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The Hermeneutics of Disease: Interpretation, Ethics, and the Literary Imagination

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Abstract: The paper undertakes a comparative analysis of the interpretation of illness in Susan Sontag’s critical essays - particularly *Illness as a Metaphor* and Thomas Mann’s novel *The Magic Mountain*, examining its fundamental tension between demystifying disease and harnessing its symbolic potential. Sontag explicitly identifies *The Magic Mountain* as a paradigmatic instance of the “pernicious romanticizing” of tuberculosis, wherein the sanatorium becomes a site of spiritual refinement and illness is transfigured into a marker of heightened sensibility. By contrast, Sontag’s polemical project insists upon stripping sickness of its metaphorical burden, exposing how such cultural narratives impose moral and psychological culpability upon patients and obstruct a clear-eyed confrontation with bodily suffering.

This study argues that despite their apparent opposition, these two texts illuminate a shared and enduring problem: whether meaning-making in the experience of illness can be disentangled from the punitive mythologies that Sontag condemns. The analysis proceeds through three comparative axes. First, it contrasts Sontag’s physiological reductionism with Mann’s dialectical treatment of disease as a vehicle for intellectual and spiritual education. Second, it examines the divergent spatial politics of the sanatorium—depicted by Sontag as a regressive enclave fostering self-absorption, and by Mann as a hermetic “pedagogical province” that intensifies existential inquiry. Third, it evaluates the ethical implications of each approach, considering whether Mann’s aesthetic investment in the romance of illness ultimately colludes with or subtly subverts the victim-blaming logic Sontag critiques. The paper concludes that the interpretive chasm between Sontag and Mann reveals a deeper cultural ambivalence: the persistent impulse to derive meaning from suffering, and the danger that such meaning becomes a second affliction.

Keywords: *Sontag, Mann, Representation, Illness, Metaphor, Suffering*

Illness begins in the body. A cell begins to divide uncontrollably; a bacillus colonises the lungs; a fever spikes and subsides rapidly. These are events happening in physiology, indifferent to interpretation. Yet when sickness intervenes in a human life, it leaves its pure physiological character and enters in the domain of finding meaning and interpretation. Susan Sontag opens her *Illness and Metaphor* by stating a deceptively simple observation that “illness is the night-side of life, a more onerous citizenship, in the kingdom of the well and the kingdom of the sick” (Sontag:03). Diseases have been interpreted as punishments, moral verdicts, character manifestations, spiritual trials, creative awakenings, and as escapisms from responsibility. This kind of persistent human impulse to associate a meaning or interpretation to illness constitutes a paradox: it is a response to a genuine existential need of human beings to make sense of suffering; yet it also burdens the sufferer with the weight of a second, symbolic affliction, one that moralises or aestheticises a mere biological catastrophe. This paper attempts to study the tension between the necessity of meaning making and its ethical dangers. The twentieth century writers and critics articulate this problem with exceptional clarity and allow us to see and analyse the problem from two vantage points. Susan Sontag, writing as a polemical critic and a cancer patient herself mounts a sustained attack that encrusts the disease. In her *Illness as a Metaphor* and its sequel *AIDS and its Metaphors*, she argues that the linguistic and conceptual framework we impose upon illnesses that are military, moral, and psychological do create real problems for the patients. They isolate the sufferers and insinuate that they are somehow responsible for their condition, and thereby obstruct a clear-eyed practical confrontation with the physical facts of the disease. According to Sontag the most truthful and ethical way to regard illness is without metaphor, in the light of physiology. Thomas in *Magic Mountain*, constructs one of the elaborate and symbolic architectures built around a disease. Set in a Swiss sanatorium in the years before the First World War, the novel transforms pulmonary tuberculosis into a vehicle of spiritual and intellectual education. Hans Castrop, arrives for a three-week visit and remains there for seven years, during which the physical condition - the “moist spot” detected on his lung becomes inseparable from his philosophical initiation, his erotic awakening, and his confrontation with the great ideological forces of his age. Mann’s narrative draws deeply on the very mythology of tuberculosis that Sontag would later condemn: illness is transfigured into a marker of heightened sensibility, a privileged epistemological vantage point from which deeper truths become accessible. Where Sontag demands that tuberculosis be understood as a bacterial infection of the lungs, Mann presents it as what Eric Downing describes it “as an aesthetic and existential condition through which the self is refashioned” (Downing 41)

The paper argues that despite of the apparent opposition of the two writers - Sontag as the demystifier and Mann as the mythologizer; the two texts together shed light to an enduring and unresolved problem: whether the human impulse to make meaning out of the experience of illness can ever be fully disentangled from the punitive mythologies that Sontag condemns. Sontag's polemical demand for a metaphor-free illness may fully underestimate the depth of the narrative impulse in human responses to suffering, a depth that Mann's novel embodies and critically anatomizes at times. Simultaneously, Mann's aesthetic investment in romanticising tuberculosis is however ironical, risking the reinforcement of the very structures of the meaning that can function as a second affliction imposed upon by the already suffering body. The paper seeks to use the interpretative chasm between Sontag and Mann as a diagnostic instrument for examining the broader cultural ambivalence that surrounds the representation of illness: the persistent desire to derive meaning from suffering and the persistent danger that such meaning will become another source of harm. The significance of comparative study is situated at the convergence of several interdisciplinary discourses. The field of medical humanities, health humanities, and the cultural study of illness have extended references to the political and ideological functions of the discourse of illness. Moreover literary theory and criticism has continued to grapple with the ethical dimension of representation, drawing on frameworks from trauma studies, affect theory, and the ethics of reading to ask how or whether the aesthetic dimensions of illness and suffering can be justified. Furthermore, the questions and concerns raised by Sontag and Mann encounter carry a renewed urgency in the aftermath of COVID-19 pandemic, which saw the rapid proliferation of militaristic metaphors, the narratives of individual responsibility and blame and contested claims between illness and identity. Sontag's argument that "military metaphors contribute to the stigmatizing of certain illness and, by extension of those who are ill" (Sontag 11) proved prescient in an era of public health measures framed as battles and patients characterised by their supposed failures to protect themselves. This paper attempts to trace the deep cultural roots of these interpretive habits and the roots that extend back through *The Magic Mountain* to the Romantic and Victorian idealisation of consumption. The analysis proceeds through three comparative axes. The first axis contrasts Sontag's physiological reductionism - her insistence that disease is fundamentally a biological event with Mann's dialectical treatment of tuberculosis as a vehicle for intellectual and spiritual education. The second axis examines the divergent spatial politics of the sanatorium which Sontag interprets as a regressive enclave fostering self-absorption and withdrawal from social life, which Mann constructs as a hermetic "pedagogical province" that intensifies existential inquiry. The third axis evaluates the ethical implication of each approach, considering whether Mann's aesthetic investment in the romance of illness ultimately collides with or subtly subverts the victim blaming logic that Sontag critiques.

Sontag's polemical project *Illness as Metaphor* is established upon a foundational claim that: illness is illness and nothing more. Thereby establishing a stark division between the biological fact of disease and the cultural meanings that encrust it: illness is the night-side of life, a more onerous citizenship. Everyone who is born holds dual citizenship, in the kingdom of the well and the kingdom of the sick" (Sontag 3). Yet the kingdom of the sick is never regarded as a neutral territory; it is regarded as a domain guarded by fantasies, fears, and punitive narratives that transform a physiological event into a moral drama. Her stated aim is to liberate the patient from this kingdom's oppressive mythology by insisting upon a "truthful" relation to disease - "the most purified of, most resistant to, metaphoric thinking" (Sontag 3). The object of Sontag's most sustained critique is the romanticisation and the romantic mythology surrounding tuberculosis. She argues that this is a mythology that persisted long after the discovery of the tubercle bacillus in 1882 should have rendered it obsolete. In the nineteenth and eighteenth centuries, TB was aestheticised as the "artist's disease," imagined to refine the senses, deepen the emotions and grant the sufferer a heightened spiritual sensitivity denied to robustly healthy. Sontag catalogs the symptoms of this mythology and records that tuberculosis was thought to "produce spells of euphoria, increased appetite, exacerbated sexual desire" (Sontag 13), and the physical signs of the disease - pallor, slenderness, the famous *spes phthisica* or "consumptive hope" were regarded as the markers of beauty and distinction. She writes, "The tubercular look had to be considered attractive once it came to be considered as a mark of refinement, of breeding" (Sontag 29). The consumptive was not merely regarded as a patient but a character type of sensitive, creative, spiritually porous, too fine for the coarse demands of ordinary life.

In this context of conception of disease Sontag invokes *The Magic Mountain* as a literary mythology she seeks to dismantle; as she writes: *The Magic Mountain* is after all the classic novel of the romanticizing of tuberculosis." (Sontag 34) In Mann's novel, she perceives the culmination of a tradition that transforms the sanatorium into a site of spiritual refinement and the tubercular patient into a privileged speaker after truth. According to Sontag, the problem with this romanticisation is not merely aesthetic but ethical: it imposes upon the sick a narrative template that can function as a form of blame. If illness is regarded as an index of sensitivity, then the failure to recover becomes the failure of character; if disease is a vehicle of insight then the patient who does not emerge spiritually transformed has somehow failed the existential opportunity their sickness afforded them. In *AIDS and Metaphors*, Sontag extends this logic to the militaristic language that surrounds contemporary diseases arguing that "military metaphors contribute to the stigmatizing of certain illnesses and, by extension, of those who are ill" (Sontag 11). In both the instances, metaphor operates as a mechanism of moralisation, converting the randomness of biological misfortunes into a narrative of desert. This critique of Sontag can be underpinned as a commitment to the physiological reductionism argued in the

paper. This is from the view that disease is ultimately a material process that is best understood through the empirical language of medicine. She does not deny social and psychological dimensions of illness, but argues that these dimensions are secondary and that the primary task of the sick person is to confront their disease as a biological reality amenable to medical intervention. Furthermore, she insists that any symbolic or mythological superstructure added to this reality risks obscuring it. The philosopher Havi Carel, whose work on the phenomenology of illness is otherwise sympathetic to the lived experience that Sontag seeks to bracket. This leads to the articulation of a counter-argument: illness: “is experienced not just as a biological dysfunction but as a disruption of the life-world, of the entire network of meanings and projects that constitutes a person’s existence.” (Carsel 27). From this perspective, Sontag’s reductionism achieves the clarity that it addresses the disease, the illness, the pathology but not the person.

Thomas Mann’s *The Magic Mountain* precisely operates within the symbolic economy that Sontag condemns, yet it does so with a self-consciousness and dialectical complexity that complicates any straight forward charge of pernicious romanticism. The protagonist of the novel Hans Castrop arrives at the international sanatorium Berghof as a healthy young man, an engineer intending to spend his three weeks there. Later, his return was indefinitely postponed when the head physician Dr. Behrens, detects a “moist-spot” on his lung - a diagnosis that at once a medical finding and a narrative threshold. (Mann 185). The spot is ambiguous, minor, perhaps even contested; yet it functions as an ontological switch, reclassifying Hans from visitor to patient and leading to a seven year sojourn that the novel frames as an education, a *Bildungreise* into the fundamental questions of human existence. The pedagogical function of illness is articulated most explicitly by Lodovico Settembrini, the Italian humanist who appoints himself as Han’s mentor. Settembrini himself a patient describes the sanatorium as a “pedagogical province,” (Mann 63) a term borrowed from Goethe to designate a sealed environment of intensive formation. Within this hermetic space, the ordinary rhythms and responsibilities of bourgeois life are suspended and Hans is free - or compelled to devote himself to inquiry: into time, into the body, into the competing philosophical systems represented by Settemberini’s enlightenment rationalism and his antagonist Naphta’s radical death-affirming mysticism. The crucial point here to consider here is that Han’s intellectual awakening is not merely concurrent with his illness but is casually entangled with it. His heightened temperature, physical lassitude, his detachment from the world of work and family are all regarded as the symptoms of tuberculosis; also the conditions for the possibility of speculative freedom. The critic Eric Downing criticises this entanglement: “Han’s epistemological progress is inseparable from his illness; the disease is not an obstacle to knowledge but it is its very medium. (Downing 42)

The most concentrated expression of Mann's dialectical treatment of illness occurs in the chapter "Snow," which stands as the novel's philosophical centrepiece and the passage that most directly tests Sontag's reading. Lost in a blizzard during a solitary skiing expedition, Hans undergoes a visionary experience in which he beholds a sunlit Mediterranean bay populated by "beautiful and young and happy" people, children of the sun and the sea whose grace and vitality embody an ideal of health. (Mann 484) the vision then darkens and Hans discovers a temple in which two old crones are disremembering and devouring an infant over a brazier, a primal image of death and destruction at the heart of the beautiful world. From this dreamlike dialectic of life and death, Hans arrives at a conscious ethical resolution: "For the sake of goodness and love, man shall grant death no dominion over his thoughts" (Mann 487) The resolution appears to repudiate the romance of illness and death. Yet the crucial point is that this repudiation itself produced by the illness-narrative. Hans arrives at his affirmation of life only through the prolonged immersion in the sickness and the mediation on the death that the sanatorium has made possible. Mann thus presents illness as a genuine, if dangerous, path to wisdom. A pedagogy that works through the body and transforms the soul.

The opposition between Sontag's physiological reductionism and Mann's dialectical pedagogy is irreconcilable. Sontag's insistence on the brute materiality of disease provides an indispensable ethical safeguard against the moralisation of sickness; while it risks flattening the lived experience of patients for whom illness is, as Carcel argues, a crisis of meaning that cannot be addressed by medical language alone. Mann's investment in illness as pedagogy captures the phenomenological richness of the sick person's world and honours the genuine transformations that sufferings can catalyse, but it flirts perpetually with the romanticisation that Sontag identifies as a source of real harm. At a close reading of *AIDS and its Metaphors*, Sontag herself acknowledges that "one cannot think without metaphors" (Sontag 9). She clarifies that her project is not to eliminate metaphors entirely. But to identify and resist metaphors that are "pernicious," those that convert illness into a judgement upon the sufferer.

Sontag's critique on the sanatorium is inseparable from her broader attack on the romantic mythology of tuberculosis. According to her, the physical isolation of the consumptive patient was not merely a medical necessity, rather it was a cultural production that reinforced the symbolic aura surrounding the disease. As Sontag writes invoking Mann's novel: "In the sanatorium, the patient was separated from the world and this separation was felt as a liberation. The sanatorium was a kind of counter-world, a "magic mountain" in which a more intense, more authentic life was lived." (Sontag 34) The quotation marks around "magic mountain" signal her ironic distance from the mythology she describes. For Sontag, the idea that sanatorium offers a "more authentic life" is precisely the pernicious fantasy that her essay seeks to dismantle. The sanatorium in her analysis does not elevate its

inhabitants but sequesters them, transforming a medical institution to a stage for self-dramatization. She further critiques, “the place of exile (the sanatorium) was the place of transfiguration. At its very name - sanatorium - implies, it was a place where one went on to be cured. But it was also a prison; people were sent there involuntarily” (Sontag 35) Here, the slippage from “transfiguration” to “prison” encapsulates Sontag’s entire polemical method. Thus, the exalted language of spiritual transformation is unmasked as a disguise for confinement and coercion.

Sontag's spatial critique has a distinct ethical charge. The sanatorium’s hermetic seal does not merely remove patients from the world; it removes them from the obligations of citizenship, work, and solidarity that bind the healthy and the sick alike. In this perspective, the retreat into the “kingdom of the sick” that Sontag has mentioned in her opening paragraph is not a necessity but a seduction. The sanatorium invites its inhabitants to make illness the organising principle of their identity, to forsake the difficult project of living in the world for the narcissistic cultivation of their symptoms. The philosopher Micheal Foucault, whose concept of heterotopia provides a powerful theoretical lens for this spatial reading, notes that such “crisis heterotopias” are “privileged or sacred or forbidden places reserved for individuals who are in relation to the society and to the human environment in which they live, in a state of crisis.” (Foucault 24). The sanatorium, as a heterotopia of deviation, houses whose bodies have placed them outside the norm. Sontag’s concern is that the institution, rather than preparing its inmates for a return to this social world, consolidates their marginality by aestheticizing it. Hereby, isolation becomes a value rather than an obstacle, and the prison of the sanatorium is rebranded as a sanctuary for sensitive souls.

Mann’s *The Magic Mountain* openly inhibits the symbolic economy that Sontag condemns yet it does with explicitness that renders its spatial logic available for critical inspection. The Berghof is introduced from the novel’s first page as a site of vertiginous separation: “An ordinary young man on his way from his hometown, Hamburg, to the International Sanatorium Berghof in the mountains of Davos.” (Mann 3) The journey from the “flatland” to the Alpine heights is at once geographical and ontological; Hans Castrop crosses a threshold beyond which the coordinates of ordinary existence - clock time, professional ambition - lost their grip on his human life. The sanatorium’s most articulate theorist, the Italian humanist Lodovico Settemberini, names his transformed condition with pedagogical precision when he welcomes Hans to “a hermetic pedagogic province” (Mann 63). The term hermetic carries the weight of alchemical tradition - that sealed vessel in which base matter is transmuted into gold - and Settemberini’s phrase proposes that the Berghof is precisely such a vessel for the human soul. Mann’s narrative rigorously elaborates the consequences of this spatial premise. Time, the medium of ordinary life is itself denatured within the sanatorium walls. The narrator observes that “the week became the smallest unit of time; the months melted away in a vague

continuum” (Mann 210), a temporal liquefaction that dissolves the rhythms of bourgeois productivity and replaces them with a durational present in which thought can unfold without external pressure. Han’s intellectual and spiritual education which he debates with Settembrini and Naphta, his astronomical reading, his erotic fascination with Clavdia Chauchat, his gramophone fueled meditations on Suchubert and Gounod depends entirely on this suspension of flatland temporality. The spatial isolation of the Berghof is the condition of possibility for the pedagogical project that the novel narrates. But without the hermetic seal, Hans would remain an ordinary young man competent in engineering but innocent of philosophy. The spatial dynamics of the sanatorium also produce the novel’s distinctive social ecology. The Berghof gathers a microcosm of pre-war European society with Italians, Russians, Germans, Dutch; humanists, mystists, militarists, sensualists and compresses them into a forced intimacy that accelerates the clash of worldviews. As Eric Downing observes, “the sanatorium functions as a laboratory in which competing ideologies can be tested under controlled conditions” (Downing 48). The architectural confinement that Sontag reads as a prison becomes a condition of intellectual fecundity in Mann’s perspective. Foucault’s heterotopia is defined as a “counter-site” that is “capable of juxtaposing in a single real place, several spaces, several sites that are in themselves in compatible” (Foucault 25), finds its literary embodiment in Berghof’s lounges and balconies where the fatally ill recline beside the merely hypochondriachal, and philosophical antagonists conducts their duels of rhetoric over afternoon tea.

The spatial opposition between Sontag and Mann is as stark as their ontological disagreement about the nature of disease. Sontag sees the sanatorium as a regressive withdrawal from the ethical demands of social life; Mann sees it as a privileged site of existential inquiry. Yet a closer reading suggests *The Magic Mountain* in its narrative arc may stage a critique of hermetic pedagogy that brings it into partial alignment with Sontag’s concerns. The novel does not end on the mountain. Hans Castrop descends to the flatland after his seven years of education and vanishes into the industrial slaughter of the First World War, “singing to himself, as one does in the moments of great fear and danger,” until he stumbles and is “lost to our sight” (Mann 706). The hermetic province that promised transfiguration delivers its pupil not to wisdom but to anonymity and probable death. Hereby, the spatial seal is broken, and the flatland reasserts its brutal claim in a manner that underscores the fragility - and perhaps the culpable indulgence - of the pedagogical retreat. This ending does not simply ratify Sontag’s critique for Mann refuses to repudiate the value of Han’s years spent on the mountain. The novel insists that education was genuine, that the questions were real, the vision in the snow - that Hans resolves that “man shall grant death no dominion over his thoughts” (Mann 487); matters even if it cannot save him from the catastrophe that awaits. But the ending does not suggest that the sanatorium’s hermetic pedagogy is finally insufficient as an ethics of life. The space of

withdrawal is temporary, and its insights must be examined against the world that is not organised to honour them. This recognition, if it does not dissolve the romantic mythology that Sontag condemns, at least subjects it to a pressure that makes its limitations visible. The second affliction of meaning is not abolished but its contingency is exposed. In this manner, the sanatorium in Mann's hands becomes a heterotopia that knows itself as such - a "magic mountain" that can be magic or mountain at a time.

Sontag's critique of romanticised illness carries an unmistakable ethical urgency. For her, the transformation of a disease into a marker of spiritual depth is not a harmless literary convention but a species of violence. It is regarded as a second affliction that compounds the physical suffering of patients with moral and physiological judgement. She argues that the mythology of tuberculosis made the patient "interesting" (Sontag 31) recording the wasting of the body as a visible sign of an intensified interior life. Like she insists, this aesthetic manoeuvre has tangible consequences: it suggests that the sick person is somehow responsible for their condition, that their character has summoned the disease as an expression of their hidden sensibility. When Sontag describes *The Magic Mountain* as "a classic novel of the romanticising of tuberculosis" (Sontag 34); she is not providing a neutral literary judgement but lodging an ethical indictment. In her reading of Mann's novel, it perpetuates a tradition in which illness is interpreted as a psychological event, and people are encouraged to believe that they get sick because they (unconsciously) want to" (Sontag 56). The romance of the consumptive with its fusion with its fusion of the eros and pathology, becomes a mechanism of blame. The lover who desires Clavida Chauchat desires her illness, and in this way, the novel teaches the readers to desire illness itself - a desire that when translated back into the world of actual patients or "the kingdom of sick", it becomes punitive logic that Sontag is determined to unravel. The philosopher and narrative theorist Arthur Frank correctly captures the ethical stakes of this critique when he warns that "the stories we tell about illness are never innocent; they shape the possibilities of how the ill person can live and be regarded (Frank 4). Sontag's polemic rests on the conviction that Mann's novel, for all its philosophical sophistication, is not innocent; moreover its very artfulness deepens the harm by making the romance of the disease seductive.

However, Mann's novel does not simply present the romance of tuberculosis as an unambiguous ideal. It presents it as a seduction, and this very act of presentation, it opens a space for critical distance. It is at this moment the Russian patient, Clavida Chauvhat, becomes the object of Hans Castrop's erotic fantasation. Her physical description blends beauty with illness in a manner that it seems to exemplify the mythology that Sontag condemns. Her "narrow-eyes" and "Kirghiz features" (Mann 78) are repeatedly associated with a languid, feline grace that is inseparable from her illness. She is attractive precisely because she is tubercular, and tuberculosis makes her body once alluring and dangerous. During the Walpurgis Night carnival, when the sanatorium's "laws and convictions had

been suspended” and the barriers between the ill and the well were temporarily dissolved” (Mann 318), Hans confesses his love to her in the famous French monologue. He declares to Clavida: “the body, love, death, these three are one. For the body is sickness and desire, and it is death” (Mann 334). In this passage Hans explicitly portrays the metaphysical seduction of disease: to desire Clavida is to desire the illness that lives within her, and to embrace illness as a gateway to a deeper and more authentic existence. The narrative voice does not endorse this seduction with irony. Eric Downing argues that “Mann’s irony functions as a permanent internal commentary on the very romanticism the novel seems to purvey.” (Downing 55) The reader is invited to observe Hans’s intoxication while remaining aware of its constructedness, its status as a performance within the hermetic laboratory of Berghof. This ironic architecture complicates Sontag’s reading in a crucial way; that the novel does not merely romanticise illness ; it displays the process of romanticisation and makes the process an object of scrutiny. Now, the question that we encounter is whether this self-consciousness constitutes an ethical defense. In the chapter “Snow,” Hans undergoes a visionary experience that ends up in a resolution that “for the sake of goodness and love, man shall grant death no dominion over his thoughts.” (Mann 487) But the promise of the snow vision does not get fulfilled. Hans returns to Berghof and resumes his idle life with philosophical consumption, and gradually forgets his resolution. Thus it is proven that the education he acquired from illness and being ill, becomes incapable of transforming its pupil into a genuinely ethical subject.

In the closing paragraph, when Hans Castrop descends from the mountains and vanishes into the industrialised slaughter of the First World War, Mann writes: “Farewell, the honest Hans Castrop! Farewell, life’s delicate child!... The moment will come out of this universal festival of death, out of this fevered flame of destruction, love may someday rise up. (Mann 706) This closure of the novel intensifies the collusion and subversion. On the one hand, the novel’s final question, whether love can rise from death retains the romantic vocabulary which Sontag renders dangerous; since it holds open possibility that suffering redeems itself in meaning. On the other hand, the sheer disappearance of Hans Castrop as he stumbles, and is singing and is “lost to our sight” denies the reader any consoling apotheosis. Also the education he gained in the mountain does not save him and the romance of illness does not lead him to transcendence rather to a battlefield. In this manner, Mann’s novel ends up in the very desmystification that Sontag demands through its aesthetic means. As Frank suggests, the most ethical illness narratives are those that “hold open the possibility of meaning without imposing a single punitive interpretation” (Frank 158). If read based on this assumption, the novel does not merely collide with the “second-affliction” of metaphor; rather it dramatises the affliction and makes it visible as a construction, and leaves the reader uncertain about whether the meanings derived from illness can ever be entirely purified of harm. The central thesis of the paper has been that Sontag and Mann when

read together unravels a cultural ambivalence that cannot be settled by choosing one over the other. The common human impulse to derive meaning from illness is ineradicable, yet the sources of the meanings and interpretations from which it is derived are mostly borrowed from the narratives that blame, isolate, and mystify. Being aware of this ambivalence in the creation of meanings to illness and the recognition that metaphor can wound as easily as it can console can perhaps be the only ethical position that can be taken from this comparative study based on Sontag's polemic and Mann's irony.

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