

WOMAN RECONSTRUCTED: A BREAST CANCER JOURNEY

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While leafing through a fashion magazine I come upon a full-page advertisement showing a woman's torso clad only in a thong. Her arms are folded over her breasts and her eyes are outside the picture frame. Splashed across her bosom is a loop of shocking pink: the iconic breast cancer ribbon. Superimposed over the entire image are the words, "Expose the Truth." It is an ad for The Breast Cancer Research Foundation, "Funding the fight to prevent and cure breast cancer in our lifetime." (Figure 1)

In a magazine my teenage daughter reads (*YM*, December/January 2004), I find a picture of a girl's bosom, the rest of her body obscured by surgical drapes. One breast, small and perky, shows scars around the areola with a black slash below, crisscrossed with silver surgical staples. The other breast, heavy and full, slopes to the side, responding naturally to the pull of gravity. It is inked with black marker for an impending surgical intervention. The caption in bold red letters shouts, "I WANT NEW BOOBS!" (Figure 2)



Gazing at these images in juxtaposition I am struck by their disturbing irony. We are obsessed with breasts, and so preoccupied with a fixed ideal of their size and shape that teenage girls willingly go under the knife for invasive procedures that alter their bodies to get, as the article tells us, “the breasts they really want.”¹ Meanwhile, we are in the throes of a breast cancer epidemic, where one out of seven women in our lifetime will be diagnosed with this life-threatening disease. Thanks to recent advances in detection and treatment, 97.5 percent of those women will survive.² What does this mean? I had breast cancer, and I know. Every form of breast cancer treatment involves invasion and alteration of the breast—from fine needle biopsy, to lumpectomy, to the extreme of dual mastectomies. While many women like myself choose to have some type of breast reconstruction, what it really means is that millions of women in the United States alone are living with new boobs—or no boobs—whether we want to or not.

Given a medical ultimatum I gave up my breast to extend my life. Who wouldn't? But I soon learned that stories about body alteration—one could say mutilation—that accompany breast cancer treatment are rarely told even in our tit-crazy world. So taboo is the subject of mastectomy and breast loss that in my adjuvant treatment support group it scarcely arose. Far more time was spent discussing hair loss, and that surprised me. After all, hair grows back.

The Breast Cancer Research Foundation ad campaign is a step forward. But what truth is it really exposing with photographs of beautiful, perfectly proportioned women seductively shielding whole, healthy breasts?

Art played a major role in how I came to terms with my bodily loss and change. Looking in a mirror, I made images of myself in different stages of treatment. I began with a cartoon-like portrait of a woman in the grip of fear, (Figure 3 on CD) the expression that the words “breast cancer” evoked in me, the face beneath the competent and composed woman I appeared to be as I proceeded stoically from a routine gynecological exam (“I feel a thickening in your breast,” said the doctor) to mammography (“You have an abnormal film; we want you to see a breast surgeon”) to biopsy (“Whatever it is, it doesn't belong there, and I'm taking it out tomorrow morning”) to lumpectomy (“The margins are not clean; there are cancer cells throughout the breast”) to mastectomy (“You can't have a recurrence in an organ that isn't there”) to breast reconstruction (“This is a good result”) all in a matter of weeks. My image was drawn in shades of black, but instead of a ribbon of pretty pink, the universal euphemism

¹ GLASSMAN, Melissa R. “I Want New Boobs!” *YM Magazine* (December/January 2004).

² National Cancer Institute, SEER Cancer Statistics Review 1975-2001, as quoted in The Breast Cancer Research Foundation ad.

for this disfiguring and deadly disease, I painted a slash of red, bright as fresh blood, on lips forbidden to speak.

Over the year of treatment I continued to stand before a mirror, trying to make images for what I could not express in words. At first, like the face, they were blunt, garish, emotionally oversimplified, even cliché. (Figure 4 on CD) I shied away from my reflection, painting impressionistic pastel swirls. (Figure 5 on CD) Then I boldly inked the cuts, stitches and scars. (Figure 6 on CD) As I continued my search for meaning, I began to look beyond my body. Outside my window was a garden of wildflowers and an old, rotting stump of a tree. I drew my lost breast as its companion. (Figure 7 on CD) But I could not understand how an organ of pleasure, an organ of life, could now turn on me, so I made an image of my “Ambivalent Breast.” (Figure 8 on CD) What happens, I wondered, to all the breasts that are cut off? My answer was the image, “All Breasts Go To Heaven.” (Figure 9 on CD)

Then I met Dr. Paola Luzzatto, director of art therapy at the Memorial Sloan-Kettering Cancer Center in New York City. She encouraged me to deepen my focus and unlock a greater and more daring search. Under her guidance I created images that expressed, shared, and ultimately transformed my experience of illness and survival. The relationship between verbal and nonverbal representation, between image and word, was the heart of the method we used. First I would create an image. Some were stimulated by inner feelings, others were cut out of magazines and assembled in collages, and many emerged from engaging directly with the tactility of art materials themselves. Once an image was composed, I looked at it as something outside myself, becoming open to what more it suggested. This process always generated fresh and deeper meaning beyond any conscious thoughts that had accompanied my initial expression. The last step was to create a title, a word or words that did not just capture the image but also extended it in an ongoing conversation.

Gradually I moved from confronting the obvious and disturbing changes in my physical body to addressing more subtle changes in my relationships with others, and ultimately to a frank and somewhat overdue investigation into who I am. The process became a powerful way to overcome both my inward dislocation and also my outward isolation from healthy full-bodied people, forging a fresh and more authentic relationship with myself and with others.

In this image (Figure 10 on CD) my breast is flying up to heaven, leaving behind black smudges of charcoal. Technically, black is the absence of color. In my work it came to represent cancer and loss. I was working with soft pastels, which are messy. To clean up I knocked the excess pastel dust onto another piece of paper. Suddenly I did not want to throw the paper away. Instead I made another

image from the remnants of my dust (Figure 11 on CD) expressing my determination and hope to create something from what was lost. That became a theme of my work, and of my life.

In the course of my treatment I felt like I had been split apart and reassembled. On the physical level I underwent a free-flap reconstruction, a procedure where fat was extracted from my stomach and used to rebuild my breast. On a deeper level, of course, it was my self-image that was split apart. Until my breast became diseased and had to be removed, I did not realize how deeply I identified with it—both sexually and also as a mother who had nursed her children—as my very womanhood. If, like a kindergarten project of “Cut and Paste,” my body could be surgically rearranged (Figure 12 on CD) then who might I be?

In “A Very Good/Bad Little Girl” (Figure 13 on CD) I began to explore and explode the constrictions of my upbringing as a well-behaved child who always colored “inside the lines.” This image acknowledges the paradox that cancer is an illness that kills by “going outside the lines,” yet for me it was engendering a deeper knowledge and fuller expression of self. What I discovered was an “Embryo” (Figure 14 on CD) of who I might come to be.

In the final image (Figure 15 on CD and print) colors and shapes burst in lively profusion from a background of black that represents cancer and loss, framed by the bold and life-affirming declaration to the world and to myself: “Yes, I am in here somewhere, Yes, you can find me if you look.”



WORKS CITED

“Expose the Truth”: Advertisement designed by J. Walter Thompson Agency.

Photo: Patrick Demarchelier © 2004. The Breast Cancer Research Foundation.

http://www.bcrfcure.org/ab_cons_printad.html

GLASSMAN, Melissa R. “I Want New Boobs!” *YM Magazine* (December/January 2004): p. 109. Photograph by Erika Larsen.