Carrying *L’Intrus*: The transport-station of an organ transplant

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Published online: 26 October 2022
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Abstract  The experience of heart transplantation shocks not only the body, but also the sense of self. As a heart transplant survivor, I find that the Ettingerian concepts of the transport-station of trauma, of wit(h)nessing, metramorphosis, and carriance provide an understanding of how—as humans—we are able to transcend the traditional notions of self through borderlinking. Jean-Luc Nancy’s *L’Intrus* explored the limits of the self as he wrote about his heart transplant, when he was confronted with a body that relied on medical procedures, machines, and ultimately on someone else’s organ. In *L’Intrus*, the alienating experience of transplantation reveals the foreign in our own bodies. But living with someone else’s heart also brings out our kinship to others, the ways in which we are opened or closed to them. I will appeal to my own experience as a heart transplant survivor to foster a dialogue between two different perspectives on trauma: Nancy’s necessary acknowledgement of the way it brings forth the alienation of the self and Ettinger’s discovery of the site of trauma as a borderspace for matrixial trans-subjectivity, co-emergence, and carriance. Transplantation, as a last resort for survival, reveals the porous nature of the self, our vulnerability, but at the same time the ways we connect and carry the Other through trauma.

Keywords  *L’Intrus* · heart transplantation · matrixial · trans-subjectivity · carriance · Jean-Luc Nancy · Bracha L. Ettinger

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The Uncanniness of Heart Transplantation

I had just turned 50 when I went through a traumatic cardiac event. I, who had considered myself strong and independent, was diagnosed with heart failure. Within months I was surviving thanks to two ventricular assistance devices doing the work that my heart was unable to do and to dozens of people caring for me in different ways. My condition eventually led to an organ transplant. For me, the topic of heart transplantation is therefore personal to the extent that I can still say “I,” “me,” and “personal.”\(^1\) A major part of the experience consisted in questioning the very notions of self and personhood. If my heart, “my very own” heart, failed, if my body was operated by machines, if I needed a heart harvested from someone else’s body in order to go on, how was this body still mine? (Saona, 2017, p. 18). How was my existence prolonged by somebody else’s organ? What does it mean that the heart I now carry is not mine? All these terms—I, me, my, mine, somebody—seemed suddenly inadequate to account for one’s existence. While I believe that many of the same feelings can be experienced with other forms of organ transplantation and with other forms of trauma, a heart transplant impacts the sense of self in a peculiar way: there is no possible live donation. For me to receive someone else’s heart, that person had to die. I will never see the face of my donor, I will never know that person, but a part of him, her, them, survives in me and potentially in many others, and, in turn, I survive because of that foreign part within me.

Among the authors that have tried to make sense of the uncanniness of heart transplantation, none have expressed it like Jean-Luc Nancy in his essay *L’Intrus*, where harsh and beautiful words explore many experiences I shared: the alienation of one’s own body, the resulting questioning of the sense of self along with the biological acceptance of someone else’s organ. However, it was only when I became acquainted with Bracha Ettinger’s ideas that I was able to understand part of how I was processing my own transplantation: this extreme experience was not only a space of alienation, but also an opening to the Other(s) within me. For a transplant recipient, hosting someone else’s heart turns alienation into a possibility of interconnection, which is de-emphasized in Nancy’s *L’Intrus*.

In this essay, I bring together Jean-Luc Nancy’s ideas on being-with-other and Bracha L. Ettinger’s matrixial theory in order to elucidate how trauma presents a

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\(^1\) I am aware that many of the terms used in this essay are contested both in philosophy and in psychoanalytic theory: the meanings of words like ego, I, self, subject, and Other have shifted many times in both disciplines. I will use the word “I” as the image of physical and psychological properties and operations that give an individual a sense of identity and continuity, what allows the individual to see themselves as a person. The main authors that I am discussing also use these words in somewhat elusive terms. In *L’Intrus*, Jean-Luc Nancy writes “I have—Who?—this ‘I’ is precisely the question, the old question: what is this enunciating subject?” He will, in other essays, question the autonomous “I” in the Cartesian formula “Cogito, ergo sum,” “I think, therefore I am.” For him, One only comes into existence in the presence of the Other. On her part, Ettinger responds to a Lacanian understanding of the subject which can only come into existence through differentiation from the Other and symbolic castration by formulating an emergence of an I vis à vis a non-I. The Ettingerian matrix, in Sheila Cavanagh’s words, “enables us to understand otherness in the subject. Moreover, the Other (as non-I) is a partner in difference” (2017, p. 5). For Ettinger, subjectivity is, therefore, already constructed in relation to and in differentiation from the Other, rather than in a radical split from it.
crisis of being while, simultaneously, offering the possibility of revealing our connection to others. I want to suggest that for the transplant recipient the experience of hosting someone else’s organ can work in the imaginary in ways that are analogous to the idea of pregnancy, a potentiality of life that is not quite a person and not quite part of one’s body. Both experiences, pregnancy and transplantation, can lend themselves to feelings of alienation, rejection, and fear of the loss of self, but they can also present a space where the limits of the self are porous to the encounter with others. Griselda Pollock presents Ettinger’s concept of the matrixial as “subjectivity-as-encounter” (Pollock, 2020, p. 1). In Pollock’s words, the matrixial “shifts, and thus relativizes, a hegemonically phallic conceptualization of subjectivity” by presenting it no longer as a separation from the Other, as castration, but, primordially, as transubjectivity (Pollock, 2020, pp. 1–2). Pollock clarifies the meaning of the word “matrix” in Ettinger’s theory: while its standard dictionary definition—“the environment in which something else develops”—associates it with the womb, for Ettinger the matrix is a site of becoming-with, not just the creation of something new (Pollock, 2020, p. 3). Human beings carry the traces of the connection to a (m)Other in the formation of their subjectivity and into their relationships to others. This is different from the total separation from the mother in traditional psychoanalysis vis-à-vis the fear of total fusion with her. Ettinger’s conception of subjectivity allows for co-emergence and coexistence (Pollock, 2020, pp. 5–7).

In L’Intrus, Nancy wrote openly about his experience as the recipient of a heart transplant, questioning the limits of his own subjectivity as he felt alienated from his own body. I propose reading the traumatic experience of a heart transplant as, what Ettinger calls, a corpo-Real event: an experience in which the body connects us “with the humane after and beyond the human” (Thiele & Witzgall, 2018). Reading Nancy in the light of Ettinger and reflecting on this extreme way in which two bodies are merged through organ transplantation, helps us understand the way other forms of trauma can constitute spaces of borderlinking. Ettinger’s theory can help us approach heart transplantation as an instance of carriance, (in Pollock’s words, “caring-carrying in a matrixial borderspace”) where I and non-I carry life forward through the experience of trauma as a trans-subjective experience.

Intrusions

Nancy published L’Intrus in 2000. Although he does not mention a specific date for his transplant, he explains that it had taken place nearly ten years earlier (Nancy & Hanson, 2002, p. 2). But he does not talk about it right away. In the initial section of his essay Nancy discusses instead the meaning of intrusion. For Nancy, in order to receive the stranger, we need to acknowledge the alienation of the encounter: “Since moral correctness [correction morale] assumes that one receives the stranger by effacing his [sic] strangeness at the threshold, it would thus never have us receive him [sic]. But the stranger insists, and breaks in [fait intrusion]” (Nancy & Hanson, 2002, p. 2). Nancy’s essay insists on the need to recognize that there is trauma and differentiation in this encounter with an Other. In order to host the stranger we need not erase their difference, but to recognize their otherness. Nancy is not talking
about a total dissolution of the subject and a total fusion of being. His essay explores the fact that the organ, the heart as a foreign object, reveals one’s “own” body as foreign, made of elements often at odds with each other. One is and is not oneself and one is connected, imbricated with others, who are part of oneself but are still different from the self. In illness we feel the strangeness of our own body, behaving and reacting in ways we do not recognize. That experience, followed by the transplant, reveals a situation in which, on the one hand, one’s own body is alien to the self and, on the other hand, the self is dependent on someone else’s organ. Others have already reflected on how Nancy discusses what is simultaneously a “metaphysical adventure” and a “technical performance,” the crisis of the self caused by heart failure and the medical feat of organ transplantation (Adamek, 2002; Fynsk, 2002; Gajic, 2015; Hanson, 2002; Wynn, 2009). From different angles critics have not been immune to the unsettling tone of Nancy’s essay. The alienating experience upon which he reflects affects everything, from the prose he uses to the destabilization of the self and the experience of the readers.

In Nancy’s recollection, the intrusion started with his own failing body:

If my heart was giving up and going to drop me, to what degree was it an organ of “mine,” my “own”? ... I’d been acquainted with my heart’s arrhythmia and palpitations ... Not “my heart” endlessly beating, as absent to me till now as the soles of my feet walking. It was becoming a stranger to me, intruding through its defection—almost through rejection, if not dejection ... A gradual slippage was separating me from myself. (Nancy & Hanson, 2002, p. 3).

It is this traumatic alienation of the self that will create an opening for the foreign. For Nancy, at an experiential level, the healthy heart was not really felt, not ever perceived as something separated from the self: “But now it falters, and this very strangeness refers me back to myself: ‘I’ am, because I am ill” (Nancy & Hanson, 2002, p. 4). The illness that renders one’s own body strange is itself the intruder who makes the self known again to the I, re-cognized. And then, receiving someone else’s heart, and forcing one’s body not to reject the other’s organ presents a new challenge in being with the Other.

In the months following the implantation of someone else’s heart into my body I was trying to process transplantation as something beyond intrusion. My own experience strongly echoed, for the most part, what Nancy expressed in L’Intrus. But I also felt that part of what I experienced was not coming through in Nancy’s essay. For me, alienation was accompanied by a sense of connection; the relief of survival, with a sense of grief. It was then that I was introduced to Ettinger’s work through a paper presented by Julián Gutiérrez-Albilla at a workshop on critical theory, psychoanalysis, and Spanish cinema. In the published version of this work, “The Im-Possibility of Not-Sharing,” Gutiérrez-Albilla reads the trans-subjective encounters of the film Todo sobre mi madre as “matrixial borderspaces” (Gutiérrez-Albilla, 2017, p. 91). Significantly, one of the story lines in the film involves the fact that the main character, somewhat reluctantly, agreed to the donation of her son’s heart after he was killed in a traffic accident. Since that workshop, Ettinger’s work has illuminated for me the psychic and experiential connections of an organ
transplant. Her theories discover facets of the corpo-Real trauma that contrast and complement Jean-Luc Nancy’s reflections about his own heart transplant. Ettinger’s corpo-Real refers to a traumatic physical event that brings up the Real, that which has been foreclosed. When Nancy discusses how the shattering of the self in his experience of heart transplantation led him to a heightened awareness of our own inner intrusions, he seems to describe precisely what Ettinger means by corpo-Real. The intrusions force us to recognize that the self is not an autonomous, distinct being and, if we accept that alienation within ourselves, how do we determine the foreignness of others? We see in both theorists a physical experience that brings down the limits of the self, but while in Nancy this opens the doors to the foreign within the self, in Ettinger this reveals primordial connections to others. Ettinger’s corpo-Real theory allows for an interpretation of Nancy’s opening to otherness in trauma. Their perspectives complement each other in the sense of reconciling alienation and encounter.

Nancy explored the limits of the self throughout his career. In The Inoperative Community (1991) Nancy focused on the tension between individuality and community, stressing our interconnections and the fact that there is no such thing as an autonomous being. Criticizing the idea of the individual he says: “An inconsequential atomism, individualism tends to forget that the atom is a world” (Nancy, 1991, p. 4). These ideas persist in one of his final books, in which the philosopher responds to the Covid-19 pandemic with a serious indictment of self-sufficiency:

The auto-, the “by him/herself” (still a big cartesian motif), the autonomous will, self-awareness, the self-management, automation, the sovereign self-determination, mark the most prominent angles of the western-global technologically and self-declared democratic fortress ... Self-sufficiency ... may well be what modernity is about. (Nancy, 2020, p. 80, author translation)\(^2\)

These are, for Nancy, modern illnesses that humanity needs to reconsider, pondering, one more time, what it means to exist, to accept intrinsic alterity, and to survive. The one and the other, the individual and the community, the self and the foreign are constant tropes in Nancy’s work. Similar tensions are explored in Ettinger’s theories, but her formulation of the matrixial, the corpo-Real, and carriance bring physicality into those tensions in substantial ways that can help us understand the transplantation phenomenon.

The Matrixial Encounter

Informed by her clinical psychoanalytic practice, Ettinger formulates a theory of self and subjectivity that cannot be reduced to its relationship to the Lacanian phallus, where the subject emerges in the symbolic order through separation and castration. Instead, as I mentioned above, Ettinger envisions forms of subjectivity

\(^2\) Nancy’s original text reads: L’auto-, le “par soi-même” (encore un grand motif cartésien), la volonté autonome, la conscience de soi, l’autogestion, l’automation, l’autarchie, souveraine marquent les angles saillants de la forteresse occidental-mondiale, technologique et autodéclaré démocratique ... L’autosuffisance ... pourrait bien être ce sur quoi bute la modernité.
that do not require a radical split with the symbolic Other (Ettinger, 2006a, p. 41). The Ettingerian subject emerges in connection with the Other in the matrixial space: the connection to the mother persists without subsuming the self in the maternal body. There is differentiation between I and non-I, but they are, in Sheila Cavanagh’s words, “partners in difference” since Ettinger’s formulation of the matrix “enables us to understand otherness in the subject” (Cavanagh, 2017, p. 5). Ettinger not only distances her own concepts from the phallic subject that severs himself from the other, but also from a symbiosis between I and non-I, and from sympoiesis as used by Donna Haraway to refer to “collectively-producing systems” without “self-defined spatial or temporal boundaries” (Haraway, 2016, p. 33). Ettinger does not see connection as sympoiesis, which seems to imply a “coemergence between any substance with any substance” (Thiele & Witzgall, 2018). This is far from her concept of copoiesis, that demands an ethical position regarding “the feminine (and the maternal)” and “the specificity of the human in terms of care and responsibility [and] the more specific traumas, joys and traumatization, and the pain attached to them” (Thiele & Witzgall, 2018). In her view, sympoiesis subsumes the human within everything else, but her copoiesis demands a “sensuous, erotic and affective co-emergence” (Thiele & Witzgall, 2018). The I is not merged and dissolved into the non-I: they exist in connection within differentiation.

Bracha Ettinger’s theories are influenced by her experiences of growing up under the inherited trauma of Holocaust survivors. In being witnesses to the witnesses of trauma, Ettinger sees our sense of self as wit(h)nessing: being with the pain of the other. Trauma and alienation can be, instead of separation and castration, a way of accessing our connection to the other through what she calls borderlinking. For Ettinger, the self cannot be only understood as the Lacanian split that allows the subject into the symbolic order by the radical separation from the m/Other. In her theory, already in prenatal life, the self co-emerges “with the m/Other, and link a rather than object a” (Ettinger, 2006a, p. 218). This linking to an Other allows us to witness the trauma of others as we share their pain in our connection to them: we wit(h)ness. Ettinger presents us with a space in which the subject resists imaginary identity and becomes a “carriance space” of subreal and symbolic “encounter events” (Ettinger, 2015, p. 343). One comes into being in connection with the mother. Ettinger also paraphrases the maxim that encapsulates the “Cartesian subject”: “I am thence I was carried. I am therefore I will carry” (2015, p. 344). In order to exist, we were born, we were carried, we came to life connected to the (m) Other. Being human means to come from these connections and to extend them unto others. Ettinger summarizes the ethical implications of this fact: “Carriance=care +response- ability+wit(h)nessing in self-fragilization is a direct path to ethics: witnessing and responsibility to the vulnerable other” (2015, p. 344). We need to recognize the fragility, the vulnerability of our own self, our lack of autonomy, and the permeability of what we see as the borders of the self. In doing this, we can see our connection to vulnerable others and recognize our connection as part of our responsibility as humans. A subject becomes a subject through being carried and carrying. While we normally understand the sense of self as being unique and different from the other, in Ettinger the self recognizes its necessary interconnection
with the other. She explains this concept further in an interview with Birgit M. Kaiser and Kathrin Thiele (2018):

By carriance I don’t mean the psychoanalytical notions of Bion’s container/contained (see Bion 1970). Carriance—the subject qua care and carry—is different from containing, and it goes beyond it. ... It involves a subject based, as in Hebrew, on the same root or etymology: the subject is NOSSE [נֹסֵס] (again from the root N.Sh.A), meaning: “to carry.” (Kaiser & Thiele, 2018, p. 104)

Thus, the subject is already trans-subjective. It becomes I and acquires a sense of self already in a network of carriance. To explain it in plain language, we could use the image of the pregnant body and describe the mother not as a container for the prenatal being. While mother and child are two different entities, they are interconnected organisms mutually constituted. Through Ettinger’s theories I see the transplant experience from the perspective of carriance: the donor (or their next of kin) make the choice to offer a vital organ to the recipient and in doing so carry the recipient’s life in this action. The recipient, whose life is prolonged by this action, carries in their body a part of the non-I. While we do not believe that the consciousness that we tend to attribute to the subject resides in an organ, the organ remains Other to the recipient: it will always be interpreted as foreign to the recipient’s body demanding the suppression of the host’s immune system, and, nonetheless, we can say that a part of the donor is still alive. As an organ recipient I feel that I have the ethical responsibility to treat my body in a way that respects that part that is not mine. I am not an autonomous body, and I wit(h)ness the trauma of my donor. I am I and non-I.

**Individual Boundaries Cannot Longer Hold**

After the transplant, my connection to somebody else’s life is real and tangible even after the death of that person. A series of stages in this illness destroys the notion of the autonomous self: first, the failing heart (our body, our own organ, our illness) presents symptoms that make moving and breathing as alien as stepping into a different atmosphere; then, medical interventions (surgical, mechanical, or chemical) alter the body in their attempt to cure it; finally, the transplant brings home the extreme notion of one’s own heart being removed from one’s own body to receive someone else’s instead. This is followed by the accompanying breakdown of the body’s immune system, when our body becomes unable to determine what belongs to us and what is a dangerous intrusion. Jean-Luc Nancy had already expressed the alienation of both heart disease, and of the foreign body that is the transplanted organ. But he does not make explicit how accepting alterity—in one’s own body and in the alien organ—also reveals the ways in which we are linked to one another. Ettinger’s perspective is illuminating because transplantation constitutes precisely a kind of corpo-Real shock: the radical shattering of our understanding of bodily boundaries that needs to bring the self-regulation of autopoiesis into copoiesis, from a system supposedly capable of producing and maintaining itself to a form of being-with and being-in one another. The fragilization, the vulnerability, of the heart
transplant recipient, renders body and self as porous. Our bodies are not self-sufficient systems; they are linked to other bodies and systems (and ultimately, in the words of Francisco Varela, “the entire biosphere”). In making an Other, an intruder, out of the self, the experience of heart transplantation reveals our coexistence, our being-with others, from the heart’s donor and all the ones who loved the person that the heart belonged to, to doctors and their networks, to the machines that support our lives or the viruses that interact with our immune systems. As if the transplant itself were not intrusive enough, in order for the body not to reject the external organ, it has to be in a permanent state of immunosuppression, which makes it both alien to itself and prey to all external organisms. Suppressing the immune system breaks down the body’s capacity to distinguish what is alien from what already belongs to it. The foreign organ needs to be accepted by the host’s body in all its foreignness. The alien organ lives on, but the host body remains vulnerable to other organisms that might damage it. Survival cannot be detached from vulnerability. Survival after transplantation makes tangible the fact that being alive is being at risk and that, in order to survive, we need to carry and be carried: accept the otherness that gives us life and know that, even as that makes us vulnerable, we need that openness to stay alive.

Nancy had explored the complexity of being with others at length, especially in “Of Being Singular Plural” (2000b, Chapter 1). In this essay Nancy discusses the idea that being—existence itself—cannot be conceived of in singularity. Formulating existence itself assumes that what exists has a presence, but to be present one needs to be present to others. Thus, existence is an appearance that is actually a co-appearance: a co-emergence of I and non-I, a co-essence or a being with (Nancy, 2000b, p. 30). Realizing the extent to which there cannot be a self without others reveals the interconnections entangled in existence itself. As if responding to Nancy’s ideas, Ettinger’s matrixial trans-subjectivity bridges the gaps created by the notions of autonomous selves: the notion of intrusion only makes sense if we believe in a sovereign subject, a subject that can be conceived and exists on its own, within its own limits, within an ego with firmly established boundaries, but Ettinger’s theory establishes the coexistence of I and non-I “without fusion and without rejection” (Ettinger, 2006a, p. 65). Nancy’s emphasis on the acceptance of alterity stops just short of how this acceptance, this wit(h)nessing, this carrying the Other, can be a form of healing.

The recipient of a heart transplant hosts someone else’s organ and this experience of carrying an Other in one’s body can be alienating, and can generate a fear of a loss of self. In establishing a conversation between Nancy’s L’Intrus and Ettinger’s matrixiality, I see the potential of resignification of this alienation as a transformation, a passage for a co-emergence that opens up the borderlines between subjects and between subject and object (Ettinger, 2006b, p. 220). Thus, the intrusion that Nancy explores in his essay about his heart transplant actually has the potential of becoming a space that facilitates connections to others as a consequence of alienation itself.

In my reading, Nancy’s reflections on his experience situate him at what Ettinger calls the transport-station of trauma: “[a space that] allows for certain occasions of occurrence and of encounter, which will become the realization of what I call border
linking and border spacing in a matrixial trans-subjective space” (Ettinger, 2000, p. 91). Nancy’s body becomes the site of trauma and of encounter, a site where the self’s borders open up, the self realizes its own alienation, and accepts the Other. While that space happens for Ettinger “by way of experiencing with an object or process of creation.” Nancy’s body becomes the site of trauma and of encounter, a site where the self realizes its own alienation, and accepts the Other. While that space happens for Ettinger “by way of experiencing with an object or process of creation.” Nancy’s essay reveals the transplant space as this station of encounter. Ettinger situates the possibility of “a kind of encounter” at “a threshold, the limit, the frontier of death—or should we say of self-death?—in life, where life glimpses death as if from its inside” (2000, p.92).

Ettinger’s matrixial co-emergence entails precisely this fragilization of the self that arises when individual boundaries can no longer hold (2006b, p. 219). While Ettinger does not base her theory in an essentialization of the female body, pregnancy appears as a primary space in which the individual boundaries become porous and the borders open. In The Matrixial Gaze, originally published in 1994, Ettinger presents the matrix, the womb, as a “transforming borderspace of encounter of the co-emerging I and the neither fused nor rejected uncognized non-I” (2006a, p. 54). While she is not speaking strictly about the uterus, she insists in recent interviews that she is talking about a “humanized female corporeality” (Thiele & Witzgall, 2018). Ettinger has had to explain several times what she means by matrix and confront the resistance to what might sound like essentializing women’s bodies.

Pollock takes exception to this controversy:

If the focus on the function of an organ has historically served as the means to deny women’s political subjecthood while pre-/pro-scribing women’s sexualities and denying gender fluidity and multiple sexualities, the womb as concept of subjectivizing time-space can now be reclaimed as the basis for shifting the Real, Imaginary, and Symbolic registers. Matrix is not at all about who has, or does not have, this or that organ. It addresses an encounter—whose traces persist—experienced by every living person by virtue of having been born. (Pollock, 2020, p.13)

The intrauterine encounter is for Ettinger a process in which the non-I can be known by a noncognitive process. The fact that this non-I is not an intruder, but rather “a partner-in-difference of the I” (Ettinger, 2006a, pp. 54–55) is significant for my discussion. Nancy is reflecting on what intrusion can even mean when the strangeness “first emerged inside” as illness makes our bodies feel like strangers (Nancy & Hanson, 2002, p. 4). Accepting one’s own alterity determines our openness to the Other.

In the context of Nancy’s essay, the fracture of the self caused by the illness leads him to rethink the limits of subjectivity, the borders between self and Other. He experienced the symptoms that made his heart strange, the treatments to try to fix it, the loss of the organ, its replacement by someone else’s heart, and a consequent lifetime of immunosuppression. I suggest that bodily catastrophe for Nancy potentially brought up a matrixial process, even if those are not the term of his discourse. My own experience was of a self that becomes “weak” in the sense of losing its imaginary boundaries and autonomy, that made me question the use of I and my body to designate myself. This experience forces a process of acceptance of otherness that resembles what Ettinger calls “metamorphosis.” The transformation
of the self, this “morphing,” comes out of the metrial encounter with the other, the (M)other. We emerge as beings in coexistence. Ettinger shows that these processes do not stop at intrauterine life, but “continue to form, inform, ‘exform’ and transform us throughout life, though the matrixial space-time is usually foreclosed or infolded inside more phallic dimensions and ignored” (2006b, p. 220). What we see in Nancy is that the way in which the “intrusion” of transplantation that makes the self so fragile is also what allows us to welcome the Other. The self cannot subsist without the stranger. It does not exist without the stranger. Nancy’s ideas regarding the self vis-à-vis the other have a long history, but while he had been writing about the individual and community for over a decade before his transplant, his examination of the self intensifies by the mid 1990s, presumably after his transplant.

Being With

In Being Singular Plural (2000b), Nancy creates an ontology of the “with.” Being singular plural means the essence of Being is only as co-essence. The I does not exist without the other. Being is being-with, and “with” is what that constitutes Being (Nancy, 2000b, p. 30). Nancy rejects the Cartesian notion that the subject asserts himself in solitary thought and insists in a co- appearance: “Ego sum=ego cum” (Nancy, 2000b, p. 31). While Descartes would assert one’s own existence by reasoning that I can formulate the question of existence because I already exists (“Cogito, ergo sum,” “I think, therefore I am”), Nancy denies the notion that there can be a self or I—as ego—if there are no others. The ego cannot really assert that existence unless it is in the presence of others. The ontological questions presented by Nancy in Being Singular Plural become grounded in material and social reality: “Nothing and nobody can be born without being born to and with others who come into this encounter, who are born in their own turn” (2000b, p. 61).

Corporeality does not figure prominently in Being Singular Plural in the same way it does in L’Intrus, and it does not mention the maternal body. However, corporeality and the links between bodies are presupposed both in existence itself and in its representation: “The ontology of being-with is an ontology of bodies, of every body, whether they be inanimate, animate, sentient, speaking, thinking, having weight, and so on” (Nancy, 2000b, p. 84). Under the terms in which he expresses this “being-with,” the necessary entanglement of Being echoes, from an ontological perspective, the psychic co-emergence of I and non-I found in Ettinger. There are clear correspondences between Nancy’s and Ettinger’s approaches to trans-subjectivity. In formulating the relationship between the self and the other, Nancy often emphasizes the “with” or cum- over the trans-, but the understanding of those prefixes seems fluid at times. Alterity seems irreducible: the other needs to continue being an Other and the same cannot exist without the other. And the Other is not rejected or excluded, nor absorbed or incorporated into the I either.

Alienation and trauma are central to the opening of the self. Recognizing the intruder as an intruder, recognizing the transgression, is perhaps central in accepting the “with” that Nancy proposes. Ettinger’s matrixial metamorphosis conceives a form of inter-, trans-subjectivity that does not subsume the other into the self, but
instead allows the “with,” the connection of the “I” and the “non-I.” Her borderlinking questions a phallic paradigm that forecloses femininity as the archaic m/Other-Thing. Her theory also differs from Julia Kristeva’s semiotic, which reduces access to this experience to the mystical or the psychotic (Pollock, 2020, pp. 47–49). Ettinger sees instead the potential for experiencing “jointess-in-differentiating” (2000). Significantly, Nancy writes about how the subject “is born into intimacy ..., and its intimacy wanders away from it in status nascendi” (2000b, p. 78). In the same passage he states; “‘To exist’ is no longer ‘to be’ (for itself, in itself), to-already-no-longer-be and to-not-yet-be, or even to-be-lacking, that is, to-be-in debt-to-being. To exist is a matter of going into exile” (Nancy, 2000b, p. 78). Even if Nancy does not talk in an explicit way about the maternal, there is a clear reference to how the connection to existence can only happen vis-à-vis the Other. The paradox of the self for Nancy includes its opening to the other and its closure. From this perspective, we can contrast his ideas with Ettinger’s formulation of the encounter with the other, presented in a lecture at the European Graduate School in 2011:

If we talk about a stratum in which subjectivity was an encounter, or subjectivity as encounter, it can come from a certain assumption that there was never such thing as an I without a non-I and that we always have had some kind of necessary trans-connectedness to an Other which is a part of the subjectivity itself. (European Graduate School Video Lectures, 2012)

From different angles, Ettinger and Nancy formulate a subjectivity that only arises with other subject(s). Ettinger’s theory presents us with the possibility to see trauma as a space in which the limits of the self can become a threshold to this encounter with the other and subjectivity reveals itself as trans-subjective in this connection. Ettinger has explored her own transgenerational pain—the trauma of the Shoah—presenting art as a transport-station for wit(h)nessing that pain. Through art she accesses the borderspace of the matrixial: the origin of the I that comes into being with the non-I. We witness not as bystanders, but with the other. I believe that in the trauma of transplantation as presented by Nancy in L’Intrus, the alienation of the self also constitutes a possibility of understanding being-with, thus revealing transplantation as a transport-station where we connect with the other in the traumatic experience.

By adopting an Ettingerian understanding of the encounter between I and non-I, we see how transplantation—conceptualized as a matrixial borderspace—can involve the transplant recipient and the donor or her family in an act of carriance. As in the matrixial space, the transplant process becomes the site of copoiesis: the transplant recipient’s subjectivity arises in the awareness of otherness, with the other’s organ and with the realization of otherness within ourselves. There is a displacement of subjectivities in the awareness of being a biological host to someone else’s heart, while at the same time depending on that heart for the survival of what is conceived of as one’s own body. In “Carriance, Copoiesis and the Subreal,” Ettinger writes:
On the ethical transferential level of the matrixial sphere, several becoming subjectivities will meet by way of their sharing in the field of influence of their pulsating minds and create a singular shared trans-subjectivity inaccessible outside the deep psychic generosity patterned upon that inaugural compassionate hospitality. (2015, p. 350)

Heart transplantation is for me one of the instances where the matrixial sphere appears as the model for compassionate hospitality that transforms the limits of subjectivity into possibilities of trans-subjective borderlinking.

Very few critics have attempted to establish connections between the Ettingerian matrixial encounter and Nancy’s being-with others. In her book *I’m not Myself at All: Women, Art, and Subjectivity in Canada* (2018), Kristina Huneault follows Ettinger’s ideas of maternal subjectivity to examine works of art depicting motherhood. She sees in the ideas proposed by Nancy and Ettinger the possibility of understanding maternal inclination as “an encounter with one’s most intimate other—a not-I who is neither assimilated nor rejected but who travels with us through a terrain where passions circulate and intensities interweave themselves into the fabric of our being” (Huneault, 2018, p. 241). Huneault’s focus on the physicality of being-with of intrauterine life, on the way the proximity of mother and child is depicted, and on the paradoxes of jointness in differentiation could be also applied to the transplant experience, although she does not consider aspects of Nancy’s *L’Intrus* in her discussions of self and other. We attribute personhood to a child in ways we do not to an organ. However, heart transplantation constitutes a site for the kind of borderlinking Ettinger establishes for the matrixial.

**Transplantation as Metramorphosis**

Reading *L’Intrus* from an Ettingerian paradigm allows us to make a connection between the transplanted body and the primal experiences of both having come into existence in somebody else’s body and growing a new being in one’s own body. While there is a phenomenological specificity to organ transplantation, it presents the kind of trauma that can be wit(h)nessed from a matrixial perspective. In heart transplantation, the recipient’s body is failing her in ways that compromise her life: oxygenation, breathing, mobility. The donor has lost her life completely. Through medical procedures extremely hard to endure for the recipient, an organ that was dead is connected to her body and is reanimated. The drugs that prevent rejection have many secondary effects. Any image of self, any semblance of autonomy at the level of the imaginary, has been shattered by the corpo-Real. While other forms of trauma could be part of a matrixial borderspace, the physicality of the encounter of two bodies constitutes a very corpo-Real site of metramorphosis: there is a transformation of subjectivities in this physical encounter that resembles the “inaugural compassionate hospitality” of the womb.

The alienation in Nancy’s *L’Intrus* happens at the level of the self by a body compromised by infirmity and maintained alive through medical intervention and by someone else’s organ. The death of this other person is impossible not to contemplate, as it is the necessary condition that makes the transplant possible.
Considering this specific form of alienation opens up ways in which illness and medical technologies can become the transport-station, the site where trans-subjectivity can connect with the trauma of others in ways that parallel the matrixial experience as described by Ettinger.

Trauma, Ettinger tells us, is not the space for a neat split between subject and object, but a threshold between life and death and a passageway to the Other (2000, p. 91). While artworking can give access to archaic trauma and jouissance, the physical erasure of the frontiers of the autonomous body experienced by the transplant recipient also constitutes a zone “between life and death.” At physical and ontological levels, the transplant recipient inhabits that zone. Trauma dissolves the barriers of the self, opening the borders: “The archaic trauma and jouissance experienced in jointness-in-differentiating with the archaic m/Other are interwoven inside the limit itself, and transform the limit itself into a threshold” (Ettinger, 2000, p. 95). In the extreme alienation of the transplant Nancy acknowledges death:

Thus, the multiple stranger who intrudes upon my life ... is none other than death—or rather, life/death; a suspension of the continuum of being, a scansion wherein “I” has/have little to do ... there is nothing that is not foreign ... what can it mean to replace a heart? The thing exceeds my capacity to represent it. (Opening the entire thorax, maintaining the organ to be grafted in the proper state, circulating the blood outside the body, suturing the vessels ... But it matters little: organ transplant imposes the image of a passage through nothingness, or an entry into a space emptied of all property, all intimacy—or, on the contrary, the image of this space intruding in me: of tubes, clamps, sutures, and probes.) (Nancy & Hanson, 2002, p.7)

Nancy, as other transplant patients, faces a state of suspension of life where the body has ceased to operate in a way that we can imagine as autonomous. The idea, for example, that the native heart is removed from the body and that that same body needs to be maintained temporarily alive by a heart-lung machine while the dead organ is transplanted into it defies our common conceptions of what it is to be alive. Afterwards, the immunosuppression necessary to prevent organ rejection prolongs the alienation by preventing the body from reacting in a “normal” way to external organisms: “Medical practice thus renders the graftee a stranger to himself: stranger, that is, to his immune system’s identity—which is something like his physiological signature. In me there is the intrus, and I become foreign to myself” (Nancy & Hanson, 2002, p. 9). The very notion of “self” comes into question and Nancy sees in utterances like “I am suffering” or “I am in ecstasy” a multiplying I, one rejected and one that exceeds the self. This multiplying self defies identity principles:

The intrus exposes me, excessively. It extrudes, it exports, it expropriates: I am the illness and the medical intervention, I am the cancerous cell and the grafted organ, I am the immune-depressive agents and their palliatives, I am the bits of wire that hold together my sternum ... (Nancy & Hanson, 2002, p. 13)

In horror and in awe, Nancy confronts a humanity beyond itself: “man [sic] recommences going infinitely beyond man ... a disquieting upsurge of the strange,
conatus of an infinite excrescence” (Nancy & Hanson, 2002, p. 13). Paradoxically, what is innate is the strangeness, the abnormal outgrowth, that which exceeds the limit of the self. But I think that it is precisely in this critical experience where borderlinking can take place.

The transplant recipient is simultaneously alienated from her own body and exposed to her connection to others. Francisco J. Varela, who did so much to bring biology, neuroscience, cognition, and mathematics together, who founded the Mind & Life Institute and whose work on autopoiesis and immunity inspired Ettinger in her conceptions of copoiesis and carriance, wrote one of the few phenomenological testimonies of transplantation. Varela’s “Intimate Distances: Fragments for a Phenomenology of Organ Transplantation” (2001) echoes the splitting of the self described in Nancy’s piece by opening the essay with the last words from L’Intrus:

We are looking at the scene from the side, you and I. And yet for me alone is echoed in multiple mirrors of shifting centers each of which I call “I”, each one a subject which feels and suffers, which expects a word, which is redoubled in a scanner’s image, a concrete fragment that seems to partake with me of a mixture of intimacy and foreignness. (Varela, 2001, p. 260)

Shortly before his death, Varela wonders about the new ways of being human, “where body parts go into each other’s bodies, redesigning the landscape of boundaries in the habit of what we are so definitively used to call distinct bodies” (2001, p. 261). The ideas of autonomy, singularity, and boundaries between bodies as discrete entities come into question as Varela experiences transplantation. He writes about a “hybrid space” that is at the same time embodied and dispersed “outside of donor, receiver, and the [transplant] ‘team’” (Varela, 2001). While there are concrete bodies affected by transplantation, there is something in the process that involves more than two single bodies. For transplantation to happen, the recipient relies not only on the donor and the medical team, but we could even think of a whole history of experimentation that conceives this kind of intervention in the human body and an understanding of the interaction between bodies. Varela writes about interdependencies and co-presence, and substitutes the term transplant for transference, discussing the role of transferential passageways: “the welcoming, the acceptance of this new form of alterity in spite of immunosuppression” (Varela, 2001). We need to renounce immunity to accept alterity. For the transplant recipient this is the only way to survive: to accept otherness within the self.

The strange intimacy of organ transplant is translated for Varela into images of intrauterine life that I also experienced after my own transplant. When, after the transplant, a doctor tells him that everything is all right he has the following reaction: “His reassuring statement oddly makes me feel my liver as a small sphere, as if I am carrying an infant (I remember the pictures of my last son’s beating heart in his mother’s belly); it is tinged with a light pain, it is definitely present” (Varela, 2001, p. 259). This intrauterine imagery also appeared in my own post-transplant poetry reflecting on the feeling of “carrying” someone else’s life. The strange connection with an Other whose face we cannot see, but who somehow inhabits us manifests itself in different ways. A short few weeks after my transplant I wrote the following lines:
I carry you with me, a part of me, like a child,
like a birth,
being one
and being two. (Saona, 2017, p. 46)

Reading *L’Intrus* a few months after my transplant, I felt that Nancy magnificently expressed the feelings of alienation and the resignification of otherness produced by heart transplantation, but also that something was missing in the text or that there was something else beyond or below the text. Ettinger’s concept of metamorphosis made me recognize that other dimension of the “exteriority and excessivity” expressed by Nancy (2002, p. 13). The intimacy of the stranger, and the recognition the stranger in oneself, brings the transplant recipient to the matrixial space of archaic trauma and *jouissance*. Ettinger reimagines the womb as bodily specificity, but the matrixial also connects the womb with other registers. She conceives the matrixial beyond the interior imaginary locus as “a dynamic borderspace of active/passive co-emergence *within* and *without* the uncognize other” (Ettinger, 2006a, p. 64). Central to the formulation of the matrixial are the ways in which it broadens the symbolic into “*subsymbolic processes of interconnectivity*” (Ettinger, 2006a, p. 64). Thus, the feminine/prenatal experience becomes a model of an encounter between I and non-I. With her formulation of carriance, to carry, to care, to carry on (see Ettinger’s lectures and interviews, IPAK Centar, 2014; Immunity and Modernity, 2015; Kaiser & Thiele, 2018), Ettinger expands our understanding of subjectivity even further. Subjectivity implies the co-appearance of the one who carries and the one who is carried. We all have been carried in a womb, real and symbolic: “I am, thence I was carried. I am, therefore I will carry” (IPAK Centar, 2014). This is not an imperative for sexual reproduction, but the ethical recognition of our being-with-others. The human subject, then, co-inhabits a special space inside and outside herself.

Ettinger’s theory offers a new angle to reconceptualize the heart transplant experience. The alienation from the self suffered by Nancy and many other transplant recipients can also produce a space for borderlinking. Witnessing our own strangeness and experiencing it with the stranger in our own bodies allows for the matrixial co-emergence, which in turn allows for new forms of ontological ethics: being is to carry. Transplantation gives corpo-reality to the fact that the survivor’s life is carried forward by someone else’s organ and that the survivor will carry this organ within her. Her being is linked to other beings in very material ways and this makes tangible the responsibilities we have toward one another. While heart transplantation presents us with this concrete example of borderlinking, the reconceptualization of this traumatic experience is just one of the many ways in which the matrixial borderspace reimagines our humanity.

**Author statement** No third part material beyond citations.
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