
This study used content analysis to examine works of literature that depict characters with multiple sclerosis in adult fiction. The purpose of this study was to examine how characters with multiple sclerosis are portrayed and viewed in literature that is available for adults. Specifically, this paper investigated what novels are available to readers, whether or not multiple sclerosis is described with medical accuracy and candidness while still treating these characters in a dignified manner, and how these characters respond to and cope with their diagnosis as well as how other characters in the novels react to this disease. Out of over forty relevant titles found, only the twenty-five novels most readily available in libraries were chosen and read, and fifteen of those analyzed. Overall, the books were found to be surprisingly diversified in genre, characterization, and writing style, and to be medically accurate.

Headings:

Multiple Sclerosis – Fiction

MS Patients – Fiction

Multiple sclerosis – Patients – Fiction

Parents with disabilities – Fiction

Content Analysis
UNDERSTANDING DISABILITY THROUGH LITERATURE: THE PORTRAYAL OF CHARACTERS WITH MULTIPLE SCLEROSIS IN ADULT FICTION

by
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A Master’s paper submitted to the faculty of the School of Information and Library Science of the University of North Carolina at Chapel Hill in partial fulfillment of the requirements for the degree of Master of Science in Library Science.

Chapel Hill, North Carolina
April 2014

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Dedication & Acknowledgements

I wish to offer my most sincere thanks to the following people for the research assistance, edition suggestions, and general support that they provided me with throughout the completion of this paper as well as throughout my time at the UNC Chapel Hill School of Information and Library Science:

My wonderful family, Barry, Cheryl, Sophie, and Greta Minor for their constant love and support from Ohio. A special thank you to Greta for her outstanding proofreading skills.

My master’s paper advisor, Dr. Barbara Moran, who has supported me through the writing of this research paper and graciously allowed me to conduct research on a topic that has such personal significance for me.

Dr. Brian Sturm, Professor at UNC Chapel Hill SILS, who has consistently supported and encouraged me throughout my time in graduate school at UNC Chapel Hill.

Kyle Driggers, a fellow UNC Chapel Hill graduate student, who supported me throughout the writing of this paper and was always more than willing to listen to me discuss my ideas and frustrations involving this research.

In conclusion, I would like to dedicate this research paper to my mother, Cheryl Minor, and to all other people I know, as well as people I don’t know, who are living with or are otherwise affected by multiple sclerosis. May there one day soon be a cure for multiple sclerosis, and until then, I can only sincerely hope that the following research and reading list will provide comfort and solace, reliable information, societal recognition, and empowerment for all those affected by multiple sclerosis.
Introduction

“We read books to find out who we are. What other people, real and imaginary, do and think and feel is an essential guide to our understanding of what we ourselves are and may become”
---Ursula K. Le Guin (qtd. in Schutte and Malouff 7).

Founded in 300 BCE, the Library of Alexandria had an inscription near the entrance that read: “Medicine [or remedy] for The Mind”, while the ancient Greek library at Thebes was devoted to the “Healing of the Soul” (Rudman qtd. in Jack and Ronan 162). Certainly, it appears as though the written word has always been a fundamental part of the human experience, including a form of healing and promoting mental and emotional wellness. In their work on the significance of reading for pleasure, N.S. Schutte and J.M. Malouff explain, “For some readers harsh living conditions or times of physical or emotional distress bring the importance of consciousness and emotion altering power of reading to the fore” (108). Undoubtedly, the written word has been shown to have an enormous impact on readers all over the world throughout history, especially in times of great turmoil, stress, or illness.

Indeed, in order to recognize the significance of reading as a tool that can influence, empower, relax, reassure, etc. one only need look at current trends within librarianship such as bibliotherapy, which I will discuss in further detail later. In the current day and age, there are numerous novels that focus on topics such as disease
divorce, death, etc. and are often used by medical professionals and librarians for bibliotherapy. Of course, while there are many who may not find comfort in reading fictional accounts about the same hardships that they are currently experiencing in life and might rather read nonfiction or not read at all, there are also many who may find validation and support in works of fiction and would gladly read them if these novels were more pronounced, readily available, and accurate with the information that they present to their readers.

As librarians, whether we work in a large academic research library, a small rural public library, or some other type of information organization altogether, one of the main aspects of our job is to locate and provide the books and other materials that are wanted or needed by our patrons. Sometimes, these individuals may not even know that certain books are available unless we show them where and how to search for them. In order to help our patrons locate these books, it is necessary that we have a general sense of what type of books are available so that we can locate and recommend these materials to the individuals as well as provide other appropriate reading suggestions for certain patrons. It is also necessary that we understand how accurate these novels are in their portrayals of whatever hardship may be represented in the book. For example, Prater discusses books containing examples of disabilities, explaining that, “Educators and researchers advocate using literature to teach others about disabilities and as bibliotherapy for those with disabilities. Yet few researchers have examined portrayals to ensure that they are accurate and appropriate” (49).

Therefore, through this research paper, I will discuss the content analysis I conducted of adult fiction that includes characters living with a specific neurological
disease, multiple sclerosis. I will explore how medically accurate and candid these portrayals are, whether they depict the characters with MS in a dignified manner, and how the characters living with MS react to their diagnoses. I will also discuss how other characters in the novels react to the characters living with multiple sclerosis. Little to no research has been done specifically involving the portrayal of multiple sclerosis in adult fiction, and it is hoped that this resource will provide an insightful analysis of the adult fiction currently available involving characters with MS. As a result, this analysis should help librarians remain informed with their collection development practices while also providing a list of available literature for patrons to peruse out of their own volition.

I will begin by giving an overview of multiple sclerosis, its symptoms and treatments, as well as the psychosocial and psychological impacts of MS on patients and their families. I will then explore what research has been done on the portrayal of disabilities in literature and the positive effects of bibliotherapy and the power of reading, in general, for people living with certain circumstances such as chronic illness.

Then, after briefly explaining content analysis as a form of methodology, I will discuss the general book information and depiction of multiple sclerosis and the characters with multiple sclerosis in fifteen of the twenty-five novels read, these specifically being the fifteen novels where the character with MS was the primary character in the story and MS was one of the primary plot points in the novel. The other ten novels only involved secondary characters with MS. Finally, I will discuss the limitations and strengths of this study as well as the overall significance of this study for libraries and librarians, finishing with a summary of each of the twenty-five novels read and examined for this study.
Research Questions
The main questions guiding this research study are: What type of adult literature is available that depicts characters living with multiple sclerosis? How are the characters with multiple sclerosis portrayed and how do others interact with them? Are the explanations of MS and the symptoms of MS discussed in a medically accurate and candid sense therefore providing an accurate portrayal of MS as a whole?
Literature Review

Multiple Sclerosis

In the most general sense, multiple sclerosis is a disease of the immune system, a demyelinating disease affecting the central nervous system, and, unfortunately, a disease that currently has no known cure. MS involves the deterioration of myelin, the fatty material that helps to insulate nerves and allows the nerves to transmit impulses rapidly. These rapid impulses are what allow humans to perform coordinated movements without much conscious effort. When this myelin begins to depreciate, humans then lose the ability to perform such coordinated movements (Schapiro 3). Many of the symptoms of MS, which will be discussed in further detail later, are the result of lesions on the brain and spinal cord. In this instance, lesions refer to tissue damage in a part of the body. Specifically, MS symptoms are a consequence of areas of inflammation within the central nervous system (Sheremata 3).

People Commonly Diagnosed with Multiple Sclerosis

MS is one of the most common diseases affecting people under the age of forty-five (Sheremata 11). Generally, people are diagnosed with multiple sclerosis between the ages of fifteen and fifty, with the average age of diagnosis being thirty (Schapiro 7). Women do tend to be diagnosed with MS more often than men with approximately 70% of people diagnosed being women. However, an MS diagnosis is slightly more common for men after the age of forty. Most people diagnosed with MS are of European descent and MS is much less commonly diagnosed in African Americans and Asians living in the
United States. In general, MS is much more commonly diagnosed in the US, Canada, and Europe, than it is in Africa, Asia, and Australia (Sheremata 12-13). As of 2007, the National MS Society estimated that there were around 450,000 documented cases of multiple sclerosis in the United States alone (Schapiro 9).

**Symptoms and Types of Multiple Sclerosis**

One of the most important things to remember about multiple sclerosis is that it affects every single person differently. While some people diagnosed with MS will experience a variety of symptoms and will gradually continue to experience more symptoms throughout their lives, others will experience very few symptoms and may live the rest of their lives in a seemingly normal fashion. As the symptoms vary drastically from person to person, it is hard to create a definitive list of MS symptoms, however, the following are generally fairly common amongst people living with MS (Sheremata 16-22):

- Difficulty walking
- Numbness and tingling sensations (“pins and needles” sensation)
- Difficulty with coordination and appearance of tremors
- Visual problems
- Increased fatigue
- Speech difficulties
- Spasticity
- Incontinence and other bladder problems
- General pain
- Dizziness and vertigo
• Cognitive difficulties

As previously mentioned, MS affects every person differently and, consequently, there are a variety of different documented types of MS. The following are brief descriptions of each of the four main types of MS: (Giesser 141):

• Relapsing-remitting (RRMS): It is believed that around 80% of MS cases begin as this classification (Schapiro 8). This form of MS includes clearly defined attacks or exacerbations and periods of remission. These attacks will include some of the aforementioned symptoms of MS and the periods of remission could result in full recovery from the exacerbation or could include lingering deficits. Usually, the periods between relapses of the disease do not include significant progression of the disease.

• Secondary progressive (SPMS): This form of MS begins with a relapsing-remitting course, but is then quickly followed by disease progression at varied rates for different people. This progression may include irregular relapses and minor remissions.

• Primary progressive (PPMS): This form of the disease shows significant progression, often without significant remissions or with only temporary minimal improvements. This type of MS, in general, is characterized by a continual worsening that is usually not followed by improvement. This classification is thought to be more common in people who develop and are diagnosed with the disease after the age of forty.
Progressive-relapsing (PRMS): This subset of MS indicates significant progressions from the beginning but also has clearly defined relapses with the possibility of some slight improvements or minor remissions.

Current Treatments for Multiple Sclerosis

Although there is currently no known cure for multiple sclerosis, there are a variety of drugs and other treatments available in order to reduce the risk of attacks in relapsing-remitting MS. The most common of these drugs are the so-called “ABC Drugs,” Avonex (interferon-beta 1a), Betaseron (interferon-beta-1b), and Copaxone (glatiramer acetate). The FDA approved Betaseron in 1993, Copaxone in 1997, and Avonex in 1996, with another similar drug, Rebif, being approved in 2002. It has been shown that with each of these approved drugs, exacerbations are reduced by approximately 30% within two years of taking the drug. Avonex and Betaseron have typically been shown to have more side effects with their initial use than Copaxone. These side effects may include injection site reactions and flu-like symptoms including fever, headache, and general aches and pains (Sheremata 126).

A newer drug on the market, Tysabri (Natalizumab), which is an intravenous drug, appears to be about twice as effective as the ABC Drugs (Sheremata 125). In general, Tysabri has been shown to lead to a 66% reduction in relapses (Sheremata 134). The most aggressive treatment that is currently approved is Novantrone. This treatment has been shown to stabilize the majority of the forms of progressive multiple sclerosis, however, there are serious side effects to take into consideration with this treatment, namely, the risk of leukemia (although this is rare) and cardiac complications (Sheremata 135). There are currently a number of other drugs that are being created and tested by
medical professionals, though the ABC Drugs, Rebif, Tysabri, and Novantrone are the only drugs and treatments currently approved by the FDA.

Some neurologists and other medical professionals also may prescribe oral or high-dose intravenous steroids (Methylprednisolone) to people living with MS, specifically to combat exacerbations. Corticotrophin (adrenocorticotropic hormone or Acthar Gel) is another FDA-approved treatment for MS exacerbations (Sheremata 113).

It is also important to note that physical rest, reducing stress, and a generally healthy diet and lifestyle, even without the use of the aforementioned drugs, have been shown to be beneficial and will usually result in a faster recovery from MS exacerbations (Sheremata 118).

There are a variety of other alternative and complementary medicines that have been tested, utilized, or researched as possible treatments for certain symptoms of those living with multiple sclerosis. Though the safety of most of these treatments is known, the efficacy of each is not as well known as many have not been thoroughly studied enough in relation to people living with MS. The following alternative and complementary medicines may be used by people living with MS with varying results and degrees of usefulness (Giesser 370-378):

- Acupuncture and Traditional Chinese Medicine
- Bee Venom Therapy
- Chiropractic Medicine
- Cooling Therapy
Dietary Supplements such as: Antioxidants, Cranberry, Echinacea, Ginkgo Biloba, Kava Kava, St. John’s Wort, Valerian, Vitamin B12, and Vitamin D

- Hyperbaric Oxygen
- Low-Dose Naltrexone
- Marijuana
- Massage Therapy
- Tai Chi
- Yoga

**Psychosocial Impact of MS on Patients and their Families**

As is discussed in the work *Primer on Multiple Sclerosis*, edited by Barbara S. Giesser, the role that grieving plays in the process of being diagnosed with MS has not been touched upon very often within the MS literature. It has been noted that “chronic sorrow is a common accompaniment to the losses people often experience [when diagnosed with a chronic illness], particularly related to loss of bodily function, loss of relationship, loss of autonomous life, loss of the life imagined and loss of identity” (385). In addition to this grieving process, people living with MS often experience feelings of anger, guilt, and anxiety. People living with MS also have to spend time thinking about other ramifications that accompany this diagnosis such as: initiating treatment, disclosure decisions, redefining oneself, learning to communicate one’s needs, maintaining healthy relationships, and dealing with the often invisible symptoms of MS that may not be immediately noticeable to outsiders. Many of these concerns can be discussed with a neurologist or other medical professional, through seeking information from the National...
MS Society, by speaking with therapists and/or counselors, and by meeting and talking with their employer. Giesser also mentions, albeit briefly, the possibility of speaking with support groups or with others diagnosed with MS to discuss concerns (386-392).

It should not be forgotten that MS affects not only a person living with the disease, but also members of the family as well. Interestingly enough, members of the family often experience the same feelings of anger, guilt, and anxiety as those diagnosed with multiple sclerosis. Spouses and partners of those living with MS must work together on maintaining a healthy relationship. Some of their struggles may include: maintaining closeness and physical and emotional intimacy (“this isn’t the same person I married”) (393), managing financial resources as well as time and physical and emotional energy, sustaining balance in their relationship, and raising a family. Married couples and partners may benefit from meeting with counselors, financial planners/advisors, and other therapists or clinicians in order to deal with some of these issues (392-394). It is also interesting to note that, although people may assume that the rate of divorce among couples living with MS are much higher than average, data from 2006 found that the rate of divorce for these couples was about the same as the rate of divorce for the general population (Minden et al. qtd. in Giesser 392).

Perhaps not surprisingly, it has been found that children who have a parent with a chronic illness such as MS tend to be more at risk both emotionally and socially. A study done in 2006 concluded that, “compared to children of healthy parents, children of an MS parent reported greater family responsibilities, less reliance on problem solving and seeking social support as ways of coping, a greater tendency to somatization, and lower life satisfaction and positive affect” (395). Another study conducted in 1999 emphasized
the importance of age-appropriate information for children regarding a parent’s diagnosis with MS, especially to note that a child’s behavior did not cause and cannot worsen a parent’s MS, and that it is highly unlikely that the child will develop MS themselves because of their parent’s diagnosis (395). Once again, clinicians, therapists, and other medical professionals should be able to provide increased education to these children and their parents regarding these issues (395).

**Information Needs of People Living with Multiple Sclerosis**

In 2002, Mark Hepworth and Janet Harrison, both of whom are lecturers and researchers at Loughborough University in the UK, conducted a survey of the information needs of people living with multiple sclerosis in the UK. Both qualitative and quantitative methods were utilized during their study, including a focus group of people living with MS as well as questionnaires that were sent to 4,100 people living with MS (which was approximately 5% of the MS population in the UK). 2,030 people responded to these questionnaires. Although it was found that information provision had improved in the last seven years, around 71% thought they had received adequate information and 43% believed they had not received the information they required. Through their study, which was published in 2004, Hepworth and Harrison determined categories of information needs that were most important to people living with MS as well as the difficulty in obtaining these needs. They also determined what information should be made available to people living with MS and how to best distribute this information (49-50).

Hepworth and Harrison suggest that people living with MS need to receive general information about the disease, especially at the time of diagnosis, but also need
information regarding the following: general symptom management, communication with family, friends and colleagues, access and transport, talking to other people living with MS, possible drug treatments, alternative therapies, exercise and diet, MS organization addresses and contact information, counseling, work related information, research regarding MS, working and MS, etc. (54-58).

Through their focus groups and questionnaires, Hepworth and Harrison came to a very succinct conclusion as well as some recommendations regarding the information needs of people with MS. They explain:

Someone with MS should be seen as a person, and not just as a person with MS, who is likely to want to take an active role in life. Information should be provided to help achieve this goal. Enabling people to participate actively in life (as a result of access to information and knowledge), whether in the home, workplace or elsewhere, has a positive impact on their self-esteem and general wellbeing (59).

They then go on to state:

Information provision needs to be targeted at three communities. These are people with MS, the general public (including the family, friends and colleagues) and state and voluntary service providers. The public need general information about MS and living with MS and the support available. This would help them to understand the condition and provide necessary support (59).

Finally, Hepworth and Harrison discuss how information regarding MS should be provided using “the most effective means of communication”. They explain:

This will vary depending on the nature of the information and the cognitive and physical ability of the person with MS. For example, face-to-face communication will be more appropriate for sensitive or complex issues. Leaflets, booklets, newsletters, e-mail, World Wide Web, video conferencing and chat rooms, however, could all play a role in information provision and exchange using different formats to cater to the individual needs of the person with MS (59-60).

Although their study does not suggest adult fiction as a conduit for receiving the necessary information required by people living with MS and by the general public
(family, friends and colleagues), I believe that, along with consulting neurologists and other medical professionals, much of this information could be garnered effectively from reading adult fiction that is accurate and consistent with its medical information, as well as candid and dignified in the way the fiction represents the characters with MS.

First and foremost, I believe it is evident how important fiction can be in people’s lives, which will be discussed in greater detail in the next section on bibliotherapy and the power of reading. Furthermore, Stratmoen’s article, “In Fact and Fiction, MS Patients Express Concerns about Disclosure”, discusses how fictional TV shows (specifically “The West Wing” where the president of the United States, Josiah Bartlett, is living with MS) and other forms of mass media can be very helpful in terms of getting information out to the public about diseases such as MS, even explaining that “to some people, fiction is more real than fact.” It also states that more exposure to TV shows and other media, which could also include literature, can raise awareness of MS in the public, so long as the media remains responsible, consistent, and accurate in its depiction of the neurological disease (16). This responsible media can also have a very positive effect on people living with MS, showing them that “having the disease does not automatically preclude them from playing an active and fulfilling role in society” (20).

**Bibliotherapy and the Power of Reading**

While searching for literature regarding the information needs of people living with MS, I found it beneficial to search for literature involving the benefits of bibliotherapy. Though the “prescribed use of books to heal the human condition” may have started as early as the Middle Ages (Jack and Ronan 164) and we can trace its origins back to the use of books in medical and mental hospitals (172), it was not until the 20th century that
Bibliotherapy became an accepted part of libraries and librarianship when the American Library Association finally “recognized and gave its support for the reading of books as a therapeutic tool” (165). Today, the field of bibliotherapy continues to be researched, and often practiced, by librarians, therapists, and other medical professionals.

Both Begum’s article, “Readers’ Advisory and Underestimated Roles of Escapist Reading” and Schutte and Malouff’s work, Why We Read and How Reading Transforms Us: The Psychology of Engagement with Text, explore the “transformative emotion power” of leisure reading, especially in coping with stress or as a “means of ascertaining reality” (Begum 738-742) and as a means of identifying and understanding physical or emotional distress (Schutte & Malouff 108). Begum explains that:

One book can vastly affect perceptions and continue doing so long after the last page has been turned. In fact, it is perhaps after the book has been closed that it begins to take on its most pivotal work: those conceptions, emotions, and ideas that readers have soaked up from the reading are now out in the open, no longer contained in the bubble that the reader created between himself or herself and the outside world through the medium of reading (744).

She also quotes K. Dali who states that “books sensitize you to things that you would not pay attention to otherwise” (744).

It is indisputable that certain books can affect people’s perceptions of important events or experiences that are a part of the human condition, whether that person has actually experienced the reality in the book or not. For this reason, I feel that reading books with characters living with multiple sclerosis or other neurological diseases has the potential to not only be beneficial for people currently living with MS, but also for people who have not experienced MS in any way. In this instance, adult fiction of this nature could provide people not affected by MS with a certain empathy for people living with multiple sclerosis and help them to become more aware of the often-devastating effects
of this disease. I will further discuss the importance of reading fiction involving characters with disabilities in the following section of this paper. Certainly, reading adult fiction involving characters with MS has the ability to not only provide comfort or solidarity for those individuals who are living with MS, but it also has the potential to give these individuals validation and empowerment by allowing these readers to see themselves in the novels they read.

**Depictions of Disability in Literature**

Disability is a topic that comes up more often than one might expect throughout works of fiction and it was thus necessary to look at literature that discussed how disability as a whole is often treated in fiction. This literature gave me an overall idea of how disability has been treated in the past in fiction and how scholars and researchers feel disability should be treated in fiction in the future. It also gave me a sense of the importance of reading literature involving characters with disabilities and helped me make a sound argument for the reading of this type of literature in order to better understand certain disabilities. Throughout my literature review, I noticed that there are numerous articles and books about the portrayal of disability in children’s and young adult fiction. Specifically, I found that Nicole M.P. Lehotsky from the University of North Carolina at Chapel Hill did a content analysis of the portrayal of scoliosis in children’s and young adult fiction in 2013, a study that was especially useful for me to see how others had conducted content analyses of disability literature. However, I found that there has been very little research done on the portrayal of disability in adult fiction, thus I focused this part of my literature review on disability portrayal in literature as a whole.
As is discussed in Rosemarie Garland Thomson’s work, *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature*, “Disabled literary characters usually remain on the margins of fiction as uncomplicated figures or exotic aliens whose bodily configurations operate as spectacles, eliciting responses from other characters or producing rhetorical effects that depend on disability’s cultural resonance. Indeed, main characters almost never have physical disabilities” (9). Thomson goes on to explain that:

> If we accept the convention that fiction has some mimetic relation to life, we grant it power to further shape our perceptions of the world, especially regarding situations about which we have little direct knowledge. Because disability is so strongly stigmatized and is countered by so few mitigating narratives, the literary traffic in metaphors often misrepresents or flattens the experience real people have of their own or others’ disabilities (10).

In their article, “Countering Negative Images of Disability in Classical Literature”, Margolis and Shapiro discuss how much of the discrimination toward people with disabilities stems from negative image factors coming from literature and the mass media. They discuss literature as a resource for society that transmits values and gives readers ideas to reflect upon, including those that reinforce negative images such as “handicapism”, something analogous to racism or sexism (18). Margolis and Shapiro include other questions that are important to consider when reading literature involving characters with disabilities such as: “Are the characters portrayed as people or as literary devices? Is the person with a disability interacting in ways that are mutually beneficial?” (19-20). These were important criteria for me to keep in mind when doing the final content analysis.
Though Thomson, Margolis, and Shapiro all present ideas that certainly hold weight in regards to the descriptions of many disabled characters in classic works of literature throughout history, I found that their ideas were no longer consistently relevant and accurate. First and foremost, the majority of the novels I read for this content analysis included a character living with a disability (in this case, a person living with multiple sclerosis) as the main character of the novel. Secondly, though there are certainly still works of literature and stories throughout mass media that continue to promote social stigmas and stereotypes regarding disability, it seems that, as social stigmas regarding disability change and our knowledge of certain disabilities evolve, the representations of these characters in literature are also evolving and changing, often for the better. This seemed to be the case in the majority of the novels I chose to read and analyze for this content analysis.

In more recently published articles, primarily Laura Yeager’s work, “Disability Literature Can Inspire Empathy” and Christina Minaki’s article, “Great Responsibility: Rethinking Disability Portrayal in Fiction for the Real World”, there are a number of guidelines set out for both readers and writers of disability literature to keep in the forefront of their minds. For example: “What are the ways characters with disabilities respond to being disabled? What is the nature of the bond between characters with and without disabilities? How closely do the lives of the characters with disabilities resemble the lives of real people with disabilities? (Yeager 44). Is the disability treated as only a misfortune to overcome? Does the literature address the difficulties along with joys in a dignified and respectful manner?” (Minaki 13-14). Many of these questions informed the criteria I chose to look for when conducting my content analysis. Minaki also stresses the
importance of disability literature for society explaining, “Literature featuring disability is not only for people with disabilities and their loved ones. Ask yourself: Is *Anne of Green Gables* meant to be read only by orphans?” (14).
Methodology

Content Analysis

In order to provide patrons with novels that relate to the every day struggles of living with multiple sclerosis, librarians must have a sound knowledge of the types of materials available and how these works portray the characters living with MS. One of the best ways to survey the available literature and determine how these characters are portrayed, and how multiple sclerosis in general is portrayed in literature, is by performing content analysis, which is a popular form of unobtrusive research. In his work, *The Practice of Social Research*, Earl Babbie explains that, “content analysis is the study of recorded human communications” (333).

Babbie goes on to discuss how “content analysis is particularly well suited to the study of communications and to answering the classic question of communications research: Who says what, to whom, why, how, and with what effect?” (333). In this manner, after choosing the code categories, which will be discussed later in this paper, one can easily use content analysis to determine which themes and ideas as well as specific words and phrases appear in a variety of works.

While reading a sampling of novels and paying specific attention to coding categories, it is important to determine whether to focus on manifest content or latent content. Manifest content is the visible content within a communication, such as certain words or phrases that appear often and is a form of quantitative research. As Babbie explains, coding manifest content is reliable and easier, however, it may not
be entirely valid (338). Latent content, on the other hand, is the underlying meaning in a communication and is therefore a form of qualitative research. Indubitably, coding latent content relies heavily on the researcher and thus has the potential to be unreliable and vague (338). Because of the benefits and drawbacks of both types of coding, Babbie suggests that, whenever possible, researchers utilize both types of coding when performing content analysis (341). Thus, I decided to code both manifest and latent content in my content analysis of adult fiction involving characters with MS.

Collecting the Data

As the purpose of this study was to find and analyze adult fiction that portrayed characters living with multiple sclerosis, and as I was unable to find any previously gathered list of such titles, I had to search numerous databases and websites in order to locate a variety of adult fiction titles that pertained to this topic. I began by searching the following databases and websites: NoveList, OCLC WorldCat, the UNC Chapel Hill Libraries OPAC, Amazon, the National MS Society Lending Library, GoodReads, and by doing a general Google search. While searching these different locations, I used a variety of different search terms: “Multiple Sclerosis - fiction”, “Multiple sclerosis - patients - fiction” and “Multiple Sclerosis AND popular fiction”. Upon finding over forty novels, much more than I originally imagined I would be able to find, I decided to narrow my scope. I decided to not include the following types of materials in my research: works based upon true stories, short stories, theatre pieces/plays, and most young adult literature and children’s literature (though I did include one young adult novel as many adults often do read young adult literature). After doing so, I chose my sampling to read and analyze,
the twenty-five novels that appeared most often in searches and that were most readily available at libraries.

**Analyzing the Data**

Upon gathering my sampling of twenty-five novels, I began to read the novels, taking notes on specific words, phrases, ideas, and themes relating to MS that came across in the novels. Quickly, I began to realize that there were a number of re-occurring themes that needed to be analyzed within the novels. After finishing my first reading of the majority of the novels, I was then able to come up with a definite set of coding criteria to search for and take further notes on during my second reading of the novels.

Some of the specific content that I searched for in these novels were: the main plot/topic of the novel, means of MS discovery/diagnosis, treatment options, medically accurate symptoms/descriptions, role/age/gender/career of the character with MS, the protagonist’s attitude toward MS, friends and family members’ attitudes toward MS, and the author’s experience with MS. I have included my final content analysis coding form as part of the appendices for this paper.

Upon reading the twenty-five novels, I found that fifteen featured main characters with multiple sclerosis (and often the MS was a major part of the plot) but the other ten only included secondary characters with multiple sclerosis. I decided to analyze only the fifteen with main characters in my research, however, I have included all twenty-five novels and their summaries in the appendices.
Findings and Results

Book Information

The twenty-five novels read for this content analysis included novels published from 1980 through 2013, a span of thirty-three years. I have included the publication years for the fifteen novels that included a main character with multiple sclerosis and in which MS was a primary topic in Table 1 below:

Table 1: Publication Year

<table>
<thead>
<tr>
<th>Book Title</th>
<th>Year Published</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Playing from Memory</em>, David Milofsky</td>
<td>1980</td>
</tr>
<tr>
<td><em>Two Ends of Sleep</em>, Lizard Jones</td>
<td>1997</td>
</tr>
<tr>
<td><em>A Sense of Belonging</em>, Erica James</td>
<td>1999</td>
</tr>
<tr>
<td><em>Out of the Blue</em>, Sally Mandel</td>
<td>2000</td>
</tr>
<tr>
<td><em>The Good Body</em>, Bill Gaston</td>
<td>2001</td>
</tr>
<tr>
<td><em>Heresies of Nature</em>, Margaret Blair Young</td>
<td>2002</td>
</tr>
<tr>
<td><em>A Sundog Moment</em>, Sharon Baldacci</td>
<td>2004</td>
</tr>
<tr>
<td><em>Eleanor Rigby</em>, Douglas Coupland</td>
<td>2004</td>
</tr>
<tr>
<td><em>The Sorrow of Archaeology</em>, Russell Martin</td>
<td>2005</td>
</tr>
<tr>
<td><em>The Breakdown Lane</em>, Jacquelyn Mitchard</td>
<td>2005</td>
</tr>
<tr>
<td><em>Freeing Vera</em>, Elissa Raffa</td>
<td>2005</td>
</tr>
<tr>
<td><em>The Ride of Her Life</em>, Natasha Moore</td>
<td>2008</td>
</tr>
<tr>
<td><em>Living Proof</em>, Kira Peikoff</td>
<td>2012</td>
</tr>
</tbody>
</table>
Of these fifteen novels, eight novels included an author’s note or acknowledgements that explained the author’s experience with multiple sclerosis. In *The Breakdown Lane*, Jacquelyn Mitchard used the acknowledgements page to thank the medical professionals and researchers who were willing to discuss multiple sclerosis with her. In their acknowledgements within *Living Proof* and *Sweet Salt Air*, both Kira Peikoff and Barbara Delinsky thanked the stem cell researchers and doctors who discussed the possibilities for stem cell research as a cure for MS. In her novel, *Heresies of Nature*, Margaret Blair Young mentioned that she knew someone who had lived with MS and who was the inspiration behind her story, though the story itself was fictional. Erica James mentioned in her novel, *A Sense of Belonging*, that she also knew someone with MS and was able to discuss their experiences with them. Both Lizard Jones, the author of *Two Ends of Sleep* and Sharon Baldacci, the author of *A Sundog Moment*, currently are living with multiple sclerosis, Jones having been diagnosed in 1994 and Baldacci in 1983. Finally, though Mark Millar did not specifically mention his interest in MS in his graphic novel, *Superior*, this work did include an advertisement for the National MS Society at the back of the book.

A number of different genres were also represented in the fifteen novels I read. Although many of the novels fit into more than one genre category, the overall genres were as follows: Christian fiction (one), Psychological fiction (three), Romance/Erotica (four), Sports fiction (one), LGBTQ fiction (one), Graphic Novel (one), General Realistic fiction (two), Science fiction (one), and Coming-of-age (one). The percentage
breakdown for the fifteen novels is shown in the following chart and I have listed the specific genres for all twenty-five novels in the appendices.

**Table 2: Genre of Books**

As well as the variety of different genres represented, there was a fair amount of diversity shown within the characters that had multiple sclerosis. This diversity appeared in terms of the characters’ genders, ages, careers, and general life situations. Of the fifteen novels read and analyzed, there were nine female characters with MS and six male characters with MS. Their ages ranged from twelve to late forties. One of the characters was twelve, six characters were in their twenties and thirties, and eight characters were in their forties. As previously mentioned, the fifteen novels I am analyzing included main characters with multiple sclerosis where the neurological disease played a major role in the plot of the story and the other ten novels read and listed in the appendices (but not specifically analyzed in this study) included secondary characters with MS and the disease played a secondary or minor role in the overall plot of the story. All fifteen of the
analyzed novels featured characters with MS who were Caucasian. The one exception was *The Kitchen God’s Wife* by Amy Tan (one of the ten novels featuring a secondary character with MS), which featured a Chinese-American woman. In terms of religious and sexual identity and diversity, *Heresies of Nature* involved Mormon characters, *Two Ends of Sleep* involved lesbian characters, and *A Sundog Moment* involved Christian characters. In table 3 below, I have listed the gender, age, and career of the character with MS in each of the fifteen novels involving main characters with MS:

**Table 3: Character with Multiple Sclerosis**

<table>
<thead>
<tr>
<th>Book Title</th>
<th>Character Gender, Age, Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>The Good Body</em></td>
<td>Male, 40, Retired Hockey player/Graduate Student</td>
</tr>
<tr>
<td><em>The Sorrow of Archaeology</em></td>
<td>Female, 47, Physician</td>
</tr>
<tr>
<td><em>Heresies of Nature</em></td>
<td>Female, 40s, Stay-at-home Mom</td>
</tr>
<tr>
<td><em>Sweet Salt Air</em></td>
<td>Male, 46, Cardiac Doctor</td>
</tr>
<tr>
<td><em>Eleanor Rigby</em></td>
<td>Male, 20, Homeless</td>
</tr>
<tr>
<td><em>The Breakdown Lane</em></td>
<td>Female, 45, Newspaper Columnist/Mom</td>
</tr>
<tr>
<td><em>Freeing Vera</em></td>
<td>Female, 40s, Stay-at-home Mom</td>
</tr>
<tr>
<td><em>A Sense of Belonging</em></td>
<td>Male, 30s, Businessman</td>
</tr>
<tr>
<td><em>Two Ends of Sleep</em></td>
<td>Female, 32, Unemployed Writer</td>
</tr>
<tr>
<td><em>A Sundog Moment</em></td>
<td>Female, 40s, Artist/Mom</td>
</tr>
<tr>
<td><em>Superior</em></td>
<td>Male, 12, Student</td>
</tr>
<tr>
<td><em>Out of the Blue</em></td>
<td>Female, 29, High School English Teacher</td>
</tr>
<tr>
<td><em>The Ride of Her Life</em></td>
<td>Female, 26, Bankteller</td>
</tr>
<tr>
<td><em>Living Proof</em></td>
<td>Female, 30s, Scientist/Doctor</td>
</tr>
<tr>
<td><em>Playing from Memory</em></td>
<td>Male, 40, Musician</td>
</tr>
</tbody>
</table>

The location or setting of each of the novels was not quite as diversified as the characters or genres. Of the fifteen novels involving main characters with MS, two took place in Wisconsin (*The Breakdown Lane* and *Playing from Memory*), one took place in
Utah (*Heresies of Nature*), one in Colorado (*The Sorrow of Archaeology*), five took place in New York or New York City (*Living Proof*, *Out of the Blue*, *Freeing Vera*, *Superior*, and *The Ride of Her Life*), one took place in Maine (*Sweet Salt Air*), one took place in England (*A Sense of Belonging*), one took place in Virginia (*A Sundog Moment*), and three took place in Canada (*Two Ends of Sleep*, *Eleanor Rigby*, and *The Good Body*).

Finally, there did not seem to be any overarching trends as far as when multiple sclerosis was first mentioned in the novel. As can be seen in table 4, in the fifteen novels where MS carried a large portion of the plot, MS was actually mentioned on pages ranging from page 2 to page 124.

**Table 4: First Appearance of Multiple Sclerosis**

<table>
<thead>
<tr>
<th>Book Title</th>
<th>Page # of First MS Appearance</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Heresies of Nature</em></td>
<td>p. 2</td>
</tr>
<tr>
<td><em>Out of the Blue</em></td>
<td>p. 3</td>
</tr>
<tr>
<td><em>A Sundog Moment</em></td>
<td>p. 4</td>
</tr>
<tr>
<td><em>Freeing Vera</em></td>
<td>p. 6</td>
</tr>
<tr>
<td><em>Superior</em></td>
<td>p. 11</td>
</tr>
<tr>
<td><em>The Good Body</em></td>
<td>p. 14</td>
</tr>
<tr>
<td><em>The Sorrow of Archaeology</em></td>
<td>p. 14</td>
</tr>
<tr>
<td><em>Two Ends of Sleep</em></td>
<td>p. 17</td>
</tr>
<tr>
<td><em>A Sense of Belonging</em></td>
<td>p. 22</td>
</tr>
<tr>
<td><em>Sweet Salt Air</em></td>
<td>p. 34</td>
</tr>
<tr>
<td><em>Playing from Memory</em></td>
<td>p. 43</td>
</tr>
<tr>
<td><em>The Ride of Her Life</em></td>
<td>p. 53</td>
</tr>
<tr>
<td><em>Eleanor Rigby</em></td>
<td>p. 84</td>
</tr>
<tr>
<td><em>Living Proof</em></td>
<td>p. 96</td>
</tr>
<tr>
<td><em>The Breakdown Lane</em></td>
<td>p. 124</td>
</tr>
</tbody>
</table>

**General Depiction of Multiple Sclerosis**

Of the fifteen novels that included main characters with multiple sclerosis, ten of these novels included descriptions of specific tests that were done or medical
professionals who were seen in order to first diagnosis the character’s MS. A list of these descriptions can be examined in table 5:

Table 5: Means of Diagnosis

<table>
<thead>
<tr>
<th>Superior</th>
<th>MRI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freeing Vera</td>
<td>Week of testing at hospital</td>
</tr>
<tr>
<td>The Breakdown Lane</td>
<td>MRI found lesions on brain</td>
</tr>
<tr>
<td>Playing from Memory</td>
<td>Test results seen by physician and neurologist</td>
</tr>
<tr>
<td>The Sorrow of Archaeology</td>
<td>Had symptoms and suspected MS as character is physician</td>
</tr>
<tr>
<td>Out of the Blue</td>
<td>Tests with original misdiagnoses</td>
</tr>
<tr>
<td>The Ride of Her Life</td>
<td>Test results seen by neurologist</td>
</tr>
<tr>
<td>A Sense of Belonging</td>
<td>First saw eye doctor and then visited neurologist</td>
</tr>
<tr>
<td>Two Ends of Sleep</td>
<td>Visits physician and then neurologist</td>
</tr>
<tr>
<td>A Sundog Moment</td>
<td>Physician consults with neurologist, MRI shows lesions on brain</td>
</tr>
</tbody>
</table>

Of these ten novels, four included mentions of numerous misdiagnoses before the conclusive diagnosis of multiple sclerosis or mentions of contradictory information from different medical professionals regarding MS. Specifically, A Sundog Moment mentioned that the doctor originally thought the patient had a stroke or a brain tumor; Out of the Blue explained that the character had been misdiagnosed with Lyme disease, hypochondria, a brain tumor, and Guillain-Barre Syndrome; and The Breakdown Lane mentioned that different doctors had told the patient that she had Chronic Fatigue Syndrome, parasites, and Locomotor Ataxia. In The Good Body, Bobby explains his frustrations with receiving contradictory information regarding his diagnosis with MS from different medical specialists:
Mr. Bonaduce, multiple sclerosis is genetic, is hereditary. Bob, may I call you Bob, MS is a matter of diet. Hello there, sir, pleased to meet you, multiple sclerosis is viral, something you caught as a child, and it flowers—I’m sorry, perhaps that’s not a good word to use—twenty years later.

Well, doctors, I guess I don’t really care how I got it as much as I want to know, how do I fix it?

Mr. Bonaduce, you don’t. Your nerve roots are covered with a myelin sheath, which has been damaged, and blocked with this white crud, “plaque”. It’ll keep occurring, more and more. Bob? You fix it with diet, visualization and prayer. Sir, you can do any of the diets if you want, they probably won’t hurt you, but mostly you rest, and take any number of drugs indicated by any number of symptoms (Gaston 37).

The remaining five of the total fifteen novels did not include any specific description of how the character was originally diagnosed with MS, though some did include a mention of when the character was diagnosed. In Eleanor Rigby, Jeremy was diagnosed with MS when he was seventeen and Sweet Salt Air explained that Julian had been diagnosed four years prior to the beginning of the novel. In Heresies of Nature, Merry was diagnosed about eighteen years prior to the commencement of the story, Living Proof explained that Arianna was diagnosed two years prior to the beginning of the novel, and The Good Body only mentioned that Bobby had been diagnosed recently.

There were a number of MS symptoms that were mentioned throughout the fifteen novels. Although some symptoms were mentioned in almost every single novel, there were a number of symptoms or complications from MS that were infrequently mentioned in only a few of the novels. Table 6 shows the variety of major symptoms that were mentioned and the number of texts that mentioned each of these symptoms or complications arising from MS:
The most frequently mentioned symptoms and/or complications were: fatigue, general numbness/tingling, vision problems (blurry vision, double vision, blindness), and problems arising from warmer temperatures. The least commonly mentioned symptoms were:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Number of Novels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fatigue</td>
<td>9</td>
</tr>
<tr>
<td>Numbness/Tingling</td>
<td>9</td>
</tr>
<tr>
<td>Vision Problems</td>
<td>9</td>
</tr>
<tr>
<td>Problems due to Heat (Temperatures)</td>
<td>6</td>
</tr>
<tr>
<td>Incontinence</td>
<td>5</td>
</tr>
<tr>
<td>Loss of Balance</td>
<td>5</td>
</tr>
<tr>
<td>Cognitive Issues</td>
<td>4</td>
</tr>
<tr>
<td>“Pins &amp; Needles Sensation”</td>
<td>4</td>
</tr>
<tr>
<td>Limping</td>
<td>3</td>
</tr>
<tr>
<td>Impotence/Sexual Problems</td>
<td>3</td>
</tr>
<tr>
<td>Slurred Speech</td>
<td>3</td>
</tr>
<tr>
<td>Muscle Spasms</td>
<td>3</td>
</tr>
<tr>
<td>Death</td>
<td>3</td>
</tr>
<tr>
<td>Paralysis</td>
<td>2</td>
</tr>
<tr>
<td>General Weakness</td>
<td>2</td>
</tr>
<tr>
<td>Mood Changes</td>
<td>2</td>
</tr>
</tbody>
</table>
were: mood changes, general weakness, muscle spasms, slurred speech, impotence/sexual problems, limping, paralysis, and death.

Of course, as previously mentioned in the literature review, although there is currently no cure for MS, there are a variety of treatments, some with more research and support than others, that supposedly help lessen the symptoms and exacerbations of multiple sclerosis. Table 7 shows the variety of treatments that were most commonly mentioned in the fifteen novels in order to combat the aforementioned symptoms and complications:

**Table 7: Treatment Methods**

<table>
<thead>
<tr>
<th>Treatment Method</th>
<th>Novels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wheelchair</td>
<td>8</td>
</tr>
<tr>
<td>Cane/Walker</td>
<td>7</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>6</td>
</tr>
<tr>
<td>Healthy Lifestyle (exercise, diet, etc.)</td>
<td>5</td>
</tr>
<tr>
<td>Corticosteroids</td>
<td>4</td>
</tr>
<tr>
<td>Prednisone</td>
<td>4</td>
</tr>
<tr>
<td>Support Groups/Visit with MS patients</td>
<td>3</td>
</tr>
<tr>
<td>Betaseron</td>
<td>3</td>
</tr>
<tr>
<td>Stem Cell Transplants/Research</td>
<td>2</td>
</tr>
<tr>
<td>Unspecified Medication (presumably ABC Drugs)</td>
<td>2</td>
</tr>
<tr>
<td>Other Alternative Medicine/Methods</td>
<td>2</td>
</tr>
</tbody>
</table>
Antidepressants | 1 novel
--- | ---
Copaxone | 1 novel
Novantrone | 1 novel
Marijuana | 1 novel

Therefore, the treatment methods that were regularly mentioned were: cane, wheelchair, physical therapy, a generally healthy lifestyle, Prednisone, and Corticosteroids. The most uncommon treatment methods mentioned in the texts were: support groups, antidepressants, ABC drugs or other medications, marijuana use, stem cell research methods, and other alternative medicines (acupuncture, hypnosis, fasting/prayer, massage therapy, Vitamin E, faith healers).

**Depiction of Characters with Multiple Sclerosis**

Earlier in this paper, I listed all the careers, genders, and ages of the characters with MS in the fifteen analyzed novels. The following are the careers of the main characters living with MS in the fifteen novels: retired hockey player/graduate student, physician, stay-at-home mom, cardiac doctor, newspaper columnist, unemployed, businessman, artist, student, high school English teacher, bankteller, scientist/doctor, and musician. The vast majority of these characters’ careers suffered upon being diagnosed with multiple sclerosis. In *The Sorrow of Archaeology*, Sarah, the main character with MS, is eventually forced to quit her career as a physician as she explains to a friend, "Nobody actually told me I had to quit. I just finally had to face the music. My energy was shot so much of the time, and then once movement in my arms and hands started to
get erratic, well...the one thing I wasn’t going to do was to let my pride end up hurting somebody” (Martin 52). After continuing to miss notes during string quartet performances due to his MS in *Playing from Memory*, Ben is forced to take a “temporary leave of absence” from the quartet (Milofsky 114). In *Out of the Blue*, Anna, a high school English teacher, sometimes has trouble with parents and the school administration in regards to her multiple sclerosis: “Periodically, a parent would phone our headmaster or a board member to protest that I’d been absent too many days or that I fell down in the hall and did I have a drinking problem? Once, someone took issue with my wheelchair, arguing that the sight of it was traumatic and embarrassing to their child” (Mandel 37). Eventually, Anna is temporarily fired as the administration say, “I’m afraid we just can’t continue keeping you on in your present capacity” (251). Indeed, the only careers that did not seem to significantly suffer as a consequence of the character’s MS diagnosis were: the unemployed man in *Eleanor Rigby*, the artist/stay-at-home mom in *A Sundog Moment*, the bankteller in *The Ride of Her Life*, and the scientist/doctor in *Living Proof*.

Overall, there were numerous emotions and reactions that were demonstrated by the characters in the novels after their diagnoses with multiple sclerosis and throughout their daily lives afterwards. Some of these reactions included: anger, worry, fear for the future, general moodiness, placing blame on others, betrayal, failure, resentment, feelings of unfairness or feelings that their lives were over, feeling as though they were a burden to others, and trying to hide their disease from others. In *A Sense of Belonging*, Josh explains his feelings of worry and fear after being diagnosed:

> Once the initial feeling of relief, that he now knew what was wrong with him, had gone, he realised that the neurologist had given him varying degrees of help and advice, he had omitted to explain to him that there was no cure for what he had.
When pressed, he admitted that there wasn’t even a drug he could take to stop the illness from getting any worse. Worry kicked in. And anger. How could this have happened to him? He’d always been so fit. He’d rarely been ill, not with anything significant. So why should he have multiple sclerosis? And what was there to come? He began to read up on the illness, and what he discovered only fuelled his anger and his ever-growing terror of what lay ahead (James 71-72).

In *The Breakdown Lane*, Jules tells her best friend that she would rather die as she has just learned she has a disease that will wreck her life (Mitchard 137). In *The Sorrow of Archaeology*, Sarah discusses her growing concerns with her husband, Harry, saying, “I’ve been pretending that this [multiple sclerosis] was going to be nothing worse than a nuisance, when the truth is that it’s already the focal fact of my life. This disease doesn’t just haywire your central nervous system, it also quite cleverly ruins everything else” (Martin 107). Jeremy, a young adult in his twenties, explains his frustrations with his MS diagnosis in *Eleanor Rigby*, saying, “Why would my own life become so messed up like this with MS if there wasn’t some sort of compensation?” (Coupland 92). In *Sweet Salt Air*, when Nicole’s husband, Julian, a famous cardiac surgeon, is diagnosed with MS, he tries to hide his diagnosis from everyone, including his parents, colleagues at the hospital, his friends, and even his children (Delinsky 34). Because of his career, Julian wants to be perceived by the public as being healthy; he has a certain self-image to uphold after all (36). Finally, in the graphic novel, *Superior*, a young twelve-year-old boy describes his life with MS as being “total crap” and “useless”. He hates being himself and hates his “stupid, pathetic body” (Millar Chapter 6).

Many of the main characters diagnosed with MS in these novels did not feel as though they could continue to be in the relationship or marriage they were already in, nor did they feel they were able to pursue new relationships because of their disease; these characters considered their disease to be a burden to others. Many of these feelings were
perpetuated by other characters in the novels, although some of the novels also included characters who tried to dissuade the characters with MS of these feelings. In *A Sense of Belonging*, Josh explains to his brother that he is not searching “for a big relationship that’s heavy on commitment” because “there’s no point” and he has nothing to offer anyone (James 152-153). In *Living Proof*, Arianna tells Trent that she has malignantly progressive multiple sclerosis, and concludes, “I like you, Trent, but you’d be wasting your time to date me” (Peikoff 96). In *Two Ends of Sleep*, Rusty worries that her girlfriend no longer wants to be with her because of her disease: “Rusty knew deep down Janet wanted to dump her and get on with her non-sickly life” (Jones 38). Though Anna does not want to become involved with anyone because of her MS in *Out of the Blue*, her mother argues with her over this feeling, saying, “You’ve decided you can’t handle a relationship because you’re sick. So, what, you’re going to just cancel that part of you right out of the picture forever?” (Mandel 23). Later in the novel, the readers see the opposite reaction from Anna’s future mother-in-law, Celeste, at a party. In this scene, Celeste discusses her concerns regarding Anna to a friend: “If she really loved him, she’d leave him alone. What kind of future does she think he’ll have with her?” (212). At Anna’s wedding, Celeste gets in an argument with Anna’s mother, telling her that it was sweet to see how her son took care of Anna and how he had “always been so charitable with the helpless, impaired, and pathetic” (289).

These ideas of being a burden and not being able to be in significant relationships because of their diagnoses with MS were mentioned in four of the fifteen novels (*Out of the Blue, The Ride of Her Life, Living Proof,* and *A Sense of Belonging*). As previously mentioned, though there were many novels with other characters who tried to dissuade
the characters living with MS of these feelings, and many of these characters ended up in positive and fulfilling relationships, including becoming engaged or getting married (particularly in the following: *The Breakdown Lane*, *A Sense of Belonging*, *Out of the Blue*, *The Ride of Her Life*, and *Living Proof*), it is also true that there were some novels that included negative examples of relationships. These novels included the significant others of the characters with MS either leaving temporarily or permanently or the significant others being involved with affairs outside of their relationship or marriage. Instances such as these occurred in five of the fifteen novels, most notably: *The Sorrow of Archaeology*, *Playing from Memory*, *The Breakdown Lane*, *Heresies of Nature*, and *Freeing Vera*. In *Freeing Vera*, one of Vera’s children, Gloria, explains that she is not surprised to find that her father is having an affair: “Frankly, I thought it inevitable he would seek out other women, given Mommy’s condition” (Raffa 169). In *A Sundog Moment*, the woman with MS left her husband temporarily, not feeling that they could handle their marriage after her diagnosis.

It is also interesting to note how other characters in these novels reacted regarding the characters with MS, whether these secondary characters be family members, significant others, friends, or strangers. In *Playing from Memory*, Ben’s wife, Dory, keeps a journal and explains, “I write out of despair, because I know there is no way to make sense out of our lives, and although Ben’s disease proves every day there is no God, I want to appeal to him, anyhow, to help us, to make our lives, to make us, happy again” (Milofsky 71). Later, Dory writes, “I resent Ben. Yet I don’t hate him, even when he’s like this. It might be better if I did; then I could leave” (164). Their children, Michael and Charles, face struggles of their own regarding their father’s MS. Michael,
the oldest son, never dates, does poorly in school, stays out all night, and is often angry with his father. Dory suggests that Michael may be doing this as he is frightened and is trying to hide from the disease and become “indifferent to pain”. In contrast, their younger son, Charles, hides in his room all day and reads (192-193). In *Heresies of Nature*, Ben discusses his frustrations with his wife’s MS, explaining that his daughters resent their mother, whether consciously or not (Young 105). One daughter, Elizabeth, realizes that she used to blame her younger sister, Janny, for her mother’s MS: “She had, for a time, blamed her baby sister for the m.s.—and it was probably true that Merry’s paralysis was rushed by her decision to have the baby rather than abort it, as the doctor had recommended” (69).

In *Out of the Blue*, Anna is confronted by a slightly intoxicated ex-girlfriend of her fiancé. This woman, Lola, begins talking with Anna, saying, “I admire you so much. All you people with MS have such amazing attitudes. I know three MS people now, and every single one of you is so upbeat. Maybe it has something to do with the nerve damage in your brain. Do you think?” (Mandel 208). Though the character with MS also happened to be a parent in seven of the fifteen novels analyzed, only three of the novels spent a significant amount of time discussing the children’s perspective on the parent’s disease, these three being: *Freeing Vera*, *The Breakdown Lane*, and *Heresies of Nature*. In *The Breakdown Lane*, Caroline, a teenager, does not seem to fully comprehend the reality of her mother’s MS, possibly because of the many invisible symptoms of MS. Caroline complains about her mother, Jules, always sleeping: “She just lays there like a zombie. She doesn’t even try to get up. It’s like, guh, guh, I’m asleep. Like, every other week!” (Mitchard 159). Jules’ other child, Gabe, gets in an argument with her, while she
is depressed about her recent diagnosis with MS, and later writes about his feelings: “She had a right to go ballistic. But she had no right to treat us like shit, because we were the only people in the world she could depend on. On the other hand, I could see how you could hate that—being dependent on the people who were supposed to be dependent on you. It would make you want to treat them like shit” (261).
Discussion

While exploring the adult fiction available portraying characters with multiple sclerosis, I was extremely surprised to find so many novels, almost all of which I had never heard of before. The only exception was *The Kitchen God’s Wife* by Amy Tan, which was one of the initial twenty-five novels I read, though I had no prior knowledge before this study that this novel included a character with MS. Clearly, there are a variety of adult fiction novels available involving characters with multiple sclerosis, however, interested patrons may not know where to look for such literature. I was also pleasantly surprised by the variety of genres represented in the texts. Whether the reader enjoys mysteries, realistic fiction, romance, graphic novels, or science fiction, there seems to be something for everyone. Also, the diversity of characters was especially interesting. Though the majority of people diagnosed with multiple sclerosis are women in their forties or fifties, it was nice to see a variety of genders and ages portrayed; women and men, from pre-teens to middle-aged and older adults. The careers and life situations of these characters were also fascinating. I believe that showing characters from stay-at-home moms and musicians to hockey players and physicians and to teachers and unemployed people, is a fantastic way to help readers realize that MS can affect anyone, no matter what social or economic class and background they may come from. The majority of these novels also did a wonderful job mentioning and showing that MS affects every single person differently. While some of the characters seemed to have
only minor problems related to their diagnoses, other characters quickly became much worse and were not able to function as they had previously before their diagnosis.

Despite being pleased with the overall diversity of the novels in terms of genre and characterization, I did feel that the quality of many of the novels suffered as the authors may have been too focused on making sure to spend appropriate time and effort explaining multiple sclerosis and its symptoms. However, it was encouraging to see that most of the portrayals of multiple sclerosis and its symptoms and complications were medically accurate. Almost all of the novels were published in the 21st century, and even the ones that were not, A Sense of Belonging (1999), Two Ends of Sleep (1997), and Playing from Memory (1980), did not appear to describe any specific details of MS or MS treatments that were particularly out-of-date in terms of medical accuracy.

Of course, both Living Proof (2012) and Sweet Salt Air (2013) mentioned stem cell transplants as a means of treatment for people living with multiple sclerosis, an idea which, although being currently researched, is still not a reality. Depending on how soon these ideas do become a reality, the scientific endeavors in these two novels could bring a false sense of hope to people affected by multiple sclerosis who choose to read these novels. Having said that, both Kira Peikoff and Barbara Delinsky seemed to be consciously aware of their decision to discuss stem cell transplants as a reality in their novels and made mention of the fact in their acknowledgements. Peikoff mentioned having spent a significant amount of time visiting the UC-Irvine stem cell laboratory and speaking with Dr. Gabriel Nistor and Dr. Hans Kierstead, world leaders in stem cell research, whose current research focuses on regenerating damaged spinal cords. It is also important to note that Peikoff’s novel (Living Proof) was mentioning stem cell
transplants as a reality in the year 2027, and not in the present day. On the other hand, although Delinsky’s novel (*Sweet Salt Air*) did include stem cell transplants as a reality during the present day, Delinsky made sure to mention the time she spent speaking with Dr. John Wagner about umbilical cord stem cell research in her acknowledgements, also mentioning that these ideas were his hopes and ideas for stem cell research in the future and explaining that this is not a current reality.

A final issue with the novels read and analyzed involving characters with MS was the lack of availability. Out of the original forty plus novels located through general searches of numerous databases, only twenty-five of these novels were able to be found in libraries using OCLC WorldCat. Of these twenty-five novels, only thirteen of them were easily found in public libraries. The other twelve novels had to be obtained through an academic library or through interlibrary loan requests. As librarians, we often discuss the opportunity to browse the shelves and serendipitously happen across certain novels. Unfortunately, the lack of availability for many of these novels does not allow for this serendipitous finding of novels portraying multiple sclerosis. Indeed, even if a patron was actively seeking out one of these novels already knowing that it existed, it may be difficult for him or her to locate it.

**Limitations and Strengths**

There are certainly a few limitations to this study. Firstly, content analysis is strictly limited to the examination of recorded communications, in this instance, only adult fiction. Also, there are numerous books available that have characters with multiple sclerosis, myself having found over forty novels, but I simply did not have time to read and analyze every single novel. Thus, this study was limited to just twenty-five of these
novels, the ones that were most readily available in public and academic libraries. Additionally, it is highly unlikely that in my original search for these novels, I found every single novel with characters with multiple sclerosis that is readily available. The novels selected were also limited because of my decision to include only adult fiction. For this research study, I chose to not read any children’s literature and to only read one young adult novel. I also chose to not include: works based upon true stories, short stories, and theatre pieces/plays.

However, as Babbie explains, there are numerous advantages to using content analysis (344). One of the biggest advantages for this study was being able to read and analyze books that were written and published over a number of years. This factor helped to determine if any significant changes had been made in the reliability of the depictions of MS in fiction within a certain time frame. For this study, the time frame encompassed the years from 1980 to 2013, a span of thirty-three years. Content analysis also allows for the correction of errors. When I noticed that some of the data did not line up, or I decided I wanted to look for other criteria in the novels, I was easily able to go back and reread novels and analyze them again using my specified criteria.
Significance of Study & Future Research

By conducting this thorough content analysis of adult fiction involving characters with multiple sclerosis, librarians will be more knowledgeable of this type of literature and what is readily available and will thus be able to better recommend such titles to interested patrons. These patrons may be individuals living with MS, individuals who are acquainted with someone who has MS, or individuals who are simply interested in learning more about the disease. It may even include patrons who simply happen across the novels by chance and choose to read them. Therefore, this study is significant as it will be able to provide librarians in academic libraries, public libraries, and various other types of special libraries, such as the National MS Society Lending Library, with a listing of adult fiction titles portraying characters with multiple sclerosis and will also provide these librarians with certain criteria to look for in these titles to determine how accurate these fictional works are in their account of MS symptoms, treatments, etc. The individuals who read these fiction titles for solace, comfort, solidarity, or general interest, will directly benefit from this study and, of course, the librarians and libraries will also benefit from this study as they will be more knowledgeable on this specific type of material and can therefore better help their patrons.

In the future, I feel that it would be important and useful to speak directly with people affected by multiple sclerosis, as well as people with no experience with MS, to see how they react to the twenty-five novels read for this content analysis. Their
responses to these texts, and other similar texts not read and analyzed in this study, could be valuable for authors and librarians as well as medical professionals. It would also be useful to read these twenty-five novels, as well as others portraying characters with multiple sclerosis, in order to measure the quality of the novel and determine if the quality of the novel suffers because of a concern for being medically accurate. It also would be beneficial to try to determine how often people look to fiction for depictions of characters with multiple sclerosis and other neurological diseases. This could be done by questionnaires or focus groups and interviews with patrons. It also may be useful to look at circulation statistics or bookstore sales to see how often similar novels are checked out or purchased. Finally, it may be beneficial to work with publishers to see how often books portraying characters with multiple sclerosis are sent to publishing companies, how many of these types of books are eventually published, and if publishers feel that there is a need for books such as these on the market.
Conclusion

Although fifteen adult fiction works portraying main characters living with multiple sclerosis and ten novels portraying secondary characters with multiple sclerosis may seem like a significant amount, there is certainly always room for improvement, regarding the amount of literature readily available as well as the medically accurate content of the literature. There could certainly be more fiction involving this subject matter published and readily available to patrons in libraries. However, the quality of the novels is perhaps more important than the quantity of the novels. Works of adult fiction portraying characters living with multiple sclerosis need to be medically accurate and realistic, consistent with their information, candid but also dignified in the portrayal of the characters, and also appealing to their readers.

Moving forward, with the knowledge of fiction portraying characters with multiple sclerosis that is available and accurate, librarians should be in conversation with medical professionals and publishers to determine and explain the necessity for novels such as these and make sure they are widely available to the patrons that need or want them. They should also be able to discuss and recommend these texts to interested patrons. Of course, librarians need to keep in mind that these types of novels may not be desired by every patron affected by multiple sclerosis and that these novels may also be interesting for patrons who have little to no experience with MS. Our main goal should be to provide a myriad of relatable and quality fiction in our collections for all patrons who may happen to be interested.
Bibliography


Works Studied


Appendices
Appendix A: Content Analysis Code

General Book Info:

- Title:
- Author:
- Publisher:
- Date:
- Series:
- Genre:
- Length:
- Author’s Experience with MS:

Context of Novel:

- First Mention of MS:
- Timespan:
- General Setting:
- Main Topic of Novel:
- General Attitude/Feeling of Novel (Hopeful, Negative, Ignorant, etc.):
- Point of View:

Presentation of MS:

- MS present at beginning of novel?
- Means of Discovery/Diagnosis:
- Treatment Options:
Medically Accurate Symptoms/Descriptions:

Specific Medications Mentioned (Avonex, Betaseron, Copaxone, etc.):

National MS Society mentioned?

Character(s) with MS:

Role of Character (Main, Secondary):

Age/Gender:

“Type” of Character/Career:

Impact of MS on Lifestyle:

Attitude toward MS:

Friends and Family:

Family Structure:

Family Communication/Coping and Attitude:

Attitude of Friends toward MS:

Significant Quotes/Events/Concepts:
Appendix B: Synopses of Novels

*An asterisk marks the novels portraying primary characters with multiple sclerosis and in which MS was the primary focus of the plot.

*A Sundog Moment. Baldacci, Sharon.

Elizabeth Whittaker has an adoring husband, Michael, and a wonderful young daughter, Kellan, who has just gone off to college. Elizabeth’s life may seem perfect to some, but then after a series of odd symptoms and a number of misdiagnoses, Elizabeth is diagnosed with multiple sclerosis. As Elizabeth and her family desperately try to cope with this new challenge in their lives, they begin to question their relationships. Yet Elizabeth is able to find solace with the help of a friend also struggling with an illness, her cousin, Carol, who is trying to cope with a recent divorce, her doctor, Gordon, who is grieving his wife who recently passed away, and Father Wells, her priest who ultimately helps her regain her faith.

GENRE: Realistic, Christian Fiction

The Ordinary White Boy. Clarke, Brock.

Lamar Kerry is a 27-year-old recent college graduate who has returned to his childhood home in upstate New York to work for the local newspaper that is edited by his father. Knowing full well that his father is disappointed with him, Lamar faces a slew of challenges while living back at home: troubles with his girlfriend, Glori, pressure to help an old classmate in town whose Latino husband has recently disappeared, and the struggles that Lamar’s mother faces as she is living with multiple sclerosis.

GENRE: Coming-of-age, Realistic Fiction


Liz Dunn is a crabby woman with almost nothing to look forward to in life when, one night, her life is interrupted by a young man named Jeremy. As is later revealed, Jeremy is her long lost son whom she had given up for adoption. Now, Jeremy needs a mother more than ever as he is struggling with his new diagnosis of multiple sclerosis. Bringing back memories of the past as well as present and future struggles, Jeremy’s reappearance in Liz’s life changes both of their lives forever.

GENRE: Psychological Fiction
*Sweet Salt Air. Delinsky, Barbara.

Two childhood friends, Nicole and Charlotte, reunite on their favorite island off of Maine one summer in order to write a cookbook together. However, each friend is harboring a secret that they are desperate to keep to themselves; Charlotte is struggling with the fact that her cardiac surgeon husband, Julian, is hiding his multiple sclerosis from the world, including his own children, while Nicole is hiding a past relationship from Charlotte. Eventually, both of their secrets are revealed and Nicole may be the only person able to help Julian and Charlotte in their fight against MS.

GENRE: Romance, Women’s Lives Fiction

Borrowed Light. Denby, Joolz.

Taking place in a beach town in the UK, this novel tells the story of Astra Sharp, a young intelligent woman who drops out of university and moves home in order to take care of her parents and younger siblings, Git, Lance, and Gwen, when her mother is diagnosed with multiple sclerosis. Although her life is a constant struggle, Astra doesn’t mind much until her best friend's younger sister, Angel, arrives in town. Angel’s good looks and sly demeanor bring havoc to the small town; Angel is able to make almost any man fall in love with her, including Astra’s love interest, Luke, and her brother, Lance. Ultimately, Angel’s arrival in town will lead to a horrifying event that drastically changes the lives of everyone in town.

GENRE: Suspense Fiction


Bob Bonaduce, a retired professional hockey player, returns to New Brunswick in order to reconcile with his ex-wife and his now college-age son that he left behind many years ago. While there, Bob enrolls in a graduate degree program in English, hoping to bide some time in a meaningful way while he begins training to start playing hockey again. However, all of Bob’s dreams may be harder to achieve than anyone realizes they are as Bob is silently struggling with the ever-increasing symptoms of a debilitating illness, multiple sclerosis.

GENRE: Realistic, Sports Fiction

When a journalist who had wanted to write a tell-all article about a well-known rock band is found murdered, the band’s guitarist, JP Kinkaid, Bree, his girlfriend of many years, and Cilla, his estranged wife, are all thrust into the spotlight, with some of them even being considered prime suspects in the murder. Unfortunately, JP is dealing with many issues of his own, including living the life of a rock star while dealing with multiple sclerosis.

GENRE: Mystery, Suspense Fiction

*A Sense of Belonging. James, Erica.

This novel tells the story of the six new inhabitants at Cholmford Hall Mews, an 18th century barn that has been converted into apartments in England. All of these characters: Kate, a young woman in a relationship with Alec, a recently divorced older man, Tony and Amanda, an unhappily married couple, Jessica, a romance novelist looking for love, and Josh, a young businessman who has recently been diagnosed with multiple sclerosis, are searching for something new and different in their lives. As their stories intertwine, we see that many of these characters receive more than they actually bargained for in the beginning.

GENRE: Romance, Realistic Fiction


This short novel tells the tale of Rusty, a lesbian living with multiple sclerosis, and the tumultuous relationship she has with her girlfriend. After being diagnosed with MS, the cynical Rusty spends much of her time sleeping, thus, much of this story is told through her dream episodes, often blending the lines between fantasy and reality.

GENRE: Realistic, LGBTQ Fiction
*Out of the Blue. Mandel, Sally.

Anna Bolle was always a skilled athlete and wonderful high school English teacher and then five years prior to the beginning of this novel, she was diagnosed with multiple sclerosis. Anna, who lives with her mother in New York City, now has a much more negative view of the future, not having quite come to terms with her diagnosis, and has completely shut down the idea of ever having a steady relationship, that is, until she meets Joe Malone. Joe is a successful businessman and amateur photographer who has a hard time getting too close to people. As it turns out, Joe and Anna may just be perfect for each other.

GENRE: Romance, Realistic Fiction


Sarah MacLeish is at a turning point in her life. As the symptoms of her multiple sclerosis continue to worsen, Sarah is forced to quit her job as a physician and instead join her husband, Harry, on one of his archaeological digs. When Sarah witnesses her husband having an affair with one of her friends, she decides to go on a road trip with a family friend that, in turn, leads to moments of self-reflection and self-discovery. Sarah meets with her husband once again at the bedside of her dying grandmother in New Mexico.

GENRE: Psychological Fiction

Lovely, Dark and Deep. McNamara, Amy.

After a car accident kills her boyfriend and seemingly ruins her planned future, high school senior Wren decides to leave town and move in with her father, an artist who lives in Maine. She wants nothing more than to be left alone and to be able to leave behind all memories of her past. However, while in Maine, Wren meets and ends up falling in love with a boy, Cal, who threatens to pull her from her safe and lonely haven of solitude. Meanwhile, Cal is struggling with his own issues; he recently dropped out of college in order to deal with his recent diagnosis of multiple sclerosis.

GENRE: Young Adult Literature, Realistic Fiction
*Superior. Millar, Mark.

Simon Pooni used to be an average 12-year-old, until he was diagnosed with multiple sclerosis. Every night, Simon prays that his MS will go away and one night, he finally gets his wish. A space monkey named Ormon comes to Simon in his sleep and grants him one wish. Simon becomes his hero, the famous superhero character, Superior. During a week, Simon lives the life of Superior, saving thousands of people across the US and the world. However, Ormon may not have been a force for good, but rather for evil, and after a week, Simon may have to decide whether he wants to submit to evil, or go back to his life with MS.

GENRE: Graphic Novel


Ben Seidler is at the height of his career. He is a 38-year-old violinist for a well-respected quartet in Wisconsin, living with his wife, Dory, and their two children, Michael and Charles, when he starts experiencing odd symptoms; his balance seems off, his eyesight remains blurry for days at a time, and he encounters other sensory issues. Upon taking the advice of his boss and seeing a physician, Ben is finally diagnosed with multiple sclerosis. Although at first not causing too many problems for his family or his career, we see the disease start to take over his life as the novel covers a span of over ten years. With each passing year, Ben’s symptoms seem to get worse, his children struggle with having a father who is ill, and his wife struggles with a short-lived affair with a family friend. In the end, however, this is the story of a family who struggles together through an unexpected illness and the changes that occur to everyone because of it.

GENRE: Realistic Fiction
*The Breakdown Lane.* Mitchard, Jacquelyn.

Julianne Gillis has always been great at giving other people advice, considering it’s her job. Julianne works as an advice columnist for a local newspaper in her small town in Wisconsin. However, when Leo, her husband of twenty years decides to go on “sabbatical”, a decision that later turns out to be permanent, Julianne is stuck with her three children, Gabe, Caroline, and Aury, and unsure of what to do. Soon after comes another devastating blow; Julianne is diagnosed with multiple sclerosis. Upon this news, her high school age children, Gabe and Caroline, go on a journey to try and locate their father, believing that his return is the only thing that can possibly make things right again. Ultimately, it is Leo’s parents and Julianne’s best friend who help Julianne and her children begin to cope with Leo’s abandonment and Julianne’s illness and help the Gillis family back onto their own feet.

GENRE: Realistic, Domestic, Women’s Lives Fiction

*The Ride of Her Life.* Moore, Natasha.

Sarah has never led an exciting life. She still lives in Buffalo, New York, the town she grew up in, and after high school, she immediately got a job working at the bank. After being diagnosed with multiple sclerosis, she feels that her life is completely over. One day, her old high school crush, Dean, walks into the bank, a moment that changes her life forever. Sarah ends up going on an “adventure” with Dean; together they ride his motorcycle across the country to visit his family in Colorado. During the trip, both Sarah and Dean are keeping secrets from one another and find that they both have strong feelings for each other. Sarah realizes that even though she is now living with MS, that doesn’t mean she has to stop living altogether.

GENRE: Romance, Erotica Fiction
*Living Proof.* Peikoff, Kira.

In the year 2027, destroying an embryo is considered first-degree murder, thus, doctor Arianna Drake is desperately trying to cover her tracks as her fertility clinic uses embryos to conduct stem cell research. However, the US Department of Embryo Preservation (DEP) is hot on her trail and has one of their best men, Trent Rowe, go undercover to figure out what Arianna is doing with the embryos. Unfortunately, Trent doesn’t plan on actually falling in love with Arianna, nor does he plan on drastically changing his opinion on stem cell research after realizing that only this can possibly save Arianna from the disease she has been living with for the past two years, multiple sclerosis.

**GENRE:** Science Fiction, Suspense

*The Good Priest’s Son.* Price, Reynolds.

Mabry Kincaid is on his way home to New York from Italy when the September 11th attacks occur. Blocked from his home for an indefinite amount of time, Mabry, an art conservator in his fifties, flies to North Carolina to visit his father, an aging Episcopal priest. While staying with his father, he meets up with old friends and girlfriends, forms relationships with his father’s African-American caretaker and her son, struggles with the relationship he currently has with his adult daughter, and lets his father in on a current struggle in his life: that he may soon be diagnosed with multiple sclerosis.

**GENRE:** Realistic, Psychological Fiction

*Freeing Vera.* Raffa, Elissa.

Taking place during the 1970s, this novel tells the story of Frannie D’Amato, a young artist and activist trying to live her own life, as well as take care of her mother, who has been living with multiple sclerosis since Frannie was young. Throughout the novel, Frannie struggles to persuade her mother and sisters that her mother, Vera, should go live without her father, a man who has been physically neglecting his wife for many years. Frannie ultimately must come to terms with her mother’s MS as well as with her mother and father’s relationship and her own place in the family.

**GENRE:** Coming-of-age, Realistic Fiction
The Origin of Species. Ricci, Nino.

Alex, a young man living in Canada in order to complete his PhD, is struggling with writing his dissertation on Charles Darwin. Along with this struggle come many others, including Alex’s reoccurring memories from the past involving his trip to the Galapagos Islands, and the news that he has a young son, the product of a short-lived relationship with a woman in Sweden. Although most of Alex’s relationships leave him feeling unfulfilled, Alex ends up befriending a young woman in his apartment, Esther, who is living with multiple sclerosis. It is through his relationship with the bright and ever positive Esther that Alex is eventually able to come to terms with his past, his present, and his future.

GENRE: Coming-of-age, Psychological Fiction


Morgan is a bright young actress living in Chicago and vying for the lead in a new play when she becomes involved in the death of an elderly actress. However, a second actress’s death soon leads everyone to realize that both the first and second deaths were actually murders. When some of her closest friends become suspects in the murders, Morgan begins to do some of her own detective work. She is aided throughout the novel by some of her closest friends: Martin, a once-great director, her closest friend, Beth, who happens to be living with multiple sclerosis, and police detective Roblings, an endearing detective who begins to fall in love with Morgan.

GENRE: Mystery, Suspense Fiction

The Kitchen God’s Wife. Tan, Amy.

Pearl is a middle-aged Chinese-American traveling to San Francisco with her husband and two daughters for a cousin’s engagement party, as well as a family funeral. Upon arriving, we meet Pearl’s aging mother, Winnie. Both Winnie and Pearl have secrets that they have not shared with each other: Winnie, who grew up in China, has a convoluted past which includes an ex-husband and prior children, while Pearl was diagnosed with multiple sclerosis a number of years ago. It is only through the cunning behavior of Pearl’s Aunt Helen that both Pearl and Winnie are finally able to share their secrets with one another and ultimately form a closer relationship.

GENRE: Literary Fiction, Realistic, Women’s Lives Fiction
**Weeping Underwater Looks a Lot Like Laughter.** White, Michael.

After his family moves to Des Moines, Iowa, George Flynn is the new kid on the block with no friends, that is, until he befriends the Schell sisters: Emily, the popular aspiring actress at the high school, and Katie, her 13-year-old sister who has been diagnosed with multiple sclerosis. Although George quickly falls in love with Emily, it is Katie who really brings the three together. After a devastating tragedy, George and Emily are forced to cope with their anger and depression, though their journey ends up being simultaneously hopeful and self-destructive.

GENRE: Coming-of-age, Realistic Fiction

**Out of the Ruins.** Wright, Sally.

Hannah Hill is an elderly woman, bedridden and living with multiple sclerosis, who happens to own the family’s Cumberland Island estate in Georgia. Unfortunately, she is the only one in the family who can keep the younger generations from selling the island to developers. Shortly after telling family friend and archivist Ben Reese about a mysterious night time intruder, Hannah dies, though Ben believes she was actually murdered. While dealing with issues such as euthanasia and human suffering, Ben sifts through many character’s motives determined to figure out what ultimately happened to Hannah Hill.

GENRE: Mystery, Christian Fiction

*Heresies of Nature: a Novel.** Young, Margaret Blair.

Although inspired by a true story, this novel is the fictional tale of the Morgan family, a seemingly normal Mormon family living in Utah. However, the mother, Merry, has multiple sclerosis. Throughout this story, Merry’s three daughters turn to varying degrees of self-destructive behavior in order to cope with their mother’s disease. Meanwhile, Merry’s husband, Ben, turns from his faith and tries to help his wife by any means possible, including bringing Cody, a woman filled with many new-age ideals, into their home as Merry’s new nurse.

GENRE: Realistic, Domestic, Psychological Fiction

**All synopses were written by Jennie Catherine Minor.**