Cancer -
Language of Comfort and Healing

A Review of Deanna Thompson’s *Hoping for More: Having Cancer, Talking Faith, and Accepting Grace*

A Review by Swarna Thirumalai and M. S. Thirumalai
Deanna Thompson’s *Hoping for More* is a personal narrative of her journey through cancer. It is her personal ‘story of life and faith with stage IV cancer.’ In her own words, it is “a story about talking faith in the midst of cancer and talking cancer in light of faith; a way of speaking that resists conventional language about God’s relationship to suffering …” (p. xiv)

Deanna Thompson writes with strong faith, with empathy for all who suffer and with hope that comforts and heals. Her style and focus on the Supreme is something that, in addition to Christians, all Hindus, Muslims, Jains, Buddhists and diverse castes and communities in India and the Subcontinent would easily relate to, because of their strong *bhakti* tradition. While the focus is on the patient and the disease, the patient’s relationship to God and what and who God means takes the center stage all through this journey of painful cancer diagnosis, treatment and recovery process. Deanna’s language is very personal and simple and her faith is so strong that it would easily resonate with all the Indian patients.

There is an additional note: she consciously avoids the most commonly found “disease-induced righteousness” or suggests or gives a false assumption that “those of suffering from cancer possess a saint-like status that separates us from those who are cancer-free” (p. xiv).

The book is not a devotional nor is it a story of suspense, although these elements are there. The book is primarily what the sub-title says: Having Cancer, Talking faith and Accepting Grace. We get a glimpse into the workings of the mind of the patient with a terrible disease, how she is shocked, how she slowly and steadily gains courage to face the reality and how ultimately the remission begins, etc.

**What is Cancer?**

An easy to understand general definition of what cancer is available in the website of the famous Adyar Cancer Institute, Chennai:

> Each part of our body is built of cells just like how a house is built of bricks. Each part has its own kind of cell, so that our lungs are made of lung cells, our kidney from kidney cells and so on. In the normal course the uniform and orderly growth of our cells result in our body growth. Cancer occurs when healthy cells begin to grow out of control. [http://www.cancerinstitutewia.org/abtcancer.htm](http://www.cancerinstitutewia.org/abtcancer.htm)

**Incidence of Cancer in India**

Recent reports and research indicate that incidence of deaths due to cancer varies from religion to religion and region to region in India. It appears that more people living in the north-eastern region are more likely to develop and die due to cancer. More Hindu women are more likely to develop cervical cancer than Muslim women in India. There is also variation between those who are illiterates or less educated and those who are more highly educated. Indian diversity gets

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reflected in some manner in the incidence of cancer and cancer deaths. (http://articles.timesofindia.indiatimes.com/2012-03-29/india/31254449_1_cervical-cancer-cancer-deaths-cancer-cases)

According to Nandakumar, A. (National Cancer Registry Program, Indian Council of Medical Research, Consolidated report of the population based cancer registries, New Delhi, India: 1990-96) different cancers occur in different states in India:

- Esophageal cancers: Southern states of India like Karnataka and Tamil Nadu and also in Maharashtra and Gujarat.
- Stomach cancers: Southern India with the highest incidence in Chennai.
- Oral cancers: Kerala (South India)
- Pharyngeal cancers: Mumbai (Western India)
- Thyroid cancers among women: Kerala
- Gall bladder cancer: Northern India, particularly in Delhi and West Bengal.

In a significant article which discusses cancer risk and diet in India, Sinha, et al., write:

Cancer rates in India are comparatively lower than those seen in Western countries, but are rising with increasing migration of rural population to the cities, increase in life expectancy and changes in lifestyles. In India rates for oral and oesophageal cancers are some of the highest in the world. In contrast, the rates for colorectal, prostate, and lung cancers are one of the lowest. Study of Indian immigrants in Western societies indicate that rates of cancer and other chronic diseases, such as coronary heart disease and diabetes, increase dramatically after a generation in the adopted country. Change of diet is among the factors that may be responsible for the changing disease rates. Diet in India encompasses diversity unknown to most other countries, with many dietary patterns emanating from cultural and religious teachings that have existed for thousands of years. Very little is known, however, about the role of the Indian diet in causation of cancer or its role, if any, in prevention of cancer … (Sinha, R., Anderson, D.E., McDonald, S.S., and Greenwald, P. 2003).

Reports suggest that there is “an increase in the incidence of cancer. This is mainly attributed to urbanization, industrialization, lifestyle changes, population growth and increased life span (in turn leading to an increase in the elderly population)” ... “Cancer prevalence in India is estimated to be around 2.5 million, with over 8,00,000 new cases and 5,50,000 deaths occurring each year due to this disease” (Nandakumar, A. National Cancer Registry Program, Indian Council of Medical Research, Consolidated report of the population based cancer registries, New Delhi, India: 1990-96).

**Paucity of Narratives**
Reports or narratives of cancer patients on the experience they have had in coping with the disease are not easily available. Hundreds of thousands of patients must be suffering silently with no finite clue to the disease they suffer from. Even if they identify it as cancer, rural folks, with no adequate awareness, income, or education or other resources, they resign themselves to the “fate” they are forced into. Perhaps it is their past misdeeds or their previous birth, etc. may cloud their minds as the possible causes. Early detection and early prevention are strange things yet in the lives of many.

Deanna Thompson’s Narrative Gives Hope

In this context, Deanna Thompson’s narrative becomes very significant since the narrative will give hope to those who can read and inform themselves about the condition they face and relate to positive processes of gaining courage and inner healing and hoping for recovery. Such narratives encourage the readers and hope for the best in the future with patience and informed attitude.

The Book

The book has 13 short chapters and the narrative in first person is told in 148 pages, with a short Foreword and a descriptive Preface. The titles of the chapters are descriptive of what you’d expect and get within the respective chapters.

1. Fractured
2. Diagnosis
3. Stage IV
4. Grace Amidst the Ruins
5. Losing Our Grip
6. Take this Cancer from Me
7. Embraced by the Virtual Body of Christ
8. Getting to Easter
9. Having Cancer, Talking Cancer
10. The Trouble with Miracles
11. Moving Forward, Standing Still
12. The Grace of Many Feet, Many Hands
13. Hoping for More

Suspense, Discovery, Process and Healing

The first three chapters are full of suspense. Deanna’s various visits to the doctors and clinics are all described with great suspense and finesse. She was clueless about her breast cancer, because it all began with a pain in the lower back. It was only a fractured spine, early investigations showed. When the second fracture occurred, the specialist doctor suspected that the strange and foreign fluid noticed in the fracture area could signify some cancer. One would normally expect
that spine is the place where this cancer could be or would be located. However, it was breast cancer.

This discovery leads to further discoveries in mind, body and spirit. A moving narrative to which both the relatives and the patients could easily relate to.

The remission begins at last, and the Grace is abundantly around her.

The Narrative Is the Counsel for Other Patients

This narrative is told in a smooth and empathic language of comfort and healing, although it all begins with some sort of uncertainty in the beginning. One travels with Deanna all through the narrative, taking part in her pain, sorrow, doubt and courage. The way Deanna narrates there is no advice or counsel or direction given to her readers, who may be suffering from any type of cancer or chronic disease. It is all a personal story. But the story in itself is the counsel, advice and direction, giving all the comfort.

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References

Nandakumar, A. National Cancer Registry Program, Indian Council of Medical Research, Consolidated report of the population based cancer registries, New Delhi, India: 1990-96.


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