

The Effects Of Aging

It's in our collective power to determine how far access to employment, education, and social opportunity is affected by physical disability. Yet even this remains simplistic. To be deprived of access to something good, I've argued, is not by itself to be denied a flourishing life. It's something all of us experience and will endure, increasingly, as we age. But there is another side to many disabilities, and to many forms of illness. Along with the absence of ability, there's the presence of physical pain. The surveys that show that life with a disability is less grim than we might suppose also indicate exceptions. The same breakdown applies to the effects of aging. We'll touch on fear of death when we turn to grief and hope. But I have a history with pain and, acknowledging its idiosyncrasies, I can write about its place in an otherwise fortunate life. Now living in Brookline, Massachusetts, I went to see a third urologist. Although it was much easier than the first, I couldn't bring myself to look at the endoscopic images in real time. She had seen significant inflammation, she said, and proposed a transurethral surgery to correct it. My reservations brought me to urologist number four, who advised that surgery might cause serious complications and offered instead a prescription for antibiotics that I could take when symptoms flared up. It took a few good months for that to happen, at which point I popped the pills, to no apparent effect. Six months further on, during my worst and most relentless phase of pain, including stretches with no sleep at all, I made it to the office of a fifth urologist, whom I still see. I was right to avoid the surgery, he said, but antibiotics wouldn't help. But he was the first doctor I'd seen who took my experience seriously, confessed that it was difficult to treat, and talked me through the discouraging prognosis. The procedures caused the most sustained and searing pain I have ever experienced, but taught us nothing of use. That pain is bad for you may seem too obvious to warrant scrutiny. But I find myself wondering why it is so bad, especially in a case like mine, where the pain I feel from day to day is not debilitating. What more is there to say about the harm of being in pain? Virginia Woolf may have invented the commonplace that language struggles to communicate pain. It is not of or for anything. It is precisely because it takes no object that it, more than any other phenomenon, resists objectification in language. But as someone who lives with pain, I know that Woolf and Scarry are wrong. And we have many words for the quality of pain. No one's pain is so special that the devil's dictionary of anguish has not anticipated it. What about the pain an amputee might feel in a body part that they don't have? What about my pain, which doesn't reflect objective damage or duress where the pain appears to be? The fact is that while pain is the appearance of bodily damage or duress, the appearance can be illusory. That doesn't mean the pain isn't real, or doesn't have referential content, just that it misrepresents one's body. This gives rise to a curious reflexivity, the sort of thing philosophers love. Deceptive pain is the most meta of pains. It misrepresents a part of the body as damaged or in duress. It's telling you that something's wrong, when nothing is actually wrong. But that very discrepancy means that something's wrong! So while it mislocates the damage it represents, deceptive pain is never wholly deceptive. You can't be in pain without pathology. Pain doesn't make that mistake. This is how it disrupts our lives. Pain draws attention to itself, taxing our capacity to engage with the world, to enjoy what we are doing, or to disengage entirely through sleep. Whatever activities we've picked from the plurality worth pursuing, pain interferes with our immersion in

them. At the limit, when pain is overwhelming, the spotlight of awareness shrinks until there is nothing else. When we are healthy, we rarely experience our bodies this way. We feel through them, directly aware of the objects and people with whom we interact, barely conscious of the intricate physical means by which we do so. If she focuses on her fingers, the performance is likely to crash. Pain draws us back to our corporeality. No longer simply a 'from' structure, writes the philosopher and physician Drew Leder in *The Absent Body*, the painful body becomes that to which [one] attends. Descartes is floundering here. How can an immaterial soul intermingle with the flesh and blood of a human being? The contrast he wants to draw does not make sense within his framework of mind and body as wholly distinct existences. Pain shows us that we are not minds somehow tethered to bodies but are essentially embodied. In part, I hope, the solace of being seen and understood. It is easy to feel like the only one, imagining the pristine lives of passersby. Pain is often invisible. There's further solace, of sorts, in the transparency of health, what Leder calls the absence of the healthy body. In the distracting grip of pain, I sometimes feel that I want nothing more than to be pain free. Simply to be at ease, to feel physically well for once, would be the pinnacle of bliss. The feeling is real, but it's one of pain's illusions. For almost as soon as pain is gone, the body recedes into the background, no longer drawing focus, and the anticipated bliss dissolves. The joy of being free from pain is like a picture that vanishes when you try to look at it, or a fabric so soft that it creates no friction and so is nothing to the touch. Attempting to dwell on the absence of pain is like turning on the lights to see the dark.