

Health: Crude Concept and Philosophical Question

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Who among us did not speak of what is healthy and what is harmful before the arrival of Hippocrates?" This is how Epictetus, in his lectures, explains and dissolves the popular belief in the existence of an a priori notion of health and the healthy — whose relation to objects and behaviors is said, moreover, to be uncertain.¹ Still, if we admit that such a definition of health is indeed possible without reference to some explicit knowledge, where would we seek its foundation?

It would be inappropriate, here in Strasbourg,² to subject to your examination some reflections on health without pointing out the definition suggested a half century ago by a famous surgeon and professor at the Faculty of Medicine from 1925 to 1940: "Health is life lived in the silence of the organs."³ It was perhaps thanks to conversations between colleagues at the Collège de France that Paul Valéry came to echo René Leriche in writing that "health is the state in which necessary functions are achieved imperceptibly or with pleasure."⁴ Earlier, Charles Daremberg, in his collection of articles *La médecine, histoire et doctrines* (1865), had written that "in health one does not feel the movements of life; all functions are

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1. Epictetus, *Dissertationes ab Arriano digestae*, 2.17.8.

2. The essay was originally given as a lecture in Strasbourg, France, in May 1988. — Trans.

3. See also Canguilhem's discussions of Leriche in *The Normal and the Pathological*, trans. Carolyn Fawcett (New York: Zone, 1989), and in *Knowledge of Life*, ed. Paola Marrati and Todd Meyers, trans. Stefanos Geroulanos and Daniela Ginsburg (New York: Fordham University Press, forthcoming). — Trans.

4. Paul Valéry, *Mauvaises pensées et autres* (Paris: Gallimard, 1942).

accomplished in silence.”⁵ And after Leriche and Valéry, the likening of health to silence was made by Henri Michaux but was deemed negative: “Just as the body (its organs and its functions) has been mainly known and revealed not by the prowess of the strong, but by the disorders of patients, of the weak, of the infirm, and of the wounded (health being quiet and the source of this immensely erroneous impression that goes all by itself [*de soi*]), it is the disturbances of the spirit, its dysfunctions, that will be my teachers.”⁶ Well before all these, and perhaps more subtly than any of them, Diderot wrote in his *Lettre sur les sourds et muets à l’usage de ceux qui entendent et qui parlent* (1751): “When we go well, no part of the body informs us of its existence; if by some pain it informs us of itself, it is then certain that we are not doing well; and even if by pleasure, it is not always certain that we are doing better.”⁷

Health was a frequent philosophical topic during the classical period and the Enlightenment, approached almost always in the same way — by reference to disease, whose absence was generally held to be the equivalent of health. For example, Leibniz, while discussing Pierre Bayle’s theses on good and evil in *Theodicy* (1710), wrote: “But does physical good lie solely in pleasure? M. Bayle appears to be of this opinion; but I consider that it lies also in a middle state, such as that of health. One is well enough when one has no ill; it is a degree of wisdom to have no folly” (sec. 251). Leibniz adds: “M. Bayle would wish almost to set aside the consideration of health; he likens it to the rarefied bodies, which are scarcely felt, like air, for example; he likens pain to the bodies that have much density and much weight in slight volume. But pain itself makes us aware of the importance of health when we are bereft of it” (sec. 259).⁸

Among the philosophers who paid the most attention to the question of health, it is necessary to point out Kant. Strengthened by the successes and failures of his private art of living (of which, in 1804, Andreas Christoph Wasianski wrote a long account),⁹ Kant addressed the question of health in the third section of *The Conflict of the Faculties* (1798). As for health, he says, we find ourselves in

5. Charles Daremberg, *La médecine, histoire et doctrines* (Paris: Didier, 1865).

6. Henri Michaux, *Les grandes épreuves de l’esprit et les innombrables petits* (Paris: Gallimard, 1966), 14.

7. Denis Diderot, *Lettre sur les aveugles; Lettre sur les sourds et muets* (Paris: Flammarion, 2000), 110.

8. G. W. Leibniz, *Theodicy*, trans. E. M. Huggard (Indianapolis, Ind.: Bobbs-Merrill, 1966), 281, 285–86.

9. Andreas Christoph Wasianski, *Immanuel Kant, sein Leben in Darstellungen von Zeitgenossen* (Berlin: Deutsche Bibliothek, 1912).

embarrassing conditions: “He can feel well (to judge by his comfortable feelings of vitality), but he can never know that he is healthy. . . . Hence if he does not feel ill, he is entitled to express his well-being only by saying that he is apparently in good health.”¹⁰ These remarks by Kant are important, in spite of their apparent simplicity, because they make health an object outside the field of knowledge. Let us bolster the Kantian statement: there is no science of health. Let us accept this for the moment. Health is not a scientific concept; it is a crude concept. Which is not to say that it is trivial or out of reach, but simply rough and inexact.

It seems to me that at the head of this series of philosophers—Leibniz, Diderot, Kant—we should place Descartes. His conception of health is especially important, since he is the inventor of the mechanist conception of organic functions. This philosopher, doctor of himself, by associating health and truth in his tribute to silent values, seems to me to have posed a question that up to now has only been badly understood. He wrote in a letter to Chanut (March 31, 1649): “Though health is greatest among all those of our goods which relate to the body, it is however that to which we make less reflection and which we taste less. The knowledge of truth is like the health of the soul: once a man possesses it, he doesn’t think of it anymore.”¹¹

How is it that no one ever thought of reversing this assimilation, that no one ever wondered whether health were the truth of the body? Truth is a logical value specific to the exercise of judgment. But there is another sense of truth—for which one need not turn to Heidegger. In Émilé Littré’s *Dictionnaire de la langue française*, an article titled “Truth” [*Vérité*] starts as follows: “Quality by which things appear such as they are.” *Verus*, “true” [*vrai*], is used in Latin in the senses of real and regular or correct. As for *sanus*, “healthy” [*sain*], it is the descendant of the Greek *σάος*, which also has two senses: intact or preserved, and infallible or sure. Hence the expression *safe and sound*. In his *Histoire des expressions populaires relatives à l’anatomie, à la physiologie et à la médecine* (1888), Édouard Brissaud uses a saying that one can interpret as a kind of popular recognition of the alliance between health and truth [*santé-vérité*]: “As foolish as a sick athlete.”¹² *Foolish*

10. Immanuel Kant, *The Conflict of the Faculties*, trans. Mary J. Gregor (New York: Abaris, 1979), 181.

11. Descartes to Chanut, March 31, 1649, in *The Philosophical Writings of Descartes*, trans. John Cottingham, Robert Stoothoff, and Dugald Murdoch, vol. 3 (Cambridge: Cambridge University Press, 1991), 370.

12. Édouard Brissaud, *Histoire des expressions populaires relatives à l’anatomie, à la physiologie et à la médecine*, 2nd ed. (Paris: Chamerot, 1892).

[*sot*] here suggests at once “stupid” and “deceived.” The athletic habitus points to a maximum possession of physical means, the equation of ambitions to capacities. A sick athlete is an admission that his sound body has been falsified.

But it is a German-language author, subtler in his choice of references than any collector of sayings, who offers unexpected support to what I call a thesis waiting for an author. This is Friedrich Nietzsche. It is not easy, even after so many commentators—notably Andler, Bertram, Jaspers, and Löwith—to determine the meaning and scope of Nietzsche’s many texts relating to disease and health. In *The Will to Power*, and following Claude Bernard, Nietzsche at times believes in the homogeneity of health and disease and at others celebrates the “great health” capable of absorbing and overcoming morbid tendencies.¹³ In *The Gay Science* this great health is the power to put all values and desires to the test.¹⁴ In *The Anti-Christ*, Christianity is denounced for its incorporation of the instinctive rancor of the sick toward the healthy, for its loathing of “all that is right, proud, and superb.”¹⁵ Retain: right [*droit*]. In *Thus Spoke Zarathustra* we find this same rectitude of the body opposed to the morbid preachers of the beyond: “More honestly and more purely speaks the healthy body, the perfect and perpendicular body and it speaks of the meaning of the earth.”¹⁶ Is it superfluous to recall here that in Chinese mythology the square is the symbol of the earth, whose form is square, whose divisions are square? Health thus summarizes, for Nietzsche, straightness, reliability, competence. Moreover, “the body is a great reason, a peace, a herd and a shepherd.” Finally, “there is more reason in your body than in your best wisdom.”¹⁷

By the time Nietzsche writes this in 1884, physiologists have experimentally established the existence of apparatuses and functions of organic regulations. But it is not very likely that the great English physiologist Starling was thinking of Nietzsche when he titled his treatise on regulations and homeostasis *The Wisdom*

13. Friedrich Nietzsche, *The Will to Power*, trans. Walter Kaufmann and R. J. Hollingdale (New York: Vintage, 1967). [As Canguilhem’s quotations are too short to allow for proper citation, we translate directly his use of Nietzsche’s passages; however, we reference the English editions of the books.—Trans.]

14. Friedrich Nietzsche, *The Gay Science*, trans. Walter Kaufmann (New York: Random House, 1974).

15. Friedrich Nietzsche, *Twilight of the Idols/The Anti-Christ*, trans. R. J. Hollingdale (New York: Penguin, 1990), 180. [We translate directly from Canguilhem. Hollingdale’s translation is “Everything well-constituted, proud, high-spirited, beauty above all.”—Trans.]

16. Friedrich Nietzsche, *Thus Spoke Zarathustra*, trans. Adrian del Caro (Cambridge: Cambridge University Press, 2006), 22.

17. Nietzsche, *Thus Spoke Zarathustra*, 23.

of the Body (1909), a title also taken up by Cannon in 1932.¹⁸ Starling, inventor in 1905 of the term *hormone*, had published a treatise, *Principles of Human Physiology* (1912)—reexamined later by Lovatt Evans—whose index does not even contain the word *health*.¹⁹ In the same way, *santé* [health] does not appear in the index of Kayser's *Physiologie* (1963).²⁰ By contrast, in each of these treatises the index contains *homeostasis*, *regulation*, and *stress*. Should we see here a new argument for refusing the concept of health any scientific status?

Can we, must we, say that the functions of the organism are objects of science, but what Bernard called “the harmonic relations of economic functions” are not? Besides, Bernard expressly said, “in physiology, there exist only conditions specific to each phenomenon which we should determine exactly, without losing ourselves in hallucinations on life, death, health, disease and other entities of the same kind.” That did not prohibit Bernard from later using the expression “organism in a state of health.”²¹

But in its general introduction, Starling's *Principles* contains a remark that can pass for minor but that I believe is important enough to highlight. It indicates, for students, that the term *mechanism*, often used to depict the mode of exercise [*mode d'exercice*] of an organic function, should not be treated too exactly. (“This rather overworked word need not be taken too seriously. . . .”)²²

We are comforted here by this refusal to reduce health to a necessary effect of relations of the mechanical type. Health, the body's truth, does not arise [*relève*] out of an explanation of theorems. There is no health of a mechanism. Besides, it is Descartes himself who, in the sixth *Meditation*, while denying an ontological difference [*différence d'être*] between a working clock and an out-of-order clock, teaches us that there is an ontological difference between an out-of-order clock and a hydropic man, that is, an organism driven by thirst to drink without constraint. When drinking is harmful, says Descartes, it is an error of nature to be thirsty. By health, Descartes understands “aliquid . . . quod revera in rebus reperitur, ac proinde nonnihil habet veritatis” (something . . . which is truly to be

18. Ernst Henry Starling, *The Chemical Control of the Body: Harvey Lectures, 1907–1908* (New York: Lippincott, 1909), 115–31; Walter B. Cannon, *The Wisdom of the Body* (New York: Norton, 1932).

19. Ernst Henry Starling, *Principles of Human Physiology* (London: Churchill, 1968).

20. Charles Kayser, *Physiologie les grandes fonctions*, 3rd ed. (Paris: Flammarion, 1992).

21. Claude Bernard, *Leçons sur le diabète et la glycogénèse animale* (Paris: Baillière, 1877), 72, 354, 421.

22. Starling, *Principles of Human Physiology*, 1–9.

found in things, and therefore which is not without some truth).²³ For a machine, the operative state is not health, and disorder is not a disease. No one has said this as profoundly as Raymond Ruyer in *Paradoxes de la conscience*. Among several passages, it is enough here to quote the one that relates to the cybernetic vicious circle. It is absurd to conceive the living organism as a regulated machine, since ultimately — and whatever the intermediary stages may be — “the regulated machine is always [vicarious] of a regulation or a conscious organic selection. . . . by definition, a natural regulation can only be . . . a self-regulation without machine.”²⁴

There is no disease of the machine, just as there is no death of the machine. Auguste Villiers de l'Isle-Adam, whose merits are the subject of vivid debates but who is nonetheless credited with having inspired Mallarmé, imagined in *Tomorrow's Eve* (1886) an Edison who would invent the electromagnetic means to simulate the functions (speech included) of a human living being. His Andréïde is a woman-machine who can say “I” but who knows herself to be nonliving, since no one addresses her as “you,” and who declares in the end: “I, who extinguish myself, will not be returned to Nothingness. . . . I am the obscure being whose death is not worth a mournful memory. My unfortunate bosom is not worthy even to be called sterile. If only I could live, if only I possessed life. . . . To only be able to die.”²⁵

The living body is thus a singular existent; its health expresses the quality of the forces that constitute it — insofar as it must live with the tasks imposed on it; in other words, it must live exposed to an environment that it does not initially choose. The living human body is the totality of powers of an existent that has the capacity to evaluate and represent to itself these powers, their exercise and their limits.

This body is at once a given and a product. Its health is at once a state and an order.

The body is a given insofar as it is a genotype, a necessary and singular effect of the components of genetic inheritance. In this context, the truth of its presence in the world is not unconditional. It sometimes follows from errors of genetic

23. René Descartes, *Discourse on Method, and The Meditations*, trans. F. E. Sutcliffe (New York: Penguin, 1968), 163.

24. Raymond Ruyer, *Paradoxes de la conscience et limites de l'automatisme* (Paris: Michel, 1960), 198.

25. Auguste Villiers de l'Isle-Adam, *Tomorrow's Eve*, trans. Robert Martin Adams (Urbana: University of Illinois Press, 2001), 203. [We translate directly from Canguilhem's quotation. — Trans.]

coding, which (depending on the milieus of life) may or may not determine pathological effects. The untruth of the body can be manifest or latent.

The body is a product insofar as its activity of insertion in a specific milieu, its (selected or imposed) way of life, sport, or work, contributes in fashioning its phenotype, that is, in modifying its morphological beginning and structure in individualizing its capacities. It is here that a certain discourse finds occasion and justification: the discourse of hygiene, a traditional medical discipline, recently recovered and travestied by the sociopolitical-medical ambition of regulating the lives of individuals.

Ever since health became known as man's, by virtue of his participation in a social or professional community, its existential meaning has been occulted by demands of accounting. Tissot was not yet there when he published his *Avis au peuple sur sa santé* (1761) and *De la santé des gens de lettres* (1768).²⁶ But health started to lose its significance of truth to a significance of facticity. It became the object of a calculation. Ever since, we have known this as the health assessment [*bilan de santé*]. It is worth recalling, in Strasbourg, that it was here that Étienne Tourtelle, professor at the École Spéciale de Médecine, published in 1797 his *Éléments d'hygiène*.²⁷ The historical broadening of the space in which administrative control over the health of individuals is exerted has today led to the World Health Organization—which could not delimit its field of intervention without publishing its own definition of health: “Health is a state of complete physical, moral, and social well-being and not merely the absence of disease or infirmity.”²⁸

Health, as the state of the given body, is proof, by virtue of the fact that this living body is possible (since it exists)—that it is not congenitally altered. Its truth is security. Is it not astonishing, then, that sometimes, and quite naturally, we speak of fragile or precarious health and even of bad health? Bad health is the restriction of margins of organic security, the limitation of the power to tolerate and compensate for the aggressions of the environment. In a famous conversation in Amsterdam in 1648, the young Burman used the fact of disease to dispute Descartes—trusting in the rectitude of the constitution of the body for the control

26. Samuel Auguste André David Tissot, *Avis au peuple sur sa santé* (Paris: P. Fr. Didot le Jeune, 1782); Tissot, *De la santé des gens de lettres* (Geneva: Slatkine, 1981).

27. Étienne Tourtelle, *Éléments d'hygiène* (Strasbourg: Levraut, 1797); Tourtelle, *The Principles of Health: Elements of Hygiene; or, A Treatise on the Influence of Physical and Moral Causes on Man, and on the Means of Preserving Health*, trans. G. Williamson, from 2nd French ed., corr. and enl. (Baltimore, Md.: Toy, 1819).

28. Constitution of the World Health Organization, Principle 1 (WHO, Basic Documents, 45th ed., suppl., October 2006).

and the prolongation of human life. Descartes's response might be surprising. He said that nature remains the same, that it seems to throw man into diseases only so that, by surmounting them, he can become more valid. Obviously, Descartes could not anticipate Pasteur. But is vaccination not the artifice of an infection calculated precisely so as to allow the organism to become immune to a savage infection?

Health, as the expression of the produced body [the body as product], is lived assurance—with the double sense of insurance against risk and audacity to run this risk. It is the feeling of a capacity to go beyond initial capacities, a capacity to make the body do what it did not initially seem to promise. We rediscover the athlete. Although the following quotation from Antonin Artaud concerns first of all human existence under the name of life (rather than life itself), we can evoke this text on the occasion of a definition of health: "We can accept life only on condition of greatness, only if we feel ourselves at the origin of the phenomena, at least of a certain number of them. Without the power of expansion, without a certain domination over things, life is indefensible."²⁹

We are far from a health measured by apparatuses. We will call this health free, unconditioned, unaccountable. This free health is not an object for those who believe themselves its specialists. The hygienist endeavors to govern a population—individuals are not his business. *Public health* is a contestable term—*healthiness* would be more appropriate. Very often, what is public, publicized, is instead disease. The patient calls for help, draws attention; he is dependent. The healthy man who adapts silently to his tasks, who lives the truth of his existence in the relative freedom of his choices, is present in a society that ignores him. Health is not only life lived in the silence of the organs—it is also life in the discretion of social relations. If I say that I am well, I block, before they are uttered, the stereotypical inquiries. If I say that I am unwell, people want to know how and why; they wonder or ask me whether I am registered with Social Security. Interest in individual organic default is eventually transformed into interest in the budgetary deficit of an institution.

But now, leaving aside the description of the lived situation of health or disease, it is necessary to try to justify the proposal to hold health to be the truth of the body by considering, in a state of exertion, the original expression of the body's position as a unit of life, which is the foundation of the multiplicity of its own organs. The recent technique of organ harvesting and transplantation does not take anything away from the capacity of the given body to integrate by appro-

29. Antonin Artaud, "Lettre à la voyante," *La révolution surréaliste*, December 1, 1926, 17n1.

priating, in a sense, a part taken from a whole, of which the histological structure is compatible.

The truth of my body—its very constitution or its authenticity of existence—is not an idea susceptible to representation, just as, according to Malebranche, there is no idea of the soul.³⁰ By contrast, there is an idea of the body in general, certainly not visible and readable in God as per Malebranche, but exposed biologically and medically in progressively verified knowledge. This health without idea, at the same time present and opaque, is in any case what supports and validates, in fact and in last resort, for myself as for the physician who is my physician, what the idea of the body (i.e., medical knowledge of the body) can suggest as an artifice to sustain it. My physician is he who ordinarily accepts from me what I tell him regarding what only I am able to tell him (i.e., what my body announces to me through symptoms whose meaning is unclear to me). My physician is he who accepts that I see in him an exegete before accepting him as repairer. The definition of health that includes the link of organic life to pleasure and pain, tested as such, introduces surreptitiously the concept of a subjective body into the definition of a state that medical speech thinks it can describe in the third person.

In recognizing in the health of the living human body its truth, have we not agreed to follow Descartes on a path where some of our contemporaries believe themselves to have discovered the trap of ambiguity? This is Michel Henry's claim in his *Philosophie et phénoménologie du corps* (1965).³¹ By contrast, Merleau-Ponty credited Descartes with what most reproach him for as an ambiguity. On this point we should refer to the posthumous text *The Visible and the Invisible*, but it is a question that he had tackled before in his course "L'union de l'âme et du corps chez Malebranche, Biran et Bergson" (1947–48) and in his last lecture course on nature at the Collège de France in 1960.³² In a note in *The Visible and the Invisible*, we read, "The Cartesian idea of the human body as human non-closed—open inasmuch as governed by thought—is perhaps the most profound idea of the union of the soul and the body."³³ Ultimately, despite his virtuosity and

30. Nicolas Malebranche, "Dialogue III," in *Dialogues on Metaphysics and on Religion*, ed. Nicholas Jolley, trans. David Scott (Cambridge: Cambridge University Press, 1997), 34–35.

31. Michel Henry, *Philosophie et phénoménologie du corps: Essai sur l'ontologie biranienne* (Paris: Presses Universitaires de France, 1965); *Philosophy and Phenomenology of the Body*, trans. Girard Etzkorn (The Hague: Nijhoff, 1975).

32. Maurice Merleau-Ponty, *L'union de l'âme et du corps chez Malebranche, Biran et Bergson* (Paris: Vrin, 1968); Merleau-Ponty, *Nature: Course Notes from the Collège de France*, comp. and ed. Dominique Ségler, trans. Robert Vallier (Evanston, Ill.: Northwestern University Press, 2003).

33. Maurice Merleau-Ponty, *The Visible and the Invisible*, trans. Alphonso Lingis (Evanston, Ill.: Northwestern University Press, 1968), 234.

ambition, Merleau-Ponty could do no better than comment on the unsurpassable. In commentator after commentator, superiority belongs to what is offered simply as such, recognizing the existence of a side of the living human body that is “inaccessible to others, accessible only to its titular holder.”³⁴ Here we meet again Ruyer, for whom the paradoxes of consciousness are only paradoxes with regard to “our practice of mechanical phenomena on our scale.”³⁵

Does our attempt at the elucidation of a concept not run the risk of being taken for fairy-tale delirium? In asking philosophy to fortify our proposal to treat health as a concept on which crude experience confers the meaning of a permission to live and act by the well-being of the body [*le bon gré du corps*], we appear to scorn the discipline that, even from the popular point of view, seems most appropriate to treat our question: medicine. For one could object that throughout time the body quite simply sensed and perceived as a power—and sometimes also as an obstacle—has had some relation to the body as represented and treated by medical knowledge. This relationship could even become manifest (in nineteenth-century France) in an institution all but forgotten today—the corps of health officials. These watchmen and advisers in matters of health were in fact subdoctors, requiring a lesser degree of knowledge than that of doctors proper. They were in the service of the people, in particular in the countryside, where life was held to be less sophisticated than in cities. The body according to the people has always owed a debt to the body according to medicine. Even today, the body according to the people is a divided body. The diffusion of an ideology of medical specialists makes it so that often the body is lived as if it were a battery of organs. Conversely, behind this debate of professional scope, in its political foundation, between specialists and generalists, the medical body places back in question, timidly and confusedly, its own relation to health. This effort of revision in a professional context finds an echo in a multiplicity of naturalist protests related to the ecological movement—an ideology of health resources. The same man who militated for a society without schools called for an insurrection against what he named “the expropriation of health.” This defense and the illustration of “private savage health,” at the cost of “scientifically controlled health,” have taken all possible forms, including the most ridiculous ones.

34. Maurice Merleau-Ponty, *Résumés de cours, Collège de France, 1952–1960* (Paris: Gallimard, 1968).

35. Ruyer, *Paradoxes de la conscience*, 285. I could not abstain from evoking now the late Roger Chambon. In his thesis, *Le monde comme perception et réalité* (Paris: Vrin, 1974), he brilliantly presented and discussed the works of Henry and Merleau-Ponty and more attentively still those of Ruyer.

But to find inspiration in Cartesian philosophy when trying to define health as the truth of the body—is this also to say that one can go farther, in the self-management of one’s health, than to follow the Cartesian precept of “relying exclusively on the activities and concerns of ordinary life”?³⁶ Can this credit, granted to a species of naturism that one could call theological, be invoked by the adepts of an antirationalist naturalism? To advocate savage health and the return to original health by rejecting the scleroses, which are considered consecutive with learnedly controlled behaviors—is this the means of returning to the truth of the body? But it is one thing to take charge of the subjective body and another to believe oneself charged with liberating this knowledge from the supposedly repressive tutelage of medicine and, beyond that, of the applied sciences. The recognition of health as truth of the body in an ontological sense not only can but must admit the presence, on edge and like a parapet, properly speaking, of truth in the logical sense (i.e., of science). Admittedly, the living body is not an object, but for man, to live is also to know. I go well [*je me porte bien*] insofar as I feel able to take [*porter*] responsibility for my acts, to carry [*porter*] things to existence, and to create between things the relations that without me would not come to them but without them would not be what they are. And thus I need to learn to know what they are to change them.

In conclusion, I must undoubtedly explain myself for having made health a philosophical question. This justification will be short: I find it in Merleau-Ponty, who wrote in *The Visible and the Invisible* that “philosophy is the whole of questions where he who questions is himself put into question by the question.”³⁷

Translated by Todd Meyers and Stefanos Geroulanos

36. “While metaphysical thoughts which bring into exercise the pure understanding serve to render familiar the notion of mind; and while the study of mathematics, which exercises the imagination chiefly in the consideration of shapes and movements, accustoms us to form very distinct notions of body; it is by relying exclusively on the activities and concerns of ordinary life, and by abstaining from metaphysical meditation and concentrating instead on things which exercise the imagination [in mathematics and physics], that we can learn to apprehend the union of soul and body.” René Descartes, “Letter to Princess Elizabeth of Bohemia, 28 June 1643,” in *Descartes’ Philosophical Writings*, trans. Norman Kemp Smith (New York: Modern Library, 1958), 255.

37. Merleau-Ponty, *The Visible and the Invisible*, 47.

