Linda Hutcheon and Michael Hutcheon: Opera: Desire, Disease, Death. Lincoln: University of Nebraska Press, 1996. xviii, 295 p. : ill. \$40.

The authors, a married couple both at the University of Toronto -- she in English, he in Medicine -- have pooled their professional perceptions and their love of opera, in an unusual commentary which, despite the formidable apparatus of its argument (one-fifth of the pages are taken up with the end-notes), should interest a wide non-specialist readership.

An early definition mentions, as an obligatory ingredient of the genre, "...Love, without somewhat of which Passion, no Opera can possibly subsist" (John Dryden, preface to Albion and Albanius, 1685). Writers and composers have indeed repeatedly illustrated that love can make you ill and/or drive you nuts. The Hutcheons diagnose various operatic love-sicknesses of the body, and resulting on-stage fatalities (but not those of the mind), as found in specific works of the nineteenth and twentieth centuries.

"The diseases that are represented in opera -tuberculosis, syphilis, cholera -- do not get there by accident, and they have been represented by European and North American society in ways that are particularly powerful in their conjunction of sexuality and death" (19). The opera immediately evoked here is *Tristan*, although the title often given to its concluding passage, "Love-Death," did not originate with Wagner. What did Isolde die of? These authors do not address the question, and -- unless I missed it in an end-note -- do not even include this work in their study.

They well justify their choice of repertoire (section-heading, "Why these diseases and these operas?", 18), but the listener to opera quizzes may be stirred into ruminating, why not others? Why not mononucleosis (surely that was poor Mélisande's problem), or polio (Amahl), or smallpox, German measles, Asiatic flu, mumps? They devote an interesting section to tobacco addiction and its connections with erotic allure; but why not an operatically more prevalent addiction, alcohol? As to operas, too, why not *Louise* (the father's ailment is curious, though he doesn't die of it), or *The Devils of Loudun* (the on-stage enema could surely inspire medical comment), or further examples centring (like *Parsifal*) on the contrast between sacred and profane desire (*Tannhäuser*, *Thaïs*)? AIDS is included in an epilogue because of the accumulation of interesting spoken plays (such as Tony Kushner's Angels in America), and, while no operatic composer has yet tackled AIDS as a theme, the authors shrewdly predict that someone soon will (John Corigliano is said to be currently working on just such a piece).

Among operas they do treat, it is refreshing to see a work by Harry Somers (*Mario and the Magician*); further CanCon is represented in the illustrations, of which one-third are from productions by the Canadian Opera Company. Among operas they could as well not have bothered with, in my view, are *Il Tabarro* and *The Secret of Suzanne*, which appear especially trashy when mentioned seriously in the company of such masterpieces as La Traviata, Carmen, and Lulu.

But we're into social contexts here, not aesthetic value judgments; instead of petulantly wishing they had written a different book, the reviewer should express appreciation for the one they did write. Their chapter on Parsifal, previously published as an article in the Cambridge Opera Journal, led me to revisit this work (via score and recording) and to penetrate its strange mood for the first time. Following other recent critics, they seek to extend its reference beyond the Christian basis of the Grail legend. Their elaborate multilingual tracings of the significance of the name Kundry stand out among several spectacular "wordplay" passages in the book. They contribute an original diagnosis of the significance of Amfortas's body-sores, but do not convince me that "...nineteenth-century audiences would very

likely have made the association... between flowers and syphilis" (79, referring to the scene of the Flower Maidens).

To the claim of recent critics that operas too often victimize their heroines, the authors respond: "In the name of love, women do often die at their own hands..., but so too do men... [I]t may be that for every Senta who leaps to her death...there is a Peter Grimes who rows out to sea to die" (12).

Their analysis of The Rake's Progress makes no mention of Tom's London wife, Baba the bearded lady. In the original draft scenario (see the appendix to Stravinsky and Craft, Memories and Commentaries, New York 1960), she is "the Ugly Duchess" -- an odd invention of the librettists, not found in the Hogarth engravings which inspired the opera. In contrast to the case of Parsifal, no doubt most audiences did, and do, grasp that Tom's madness is brought on by tertiary syphilis, the last stage in his grisly sexual "progress." Whether this element in the plot was the result of the composer's awareness of the social dangers of venereal infection in France between the wars and in the U.S. during and after World War Two, as the Hutcheons argue, can be documented only circumstantially, but this they do very well. Referring later to a witty lyric from Bernstein's Candide, they comment that "For the North American audience of 1956, syphilis had come close enough to being under control that humor might be possible..." (119).

The Hutcheons draw understandably more on textual than on musical details in illustrating their arguments. Referring again to *The Rake's Progress*, they note that the brothel scene (I, 2) is in C major, a key which "does not appear again in the opera, evidently," until the Bedlam scene (III, 3) -- a musical link implying a dramatic one. However, to the extent that one can speak unequivocally of keys in even the neoclassic Stravinsky, C major is also the key of Anne's cabaletta ("I go, I go to him," I, 3), whose theme is repeated (in the same key) at a crucial moment in the churchyard scene (III, 2).

My recourse to the volume by Stravinsky and Craft referred to above renewed my irritation with its recurrent use of the word "famous" as in "Arensky's famous piano trio" (60), "Delius's famous orange farm" (125), or "the famous catechism scene" (in a Kabuki drama, 141). The Hutcheons appear to have fallen victims to the same disease: "Duchâtelet's famous report" (on prostitution in Paris, 42); Fernel, "the famous sixteenth-century physician" (69); "the famous [sixteenth-century] work of Fracastorius" (71); the "famous late-1890s debate between Jean Martin Charcot and Alfred Fournier" (concerning the connections between syphilis and madness, 106); Susan Sontag's "famous 'Some Notes on Camp'" (200); Adorno's "famous" theory about opera (226); etc. A librarian acquaintance explains this usage as the academic equivalent of "like" or "y'know." Clearly the above examples make good sense without it.

That is however a minor annoyance only. The book is absorbing and original, and full of intriguing detail, calculated to illuminate well-known operas and arouse interest in unfamiliar ones. For example, the lack of heat in the *La Bohème* garret is a humorous element, but at the same time connects closely to the heroine's illness and death: cold and damp surroundings were a proven cause of tuberculosis (50).

The authors' conclusion is provocative: "The ways medicine comes to understand disease will continue to affect the way the general culture portrays it: but...medical knowledge will always be affected in turn by the social and cultural meanings given to disease" (227). Is this perhaps a too-veristic view of the operatic medium? Artists may decide on fantastic or imaginative depictions of illness, suffering, and death, which contradict medical findings (perhaps not even deliberately). An operatic project is always researched, but the resulting work may not always literally conform to science.

John Beckwith Faculty of Music, University of Toronto