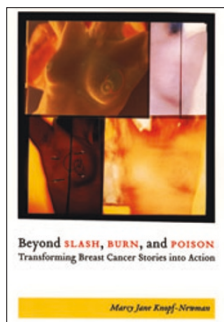


Raising voices, changing lives



Beyond Slash, Burn, and Poison: Transforming Breast Cancer Stories into Action

Marcy Jane Knopf-Newman

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Reviewed by Carolyn Kaelin

Can a single voice propel significant medical and social change? Perhaps not all alone, yet in *Beyond Slash, Burn, and Poison: Transforming Breast Cancer Stories into Action* author Marcy Jane Knopf-Newman persuasively explores the cumulative impact of several strong voices. Behind the arresting book title—a pungent bit of prose borrowed from African-American lesbian poet Audre Lorde—lies the breast cancer experiences of four women. Knopf-Newman ably presents their stories in chronological order, delving deeply into how their treatment reflected the culture of their eras and how their responses to treatment hastened cultural evolution.

Her first subject is Audre Lorde, the author of many works, including *The Cancer Journals*. Lorde explored the differential in exposure to the carcinogenic effects of environmental toxins between poor and affluent populations. Further, she challenged white, heteronormative assumptions that a woman's body should always be restored to its preoperative state after a mastectomy through breast forms or reconstructive surgery. The next subject is Rachel Carson, author of *Silent Spring*, the 1962 landmark book on the rippling public health implications of the ecological havoc wrought by humans. Carson purposefully chose to keep private her battle with breast cancer, a battle she feared would call into question her objectivity as a scientist. First Lady Betty Ford took a very different path in 1974. In the wake of the secrecy surrounding Watergate and with President Ford's promise to disclose all matters public and private still ringing in the air, Mrs. Ford deliberately disclosed her breast cancer diagnosis and single-step biopsy-plus-radical mastectomy. Her surgery preceded by days the end of the NSABP B-04 trial, which observed that simple and radical mastectomies were equivalent for women in all but their physical impacts, thus paving the way for public discussion of breast cancer and validating less extensive surgeries. That same year, feminist Rose Kushner was treated for breast cancer, too. Kushner's writings and testimony before Congress brought about a sea change in which the one-step biopsy-to-mastectomy was separated into a two-step procedure.

Knopf-Newman is forthright in describing her relationship with breast cancer. She witnessed her mother undergo a first mastectomy, chemotherapy and radiation and, later, a second mastectomy. Ultimately, her mother had a bone marrow transplant in an unsuccessful effort to treat metastatic disease.

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Quoting her mother and the diaries and letters of other women treated for breast cancer, the author describes the breast as surgically amputated, mutilated and disfigured, and the aftermath of a mastectomy as assaulting patients to their emotional cores. Will such descriptions evoke a sense of discomfort in those who care for women with breast cancer? Surely yes. Yet these strong words stand as important reminders that our efforts to treat and cure this disease exact real and perceived debilities upon body and mind.

Laced throughout the text are notable historic accounts. As a surgeon, I was most delighted to read about surgeon Dr. George Crile, who, as early as 1955, challenged the necessity of the Halsted radical mastectomy. Crile himself abandoned this procedure in favor of a modified or simple mastectomy that left essential muscles untouched and helped pioneer breast-conserving surgery widely known as lumpectomy. Furthermore, he was the first to bring medical information to a lay audience through his early writings for magazines, including *Life*, and later wrote the book *What Women Should Know about the Breast Cancer Controversy*. Most controversial was his public disclosure of fees paid based upon the extent of surgery, a topic Knopf-Newman further explores by describing the 1946 post-World War II Hill-Burton act, which provided federal funding for the construction of hospitals throughout the country and encouraged insurance companies to combine a diagnostic biopsy with a therapeutic mastectomy in a single-event procedure. Sadly, his first wife, Jane Halle Crile, was treated with a mastectomy and died in 1963 of her disease—a fact used in attempts to discredit Crile's objectivity as a researcher and physician. Like so many others in the book, including the author, a deeply personal experience formed the catalyst for public disclosure and action that ultimately empowered women to take an active role in their own health care.

No book is without flaws, of course. Acknowledging my surgical biases, I would have appreciated a more clear connection between the time sequence of the NSABP B-04 trial (subject accrual, closure of trial, peer-reviewed publications) and the treatment of the key women cited, particularly Betty Ford. Also, describing the changing scientific understanding of the biology of the disease—from a stance that it spread regionally (thus, the need for a radical mastectomy to excise the extensive lymphatic network) to an understanding that cancer may be disseminated systemically before surgery—would have fully rounded out the discussion.

Seventeen pages of footnotes hold fresh perspectives not fully explored elsewhere in the book. Included is a thought-provoking inquiry titled "Shopping for a Cure," which openly questions whether pink-ribbon initiatives have shifted public focus from awareness and activism to fundraising and consumerism. By the time the last page of *Beyond Slash, Burn, and Poison* is turned, readers will have acquired significant knowledge and may well feel compelled to further explore the topic through additional resources and readings. How upsetting or uplifting the journey is may lie in the eye of the beholder. Certainly some women diagnosed with breast cancer might best appreciate the information and message after their active treatment is over and their emotional recovery is well underway. Yet Knopf-Newman presents an essential, sometimes discomforting perspective on breast cancer, which physicians, nurses, social workers, government officials and some in the media would do well to reflect upon. By challenging comfortable cultural constructs surrounding breast cancer, her book may succeed in persuading readers to change trajectory, perhaps slightly, perhaps radically, in the way we think and move ahead with our lives.