

# **Medical Humanities: An Interdisciplinary Approach to Health and Disease in Select Poems of Sylvia Plath and Anne Sexton**

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## **Abstract:**

Medical Humanities, an emerging interdisciplinary field that incorporates humanities (literature, philosophy, ethics, history, and religion), social sciences (anthropology, cultural studies, psychology, sociology), and arts (literature, theatre, film, and visual arts) into medical education and practice, emphasizes literature and the arts in relation to clinical practices, to cultivate skills such as observation, analysis, empathy, and self-reflection crucial for providing compassionate healthcare. The rise of Medical Humanities as a scholarly field in has led to more conversation about health and disease. Humanities and Arts offer valuable insight into human experience, suffering, personality, and social responsibility, as well as a historical perspective on medical practices. An interdisciplinary approach to health and illness, medicine, the body and narrative, material culture and the arts, disability and healthcare, ethics and pedagogy, and emerging global concerns might positively affect future living practices. The present paper examines Sylvia Plath's 'The Surgeon at 2 a.m.' and Anne Sexton's "The Operation" poems, which explore the normative and disciplinary aspects of medical practice. Plath and Sexton's 'clinical lyricism' challenges mainstream beliefs and power structures by depicting surgery as colonial or exploitative. In their poems, surgeons maintain their authority by assuming objectivity and disregarding patients' experiences. This process is expressed through images of colonization and surgeons' claim to transcendence. Sexton and Plath identify a paradox related to medical framework and the concept of bodily integrity.

**Keywords:** Medical Humanities, clinical, medicine, disease

## **Introduction**

What is Medical Humanities? What are the best ways to combine Humanities in general and Medical Humanities specifically? Humanities has been used since medieval times to improve understanding of illness and healing, as well as to explore the meaning and possibilities of human existence. It focuses on describing experiences on a global scale. Medical Humanities now focuses on constructive criticism of sickness experiences and personal transformation through therapy. Recent advances highlight the impact of mental illness, anxiety, trauma, and suffering on literary works.

Literature and medicine have a deep and lasting connection, woven through the strands of human experience and the intricate web of life. The convergence of these two disciplines is distinguished by a long history of investigation into the human condition, with literature serving as a potent prism through which to investigate the complexity of illness, healing, and the human spirit. Whether in ancient works depicting medical activities or in modern novels delving into the inner landscapes of patients and practitioners, literature has served as a mirror, reflecting the successes and tragedies of healthcare. Beyond mere documentation, writing provides a unique route for empathy, promoting a greater understanding of the challenges and joys that exist in the medical field. Literature, via stories, poetry, and drama, not only expresses the complexities of sickness but also functions as a therapeutic tool, providing solace and understanding to individuals navigating the labyrinth of health and recovery. In essence, the symbiotic relationship between literature and medicine continues to reveal the common human experience, forming a bond that transcends time and improves both areas.

Medical humanities comprises a wide spectrum of scholars and theorists who study the intersections between medicine and humanities subjects. As per Arthur W. Frank, a sociologist and medical ethicist, renowned for his contributions to the medical humanities, particularly his work on illness narratives, there is transforming power of storytelling in the setting of disease in his notable works is the book titled "The Wounded Storyteller: Body, Illness, and Ethics," published in 1995. Frank's theoretical framework is built around the concept of "narrative ethics". He contends that people dealing with disease create narratives in order to make sense of their experiences and explain the complexities of their suffering. Frank distinguishes three types of narratives: the restitution narrative, which focuses on recovery and returning to normalcy; the chaos narrative, which depicts illness as a disruptive force that challenges one's life narrative; and the quest narrative, which emphasizes personal growth and finding meaning in the face of illness.

Similarly, Rita Charon, a physician and literary scholar, a well-known person in the medical humanities, having made significant contributions to the creation of narrative medicine by her book titled "Narrative Medicine: Honoring the Stories of Illness." Published in 2006 believes that interacting with literature and storytelling can considerably improve medical practice by encouraging empathy, understanding, and better communication between healthcare personnel and patients. She highlights the significance of narrative competency, encouraging healthcare personnel to listen to and interpret their patients' tales, realizing that these narratives include critical information for diagnosis and therapy. Charon claims that by incorporating storytelling skills into medical education, practitioners can create a more holistic approach to patient treatment, taking into account not just the biological components of illness but also the emotional and social dimensions.

Susan Sontag, a well-known cultural critic and writer, explored the intersection of disease, metaphor, and society in her famous writings, including "Illness as Metaphor" (1978) and "AIDS and Its Metaphors" (1989). Sontag's fundamental thesis is about the perils of metaphorical language and societal beliefs that stigmatise and mystify disease. She critiques the use of metaphorical frameworks to describe ailments, arguing that they contribute to the marginalization of those suffering from illness. Sontag advocates for a more straightforward and rational approach to understanding and treating diseases, emphasizing the importance of demystifying the language used to discuss them. Her work has substantially affected conversations on the cultural and linguistic dimensions of disease, challenging stereotypes and calling for a more compassionate and realistic discourse around the experience of being unwell.

Paul Farmer, a medical anthropologist and physician, is well-known for his work on global health inequities and social justice in healthcare. Farmer, a co-founder of Partners In Health, believes that access to high-quality healthcare is a fundamental human right and should be guaranteed regardless of socioeconomic position. His contributions underscore the interdependence of health, poverty, and social structures, emphasizing the importance of comprehensive, community-based approaches in addressing structural inequities in his work titled "Pathologies of Power: Health, Human Rights, and the New War on the Poor," published in 2003. Farmer's method, also known as "pragmatic solidarity," argues for combining medical care with social and economic support to address the underlying causes of health inequities. Farmer's work has had a considerable impact on the global health discourse, advocating for a more egalitarian and inclusive approach to healthcare delivery worldwide.

In the *Edinburgh Introduction to the Critical Medical Humanities*, Angela Woods and Anne Whitehead argue that the 'literary' is more than just a collection of works that meet the standards of prose, poetry, and fiction; it is also a critical perspective with a separate approach. (Whitehead and Woods 2016). The allied subject of 'Literature and Science' studies questions the culturally imposed, hierarchical divide between 'useful science' and 'useless literature' (Squier, 1999). In his famous essay collection, George Levine writes, "Literature and science, whatever else they may be, are modes of discourse, neither of which is privileged except by the conventions of the cultures in which they are embedded" (Levine, 1987). So, how can the different fields of literature and medicine be 'helpful' to one another? And why is the 'critical' approach of the current, 'second wave' of the medical humanities so vital in determining how to answer this question without decreasing or confusing the distinct analytical skills and knowledge that both disciplines have to offer (Bleakley, 2014)

Medical humanities is an interdisciplinary branch of study that combines humanities approaches with medical research, as well as an umbrella word that refers to a number of related fields. The latest growth of "critical" medical humanities seeks to criticize the previous wave's avowed humanism. Both doctors and patients occasionally remark that medicine appears to be nothing more than a collection of tools used to impact certain bodily parts, rather than an interaction between imperfect, complicated, and, ultimately, gloriously irreducible human beings. Medical humanities takes these emotions seriously. When viewed as a unique field of research and practice, it serves three critical purposes. First, as an academic area of inquiry, the medical humanities encourage the careful examination of medicine's human side, from its most obscure philosophical aspects to its most delicate and convoluted cultural and historical impacts. Second, the medical humanities embrace the connection of medicine and the creative arts, recognizing the numerous outstanding works of physician writers, filmmakers, singers, and artists. Third, there is a lot of hope in the medical humanities that focusing on human interaction and allowing for creativity - admitting enchantment - would result in more empathetic, capable communicators and better health results for patients.

## **Discussion**

There is a long history of poetry about doctors and medicine. Robert Southey's poem "The Surgeon's Warning" (1796) portrays doctors in a Gothic and sometimes grisly light. In it, a doctor on his deathbed is worried about how his body will be treated:

"All kinds of carcasses I have cut up,  
And the judgment now must be-  
But brothers I took care of you,  
So pray take care of me!" (Southey, 1796)

This is an image of the doctor as a monster, possibly deserving of the treatment he has given others' bodies (ultimately, "they carv'd him bone from bone" (Southey, 1796), and it echoes 18th-century suspicions about doctors and surgeons, as well as those who worked with them (grave robbers). Medicine (and its perception) saw enormous changes in the nineteenth and twentieth centuries, with Anne Sexton offering a more thoughtful perspective in "Doctors" (1975). She, too, has concerns about doctors, though they are less strange and more mundane: "If the doctors cure / Then the sun sees it. / If the doctors kill / Then the earth hides it." The grave is not a depository for stolen remains, but rather a location where doctors' flaws and errors are placed to rest. She says: "they work with gentleness/ and the scalpel" and that "they are only a human/trying to fix up a human." (Sexton, 1981, p. 465-66)

Some cynicism against doctors lingers in James Tate's "On the Subject of Doctors" (1991), in which the speaker describes doctors by their flaws: "Some of them smoke marijuana/ and are alcoholics, and their moral/ turpitude is famous: who gets to see the/most sex organs in the world? Not/poets." There's a sense that they're at risk themselves ("With the hours they keep / they need drugs more than anyone"), and the poem ends with a line about "the doctors, who are dying," but this knowledge is matched by a sense that they're ready to "grab all your money / just when you're down." Doctoring has evolved into a job with significant financial and cultural benefits, but it is also demanding. Doctors also write poetry to capture the fragility, tenacity, and universality of the human experience. This is not a new phenomenon; doctors have been writing poetry for as long as there have been doctors. In addition to expressing their own experiences, doctors use poetry to better understand their patients' experiences and to demonstrate their humanity to their patients.

Dr Rafael Campo, A physician at Harvard Medical School and the poetry editor of JAMA says: "When a cure isn't possible, when there isn't going to be another round of chemotherapy, or there isn't another procedure to perform, what do we still have to offer our patients?" The answer, found in poetry and other places, is "our own humanity." That can be extremely healing for patients." (Los Angeles Times, 2020) Doctors are now adding poetry in their treatment strategies. For example, Harvard medical student Danny W. Lingonegoro outlines a clinical study on the impact of music or poetry on cancer patients, claiming that "only poetry... increased hope scores." (The Novum, 2021) The researchers predicted that poetry could break the "law of silence," which dictates that discussing one's perception of disease is not permitted.

Finally, reading poetry can help doctors deal with their own emotional responses to their work. Colleen M. Farrell, M.D., describes integrating poetry into the ICU and reading it to her medical students. She goes on to say, "During rounds, we never realized how heartbreaking this man's condition was." But poetry provides an entry point, a permission slip to acknowledge the pain we feel vicariously and the helplessness we feel when medication has had its course." (Los Angeles Times, 2020)

Medicine does not exist in a vacuum, separate from the literature. Even poetry allows doctors and patients to reflect on medical practice and their own personal experiences with it. The present paper examines Plath's 'The Surgeon at 2 a.m.' and Sexton's "Operation" poems, which explore the normative and disciplinary aspects of medical practice. Plath and Sexton's 'clinical lyricism' in 'The Surgeon at 2 a.m.' challenges mainstream beliefs and power structures by depicting surgery as colonial or exploitative. The study argues that Sexton's and Plath's poems give a 'poetic phenomenology of patienthood' (Britzolakis, 1999) implying that medical discourse delegitimizes patients' experiences of surgical procedures by presuming scientific objectivity.

In Plath's and Sexton's poems, surgeons maintain their authority by assuming objectivity and disregarding patients' experiences. This process is expressed through images of colonization and surgeons' claim to transcendence. The poems discussed emphasize that cultural and social ideals and expectations shape what constitutes a healthy and acceptable body, rather than being based on objective scientific concepts. These ideals are not only ideological constructs, but also culturally and historically specific. This contrasts with surgeons' belief in an ahistorical truth. Sexton and Plath identify a paradox related to medical framework and the concept of bodily integrity. According to Deborah Nelson, the surgeon is a common figure in confessional poetry, particularly in Plath's work. These poems depict a forced transgression of bodily integrity. Opening up the body has enormous

ramifications for both ideological systems and artistic representations. (Nelson, 2006, p 33) Nelson argues that revealing the body's insides in surgery serves as a parallel for the confessional genre's poetic and rhetorical methods. Confessional poetry often addresses previously unspoken and 'taboo' details about the body. (Nelson, 2002, p 117)

This study argues that Plath's 'The Surgeon at 2 a.m.' and Sexton's 'The Operation' and 'August 17th' (from the 'Scorpio, Bad Spider, Die: The Horoscope Poems' sequence) highlight how the process of constructing bodily integrity through bodily breach is linked to ideologies and power structures. The analysis of Plath's 'The Surgeon at 2 a.m.', Sexton's 'The Operation', and 'August 17th' will examine the use of violence to conform to cultural norms of the healthy and whole body, which is viewed as the locus of the autonomous and self-same subject.

Sylvia Plath's 'The Surgeon at 2 a.m.' (1961) examines how clinical scenarios are rooted in power dynamics, particularly the surgeon's claim to transcendence. The surgeon's voice in the poem conveys superiority and authority. The poem's introductory line depicts the surgical setting as a metaphysical milieu, noting that the white light is artificial and as hygienic as paradise. The surgeon's perspective on the patient during a surgical procedure contradicts the notion that medical authority is transcendent.

“The soul is another light.  
I have not seen it; it does not fly up.  
Tonight it has receded like a ship’s light.” (Plath, 1961)

The patient is shown as having an innate essence, a 'soul', in contrast to the surgeon's artificial light. However, ascension, which represents metaphysical guarantee, is not granted. Furthermore, it is believed that the soul requires medical intervention to be saved. The patient's body is depicted as an untamed natural habitat, similar to a post-lapsarian Eden.

“It is a garden I have to do with—tubers and fruit  
Oozing their jammy substances,  
A mat of roots. My assistants hook them back.  
Stenches and colors assail me.  
This is the lung-tree.  
These orchids are splendid. They spot and coil like snakes.  
The heart is a red bell-bloom, in distress.” (Plath, 1981)

The surgeon suggests that restoring corporeal integrity through surgery can lead to metaphysical benefits. The emphasis on the soul creates a dichotomy between body and soul. However, the soul can only be 'redeemed' through medical intervention, highlighting the interconnectedness of corporeality and the 'self'. Plath's poem critiques the surgeon's claim to transcendence, despite his use of religious language to convey authority and mastery.

As Jacqueline Rose believes, the phrase "The blood is a sunset." And she argues: I admire it. | I'm up to my elbows in it, red and squeaking' serve “both to celebrate the surgeon's quasi-mystical talent and to lampoon its philosophical pretension” (Rose, 1991, p 134). The surgeon's violence is both literal and symbolic. It involves dismantling the body and inserting an artificial limb. It also represents the medical ideal of perfection, which requires disciplinary regulation and objectification of the body. The medical practice objectifies the body with analogies such as comparing the patient to a statue and references to ancient Roman architecture and beauty ideals. According to Tracy Brain, Plath's surgeon aims to discipline the body to create an orderly system, despite the patient's 'messy corporeality' with tubers and fruit oozing jammy things. (Brain, 2001, p 124) It rejects and challenges the concept of the 'clean and proper body' (Kristeva, 1982, p 73) as per Julia Kristeva.

The poem highlights the contrast between the human body's materiality and leakiness and the hospital's pristine, manufactured atmosphere. The hospital bed's 'pale marble' contrasts with the delicate blue piping used to collect the patient's blood. The surgeon's practice is based on the ideal of a lean, orderly body that adheres to the principle of the 'pale marble'. The surgeon's definition of the body as 'a Roman thing' aligns with the depiction of the completed body as a statue. The prosthetic limb a patient receives at the end of a medical intervention reflects the ideological and discursive underpinnings of the surgical operation. It is an unavoidable outcome of the surgeon's objectifying activity. Plath's picture questions both the physical and ideological aspects of medical practice. Michael Davidson cites references to ancient Rome:

Plath mocks the voice of a scientific rationality that gains legitimacy for its work by quoting from the classics. The surgeon's admiration for Roman civilization signifies his enlightened sense of power, one that he exploits by treating the body as a 'statue' or a work of art. By reifying the body into an object, the surgeon perverts an enlightenment ideology of progress, based as it is on references to Greece or Rome. (Davidson, 2004, p 189).

Britzolakis describes Plath's surgeon as a terrible character who seeks to colonize and subordinate others through dissecting and reconstructing their bodies. (Britzolakis, 1999, p. 92). Rose argues that Plath's depiction of the doctor embodies the worst aspects of masculine institutional and sexual authority, which she also expresses in other works (Rose, 1991 p. 134). Plath's depiction of a male patient going through a feminized medical procedure challenges gender stereotypes of power and passivity, colonizer and colonized according to Brain. (Brain, 2001 p. 124)

Sexton, like Plath, wrote several poems about medical issues, including 'The Abortion' (1962), 'The Operation' (1962), 'The Surgeon' (1972), and 'Doctors' (1975). The second half of this essay examines how 'The Operation' and 'August 17th' (1971) confront the ideological roots of medical intervention into individuals' bodies. Anne Sexton is a post-war American poet who most is known for her candid poetry. She developed severe syndrome following the birth of her first daughter. She experienced a severe period of suffering, which is represented in her poetry. Her poetry explore themes such as murder, suicide, death, menstruation, and carnal urges. During her sickness, she composed many poems, and she considered terminating her own life, as evidenced by her poetry. She was a determined woman, yet she still faced numerous personal challenges. She used her poetry to express her grief and suffering. As a confessional poet, she doesn't hide anything from her audience. She does not stop from tackling and expressing taboo subjects. She brought about a revolutionary change in confessional poetry by bringing previously taboo issues to the forefront. Her areas of interest include drug addiction, medication, sex, religion, fantasy, familial abuse, suicide, and death. There was rarely another woman in America who spoke so forcefully and fearlessly about such issues. Many critics think she has a crazy voice. Confessional poetry as a genre arose in the United States in the 1950s and 1960s. This genre was characterized as "personal poetry." The majority of her poems contain very autobiographical content, such as chartings on mental illness, sexuality, and suicide. She had initiated a war against depression in her personal life, which she depicts in her writings. She also exposes the intimate nuances of her family interactions.

Sexton's 'surgery poems' challenge doctors' authority and control over patients, comparable to Plath's critique of surgeons' transcendental claims. In contrast, Sexton's texts highlight how medical procedures can dehumanize patients and undermine their sense of self-worth. These operations also challenge the concept of bodily integrity. Sexton's poetry differs from Plath's as it focuses on the impact of medical practices on the female body. Her poems are more explicit than Plath's in addressing the power structure in surgical procedures, but equally effective. Sexton's poems about the medical profession focus on the authority and mastery that practitioners have over bodies and knowledge. In 'The Operation', the patient's emotional response to hospitalization and operation clashes with the surgeons' and nurses' scientific approach. The phrases "No reason to be afraid, | my almost mighty doctor reasons" (Sexton, 1981, p 56). The speaker's confrontation with the nurse follows a similar pattern:

“she brings two mysterious needles: the skills  
she knows she knows, promising, soon you'll be out.  
But nothing is sure. No one. I wait in doubt.  
[...] At ten  
she returns, laughs and catalogues  
my resistance to drugs.” (Sexton, 1981, p 67-69).

The nurse's practice is portrayed as possessing skills and objective knowledge, in contrast to the patient's view of needles as "mysterious." The nurse's confidence in her practice and ability to heal contrasts with the speaker's concern about the surgical process. The nurse's reaction to the patient's "drug resistance" weakens the speaker's standing in the medical framework. The nurse is only interested in how the patient's body reacts to medications if it gives useful information. Sexton's medical practitioners, like Plath's 'The Surgeon at 2 a.m.', claim both scientific and spiritual competence. Sexton's poem on the medical setting differs from Plath's in that it uses the patient's voice instead of the doctor's. This approach highlights the impact of medical interventions on the patient and makes the situation more relatable to the reader. The surgeon is alluded to as a 'nearly tremendous doctor' from the first stanza, and the medical setting throughout the poem emphasizes metaphysical dimensions. The speaker's description of "two pillows at my elbows, as soft as praying cushions" (Sexton, 1981, p 109-11) implies that the hospital environment is a place of comfort and healing. However, most images that connect the medical and transcendental depict the medical scene as a source of suppression and threat. The speaker discusses the surgical procedure in the following manner:

“The great green people  
stand over me; I roll on the table  
under a terrible sun.” (Sexton, 1981, p 72-74).

Sexton describes the doctors' light as possessing transcendental properties, but it does not offer salvation and instead poses a threat of destruction and annihilation. The nurses are depicted as 'starchy ghosts' (Sexton, 1981, p 95) hovering over the speaker, implying that the presence of the transcendental-spiritual does not always provide comfort. On the contrary, it can be positively disturbing. In 'The Operation', the speaker describes how anaesthesia causes her to float over her own skin, like an angel. The speaker's paleness resembles the angels' whiteness, but their ethereal presence suggests a disembodied and transcendent state created by anaesthesia. This figuration highlights the separation between body and spirit, which is central to religious discourse and the Cartesian self. The speaker's soul leaves her body and hovers over other patients in the hospital before returning to her body.

“I plunge down the backstair  
calling mother at the dying door,  
to rush back to my own skin, tied where it was torn.” (Sexton, 1981, p 79-81).

The speaker's primary trauma from surgery is a loss of control and ownership over her body. Courtney S. Campbell argues that medical practice raises the question of whether the human body is private property and if individuals own it. He says: “we cannot avoid questions about whether the human body is a form of private property and whether persons own their bodies” (Campbell, 1992, 34).

According to Sexton's poetry, surgeries take away patients' sense of ownership, which is a tremendous disruption to the body. She explores how surgical procedures lead to a loss of ownership over one's body, as well as how medicalization processes objectify the body. Her hospital poem 'August 17th', part of the 'Scorpio, Bad Spider, Die: The Horoscope Poems' cycle from 1971, illustrates a similar dynamic. The poem depicts the hospital as an unpleasant environment where patients become more machine-like and merge with mechanical and inorganic materials:

“Bodies made of synthetics. Bodies swaddled like dolls  
whom I visit and cajole and all they do is hum  
like computers doing up our taxes, dollar by dollar.” (Sexton, 1981, p 603-604)

In Sexton's poetry, the presence of inorganic elements represents the dissolution and collapse of the body caused by aging. The speaker argues that the incorporation of inorganic components into the body leads to the loss of youth and physical health, but does not provide a viable alternative form of living. The surgeon's intervention in a deteriorating body is portrayed as ineffective and temporary.

“Each body is in its bunker.  
The surgeon applies his gum.  
Each body is fitted quickly into its ice-cream pack  
and then stitched up again for the long voyage back.” (Sexton, August 17th, p. 37-40).

This implies that neither surgery nor machinery can save the body from dissolution. The image of the doctor 'apply[ing] his gum' mocks the clinical attempt to restore body health, portraying it as a trivial and childish endeavour. Sexton's poem discusses how surgical intervention mechanizes the flesh and dehumanizes people. This image highlights the tension between how 'unhealthy' bodies are viewed in relation to their function in the national body. Ill and elderly individuals are considered unproductive in economic terms, and medical assistance is seen as a drain on national resources. In contrast, patients in the poem contribute to the nation's economy by "doing up our taxes, dollar by dollar." (Sexton, August 17th, p. 34-36).

Sexton's poems explore the impact of medicalization on national-economic concerns, as well as the social backdrop of corporeal and intellectual normalization. The speaker in 'The Operation' portrays the patient-doctor relationship in the healthcare setting as regulated and exploitative. The speaker describes her medical experience using images of vulnerable and injured animals. When a woman's hair is removed before surgery, she is referred to as a "shorn lamb" (Sexton, 'The Operation', 1981), who is often exploited for economic purposes. The first stanza's depiction of the gynaecological examination prior to surgery best captures the sense of duress in the medical scenario.

“I come to this white office, its sterile sheet,  
its hard tablet, its stirrups, to hold my breath  
while I [...] must allow the glove its oily rape.” (Sexton, 1981, p 56)

The speaker's use of the phrase "must allow the glove its oily rape" implies that the gynaecological examination is linked to sexual power dynamics. According to Foucault, disciplinary methods can modify and improve a submissive body when he says: "a body is docile that may be subjected, used, transformed, and improved" (Foucault, 1977, p. 136) through disciplinary procedures.

## Conclusion

To conclude, Plath and Sexton's poems on surgery highlight the strategies of submission and normalization used during clinical operations. Regulating the body to adhere to cultural and social norms of integrity and health is necessary to achieve desired improvements. Their poems suggest that medical practices, including surgical procedures, can reshape bodies and identities to conform to Western ideals, despite claims of ethical care. Eliminating deviance and openness creates a bounded body, ensuring self-same, autonomous individuals. However, Sexton and Plath do not only raise our attention to the pervasiveness of the discourses of normalisation and regulation that underlay the clinical setting. The authors undercut the authority of medical practitioners by emphasizing that, despite their claims of transcendence, surgeons and doctors are only human beings attempting to help others.

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