

Sickness and Love

“Une médecine dans le corps et cent sottises dans la tête”

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*This essay on ‘sickness and love’ is an exploration of various approaches to the theme of ‘Sickness and Love’, which will be the subject of the symposium *Medische Antropologie* is organising on 14th December 2007. The link between sickness and love is looked at from two opposing angles. On the one hand, biomedical and psychological approaches use sickness as a metaphor for love. On the other hand, sickness and love show the possibilities of a reflective approach through narratives. Both approaches serve different purposes. The first is focused on understanding the nature and uniqueness of love. The latter questions what combining love and sickness adds to a better understanding of sickness, love and those elements of life that escape scientific categorization. An anthropological approach closely tallies with the latter view and offers insights into experiences where love and sickness meet.*

[love, sickness, neurobiology, psychology, anthropology, narratives, condition humaine]

In one of his many love letters to his niece and mistress, Madame Denis, Voltaire expresses his feelings for her in terms of sickness and love : “Toujours malade, et toujours occupé de rien... je vous écris à présent en me rasant et en dictant ma lettre avec une colique horrible, une médecine dans le corps et cent sottises dans la tête.”¹ In this letter Voltaire describes himself as a patient suffering from a colic, a disease which was at the time known to be caused by passion. He says that he is taking medication, admitting that the real cause of his ailment is that he is crazy in love with someone 23 years younger than he. He is suffering from his mental turmoil – his ‘cent sottises dans la tête’ – rather than from his physical complaints. Voltaire suffers from the sickness called love.

The tradition of linking sickness to love is as old as love itself and has continued up until the present day. Plato for example considered in *Phaedrus* the sudden overthrow of reason associated with falling in love as being an expression of madness. The intertwining of love and madness is a recurrent theme in Shakespeare’s theatre.



Marlene Dumas.. *Chlorosis (Love sick)*. 1994. Ink, gouache, and synthetic polymer paint on paper; each sheet 26 x 19 1/2" (66.2 x 49.5 cm).

Robert Burton devoted one of his four sections of *The anatomy of melancholia* to the melancholy of love, describing at length the so called symptoms of falling in love. In the 19th century, women diagnosed as ‘hysterical’ were supposed to suffer from unrequited love. Bob Dylan celebrates his love sickness in a song: “I’m sick of love but I’m in the thick of it. This kind of love I’m so sick of it”. Gabriel Garcia Marquez in *Love in the Time of Cholera*, uses a disease as a metaphor for a love that has been repressed for half a century. The South African artist Marlene Dumas presents love-sickness in collage of twenty-four portraits. The title of the work “Chlorosis” comes from the Greek word for light green, and describes an anaemic disease marked by a characteristic green skin tone. Chlorosis, or greenskin, was considered a sickness caused by the intense suffering provoked by unrequited love.

These examples illustrate how through the ages sickness and love have been conceived as inseparable. They demonstrate that sickness and love can be studied from different approaches: philosophy, medical history, literature, anthropology and art. In addition, these examples reveal the causal relation between sickness and love, as it can be perceived from different perspectives: is love causing illness or is love an illness and if so, what kind of illness is it? Among others, these questions will be discussed at the forthcoming conference of *Medische Antropologie* on ‘Sickness and Love’.

This essay will describe two opposing approaches to ‘sickness and love’: as an explanatory model for love; and as a reflection on the elusive nature of love and sickness. The first appears in the biomedical and psychological theories on love. The latter emerges in reflections on sickness or love in the arts, literature and the humanities. I will argue that the combination of sickness and love does not have an explanatory but a reflective function. Insofar as the junction of sickness and love is seen as a narrative

practice, this strange combination of sickness and love reflects on life itself, as it can be experienced in love or illness. I will illustrate this with some love stories that are painfully close to stories of illness, and with illness narratives dealing with love. I will illustrate this with a few examples of an anthropological approach to the way sickness and love may be interconnected. In sum, this article aims to both draw a map of and act as an appetizer for the fascinating but complex theme of the symposium: sickness and love.

Love: une médecine dans le corps

In 1980 Gerard Nijboer won the marathon of Amsterdam in a remarkable time record. The circumstances for this physical performance were good: it was beautiful weather, thirteen degrees and a slightly backward wind. According to Nijboer his victory had another reason. He was in love. '*Love gave me wings*', was his own explanation for his spectacular achievement.

It is well known that the wings of love do have physical effects. Since the 1970s, science is beginning to pay more attention to the chemical storm that romantic love can trigger in our brains (Fisher 2004, Tallis 2004). One of the most important chemicals to be released in case of love is Phenylethylamine, an amphetamine-like compound that raises mood and energy levels and it is thought to be responsible for higher physical achievements. This chemical in the brain induces the production of all sorts of hormones such as dopamine, adrenaline and noradrenaline (Tallis 2004: 221). According to Tallis, the combination of 'stimulating' chemicals in the brains engenders a state of excitement comparable to an exhilarating rush. Seen this way, Nijboer did not win his marathon on the wings of love but on a shot of love chemicals. This theory is helpful in understanding why the biochemistry of love is often compared to an addiction (Tallis 2004: 215-237). Love could be addictive, not so much because people become addicted to their beloved, but because they are addicted to the kick the 'chemistry of love' causes. Tallis reckons that the sudden decrease in the Phenylethylamine-levels are responsible for the crash that can be caused by heartbreak. He phrases it as a sharp comparison: "... the deep distress of the broken-hearted bears close comparison to the addict's 'crash' into the abstinent hell of 'cold turkey'" (Tallis 2004: 221).

Tallis argues in his book *Love sick* that love is not only *comparable* to physical sickness. According to him love *is* an illness because it is strongly associated with a wide range of physical 'symptoms'. Lovers are often described as fevered, or pale and depleted – unable to sleep or eat. More precisely, he is convinced that love is a mental illness. Although he elaborates this statement in more detail in his book, on his website he focuses on the main arguments (www.franktallis.com):

The symptoms of love are many and varied. What's intriguing is that if we list them – for example, preoccupation with the loved one, tearfulness, euphoria – and check them against accepted diagnostic criteria for mental illness, we find that most 'lovers' qualify for diagnoses of obsessional illness, depression or manic depression. And this is no superficial relationship. Neurochemical and brain scanning investigations have

shown a considerable overlap between ‘the brain in love’ and ‘the brain in the throes of mental illness’.

Tallis presents his premise that love is an illness as a universal truth. Examples of similar observations in the early writings of the ancient and classical world, extensive accounts of the ‘pathological’ reactions and forms of love, detailed descriptions of many experiments and numerous references to the DMS IV, are used to substantiate his statement that love is a mental illness.

However attractive these explanatory models for love may be, there are some criticisms to be made. Although Tallis emphasizes that illness is a metaphor for understanding love, the impression is nonetheless that love is a disease in the medical sense of the word. Although the so called symptoms of love are largely physical, love is presented as an illness – a subjective sensory experience – rather than a disease. If the euphoria caused by love’s biochemistry is called an addiction, it is a cheap and innocent one. Defining love as a mental disease might be illuminating in order to grasp the elusive nature of love. However, when love is portrayed as being similar to a broad range of mental disturbances such as depression, mania, and psychosis, the comparison is hindered by the wide range of (mental) illnesses which would correspond to love.

If love were a disease, it would be a particularly strange one. The neurobiological explanations stress how this particular biochemical cocktail has a stress-reducing and health-promoting potential. The longitudinal research into the link between love and health by Russek and Schwartz (1997) for example, indicates that the prevalence of coronary artery disease, hypertension, duodenal ulcer and alcoholism in midlife was 40 percent lower when people perceived themselves as having a warm relationship with their mothers. These theories suggest explaining the nature and the functioning of love. However, they only offer explanatory models for the effects of love on the physical and mental capacities and on general wellbeing. They want us to believe that love and illness are totally understandable and manageable. Still, this simplification of the complexity of love reduces the rich and subtle experience of love to one single interpretation, the medical one.

Love: Cent sottises dans la tête

Unlike the biomedical approach which searches for the chemical nature of love, the social sciences approach the same subject focusing on cultural aspects. These are to be found in mythological stories, fairytales or philosophical treatises on love, which are passed on from generation to generation and in anthropological descriptions.

Artistophanes’ discourse on love in Plato’s *Symposium* is no doubt one of the founding texts of Western thinking about love. According to this allegory, man was originally a hermaphrodite creature with four hands, four legs and two heads, each looking another way. This ‘person’, the story goes, became so powerful and arrogant that Zeus decided to split ‘him’ up. Since then, mankind is doomed to forever search

his/her opposite half in love. Plato's tale expresses the deeply human longing to unify with one's beloved, a central idea in Western conceptualizations of love, which is not unproblematic and sometimes even sickness inducing.

If this idea of the unifying love could ever be realized, the lover would become the same as the beloved, and the beloved would dissolve in the lover. Such a love would not bear any shortcoming nor any blemish. In *Liefde in tijden van eenzaamheid* Paul Verhaege (1998: 72-73) points out some of the problematic effects of such a love. According to him, it can lead to a paranoid need for certainty that one is truly the one and only possible lover for one's partner. Such a love can equally result in a continual neurotic doubt about one's capacities to do well, to be good enough. This can result in jealousy to the extent one believes that the other is the beginning and the end of everything. Finally, such an all-absorbing love can induce depression when the person suffering is convinced he or she is not good enough to be loved.

The 'pathological' danger of such an 'absolute' love comes from the risk of losing oneself in order to maintain the ideal of a unifying love. Murphy describes in *The Dance of love* (2003: 85-86) how a strong belief in the 'oneness' of the ideal love turns out to be pathological. The love of the narcissist for example cannot contribute to the common world between lovers. To be in love with oneself implies that one is not able to start building a common world with the lover. Another pathological love, is what Murphy calls the love of the 'gift-giver' who believes that love is the product of a gift relationship. In this kind of love, the lover suffers from a distorted idealization of his relationship. Therefore, he is willing to give one-sidedly in order to maintain this illusion. One could say that he gives his soul away in return for love.

Obsessive love, stalking, and smothering maternal love can all be considered to be forms of such a total love. According to some psychoanalytical insights, this structure is also well recognizable in some forms of romantic love. According to this theory, love goes hand in hand with an array of contrasting— and sometimes 'pathological' — feelings that ride with us on the journey of love. More precisely, psychoanalysis investigates love in relation to dominance and submission, abandonment and engulfment, attachment-separation and a dependence-independence struggle. Psychoanalysis has shed a light on the hidden ways in which human love is laced with ambivalence.

Psychoanalysis takes the pathological dangers of love very seriously, without promising an ever-lasting solution for love difficulties. According to this theory, the 'cent sottises dans la tête' are part and parcel of love that turns love into a complicated and in some cases impossible or even sickness-inducing experience.

Apart from psychoanalysis, there has been a growing interest in psychological research into love since the 1950's. That interest takes a totally different point of view, however. The psychological models of love are in a way more ambitious than the psychoanalytical ones as they attempt to master the ambivalence of love by identifying different types of love.

The first extended typology explores the nature of love from a Christian perspective. In 1960 C. S. Lewis published *The Four Loves*. He divides love into four categories, based in part on the four Greek words for *love*: affection, friendship, eros, and charity. Although Lewis' work has been influential, it implies a valorisation of

types of love. Eros, with its bodily lusts and sensory pleasures, is clearly less valued than friendship, which is seen as far more dignified. No doubt, Lewis' religious background can account for this moral classification. More important is the fact that Lewis sets the tone for psychological classifications of love including the connotation of love and sickness or abnormality within a fixed typology. Unlike in psychoanalysis, where the ambivalence of love is part of the phenomenon's essence, in these classification systems sickness and abnormality are a matter of gradation. John Lee, for example, made a classification of love through examining descriptions of love in fictional and nonfictional accounts. He differentiates six different 'love' styles: Eros (romantic), Storge (friendly), Ludus (playful), Agape (selfless), Pragma (pragmatic), and Mania (manic). Lee did not intend to qualify the different styles. In practice, it seems that these styles are used in popular psychological tests in order to 'identify' what kind of lover you are. Furthermore, based on their love profile, lovers can be given advice how to improve their love life (Van Tilburg 1994). Implicitly, this classification contains an inherent moral judgment for the classification suggests that there are better and worse styles of love. One has to try to eliminate the poor aspects in a relationship, in order to achieve a 'healthy' and 'balanced' relationship.

Lee's taxonomy was followed by many others, whereby the concept of love is repeatedly divided up into various types in order to grasp the complexity of love. However detailed and differentiated all these concepts of love may be, no single typology is convincing enough for people to recognize themselves fully. Taxonomies of love reduce the complexity of love to three, six or however many labels. To suggest that love is a univocal concept is inadequate because love has more facets than one single word can capture.

In the practice of relationship counselling, however, such theories are attractive. Partly because of their simplicity, they are well suited to determining what sort of lovers partners are. It is used as a diagnostic element to correct disturbed relationships. Within this context, love becomes malleable and controllable and therefore adjustable. It seems necessary for a 'healthy' love life to understand one's own love style. Here, a healthy and happy love life is to be pursued through self-knowledge and empowerment. Pushed to extremes, the despairs of love can be seen as pathological, demanding a remedy. This point of view is becoming more and more popular. Recently, a hospital clinic for the broken-hearted has been set up in Germany. They give emergency treatment to those who have been dumped. Set up by Munich-based Dr Birgit Delisle, the clinic in the Schwabing Hospital is aimed primarily at love-sick teenagers who do not know how to cope with a broken heart. Apparently, there is a medical solution for every existential problem, even for the 'cent sotisses dans la tete'.

Both psychoanalysis and the love typologies are attempts at a better understanding of the unintelligible and mysterious aspects of love. Psychoanalysis insists on the ambivalent nature of love as well as on the close relationship between sickness and love. Conversely, the psychological classifications of love quantify the incommensurable qualities of a specific relationship. Love counselling aims to develop a 'healthy' relationship whereby the norm of health is personified on the basis of the ideal combination of love styles, excluding any forms of abnormality.

Biomedical explanations versus psychological interpretations

In seeking to answer the question 'what is love', biomedical explanations as well as psychological interpretations rely on an apparent concept of sickness. In the biomedical explanations, love is compared to a medical disease. In that case, love is the unknown factor that can be explained through a comparison with a well known concept, i.e. disease. In psychological love theories there seems to be a fixed 'norm' to determine when a love can be marked as 'pathological' and in need of counselling. In both cases, love and sickness are regarded as functional concepts. In the biomedical approach to love, the concept of a disease is supposed to explain how love works. In the psychological love theories, the concept of 'unhealthy love' is a qualification of a certain type of love. In these different contexts, the meaning of 'sickness' varies from a very specific mental illness to some vague references to a condition of 'abnormality'.

A clear conceptualization of disease is missing, however. It is not clear in what specific situation love is compared to a disease in the medical sense of the word or to a personal experience of being sick. Nevertheless, according to these theories, the metaphor of illness/disease may illuminate the nature of love, but is unable to understand the ambiguous and complex experience of either sickness or love. In particular, the mysterious aspect of the love 'affecting' people, 'afflicting' them, and moving them is not unveiled in these comparisons between love and sickness. Apparently, the secret of love is not so easily unravelling. This type of research is not always appreciated by everyone either. The American senator William Proxmire from Wisconsin was vehemently opposed to scientific research into love. In 1974 he led a public campaign against such research: "I believe that 2000 million Americans want to leave some things in life a mystery" (Van Tilburg 1994: 11).

Love stories: reflections on 'sickness and love'

Since early times, literature and poetry have had the privilege of reflecting on sickness and love. Reflective disciplines such as philosophy or anthropology have as well their specific merits on this subject. They are not so much concerned with determining the specific relationship between the concepts of love and disease. Rather, they focus on the questioning of how the similarities and differences between sickness and love can lead to a better understanding of what life with illness and love might be like.

Both love and illness are narrative experiences. Narratives of all sorts are providing these experiences with a particular meaning. They are reflecting on what life might be like, in case of illness or love.

As meaning is not predetermined but forever sliding around, stories describe the experience of sickness or love in a shifting world of meaning. In addition, experiences of sickness or love in humans are never a simple given fact because they change through time. An innocent love may grow into an obsession. Or a love affair may become totally disturbed when other things in life, such as illness, test a relationship. Even happy loves may become a huge strain and make people deeply depressed. In

that case, love becomes a true illness. The same goes for the so called 'love diseases', like syphilis or AIDS. Put simply, there are as many sorts of love stories as there are loves, and they are as diverse as the experience of illness.

Julia Kristeva (1983) names her reflections on love in Western thought 'histoires d'amour', tales of love. *Histoires d'amour* presents itself as a compendium on love as it appears in a broad variety of systems. She refers to her study on love as a "contribution to the elaboration of the history of subjectivity as it is evinced in various discourses of love" (1986: 167). According to her, love is not a fixed and monolithic entity, but rather an ever-changing product of people and cultures. This approach perceives stories as cultural reflections on the question of how love and sickness might match together. In particular, the ways in which 'love and sickness' and 'sickness and love' are combined provide us with an insight into people's ideas on sickness, love and living with these phenomena.

Illness accounts and love stories are naturally the most obvious materials to study the link between sickness and love. There are many other discourses that express a particular relation between love and sickness as well. Medical historical sources on, for instance, hysteria can offer valuable insights into the combination of love and sickness (see among others Micale 1995). Elaine Showalter's study on *Hystories* (1997) is, therefore, a reflective work on sickness and love. Roland Barthes' meditation on love *Fragments d'un discours amoureux* (1977) describes various facts, feelings, fears and thoughts engendered by love. Each passage, every paragraph refers to illness without labelling it as such. In this way these 'notes on love' make an intriguing reflection on 'love and illness'.

Conversely, all love stories could be regarded reflections on 'love and sickness'. Hence, all illness narratives could be regarded as reflections on love and illness. The great philosophical treatises on love as well as the life histories of ordinary men and women who recount their experiences have their own reflective capacities. Reflections are also to be found in published autobiographies of people describing their experience of sickness interfering with their loves. Happy histories of people who found love in illness also reflect on love and sickness. The little anecdotes of people recounting ordinary and not so ordinary heartbreaks in Sophie Calles' performance *Exquisite Pain* and great illness novels, such as Thomas Mann's 'Death in Venice', *The black Swan* or *The Magic Mountain* are cases in point.

In sum, most narratives referring to love or illness are sources of reflection on sickness and love. Interestingly, in the database 'Literature and Medicine' of New York University School of Medicine practically the whole collection of illness stories is catalogued under the keyword 'love'. Apparently, all kinds of discourses and stories touching upon illness can be regarded as what Kristeva calls 'love stories'. They all have in common that both love and sickness are set in the context of life itself. The specific combination of sickness and love in each of these 'love stories' causes reflection on whatever it is that places sickness and love outside the grasp of popular explanation or medical categorization.

Perspectives on 'sickness and love'

Such an approach makes it possible to study a wide pallet of possible links between sickness and love. One 'obvious' combination of love and sickness is of course love sickness. Love hurts when it comes to an end. It is a recurrent theme in poetry, literature and film. In the past, in Arab medicine, lovesickness was taken very seriously. Murad (2001) for example describes in *Le mal d'amour dans la médecine arabomusulmane* how lovesickness used to be considered a cause of physical illness.

Unfulfilled or unrequited love can also be regarded as a form of lovesickness. 'Hysteria,' as we have seen, is a famous example. Eating disorders can also be regarded from this perspective, as bestseller author Geneen Roth (1992) does in *When Food Is Love*. He argues that compulsive eating is 'acting out behaviour' showing up the need for intimacy that the sick person does not admit to consciously. Expressions such as 'being madly in love' and 'love crazy' also convey this experience. Extreme longing for a beloved person is an ambivalent feeling, exciting as well as exhausting. If the object of love is unattainable, it can be very unpleasant, with feelings approaching 'sickness'. The word 'homesickness' illustrates how close unattainable longing is to sickness.

Mother love can be so all absorbing that some young mothers fall prey to depression. Munchausen by proxy is an extreme example of obsessive mother love. Self-love can also take a range of pathological forms such as obsessive love for one's own body. The pathological form which this takes may differ culturally. For example, in times of abundance and wealth 'orthorexia nervosa' and extreme bodily training appear (Bratman, 2000).

Some forms of love may be considered 'sickening' by themselves. Paedophilia, sadism and masochism, or homosexuality have been or are labelled 'sickening' in certain periods and/or societies. When people are suffering from a serious sickness, love can be jeopardized, but this is not easily discussed. Partners of chronically or seriously ill people sometimes say that the sickness can be a divisive force. Diseases that affect the personality, such as dementia and some psychiatric illnesses, are particularly harmful to a loving relationship.

Yet sickness may also bring people together (see John Bayley's description of Iris Murdoch's last years). Self sacrificing love is an example. Such love shows itself in a mother caring for a sick or handicapped child or in the donation of an organ or bone marrow to save the life of a loved one. Illness can also trigger the development of a love affair. The film *C'est la vie*, for example, tells the story of the love of a terminally ill patient for a young widow.

Anthropological approaches to sickness and love

Sickness and love in their diverse forms of coexistence are a challenging subject for anthropologists, yet anthropologists have, until recently, not shown much interest in love. After pioneering studies by Malinowski (1929) and Margaret Mead (1928) an-

thropologists in the era of Structural Functionalism shifted their attention from emotions to institutions such as kinship and marriage neglecting what it *meant* to be a member of a family or a partner in a relationship.

The renewed interest in emotion and experience has brought love and sickness back to the anthropological agenda, although few looked specifically at the linkage between both. In the remainder of this overview I will present and briefly discuss a few publications that do deal with the intertwining of sickness and love. In general it can be said, however, that medical anthropologists with their interest in the experience of illness and suffering increasingly interpret the pain of illness as social and emotional pain: the fear of being cut off from those one feels attached to.

In *Notes on love in a Tamil village* the American anthropologist Margaret Trawick (1990) describes her and her young son's ambivalent experiences in a community in Southern India. Tamil parents often express their love for children in harsh and cruel treatment. Children are beaten and scolded. By doing so the parents keep hidden and protect what is most dear to them. A mother told Trawick that she never made her child laugh; the child would suffer in future for each moment of happiness it experienced as a child. Happiness is like mother milk: limited and full of bitterness. In contrast, Einarsdottir's (2004) study 'Tired of weeping' describes the redemptive nature of love, particularly maternal love in Guinea Bissau.

In *The anthropology of love and anger* Joanna Overing (2001) compiled contributions on sociability among Amazonian peoples. With case studies from across the South American continent, she shows how they produce and maintain a deeply cherished, tranquil and intimate life that relies heavily on maintaining an even balance between all that is constructive, love, and all that is destructive, anger. This study reveals how 'negative' features of love can be functional within certain communities.

Anthropologists have also studied the magical domain of love, which is also often the cause of sickness. David Frankfurter (2001) for example explores this relationship in *The perils of love: Magic and countermagic in Coptic Egypt*. He analyses the social role of different Coptic erotic spells within that specific culture and the metaphorical meaning they have in the negation of sexuality. In other Arab folk stories love, magic and sickness are also closely linked, as is the case in the Persian tale of the 'mad love' between Leila and Majnun of Nizamy in the 12th century. The tale recounts how Qais falls in love with the beautiful Leila. It turns out to be an impossible love which literally drives him to madness. He becomes Majnun, possessed by Djinn. Traditional healers in Morocco also concern themselves with love, sickness and magic. Through magic interventions they try to cure problems such as infertility or impotence. Hermans (2007) describes their practices in *De wereld van de djinn: Traditionele Marokkaanse geneeswijzen*.

Medical anthropologists have written about HIV/AIDS in relation to love practices. Liv Haram did fieldwork among Meru people in northern Tanzania, and studied how they managed their love affairs. In *Eyes have no curtains* (2005) he explores the cultural logic of secrecy in sexual life by focusing on how young people manage multiple and concurrent love affairs in a morally acceptable way, which, however, facilitates the spread of infection and disease.

Less explored is the way how illness affects love. Although qualitative anthropological research explores different aspects of the experience of illness, love is not often explicitly a major theme of research. People don't talk so easily about this subject. However, as anthropology is particularly equipped to unveil what is not spoken about, it should contribute to a better understanding of love as it is experienced in times of illness.

An anthropological approach is able to question those aspects of sickness and love that are taken for granted in a medical or psychological explanatory model of love. Nancy Scheper-Hughes (2002) sketches an anthropological critique of a one sided medical interpretation of this 'sickly love.' She places the disease on a continuum of (mal)adaptive maternal behaviours in response to unrecognized and unmet needs, not all of which are pathological. She demonstrates that a 'critically applied and cross-cultural medical anthropology' contributes to a broader social understanding of the relationship between sickness and love.

The theme of love opens a vast area for anthropology to explore. Love is related to care, compassion, responsibility, justice, commitment and morality. Kleinman (2006) writes about how people who become seriously ill struggle to remain a "moral person" with responsibility towards others. The work of family members, friends, doctors, NGOs, community health workers, church members and even that of anthropologists may be inspired by love (depending how one defines love). Of course, one cannot merely respond to human suffering out of love. Sickness – this word has a particular anthropological meaning! – is often as much a political and social event as it is a biological happening.

Anthropological approaches to sickness and love can grasp those aspects of sickness and love that are often neglected in the medical or psychological models of love. Sickness in its combination with love seems to touch upon universal experiences that are perceived and expressed in culturally diverse ways. Love and sickness raise questions about who we are and how we relate to the world. The forthcoming symposium offers an opportunity to discuss and exchange views on these 'burning' questions.

Notes

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- 1 “Still sick, and still occupied with nothing...I am writing you while shaving and dictating my letter with a horrible colic, medicine in my body and a hundred silly thoughts in my head.”

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