ABSTRACT

In recent years the media has focused more on health issues and plays a crucial role in constructing illness society that is purified from death. Popular specialists on media diagnose continually through deadly-dangerous symptoms and offer new formulas in a changing sense. Each trouble and its solution pave the way for selling new products and new beginnings. Indeed, in this regime, each cure proves the existence of a different virus. For this point of view, all health manners can and should be debated in the media and consumerism relations. To put this differently, health is an academic area not related primarily to medicine but sociology. This paper deals with the reciprocal connection between medicine and media as components of the traumatic modern society and individual. According to the argument of this study, in the present-day society, medicine marks virus rather than cure, while the media refer to lack of meaning instead of wisdom.

INTRODUCTION

The thought that modern societies are bodily or at least based on body has been discussed for a long time by different academic disciplines from medicine to sociology, from philosophy to art, and from media to pedagogy (Kern, 1975; Blacking, 1977; Polhemus, 1978; Brain, 1979; Featherstone, 1982; Freund, 1982; Armstrong, 1983; Turner, 1984; Shilling, 1993; Crossley, 2001). All these studies, which hypothesise the body as non-natural and fictional asset (Grosz, 1994), dealt with it mainly in the theoretical contexts of onthological question, civilisation paradox, socio-political and economical representation, sense of community, consumerism and culture change. On the other hand, especially for the last decade, the body has been analysed as a matter of health, so much so that body and health have replaced each other consciously or unconsciously (Broom and Tovey, 2009; Ettorre, 2010; Stewart and Sutton, 2012). This is perhaps because the body within health and vice verse reveal the references of modernity as a whole.

However today, the case gets more complicated as new parameters are added to the triangle of the body, health and modernity. Moreover, new links and deadlocks
emerge between medical knowledge and social relations (White, 2009, p. 21). Accordingly, while the body refers more to enslavement than freedom, health implies to illness rather than wellbeing. This may be interpreted as the nature of capitalist culture in which everything turns into a property and generates its own opposite with itself. Now health as well as body goes beyond medical sciences. Rather, it constitutes the essence of global politics and money economy that penetrate into every corner of everyday life. Health that turns into the meaning of life is now a lucrative industry, just like other meanings of life (Eagleton, 2008, p. 28). Health as a sector and a strategy get disconnected from the body that becomes vague at the hands of mediatised medicine and of medicalised media and thus that is a slippery ground open both to enlightenment and to misinformation.

The myth of “the healthy body” evolves to impossible love for those who design envyingly and ardently their existence in compliance with contemporary body and health trends. Hence, each step taken to reach perfection by the mediatised masses reproduces itself as a new mental or physical illness form. Health under these circumstances stands for a sort of social pathology rather than medical issue. The tendency of idolising health and body can and should be read as a fragment of the pleasure-based and speed-oriented modernity. Even though life and death involve an existential unity and wholeness (Kearl, 1989, p. 7), according to the worldview living is accepted as intrinsic, natural and ordinary, but dying is seen as extrinsic and marginal. As Baudrillard underlines (1993), ours is a culture in which the philosophy of healthiness is canonised whereas death is removed from life. For the very reason, ‘bodyness’ is not merely an aesthetic but ontological manner for simultaneously medicalised and mediatised individuals who look for better body for better life that is able to ignore the thought of death. No wonder that this strategy stimulates and is stimulated by mass media that broadcast health programs and that commercialise health products through body ‘experts’. However, these programs as well as products that become determinative over the sense of perfect body have a strong potential to generate a collective illness, called as illness society. This paper examines this potency within cause and effect relation.

**METHOD AND APPROACH**

This paper benefits from debates reflected not only from policies or body-and-health related texts and also from visual sources such as film (Moartea domnului Lazarescu) and television programmes (The Chew, The Doctors, The Dr. Oz Show, Mystery Diagnosis, Unhold Stories of the E.R., Everyday Health, The Weight of the Nation). This is because the modern culture is based essentially on visual presentations and surfaces, and moreover, global trends on the body as well as health discourses are encoded and decoded visually. In this respect, analysis of illness society, necessitates observing visual images without separating them from theoretical text and without getting lost details. Therefore, this study does not gain insight into scenes, episodes or dialogues. Instead, from panaromic view, it sees and depicts overall picture that gives some important clues about liquid modernity we live in collectively. Also, it aims to conceptualise the mediatised medicine and the medicalised media terms without placing media and medicine, body and spirit, health and happiness separately. In other words, this article as a whole tries to expound modernity through some relevant concepts of body, place, media, medicine, health, life and death. For this purpose, in analysing these ambivalent and dialectical topics, two significant methods come to the
forefront. The first is to to concentrate on ‘impressions’ in spatial and social ground, as taught by Georg Simmel. In this paper, these are television programmes, experts, prescriptions and hospitals. The second method is to establish some links between social issues and theoretical background and between discourse and practise.

MEDIA AS MODERN CLINIC

The Romanian film Moartea domnului Lazarescu (The Death of Mr. Lazarescu, 2005) directed by Cristi Puiu zooms in the story of an old, poor and sick man who seeks a remedy for his sufferings. Throughout the film, he is seen either in front of television, while desperately watching health programmes, or in an ambulance and hospital. The neighbours and relatives around Lazarescu, the main character, make diagnoses and give advices about his sickness. Health services are provided by arrogant and sullen faced doctors and regulated by rigid procedures. Accordingly, the hospital evokes illness rather than cure.

Media that convert individuals to masses by using seductive tools and discourses are today one of the most remarkable elements of the modern health regime. In other words, media have a crucial role to make health both a private and public issue. At all hours of the day and night, and regardless of where the place is, the global health industry distributes rapidly-changing trends through all forms of media. As a result perhaps of this, individuals feel themselves obliged to claim their rights to health on their own. Namely, in health-oriented affairs, the State’s mechanism is implicitly dominated by media-based global body-industries (Farmer, 2003; Mann, et al. 1999 cited in Ozbay, Terzioglu and Yasin, 2011, p. 19). This is also the essence of the loneliness that Mr. Lazarescu faced in the film.

The modern individual is on the one hand hustle and bustle without interrogating breath of life, and on the other is encircled with spare time activities. But the spare time, which turns into an absolute action in itself, enable people to examine, concentrate and reform their bodies that stand for identity beyond appearance. Health programmes on television nourish and are nourished from the spare-time understanding that gives inspiration to the audience about how to create new body forms and health formulas. Although this interaction between media and individuals is totally concrete and body-based, the notion of the relationship resembles a spiritual ritual. The audience whose dedicated faith in medical knowledge practises the duties that media characters preach. News and programmes about healthy bodies are watched and accepted as sine qua non because it is believed that they disclose the secret of possessing eternity in the ephemeral world. More precisely, these programmes sell the promise of having a healthy (smooth, ageless and immortal) body that normally tends to decompose. Namely, they highlight the terror of death and so, ontologically are nourished from Thanatophobia despite the fact that this escape is futile.

It is futile because neither media nor medicine can write a perfect prescription to enable a person to overcome death. Besides, mediatised medicine and medicalised media in unison do not fight against the ageing and death, but against their traces, reflections and impressions. Their attraction comes not from this, but from their liquidity that causes forgetfulness. In this sense, Alain de Botton sees an analogy between hospital and news. To him, “the news hub has the institutional amnesia of a hospital’s accident and emergency department: nightly the bloodstains are wiped away
and the memories of the dead erased” (2014, p. 252). In this environment in which there is no room for permanent perfection, each text or image produced via media are reproduced by and over the passionate, concerned and obsessed audience-like individuals. In here, they wait for taking even the most radical decisions about their flexibly-constructed bodies. The complex and never-ending cure that is controlled by science and medicine is however looked for in markets, pharmacies, herbalists and cosmeticians under colour of killing death. For those who look for the cure without ceasing, there is not an inner or spiritual way to feel freedom and to sense serenity. They are always conditioned to material solutions and authenticated tools. Thus, individuals are objectified in and by the logic-based and costly health regime, which involves some fictional activities such as diets and exercises. Nevertheless, all expenses made for the sake of being healthy and looking well are somehow exempted from total expenditure amount. That is perhaps why any online or broadcasted health programme does not give place to politics and economics of health care (Christenson and Ivancin 2006, p. 13). Instead of this, media generally put new fantastic cures, fashionable diseases and bodily deficiencies on the market. The health system with its experts is substantially in the possession of a media that works like a clinic. As for the viewers who encourage using medicine as if fulfilling a divine duty, they turn slowly into paranoid beings about their body and health (Wallack, 1990, p. 46), so these flurried and disoriented media-characters get inside an unbounded addiction.

The health versus illness issue is no longer confined to the hospital environment and the medical centres nor is it confined to the traditional doctor-patient relationship. This issue has spread to other social and commercial arenas. The promotion of health has been brought to contemporary households by TV campaigns. ‘Health’ is showcased in supermarkets and shopping malls; catches our eye in cosmetics advertising, is displayed in leisure sports arenas, and flows freely within cybernetic space (Gomes, 2010, p. 90).

Media, particularly television, does not merely influence, but also determines the public’s knowledge, attitudes and behavior because they reach the masses in an interactive sense and transfer data within storytelling (Murphy and Hether, 2008, p. 1). Those who come digitally together through media meet around common space in spite of physical distance; in so much that even the tools are switched off. This reconstructive effect continues a while more. The distant bodies in search of perfection and immortality have a strong commitment and ‘we are feeling’. Devoted members of the circle have also dramatic stories and anxieties regarding their appearances that represent their future. They narrate the risks of disease as well as delight of body transformation and stimulate hope of the phrase ‘Yes, I can’. By this means, medical knowledge gets quickly into circulation and affects collective behaviour. The body in the shade of media and science is the focal point of the interpersonal and intra-personal communication network.

Media programs highlight the results of the latest medical studies that are being conducted to explore a way of heathier life; besides this advice may totally be different from the previous one (Hackett, 2007, p. 110). In this process, all the people on TV are coded as ‘health profesional’ and expertness is reduced mostly to mercantile affairs. To put this differently, health is turned into an object of reality-show, and experts and their diagnosis and solution recommendations are offered as consumable items. Medical knowledge and interest designed and marketed by mass media are easily spread and publicised through video sharing sites and social network. Here, the
unquestionable authority allies with the power of media and they eventually break the resistance of the audience.

**THE MEDIA-ORIENTED DOCTOR ACTING MODERN GOD**

As long as health is centred on everyday life via media messages and the body becomes raison d’être, being a doctor goes beyond a profession. Medicalisation not only of media but also of daily life makes doctors one of sanctified secular symbols of modern society; so much so that the relationship between doctor and patients resembles the relationship between God and humanity. The phrase “Trust me I am a doctor”, which is used in some television programmes and song lyrics, reflects the sense of God-like perfection and incontestability. This implies at the same time that humanity is sickly and life is pathologically full of virus. In the sight of doctors, even the most sterilised things are seen like contaminated factors that must be disinfected without delay. Moreover, even death, which is not seen as part of nature by doctors, is defined as personal neglect, untoward accident or contagious disease (Fulton and Bendiksen, 1976, p. 4). Related to this, in modern culture, the phrase “natural death” is preferred to the decree of “death is natural”.

In his bestselling book “How We Die: Reflections on Life’s Final Chapter”, Sherwin Nuland explains the paradoxical view on death. According to him, “neither among the top fifteen causes of death nor anywhere else in that soulless summary is there to be found a listing for those among us who just fade away” (1995, p. 43). This is indeed the criticism of modern society as well as moral and legal medical understanding. Baudrillard reformulates this irony: “Just as morality commanded: ‘you shall not kill’, today it commands: ‘You shall not die’, not in any old way, anyhow, and only if the law and medicine permit“ (2007, p. 174). In this respect, doctors who play the role of counter-God implicitly determine how long people live and when they die. But struggling against death is as demanding as living. As Bauman underlines, “death is a momentary event, but defense of health and vigilance against its enemies is a life-long labour... To postpone death, one needs to surrender life to fighting it” (Bauman, 1992, p. 142). For this purpose, just like a spiritual ritual or a religious duty, doctors preach continuously on the importance of exercising, healthy diet, herbal tea and weight loss.

Since death is disrupter, body, place, time and relations are filled with health, energy, happiness and pleasure. That is also why doctors of the present-day society are positioned as approved supplier of undying new beginnings. Believing in doctors and medicine is thus nourished from anxiety concerning uncertain futures and abrupt death. However, the more people are motivated to obey the rules of medicine, the more they feel themselves more resistless and more desperate because proposing medical solutions underlines the power of disease and because there is indeed no permanent sustainability of fighting against inevitable ageing and dying. One way or another, death finds the weakest link of organs in spite of all scientifically-proven inventions and practices. The body of a patient takes a scientific and objective form in the hands of doctors who relieve pains, so much so that the body is sacrificed in regard to sanctified medical justification. It, just like a votive offered to God, is freely able to be cut, fragmentised, diminished and even donated. In this system in which medicine plays the role of religion, inspection resembles confession of sins to priests who are represented by doctors in this sense. From this point of view, via media, patients are accepted and shown as a sinful character who must be mundified
faithfully. Here, skin obtains a spiritual qualification, whereas spirit is concretised. This dilemma is one of the most complex deadlocks of modernity that glorifies the principles of freedom, beauty and health in compliance with mediatised medicine and medicalised media. In this fiction, it is assumed that everything will be worse day by day as long as media and medicine do not intervene in the situation. In other words, media within medicine and vice versa create and spread the fear of how the world is unreliable and how individuals have fragile being. According to Ulrich Beck (1992, p. 29), social motives that force individuals to act are not based on real risk factors but on risk discourse developed mainly in consumer societies and mostly by scientific disciplines. “In dealing with civilization’s risks, the sciences have always abandoned their foundation of experimental logic and made a polygamous marriage with business, politics and ethics—or more precisely, they live with the latter in a sort of ‘permanent marriage without a license’”.

Health programmes on TV give a disturbing and alarming impression to audience by designing the conditions from decor to content and from guests to experts. Each probable symptom implied on media produces a different disease ideationally. This is the essence of popularity of media organisations. Bauman is also right: “The market feeds on the unhappiness it generates: the fears, anxieties and the sufferings of personal inadequacy it induces release the consumer behaviour indispensable to its continuation” (1989, p. 189). Seeing a danger and risk factor is truly the source of consumerism. If this adapted to media and medicine, it can be asserted that they feed on crisis, trouble and disease in opposition to their optimistic promises.

Perhaps, the only norm of modernity is anomie. Everything and everybody have a rapidly-changeable notion in a non-directional liquidity. Fashion, in this sense, refers not only to global industries also to socio-personal characteristics. In the liquidity, there is no permanent place even to the best ones. As for the body, it is home of the ambivalence that is chronically manipulated by and through mediatised medicine and medicalised media. The body is no longer a real entity; rather, it is a phantasmagorical fiction and a subjective interpretation. As Nietzsche indicates (1974, p. 120 cited in Turner, 1984, p. 212), “even the determination of what is healthy for your body depends on your goal, your horizon, your energies, your impulses, your errors, and above all on the ideals and phantasms of your soul”. In relation with this finding, medicine and media in cooperation reproduce health and disease by generating interpretations on the body. All health-oriented flexible and functional classifications among beneficial, sick, criminal, deviant and harmful ones (White, 2009, p. 9) are determined and applied by body-related professionals such as doctors, practitioner, dieticians, gym teachers, etcetera). Briefly, mediatisation of medicine and medicalisation of media are, as hypothesised through the paper, both cause and result of the illness society.

**MEDIA AS IGNORANCE; MEDICINE AS DISEASE**

Media is the sociological ground in which people easily talk and make interpretations. But, most of time, this privilege about the right to freedom of speech may evolve to meaningless or misinformed monologue. Reviews, comments and research results shared about health through Internet forums, television channels, radio programmes and social media turn the audience into desirous but uncontrolled body-watchers who seek for happiness. Besides, a significant part of these electronic debates is full of contradictory data that reaches from homes to cafes, from
universities to companies. Accuracy of information gets lost in the speed and delight of communication technologies.

Ours is an illness society that talks always about health, or is a death society that desires to live forever. In this sense, philosophically, the rejected truth is truth itself. As for the health and body experts, they present artificial ways of regulating all opposite experiences without contradicting. In this respect, they infect and disorient people with contagious formulas that offer exact solution. As Baudrillard states (1993, p. 40), “today, the masses act not by deflection but by infection”. In this process, media represent the infected notion of modern culture that is metaphorised with disease (Sontag, 1978). Media enhance medicine’s efficiency by carrying it from hospitals and clinics to everyday life. To put this more precisely, life is medicalised by media. As for the viewers, they take an active role in internalisation and distribution of health-based media message and try to display perpetual performance to accommodate themselves to the rapidly-changing medical discourse and perfect-body fashion.

This may be one of the reasons of chronic state of depression and blasé attitude raised in modern culture. As claimed throughout the paper, the illness society in which we live is based more on psycho-neurological disorders than on biological destruction. Byung-Chul Han, in his book titled “The Burnout Society”, indicates “From a pathological standpoint, the incipient twenty-first century is determined neither by bacteria nor by viruses, but by neurons. Neurological illnesses such as depression, attention deficit hyperactivity disorder, borderline personality disorder, and burnout syndrome mark the landscape of pathology at the beginning of the twenty-first century” (2015, p. 1). Hence, the individuals concentrate on their own bodies so that they overcome the inner chaos. In other words, they try to repair their worn-out spirit by reforming the surface and presentation. However, the body that is not a reference to a stable entity is endlessly formulated by media that create new remarkable defects and by medicine that reveal new illnesses. In this system, even the most minimal trouble or sign is assumed as collective attack carried out by uncanny factors in risky everyday life. Directions gave via media and medications prescribed by doctors surround and affect not only the past and the present but also the future.

CONCLUSION
Disease is a symbolic parameter engaged in consumerism in modern societies. Related to this, Theodor Adorno reverses and revises the Kierkagaardian concept “The Sickness unto Death” as “The Health unto Death” (2005, p. 58). If death is really gruesome, this idea derives from hyperbolic joie de vivre, because death is not dialectics of life but desire to live forever (Demir, 2016, p. 291). Disease is, just like death, dependent upon culture, meaning and virtue. Nettleton also states that disease entities are not simply real but are products of social reasoning and social practices (2006, p. 17). In any case, the perfect healthy body corresponds to the desire of immortality, while fighting against illness stands for the horror of dying; therefore health is a reference to an existential issue and media refer to an epistemological power.

Modern individuals are always under the control of the health regime that surrounds them both in home and in street. This regime captures not only their bodies but also their minds and transforms them to role models for others who remain out of
the circle. Consequently, almost all kind of fashion is maintained through the individuals who embrace scientific data that classifies facts as useful and harmful. But, this determination is renewed at every turn not by people but by experts. In the global fiction of mediatised medicine and medicalised media, life is postulated as dirty, stigmatised and turbulent. Medicine and media have a claim that they have appropriate formulas to clean them up and to make troubles right. According to the formula, people should buy recommended products in order to get rid of stigmas as pursuant to the agreement offered by the health regime.

These people under the emphasis of stigma collapse into an insuperable obsession that makes each precaution non-functional. More crucially, any obsession does not wait for illness-related signs to bring itself into being. Instead, it occupies the spirit waywardly. Although disease and cure are not antithesis to each other, patients constitute an artificial but faithful community by gathering around shared cures that promise to destroy diseases. Namely, just as audience meet on a common ground on media, patients experience the sense of togetherness in clinics. In fact they are all lonesome with their problems. But hope of recovery has to defeat despair one way or the other. Science, in this respect, gives confidence to them in attaching to the hope despite the fact that it is fictional and forced.

Mediatised medicine and medicalised media, or digitalised-healing and health-giving networks, turn into public knowledge what is accepted and consumed without interrogating. In future, it can be expected that medicalisation and mediatisation, separately and together, will gain more momentum in terms of digitalisation and prevalence. Correspondingly, health and body experts will be more popular but less accessible in real sense. As an academic discipline, this issue will get involved more in social sciences such as philosophy and sociology than medical sciences, because health is ultimately a reference to the Being in which the sense of living and dying appears. “Nietzsche already observed that after the death of God, health rose to divine status. If a horizon of meaning extended beyond bare life, the cult of health would not be able to achieve this degree of absoluteness” (Chul-Han, 2015, p. 18). This inference, which is dealt with the relationship between media and medicine in this paper, adds new and more ambivalent to life and existence question and induces an alienation regarding contemporary body. In this manipulative process, for the modern individuals who turn into media and medicine users, it seems that there is no other option than awareness and rejection.
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