While I continue to stay within the confines of my home, the outside world is reeling against the onslaught of a mere microorganism. For countless others and I, this is a completely unprecedented situation, but writers of medicine have always understood the fragility of human health. Their narratives and research capture the trials and tribulations of illness, but they also present an opportunity to move beyond our anxiety and still embrace life. As a student of Literature and Medicine this semester, I have had the opportunity to read several works that touch upon this resilience in the face of disease.

Our ongoing captivity in our homes pales in comparison to that of Elisabeth Tova Bailey during her struggle with an unknown illness, but just as many of us are using this time to connect with loved ones, she found companionship in a snail. Her patient narrative, *The Sound of a Wild Snail Eating*, focuses comparatively little on the details of her infirmity; she instead begins identifying with the snail, which “led me through a dark time into a world beyond that of my own species” (Bailey 160). Technology has likewise allowed us to escape our mundane routines and digitally interact with a society confronting the same problems. Even in isolation, building connections is essential for the human spirit; Bailey finds solace in an invertebrate, whereas we have found it in our family, friends, and pets. One parent shared that “my kids have been really into pretending that they are Star Wars characters or Harry Potter characters … probably because they want to have magical forces that control things (while COVID-19 invisibly controls our lives!” (Guynn). To pass the time, Bailey gratifies her thirst for knowledge by learning more about snails, not entirely unlike the new self-proclaimed experts on hydroxychloroquine. At the same time, she realizes the limitations of her understanding and consults professionals like Tim Pearce and Ken Hottopp (Bailey 165). Nowadays, we find this credibility and competence in the daily briefings of Dr. Anthony Fauci and Governor Andrew Cuomo. On the other hand, misinformation has rapidly spread throughout social media, leaving us unable to trust what we read on our Facebook and Twitter feeds. She mentions her attempts to extend this search for information to her physical ailments towards the end of the book, comparing the guilty pathogen to an author: “it rewrote the instructions followed within every cell in my body, and in doing so, it rewrote my life, making off with nearly all my plans for the future” (Bailey 166). Bailey turns to literature in making sense of the senseless, both in characterizing the pathogen and writing the book to disseminate her experiences. Her narrative of healing is therapeutic for her and instructive for its audience, reminding them to treasure their health. This lesson is most clear after her eye-opening observations of how “careless” her friends were with their energy (Bailey 39). Before the outbreak, handwashing and not touching our faces were an afterthought, if not ignored altogether, but now we appreciate the importance of these habits. Her vivid storytelling is the key to absorbing these ideas. Similarly, the harrowing stories of frontline medical staff working amidst shortages have proven to be compelling in motivating our societal shutdowns. Starved of any stimulation, we turn to these accounts to both inform ourselves as well as immerse ourselves in the response to this crisis. Bailey ultimately takes advantage of her involuntary stay at home to expand her worldview and find value in the ordinary, providing an example to readers coping with social distancing.

In grappling with the realities of an incurable virus, *The Two Kinds of Decay* by Sarah Manguso is similarly enlightening, lending insight into a probably common patient perspective. Unlike her CIPD, the coronavirus will infect millions, but many patients can relate to the feelings of powerlessness and frustration that pervade the book. Her treatment is uncomfortable and sometimes excruciating, which also characterizes the medical care currently being delivered in intensive care units worldwide. We have read countless news articles about the shortages of ventilators, but for the patients who are using them, it must be distressing to be reliant on a machine for a task as trivial as breathing. However, Manguso uses the
fragmented structure of her narrative to find positivity in seemingly trivial details, such as the wintergreen candies from her favorite nurse Tabitha (Manguso 40) or the flowers from the engineer of a new apheresis machine (Manguso 48). She intersperses her descriptions of the hospital and psychiatric ward with her life at Harvard and beyond, emphasizing that a disease does not define the totality of an identity. Nonetheless, her time spent in these places shapes her identity and yields valuable insights:

The [psychiatric] ward was the only true community of equals I ever lived in. What I mean is that we all knew we had already lived through hell, that our lives were already over, and all we had was the final descent. The only thing to do on the way down was to radiate mercy (Manguso 151). A common mistake throughout this pandemic has been to focus exclusively on statistics: the death toll, the economic costs, the rate of change in cases, and many more examples. But the individuals most afflicted by this virus were human beings before they fell sick and will still be human beings whether they succumb or make a full recovery. When the virus inevitably recedes, their viewpoints will become invaluable when we look back on these few months. One example of such a narrative is that of Stacy Allegro, a 58-year-old survivor of the virus who memorably described how “all I could do was stare at the ceiling burning with fever feeling like a piñata being up by kids at a birthday party” (Melendez). In the same vein, Manguso supplies an experience of living with CIPD that is unavailable to the various doctors and nurses who treated her. Many of these professionals dismiss her knowledge of her own body and instead argue that “the symptom I was reporting was not the correct one” (Manguso 27). Beyond these injustices in the hospital, her time in the psychiatric ward highlights the effects of this illness on her mental health, an important lesson for helping COVID-19 survivors in the aftermath of this crisis. Like Bailey, Manguso is an example of a writer who truly understands the patient perspective, and these types of narratives will be crucial in giving a voice to those infected with the coronavirus.

Another book among our readings, *The Poetry of Healing: A Doctor’s Education in Empathy, Identity, and Desire* by Dr. Rafael Campo, emphasizes the compassion that is vital in the health professions as well as in our everyday lives. Outside of the disheartening articles about governmental failures and price gouging, there have been just as many stories about the goodness of our fellow humans. Throughout his book, Campo illustrates his technical competence as a physician, but his treatment truly helps his patients when he pairs it with empathy and an appreciation that “our words are the currency of our existence” (Campo 169-170). SARS-CoV-2 itself may be a purely biological threat, but the virus has also affected us on a humanistic level. In a perilous time for public health and the economy, many people have shown the same lovingkindness as Campo, working to help vulnerable groups like the elderly or the unemployed. Campo shares his personal struggles as a Latino and a gay man (“The Fairiest College”), which informs his tender approach towards his patients, especially those suffering from AIDS. Like him, we each have our own problems – such as a chaotic return home, a loss of income, or family members in danger of infection – but many of us have still committed to helping others. Even if self-preservation and governmental restrictions are partially motivating our social distancing efforts, sacrificing our routines and travel is another result of this innate altruism. For example, volunteers in my local area have established a food distribution for residents despite the potential risks, taking care to incorporate workers who are fluent in Spanish (Abdalla). Campo ties his desire to be a benevolent, effective physician to his love for literature, writing that the poem “is the bright laboratory where the virus is isolated, understood, and cured. It is what gets into your blood and makes you feel so robustly alive” (Campo 195). Beyond containing an apt metaphor for our predicament, this quotation demonstrates the intimate relationship between literature and medicine, the cornerstone of our class. Coping with COVID-19 is inherently exclusive to our different immune systems, but our virtuous deeds in these trying times and fascination with literature both testify to our need to see beyond ourselves. Part of this trait is our tendency to identify
similarities in situations far removed from our lives. For instance, many of the stories in the book hail from the devastating AIDS epidemic in San Francisco, where Campo witnessed cases firsthand as a resident, with a poignant example in the chapter “Fifteen Minutes After Gary Died.” With disturbing accounts of abuse against Asian Americans, some of these experiences gain special significance, a reminder that just as the virus is non-discriminatory, we must be unbiased in our treatment of others. Decades before this virus revealed our capacity for solidarity in a global emergency, Campo explained that these acts are representative of our fundamental humanity.

These texts, only a subset in the field of medical humanities, underscore the importance of literature in an otherwise medical and economic crisis. Statistics do not adequately express the extent to which this virus has upended our lives, but Bailey, Manguso, and Campo each capture a different aspect of our current status. Well before COVID-19 became a household name, these writers linked issues of health to broader discussions about our instinctive need for companionship. In general, literature plays a critical role in allowing us to escape the limits of our lived experience and find fulfillment in the stories of others, a necessary relief from our self-imposed imprisonment.
Works Cited
