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## **The Languages and Cultures of Pain: Towards a Global Medical Humanities**

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In September 2020, following a two-year research and consultation process, the International Association for the Study of Pain (IASP) introduced a revised definition of pain, which was intended to ‘better convey the nuances and the complexity of pain’.<sup>i</sup> The new definition emphasises that pain is an experience rather than a corporeal event: ‘An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage’. It is expanded upon in a series of six Notes, one of which affirms that pain ‘is influenced to varying degrees by biological, psychological, and social factors’ (Raja, Carr, Cohen et al, 2020). What, however, is missing from this revised definition of pain is that pain is a phenomenon that always takes place in a specific linguistic and cultural context.

Of course, pain is first and foremost a personal experience; it is central to our conceptions of health and wellbeing, to our relationships with one another and therefore to our shared human experience. Pain may impose physical limitations, employment or financial anxieties, yet it can also lead to the sharing of lived experience, empathic encounters, the offering of support, solidarity and practical or therapeutic help. As Deborah Padfield and Joanna Zakrzewska put it in the introduction to their book that brings together those who live with pain, their carers, clinicians, academics and artists, in a bid to share insights and ‘expand the debate around pain’: ‘There may not yet be a cure for chronic pain but there is room for “accompanying” people with pain along their journeys. Persistent pain makes demands on language inextricably bound up with the demands of moving beyond our individual experience to empathise with that of another’ (Padfield and Zakrzewska 2021: 1-2). By focusing on the reciprocal interactions at stake between language, pain and communication, this special issue of the *Journal of Romance Studies* similarly seeks to further ‘expand the debate around pain’. It does so by paying renewed attention to the questions of how pain shapes language and to

how language, in turn, shapes our understanding of pain; yet, it reframes this question by shedding light on the multiple and distinct conceptual underpinnings of ‘pain’ and ‘language’. It spotlights the role these play in foregrounding or marginalising different groups of patients or carers, as well as specific linguistic, cultural and social contexts and institutions, and, finally, the diverse kinds of body-mind interactions at stake in different kinds of pain. The articles in the present volume thereby seek – individually and collectively – to widen the framework for an analysis of understandings of the articulation, expressibility and shareability of pain, and they do so by invoking the rich cultural, theoretical and philosophical perspectives provided by different European literary contexts. In this way, this special issue approaches the study of language and pain in an explicitly polysemic way, regarding neither entity as fixed, stable or monolithic. Instead, by establishing dialogue and comparisons across European languages and cultural contexts, we seek to enhance appreciations of literature’s capacity to inform knowledge of pain’s manifold subversive and creative potential.

As a vector of encounters and exchange, pain is, as Brandy Schillace notes, the subject of ‘dialogue and exchange’: ‘there are few experiences as ubiquitously encountered and shared as pain. From the traumatic to the spiritual, the complexities of pain become story even as they become lived experiences’ (Schillace 2018: 71). Questions and answers about the intensity, nature and localisation of pain are, then, at the heart of the encounter between patient and healthcare professional. As Daniel Goldberg reminds us, ‘Pain is almost certainly the most common illness experience on the planet’ (Goldberg 2018: 72). The acute respiratory syndrome coronavirus 2 (SARS-CoV-2) that is at the origin of the current global pandemic causes tissue damage and can lead to severe physical or neurological pain. Some of its key early symptoms include muscle, abdominal and respiratory pain, while one of the long-term risks is that those who contract COVID-19 will develop chronic pain due to viral infection. The sheer scale of the pandemic, coupled with the journalistic and first-person accounts of the experience of Covid or so-called long-Covid, have brought the effects of pain into the public consciousness in

profoundly disturbing new ways. Pain then constitutes a social experience that is shaped by a number of cultural, psychological, theological, medical and clinical discourses, and can be described in physiological terms and as triggering a distinct psychological composition. For that reason, the conceptualisation of pain as a universal yet personal human experience with far-reaching implications for medicine, ethics and aesthetics has played a central role in the research agenda of the Medical Humanities since the establishment of the field in the late 1960s.

The *BMJ Medical Humanities*' 2018 special issue entitled 'Pain and its Paradoxes' attempted to highlight some of the pluralist understandings of pain by engaging with a range of topics and voices that not only referred to different cultural and historical understandings (Global South vs. West), but also drew on a range of disciplinary perspectives. Crucially, as Goldberg underlines in his introduction to the special issue, 'some people's voices have historically been more likely to have been heard — and responded to — than others' in the story of pain' (Goldberg 2018: 72). 'Pain and its Paradoxes' thus emphasises the pain experiences of women and historically marginalised groups as 'an ethical imperative' (Goldberg 2018: 72). One central plurality, however, which has not yet received the scholarly attention pain deserves within the field of Medical Humanities, concerns the fact that the cultural and historical variations of pain are also conditioned by the languages in which they are expressed. It is therefore not only language as an abstract entity, but languages as cultural and symbolic systems which play a foundational role in structuring our understanding, experience and communication of pain. And it is precisely the communicating of the experience of pain to another – even if that communication ultimately remains an insufficient approximation of the experience itself – which is key to the affinity between language, literature and medicine.

Aligning with the broadening emphasis of the Medical Humanities on a truly global appreciation of health, this special issue of the *Journal of Romance Studies* fosters international, cross-cultural, multilingual dialogue on the theme of pain, and reaches out beyond the cultural

values, perspectives and assumptions of the Anglosphere via a network of researchers whose work is situated at the rich interface of Modern Languages, European literatures and Medical Humanities. Different languages draw on different wor(l)ds, which in turn are linked to different meanings and contexts to express pain. They refer to different cultural histories of pain and different historical experiences that have shaped the conception of physical and psychological pain both inside and outside a clinical setting. By bringing together seven articles that draw on a range of modern European languages and engage with the central role that literary texts (of a variety of genres) have played in the challenge of expressing pain in French, Italian, German, Spanish and Irish, the special issue seeks to significantly enhance our understanding of the complex interactions between pain and the expressive capacity of languages. It thereby aims to push further the project of the Critical Medical Humanities, and its call for the field to play a less ‘benign’ or ‘supporting’ role in representing healthcare and medical experience, but to aim instead for more critical and theoretical considerations of how, where and when ‘entanglements’ between medicine and the humanities are constructed (Whitehead and Woods 2016: 2; Viney, Callard, and Woods 2015; Fitzgerald and Callard). While the Critical Medical Humanities have claimed that we should pay further attention to categories such as gender, disability, race, class, culture and history, we propose that in order to make sense of these categories with regard to pain, we must also pay attention to the different languages and cultures in which these categories emerge.

Medical Humanities scholarship has focused predominantly on Anglophone texts. In this special issue, it is our aim to forge a new, international perspective on the languages of pain that embraces more fully the richness and diversity of European languages and literature. By examining the culturally-specific means by which writers in non-Anglophone European literature reflect on and communicate pain, it seeks to constitute a significant step toward more comparative work in the Medical Humanities. Though Western medicine functions as a pivotal unifying force in the texts examined here, different cultures within the West will respond to

pain in different ways, drawing on different registers, rituals etc. The need for this special issue is grounded in the recognition that in order to fully grasp the richness and complexity in which literature and literary theory can productively engage with the Medical Humanities, we must move to open up the field to approaches that are not only comparative, but that cross geographical, cultural and linguistic borders, allowing for the sort of truly ‘creative boundary crossing in and through which new possibilities can emerge’ (Whitehead and Woods 2016: 8). Integrating narratives in languages other than English will allow us to gain a much more nuanced and accurate understanding of specifically Western attitudes towards pain, and we believe that this engagement with the local at the micro-level of language is a necessary step towards expanding and strengthening the global outreach of the medical and health humanities.

Elaine Scarry’s *The Body in Pain* (1985) established the commonplace that pain defies language. Taking as an example the extreme pain of torture, Scarry argued that pain is such an intensely private experience that it presents a significant challenge to the one seeking to express, communicate and capture it. ‘Whatever pain achieves’, she remarks, ‘it achieves in part through its unsharability, and it ensures this unsharability through its resistance to language’ (Scarry 1985: 4). But ever since its publication, literary, cultural and historical studies have questioned Scarry’s argument that ‘physical pain not only resists language, but actively destroys it’ (Scarry 1985: 4-5). Martha Stoddard Holmes and Tod Chambers have argued that we may not need to ‘dismantle *The Body in Pain*’, as much of it may hold true for acute pain, but rather that we need ‘to look at a wider range of relationships between pain and language’ (Stoddard Holmes and Chambers 2005: 133). They have therefore proposed that we must think in more complex ways about what we understand by pain, taking into account the different sensory experiences of chronic, nonacute or recurrent pain. In a context in which ‘our language of pain has been reduced to numbers, faces, and words on various pain ratings scales’, epitomised by the famous McGill Pain Questionnaire, articles in this special issue seek instead to develop Susannah Mintz’s endeavours to ‘bring together writers whose angles of approach interrogate

conventional attitudes about pain and so provide opportunities for imagining ourselves into a more expansive relationship with it' (Mintz 2013: 10). The aims of the special issue thus align with Sara Wasson's research which has highlighted that specific forms of pain, such as chronic pain, call for an augmentation of 'the available critical vocabulary for the textual representation' of pain, that may ultimately find expression more in textual fragments, episodes and moments than in hegemonic, and exclusionary, illness narratives (Wasson 2018: 106).

Notwithstanding Wasson's argument about the need to consider the representation of pain in diverse textual forms in order to incorporate multiple modes of subjectivity, Ann Jurecic has asserted that pain 'is everywhere in literature' (Jurecic 2012: 43). Peter Fifield, moreover, has claimed that, despite its undeniably totalising and isolating qualities, pain may even be an 'experience particularly suited to literary depiction' (Fifield 2015: 129). While Wasson advocates that 'diversifying stories' is an urgent requirement of the Medical Humanities (Wasson 2018: 108), Mintz has gone further by proposing that we should 'broaden our perception of what pain means' (Mintz 2013: 2). She has highlighted the need to become 'more literary about pain' (Mintz 2013: 6), meaning that we need to situate and seek to understand pain within literary works. This includes expanding our vocabulary of the phenomenon and attuning ourselves to the many ways in which writers resist familiar tropes. Moving across genres, Mintz has paid particular attention to the ways in which cognitive and emotional elements are entangled in the experience of pain, highlighting that instead of producing isolation, narratives about pain may create communities and even produce knowledge. In her seminal study, *The Story of Pain: From Prayers to Painkillers*, historian Joanna Bourke has also highlighted that pain may be 'integral to the creation of communities' (Bourke 2014: 46), as pain always emerges 'in negotiations with social worlds' (Bourke 2014: 300). As a powerful counterargument to Scarry, Bourke's analysis of the many iterations of pain across the past shows that we have developed rich and shared languages to capture what it means to be in pain.

Moreover, social and cultural factors are integral to these languages, which, as Scarry shows, are characterised by social hierarchies and cultural, gender and racial biases.

In *The Culture of Pain*, David Morris claims that ‘pain is a personal and cultural encounter with meaning’ (Morris 1991: 267). It is against the background of this duality of subjectivity and culture integral to the experience of pain that this special issue highlights the need for scholarship in the Medical Humanities to specify the different intensities and compositions of pain in modern European languages. This includes considering pain across genres (such as the novel, graphic memoir, autofiction, poetry and patient narratives), but also taking seriously categories such as gender, ethnicity and class. In addition to these, however, we highlight that the specific languages and cultures in which the experiences of pain, hurt and suffering are expressed, fundamentally affect the way pain is experienced and communicated. In the articles in this special issue, we therefore privilege a diversity of perspectives related to the languages of pain. In our exploration of the location of pain within language(s), the translation of pain into language(s), visual languages of pain, the limitations of using one’s native language to express pain, the creative potential in experimenting with language(s) to communicate pain and the therapeutic benefits of language use in the context of psychological, emotional and spiritual pain, this special issue offers a showcase more generally of what research in the interdisciplinary field of Modern Languages has to contribute to the Critical Medical Humanities.

Each of the articles that follows engages, from different cultural, linguistic and textual viewpoints, with a selection of the conceptual questions and theoretical sources referenced in this Introduction. The opening piece, by Dominik Zechner, serves as a positioning paper, by establishing a framework for reading literature’s capacity to allow us to reflect upon the complex dynamic between pain and representation. Yet Zechner deliberately departs from an understanding of pain as ‘lived experience’, pursuing instead a type of pain that takes place *in* language. Zechner reads pain as a philological occurrence, dislodged from the sensory and the



empirical, that conditions the very act of representation and is integral to the structure of language itself. Zechner then traces the traits of this new kind of ‘linguistic pain’ (‘the pain of representation’ rather than ‘the representation of pain’) through close readings of texts by Franz Kafka, Georg Trakl, Martin Heidegger and Paul de Man. Rebecca Rosenberg picks up the challenge to rethink pain’s relationship with representation, this time by engaging with the physician David Biro’s injunction that ‘we must (...) change what we mean by the word and concept of pain’ (Biro 2010: 44-5). Rosenberg does this by paying close attention to the language used in French writer Chloé Delaume’s short text *Éden Matin Midi et Soir* (2009), in which the narrator, Adèle, finds herself in a hospital bed having survived several suicide attempts. Like other contributors to the special issue, Rosenberg sensitively questions the distinctions occasionally drawn between psychological and physical pain, notably through a striking reading of Adèle as ‘pain incarnate’. Moreover, she demonstrates that the linguistic and experiential challenges of communicating pain are bound up with societal factors, notably medicine as institution. Adèle’s pain narrative is one that is written in resistance to that of her doctors, nurses, the institution of psychiatry, her family, and the society that tries to blame her for attempting suicide and manipulate her to keep living and fighting, which only augments her suffering. Rosenberg’s article thus exposes the complexity of psychological pain, while considering the political qualities of a text that beguiles its readers to acknowledge psychological pain and grapple with their powerlessness in the face of Adèle’s choice to commit suicide.

Rosenberg’s article offers a telling reminder that conversations about pain have important practical, political and economic consequences in medical care. For that reason, this special issue draws attention to the important role that communication about pain across linguistic and cultural boundaries can play in the clinical setting. In *The Language of Pain: Finding Words, Compassion and Relief*, David Biro highlights the crucial role language plays for pain relief by noting that ‘metaphor works like (and in the absence of) medicine; it has the

power to alleviate pain' (Biro 2010: 145). This power has always also had political implications. In his political history of pain, Keith Wailoo points out that the connection between language and its power to enable pain relief 'incited a steady struggle over who has the right, jurisdiction, and authority to say who is in pain' (Wailoo 2014: 11). The National Pain Strategy, launched in 2015 by the United States as a response to the opioid epidemic, may be seen as an extension of this struggle. Importantly, however, the Strategy called for a 'cultural transformation' to fight chronic pain, as part of which it also emphasised the shortcomings of numerical pain-intensity ratings (Ballantyne 2015: 2098). While our subject matter in this special issue is more narrowly constructed around the role and critical methodologies of modern European languages in the Critical Medical Humanities, it is our contention that this research will ultimately also play a vital role in attaining the goal of moving beyond a numerical understanding of pain and toward the cultural transformation of the ways in which pain is dealt with in the clinic.

Samuel O'Donoghue, in his article, further considers the cultural transformation of pain, specifically in a sanatorium setting, by examining how Spanish writer Camilo José Cela deals with tuberculosis in his 1943 novel *Pabellón de reposo*. While TB was a major public health concern in Spain at the time, the text was written just before the discovery of the first antibiotic cure for the disease. Cela's work therefore also disentangles pain – both physical and emotional – from a curative paradigm, posing important questions instead about how pain is constituted and palliated through literary forms. In a context where the narrator-protagonists of Cela's novel are both readers and writers, O'Donoghue argues that the text anticipates some of the concerns about the therapeutic benefits of reading as writing, as means of coping with pain, that are the subject of increasing scrutiny in the Critical Medical Humanities and contemporary models of bibliotherapy. O'Donoghue's innovative reading of *Pabellón de reposo* thereby encourages us to identify in and through it bibliotherapeutic models *avant la lettre*. This analysis sets the scene for Emilie Garrigou-Kempton's reading of French journalist Philippe Lançon's 2018 bestselling memoir, *Le Lambeau*. In it, Lançon chronicles the first nine months

after he was severely wounded in the 2015 terrorist attack at the *Charlie Hebdo* satirical newspaper in Paris. Garrigou-Kempton suggests that Lançon's experience of pain serves as a departure point for the writer's exploration of both the limitation of words and the creative potential inherent in a reappropriation of language – and languages, for in his bid to express his suffering, Lançon borrows from Spanish at one point to capture his plight. Pain thus ushers in a new relationship for Lançon with language, but it is one that emerges as a beneficial practice that allows the writer no longer simply to conceptualise pain as something he feels, but rather to live in and through a language of pain that allows him to piece together the fragments of his body and reconstruct his sense of self.

The final three articles focus less on the potentially beneficial practices of writing pain than on the aesthetic transformations that pain can produce in writing. Ariela Freedman, in her rich discussion of French writer David B.'s graphic memoir of epilepsy, *L'Ascension du Haut Mal* (1996-2004), argues that the *tressage* of word and image, and diachronic and synchronic frames, constitutes a particularly powerful narrative and aesthetic strategy for capturing the complex intersection of pain, trauma and suffering. Freedman's article underlines the role of the family as witnesses as well as the unassimilated traumas of French history that partake in this personal illness narrative, thereby pointing to pain as a systemic event that always also extends beyond the experiencing self. Giuseppe Capalbo picks up on the systemic nature of pain by turning to the memoirs and theoretical writings of Louise DeSalvo, a leading figure in the Italian American literary community who contracted a mysterious disease later identified as asthma. Capalbo argues that the process of writing pain through intertextual references to canonical literature allows DeSalvo to situate her pain as part of more extensive palimpsests of traumatic memory. For DeSalvo, questions of language and translation are integral to her engagement with pain as her Italian roots become visible when she uses Italian references accompanied by English translations to better capture the isolation and vulnerability associated with pain. Moreover, Capalbo reveals that DeSalvo sees her memoir as an opportunity to turn

her 'traumatic past into works of art', aestheticising pain and using it to reimagine, in writing, who she is.

The final article returns to the body as the locus of pain and, fittingly, urges us to pay attention to pained voices that emerge from wounded bodies. Extending the range of languages covered in this special issue to include Irish, and thereby to provide a cultural counterpoint to the Romance languages that dominate this volume, Caitríona Ní Chléirchín also invites us to reflect on the power of contemporary women's poetry to give expression to the marks of pain and trauma, as etched on bodies and the psyche. Challenging the Cartesian separation of mind and body, Ní Chléirchín analyses the poetry of Máire Mhac Mhac an tSaoi, Nuala Ní Dhomhnaill and Áine Ní Ghlinn as *écriture féminine* (feminine writing), arguing that, in it, we hear women's voice, body and psyche, and gain privileged access to the dissociative, somatic and depressive effects of trauma, as depicted in their work. Ní Chléirchín's work offers particularly striking observations on the cultural associations between the Irish language and the feminine in representing pain, while positing that poetry can transform suffering into the beauty of art.

The multiplicity of genres and languages that provides the basis for this special issue's analyses of pain enables innovative interpretations of the role and significance of Modern Languages research in the context of the Critical Medical Humanities. This is because the texts united here bring nuance and precision to conceptual debates about pain, anchoring them in the actual languages and cultures of pain in which these debates originate and develop. It thereby seeks to destabilise a fixation on certain conceptual positions, such as, for example, whether pain does or does not resist language, which has been a key question in criticism on language and pain since Elaine Scarry's landmark publication mentioned earlier. By taking a more global, multilingual approach, the contributors to this special issue demonstrate that preceding the macro-question of pain's resistance to language, are the micro-dimensions of linguistic and cultural circumstances in which pain is experienced and as part of which pain may even be seen

to structure language itself. Tending to these circumstances will ultimately allow us to question how languages – rather than language – are interactively influencing and shaping different kinds of pain, thereby supplementing important points of reference for the ‘varying degrees’ by which pain is shaped by factors other than the corporeal, as outlined in the IASP’s revised definition of pain. It is our hope that the findings presented here will not only provide a fresh approach to pain across literatures and languages, but that these points of view may also constitute a resource for reconceptualising pain in the clinical setting, which has largely focused on measuring and communicating pain severity. If we take the role of effective pain communication seriously, we must recognise that the basis for such communication is always embedded in a specific cultural and linguistic context. The contributions in this special issue shed light on the neglected role of this context, outlining a diversity of perspectives that opposes streamlined mechanisms of inclusion in the symptomatic evidence base. The special issue instead carves out the need for a multilingual cultural archive of texts engaging with pain, highlighting that a more global understanding of pain across languages and cultures can bring to the fore productive new interlocutory engagements with medicine, as well as an awareness of specific local, national and linguistic conditions that frame its aesthetic representation.

### **Works Cited**

- Ballantyne, Jane et al. (2015) ‘Intensity of Chronic Pain – The Wrong Metric?’, *New England Journal of Medicine* 373, 2098–99.
- Bourke, Joanna (2014) *The Story of Pain: From Prayer to Painkillers* (Oxford: Oxford University Press).
- Biro, David (2010) *The Language of Pain: Finding Words, Compassion, and Relief* (New York: W. W. Norton & Company).

- Fifield, Peter (2015) 'The Body, Pain and Violence', in *The Cambridge Companion to the Body in Literature*, ed. David Hillman and Ulrika Maude (Cambridge: Cambridge University Press), 116–31.
- Fitzgerald, Des and Felicity Callard (2016) 'Entangling the Medical Humanities', in *The Edinburgh Companion to the Critical Medical Humanities*, ed. Anne Whitehead and Angela Woods (Edinburgh: Edinburgh University Press), 35–49.
- Goldberg, Daniel S. (2018) 'Pain and the Human Condition', *Medical Humanities* 44, 72–73.
- Jurecic, Anne (2012) *Illness as Narrative* (Pittsburgh: University of Pittsburgh Press).
- Mintz, Susannah B. (2013) *Hurt and Pain: Literature and the Suffering Body* (London: Bloomsbury Academic).
- Morris, David (1991) *The Culture of Pain* (Berkeley: The University of California Press).
- Padfield, Deborah and Joanna M. Zakrzewsk (eds.) (2021) *Encountering Pain: Hearing, Seeing, Speaking* (London: UCL Press).
- Raja S. N., D. B. Carr, M. Cohen et al. (2020) 'The Revised International Association for the Study of Pain Definition of Pain: Concepts, Challenges, and Compromises', *Pain* 161, 1976–82.
- Schillace, Brandy (2018) 'Editor's Note: Pain and Paradoxes', *Medical Humanities* 44, 71.
- Scarry, Elaine (1985) *The Body in Pain: The Making and Unmaking of the World* (New York: Oxford University Press).
- Stoddard, Martha and Tod Chambers (2005) 'Thinking through Pain', *Literature and Medicine* 24, 127–41.
- Viney, William et al. (2015) 'Critical Medical Humanities: Embracing Entanglements, Taking Risks', *BMJ Medical Humanities* 41, 2–7.
- Wailoo, Keith (2014) *Pain: A Political History* (Baltimore: Johns Hopkins University Press).
- Wasson, Sara (2018) 'Before Narrative: Episodic Reading and Representations of Chronic Pain', *BMJ Medical Humanities* 44, 106–12.

Whitehead, Anne and Angela Woods (eds.) (2016) *The Edinburgh Companion to the Critical Medical Humanities* (Edinburgh: Edinburgh University Press).

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<sup>i</sup> [IASP Announces Revised Definition of Pain - IASP \(iasp-pain.org\)](https://www.iasp-pain.org) [accessed 19 July 2021].