned-memoir, as she ridicules Fancy Hospital for giving away a “free (!) pink emery board” at the front desk of its Cancer Floor: “What is the purpose of a pink emery board? To remind you to have a mammogram when you’re sawing down your nails? In general the pink ribbon thing is supposed to make you Feel Feminine even though you’ve lost the outward manifestation of what men think of as feminine in this country. Thank you, Hugh Hefner” (35). Yet she acknowledges that while she prefers BCA’s anticorporatism to market-driven philanthropy, her anger at the “Pink Ribbon people” might be misplaced, since even the Komen Foundation began in grief and was thus once “pure” (39).⁷

Like other feminist autobiographers, Wisenberg embraces baldness and one-breastedness as strategies for evading the pressures of hegemonic femininity. Having refused to fill a prescription for a “cranial prosthesis” (aka wig), she recounts sporting a Mohawk once her hair loss begins, tattooing her bald head with leaf-shaped henna swirls and peace signs, using her scalp as an antiwar billboard to proclaim “US Out of Iraq,” and presenting herself proudly to sister bloggers as “just another bald-headed girl for peace” (*Adventures*, 74). She mocks the trauma of becoming “Un-Mohawked” when her remaining tufts of hair fall out midway through chemo and endorses “The Bad Girls of Breast Cancer” who wear black T-shirts with an X over the missing breast rather than pink ones labeled “Breast Buddies” or “Under Reconstruction,” captions she deems “suitable only for Hooters customers” (76, 37). She parodies mainstream culture’s sexualization of breasts by hosting a Farewell to My Left Breast Party the night before her mastectomy that features frothy breasted figures on its dessert menu: cream puffs with candy nipples, giant Hershey kisses, scoops of peach ice cream topped with cherries. Although she decides against breast reconstruction, she admits struggling over this decision: “I have to admit that I’ve been feeling lazy for not replacing my breast. Maybe feeling lazy and slatternly for going around braless and one-breastless. O gosh, lost a breast and didn’t even sew one back on. As if it were a button fallen off a coat” (137). In these wry passages the memoirist defies gender norms, destigmatizes one-breastedness, and ridicules the cultural obsession with breasts.

In her boldest defiance of post-mastectomy etiquette, Wisenberg em-

loys ribald humor to recount her pubic hair loss due to chemotherapy. This taboo confession opens with a description of the first hairs she found in her bathtub, which “looked like a swarm of ants,” and culminates with an explicit account of her bald pubis and visible labia (*Adventures*, 73). In a blog entitled “The Million Dollar Brazilian” she riffs on the increasingly popular grooming practice among young U.S. women of having their pubic hair waxed. “Why?” she wonders, only to report that research reveals “men want women to be bare because they want their sex partners to look like porn stars” (102). Unsurprisingly, she embraces neither the J. Sisters Salon in New York, cited in *Marie Claire* magazine as a prime site, nor the porn aesthetic of pubis-waxing.

Cancer Bitch has never waxed anything, including floors and furniture, though in her youth she bleached her mustache and arm hairs. Now she doesn't have to because Adriamycin and Taxol have left her hair-depleted. She has two half-eyebrows, just a little hair left on her shins, and a threadbare little nest above her crotch. How can I say this delicately? There's a slit underneath the nest. It reminds her of the profile of a crocodile. (*Adventures*, 102–3)

Revealing the comic details of her shorn pubis, Wisenberg admits to worry over whether the administration of Fancy University, where she teaches but lacks tenure, will fire her for pornographic commentary. Ultimately she reassures herself that academic freedom will protect her and that “after all, this is why the second wave of feminists fought, so that in the early 21st century, a Cancer Bitch could write about her loss of pubic hair with impunity” (*Adventures*, 103).

A prominent narrative strategy in *The Adventures of Cancer Bitch* is the cross-referencing of feminist writers and artists who have challenged the breast cancer marketplace. Although Wisenberg mentions celebrities with breast cancer such as Sheryl Crow and Gilda Radner, her praise is reserved for feminist critics of cancer culture, most notably Barbara Ehrenreich, Deena Metzger, Matuschka, and Miriam Engelberg. Ehrenreich's oft-cited essay “Welcome to Cancerland,” published in *Harper's* in 2001, exposed what Wisenberg characterizes as “too much treacle out there about breast cancer—positive attitudes, what my cancer taught me” (*Adventures*, 23). Metzger's exuberant photograph of her one-breasted tattooed chest, taken in 1976 by Hella Hammid, attracts Wisenberg

through its iconic status in feminist breast cancer history, although she refuses to tattoo her own chest because it “would hurt too much” (28). Matuschka’s *Beauty Out of Damage*, which appeared on the cover of the *New York Times* magazine in 1993, captures Wisenberg’s attention for its brave self-portraiture, “a woman taking a picture of her own scarred self after her breast was cut away” (139). And Engelberg’s *Cancer Made Me a Shallower Person* appeals to Wisenberg because the cartoonist stares at death with humor: “There is always the void. Let’s laugh to cover it up” (33).

In contrast to her praise of feminist pioneers, Wisenberg ridicules women she considers breast cancer’s public glamour girls: Cancer Vixen (the *New Yorker* cartoonist and cancer memoirist Marisa Acocella Marchetto, although she is never named); the authors of the *Skinny Bitch* vegan cookbook (also unnamed), for whom thinness is a major goal; anyone who values the trappings of femininity over health.

I’m not going to be like those superficial fucking girls who live for their cleavage, who won’t take tamoxifen because they might gain weight, and the reason they can’t gain weight is because their appearance is more important than their survival. I don’t want to be like Cancer Vixen who just thinks about shoes and hair. I want to be like Miriam Engelberg but she died. I’m crying. I’m crying for her because the one I want to be like died. (*Adventures*, 45)

Grief at Engelberg’s death blends here with strategic narcissism as Wisenberg both laments and laughs at her own mortality.

Wisenberg’s Jewish identity is as central to her narrative as is her feminist politics. As she confronts mastectomy and chemotherapy, she studies the Torah, attends Passover seders, commemorates Yom Kippur, and reads texts of Jewish mysticism. Reflections on Judaism provide much of her serious subject matter, in particular the shame that many Jews associate with bald heads because of forcible shavings of the heads of Jewish women and men by the Nazis during the Holocaust. In addition, her status as an Ashkenazi Jew leads Wisenberg to be tested for BRCA1 and BRCA2 mutations, and the topic of genetic predisposition toward breast and ovarian cancers occupies her even after her test results come back negative. Her often sober meditations on Judaism and the Holocaust also reveal subversive humor.

For some American Jews, the Holocaust is our holy of holies. Auschwitz is our version of the crucifixion, and we approach it, the idea of it, with horrified awe. . . . The Holocaust is my automatic reference point to many things—if it's really cold outside I think about morning roll calls in dark dead winter in Poland in the death camps. . . . I wrote a book called *Holocaust Girls*, about people (like myself) who identify with the Holocaust too much.

That's why the term is a household word now.
(You mean it's not?) (*Adventures*, 9)

In this passage Wisenberg uses her cultural identification with the Holocaust as a narrative tool for meditating on the horrors of genocide but also for lamenting her previous book's lack of a sufficiently large academic audience.

Unlike Norton and Engelberg, who never analyze their own comic strategies, Wisenberg reflects on the role of laughter in her narrative confrontation with breast cancer. While she is initially drawn to nervous laughter as a coping mechanism, she later rejects it as evasive.

I hate nervous laughter. It seems so fake. It seems to be covering up. It seems to be negating what you're saying. I don't want to be a nervous laugher. I remember talking to someone a few years ago about her mastectomy and she was all barky nervous laughter. It put me off. But I am doing it. I'm getting a part of my body cut off, ha-ha. If the cancer has spread I could die, ha-ha. (*Adventures*, 31–32)

Wisenberg does acknowledge the power of catalytic laughter as a form of release—for example, she enjoys making audiences laugh aloud when she reads from her memoir: “It's easy to make a happy, willing crowd laugh. They want to laugh. They need it, to let off steam, from their waiting, their wanting. The nervousness of all being together, chairs set up in rows, side by side. All the raggedy breathing. . . . We are animals that need to make noise” (*Adventures*, 32). Here she posits what Andrew Stott identifies as the relief theory of laughter, which pivots on “a struggle of incongruous selfhood” in defiance of both cultural and unconscious taboos (131). In his work on comic theory Stott reminds readers that Freud viewed laughter as a means of alleviating inhibitions: “Laughing is the audible signal of energy required for cathexis,” which can in turn restore

mental equilibrium (131). Wisenberg concurs, and she uses humor strategically in her narrative to evoke reader connection and relief: “Enough of memoirs about trauma and sorrow and addiction” (*Adventures*, 23).

In her retrospective essay “Bitching and Blogging Through Breast Cancer” Wisenberg reflects on her lifelong preoccupation with suffering, her chronic depression, and her reasons for writing the blogs that became her memoir. If in a journal “you strip yourself down as close to the bone as possible,” in a blog you “can look both inward and outward, because it’s theoretically available to every single person on the planet who’s online” (21). Her postings served as “a journal with benefits,” since she could write not only to complain about her post-mastectomy drainage tubes or ponder mortality but also to amuse herself and others: “And—I know how this sounds—I wrote about the fun I had with cancer” (21). For Wisenberg, blogs replaced therapy: “I felt listened to even on days when friends, as well as strangers such as Colon Cancer Cowgirl and The Fifty-foot Woman, didn’t give feedback in the comments section” (21). Kvetching about breast cancer thus provided laughs and a lifeline.

The Cultural Capital of Transgressive Laughter

Why laugh about breast cancer? One answer can be found in the medical websites and journals that surface when one investigates cancer, laughter, and humor. A 2006 article by Mary Payne Bennett and Cecile Lengacher, “Humor and Laughter May Influence Health: Complementary Therapies and Humor in a Clinical Population,” featured at a website supported by the National Institutes of Health, notes that in a survey of 105 breast cancer patient-respondents in Florida, 21 percent used laughter as a “complementary and alternative medicine,” while in a smaller study 50 percent of patients found the use of medical humor helpful during treatment (pubmedcentral.nih.gov). Such studies represent the most recent manifestation of a long history of medical endorsement of the healing power of laughter, beginning with Hippocrates, the “laughing philosopher” of ancient Greece who viewed laughter as an antidote to disease (Stott, 131). Comedy cures, as one often-visited cancer humor website proclaims, however exaggeratedly.⁸ Increasingly in postmillennial medical culture, humor therapy, web-based jokes and games, comic memoirs, and laughter-inducing activities are being prescribed to help breast cancer patients cope, heal, and even face death with defiance or equanimity.

While Norton, Engelberg, and Wisenberg are among the best-known published authors of comic memoirs, the blogosphere abounds with feminist breast cancer humor. For example, an October 30, 2008, posting on *assertivepatient.com* by Jeanne Sather, “Introducing Breast Cancer Joe,” explains why she is launching a new product for the men of America.

In 2006, in October, of course, Mattel introduced Breast Cancer Barbie. I bought one to add to my Wall of Shame, and she’s been there ever since, raising awareness in a different way from what Mattel intended. . . . I thought at the time that if I did a gender-reversal people might better be able to see how stupid this Barbie doll is, and how offensive it is to a woman like me. . . . Because men do get breast cancer. No one thinks about that when they open clinics to treat breast cancer where the only backless gowns available to patients—male and female—are pink. (Sather)

Using pink-bashing to take on the toy industry and the breast cancer marketplace, Sather provides photographs of Mattel’s Barbie (both pointed breasts intact) and her own stiff-torsoed Joe, clad in a rose-colored helmet and looking stoic. The box caption that accompanies her product reveals that Joe “comes with the following accessories: pink helmet, boots, backless pink camouflage hospital gown, pink teddy bear, military issue weapon, repainted pink, pink hand grenade, and pink ribbon tattoo” (Sather). If G.I. Joe could survive Vietnam, surely Breast Cancer Joe can handle chemotherapy.

Like Ehrenreich, who underwent treatment for breast cancer in 2001 and became offended by the endless array of ultrafeminine and infantilizing products she encountered, Sather uses her authority as a breast cancer patient to object to crass marketing ploys.

As a woman living with breast cancer (and minus one breast) who is forced to run a gauntlet of pink products every October, my question is this: What does this beauty queen, fairy princess DOLL in a pink formal gown say about me and my experience with breast cancer?

And the answer is: Nothing. Nothing.

This doll does not offer me hope.

This doll certainly does not offer a positive image of a strong woman living with cancer.

And the doll is not even a fund-raising effort that I can support. (Sather)

The blogger cheekily suggests revisions to Breast Cancer Barbie should Mattel truly want to fulfill its stated goal of inspiring women with this disease: “If Barbie were to represent us, she should be bald, and come with an assortment of wigs and headscarves—the fashionistas at Mattel who created the ‘sparkly tulle stole that evokes the iconic pink ribbon’ missed that one. . . . Breast Cancer Barbie would also need that essential chemo accessory: a small pink toilet in which to upchuck when nausea strikes” (Sather).

Transgressive breast cancer humor has also pervaded YouTube, primarily through performance art by comedians who bare their souls and chests for laughs. Queer performance artist and writer Tania Katan, for example, includes on her website links to a YouTube segment in which she lectures shirtless to a large audience at a Manhattan art gallery, her mastectomy scars fully visible, about the freedom of running “topless 10K’s”: “We’re off! Me, my shirt, and 50,000 people!” In this comic routine she reveals her outrage when, relaxing after the race in the “survivors’ café,” she is approached by an event official who insists that she either don her shirt or leave. In her saucy memoir, *My One-Night Stand with Cancer*, Katan discusses her familial cancer history and BRCA-positive status as well as plans for an upcoming one-woman show, “Saving Tania’s Privates.” “If you speak, you survive,” she wryly concludes (www.taniakatan.com).

Considered as a group, the humorous narratives of Norton, Engelberg, and Wisenberg—along with Sather’s blogs, Katan’s memoir and YouTube segments, and blog postings by countless other defiant women with breast cancer—constitute feminist activism as well as comic self-expression. Such narratives inform readers that cultural attitudes toward breast cancer have changed since the founding of National Breast Cancer Awareness Month in 1985, since the declaration by the *New York Times* of 1992 as “The Year of the Ribbon,” and since the increase in National Cancer Institute funding of research on breast cancer from \$155 million in 1992 to \$566 million in 2004 (King). Reading humorous narratives can help people living with breast cancer to better cope with illness, suf-

fering, and mortality, since laughter provides a means of deflecting fear and confronting vulnerability. Such narratives invite readers to revel in the knowledge that rebellious laughter “strategically bypasses civility to return us to our body and remind us of our corporeality, momentarily shattering the apparently global imperatives of manners and beauty” (Stott, 86).