

JOAN DIDION

A writer whose fame is fourfold—as novelist, essayist, journalist, and screenwriter—Joan Didion was born in 1934 in California, where her family had lived for five generations. After graduation from the University of California, Berkeley, she spent a few years in New York, working as a feature editor for the fashion magazine *Vogue*. She gained wide notice in the 1960s and 1970s with the publication of the essay collections *Slouching Towards Bethlehem* (1968) and *The White Album* (1979) and the novels *River Run* (1963), *Play It as It Lays* (1971), and *A Book of Common Prayer* (1977). *Salvador* (1983), her book-length essay based on a visit to war-torn El Salvador, and *Miami* (1987), a study of Cuban exiles in Florida, also received close attention. With her late husband, John Gregory Dunne, Didion coauthored a number of screenplays, notably for *A Star Is Born* (1976), *True Confessions* (1981), and *Up Close and Personal* (1996). Her latest books are *The Last Thing He Wanted* (1996), a novel; *Political Fictions* (2001) and *Fixed Ideas: America Since 9.11* (2003), both critiques of US politics; *Where I Was From* (2003), a memoir and an assessment of Didion's native California; and *The Year of Magical Thinking* (2005), a memoir of life after Dunne's sudden death that was adapted into an acclaimed Broadway play.

In Bed

In this essay from *The White Album*, Didion explains migraine headaches in general and her own in particular. Any migraine sufferer will recognize the pain and debility she describes. Even nonsufferers are likely to wince under the spell of Didion's vivid, sensuous prose.

Didion draws on half a dozen methods of development to give a full picture of migraine:

- Narration (Chap. 4): paragraphs 1–2, 7–8
- Description (Chap. 5): paragraphs 1–2, 7–8
- Example (Chap. 6): paragraphs 2–3, 5, 7
- Process analysis (Chap. 8): paragraphs 3–5, 7–8
- Cause and effect (Chap. 11): paragraph 6
- Definition (Chap. 12): paragraph 3

Three, four, sometimes five times a month, I spend the day in bed with a migraine headache, insensible to the world around me. Almost every day of every month, between these attacks, I feel the sudden irrational irritation and flush of blood into the cerebral arteries which tell me that migraine is on its way, and I take certain drugs to avert its arrival. If I did not take the drugs, I would be able to function perhaps one day in four. The physiological error

called migraine is, in brief, central to the given of my life. When I was fifteen, sixteen, even twenty-five, I used to think that I could rid myself of this error by simply denying it, character over chemistry. "Do you have headaches *sometimes? frequently? never?*" the application forms would demand. "Check one." Wary of the trap, wanting whatever it was that the successful circumnavigation of that particular form could bring (a job, a scholarship, the respect of mankind and the grace of God), I would check one. "*Sometimes,*" I would lie. That in fact I spent one or two days a week almost unconscious with pain seemed a shameful secret, evidence not merely of some chemical inferiority but of all my bad attitudes, unpleasant tempers, wrongthink.

For I had no brain tumor, no eyestrain, no high blood pressure, nothing wrong with me at all: I simply had migraine headaches, and migraine headaches were, as everyone who did not have them knew, imaginary. I fought migraine then, ignored the warnings sent, went to school and later to work in spite of it, sat through lectures in Middle English and presentations to advertisers with involuntary tears running down the right side of my face, threw up in washrooms, stumbled home by instinct, emptied ice trays onto my bed and tried to freeze the pain in my right temple, wished only for a neurosurgeon who would do a lobotomy on house call, and cursed my imagination.

It was a long time before I began thinking mechanistically enough to accept migraine for what it was: something with which I would be living, the way some people live with diabetes. Migraine is something more than the fancy of a neurotic imagination. It is an essentially hereditary complex of symptoms, the most frequently noted but by no means the most unpleasant of which is a vascular headache of blinding severity, suffered by a surprising number of women, a fair number of men (Thomas Jefferson had migraine, and so did Ulysses S. Grant, the day he accepted Lee's surrender), and by some unfortunate children as young as two years old. (I had my first when I was eight. It came on during a fire drill at the Columbia School in Colorado Springs, Colorado. I was taken first home and then to the infirmary at Peterson Field, where my father was stationed. The Air Corps doctor prescribed an enema.) Almost anything can trigger a specific attack of migraine: stress, allergy, fatigue, an abrupt change in barometric pressure, a contretemps over a parking ticket. A flashing light. A fire drill. One inherits, of course, only the predisposition. In other words I spent yesterday in bed with a headache not merely because of my bad attitudes, unpleasant tempers and wrongthink, but because both my grandmothers had migraine, my father has migraine and my mother has migraine.

No one knows precisely what it is that is inherited. The chemistry of migraine, however, seems to have some connection with the nerve hormone named serotonin, which is naturally present in the brain. The amount of sero-

tonin in the blood falls sharply at the onset of migraine, and one migraine drug, Methysergide, or Sansert, seems to have some effect on serotonin. Methysergide is a derivative of lysergic acid (in fact Sandoz Pharmaceuticals first synthesized LSD-25 while looking for a migraine cure), and its use is hemmed about with so many contraindications and side effects that most doctors prescribe it only in the most incapacitating cases. Methysergide, when it is prescribed, is taken daily, as a preventive; another preventive which works for some people is old-fashioned ergotamine tartrate, which helps to constrict the swelling blood vessels during the "aura," the period which in most cases precedes the actual headache.

Once an attack is under way, however, no drug touches it. Migraine gives some people mild hallucinations, temporarily blinds others, shows up not only as a headache but as a gastrointestinal disturbance, a painful sensitivity to all sensory stimuli, an abrupt overpowering fatigue, a strokelike aphasia, and a crippling inability to make even the most routine connections. When I am in a migraine aura (for some people the aura lasts fifteen minutes, for others several hours), I will drive through red lights, lose the house keys, spill whatever I am holding, lose the ability to focus my eyes or frame coherent sentences, and generally give the appearance of being on drugs, or drunk. The actual headache, when it comes, brings with it chills, sweating, nausea, a debility that seems to stretch the very limits of endurance. That no one dies of migraine seems, to someone deep into an attack, an ambiguous blessing.

My husband also has migraine, which is unfortunate for him but fortunate for me: Perhaps nothing so tends to prolong an attack as the accusing eye of someone who has never had a headache. "Why not take a couple of aspirin," the unafflicted will say from the doorway, or "I'd have a headache, too, spending a beautiful day like this inside with all the shades drawn." All of us who have migraine suffer not only from the attacks themselves but from this common conviction that we are perversely refusing to cure ourselves by taking a couple of aspirin, that we are making ourselves sick, that we "bring it on ourselves." And in the most immediate sense, the sense of why we have a headache this Tuesday and not last Thursday, of course we often do. There certainly is what doctors call a "migraine personality," and that personality tends to be ambitious, inward, intolerant of error, rather rigidly organized, perfectionist. "You don't look like a migraine personality," a doctor once said to me. "Your hair's messy. But I suppose you're a compulsive housekeeper." Actually my house is kept even more negligently than my hair, but the doctor was right nonetheless: Perfectionism can also take the form of spending most of a week writing and rewriting and not writing a single paragraph.

But not all perfectionists have migraine, and not all migrainous people have migraine personalities. We do not escape heredity. I have tried in most

of the available ways to escape my own migrainous heredity (at one point I learned to give myself two daily injections of histamine with a hypodermic needle, even though the needle so frightened me that I had to close my eyes when I did it), but I still have migraine. And I have learned now to live with it, learned when to expect it, how to outwit it, even how to regard it, when it does come, as more friend than lodger. We have reached a certain understanding, my migraine and I. It never comes when I am in real trouble. Tell me that my house is burned down, my husband has left me, that there is gun-fighting in the streets and panic in the banks, and I will not respond by getting a headache. It comes instead when I am fighting not an open but a guerrilla war with my own life, during weeks of small household confusions, lost laundry, unhappy help, canceled appointments, on days when the telephone rings too much and I get no work done and the wind is coming up. On days like that my friend comes uninvited.

And once it comes, now that I am wise in its ways, I no longer fight it. 8 I lie down and let it happen. At first every small apprehension is magnified, every anxiety a pounding terror. Then the pain comes, and I concentrate only on that. Right there is the usefulness of migraine, there in that imposed yoga, the concentration on the pain. For when the pain recedes, ten or twelve hours later, everything goes with it, all the hidden resentments, all the vain anxieties. The migraine has acted as a circuit breaker, and the fuses have emerged intact. There is a pleasant convalescent euphoria. I open the windows and feel the air, eat gratefully, sleep well. I notice the particular nature of a flower in a glass on the stair landing. I count my blessings.

7–8) contribute to her essay?

Questions on Language

1. How would you characterize Didion's word choice: colorful, utilitarian, flowery, careless, or lyrical? Support your answer with examples.
2. In the title of Didion's essay, what arrests you? Is this title a teaser, having little to do with the essay, or does it fit?
3. Speaking in paragraph 1 of the "circumnavigation" of an application form, Didion employs a metaphor. In paragraph 7 she introduces another—"a guerrilla war." In paragraph 8 she uses a simile—"The migraine has acted as a circuit breaker." Comment on the aptness of these FIGURES OF SPEECH.
4. Consult a dictionary if you need help in defining the following: vascular, contraindications, predisposition (par. 3); synthesized, contraindications, aura (4); aphasia (5).

Suggestions for Writing

1. Expand your journal entry into a full descriptive essay, fit to explain your illness