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Theatrical Illness: Tuberculosis and HIV as Presented by "La Boheme" and "Rent"

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The musical *Rent* made its Broadway debut on January 25, 1996, a century after the opening performance of the opera, *La Boheme*.¹ This correlation was a coincidence, though *Rent* draws significantly on the story of *La Boheme*, to the extent that a New York Times reviewer deemed it a “contemporary answer to Puccini's ‘Boheme.’”² Each of these productions presents the troubles and tragedies of the bohemian lifestyle in a specific time and place—*La Boheme* in Paris during the 1830s and *Rent* in New York City during 1989. Disease, too, is a major theme in each: tuberculosis in *La Boheme*, and HIV in *Rent*. Each of the plays illustrate the different effects of the diseases with respect to conceptions of life and death, identity, spiritual promotion, and time. The historical and medical contexts of tuberculosis and HIV manifest in different perceptions of diagnosis and contagion. The extent of influence *La Boheme* had on *Rent* calls for a comparison of the representations of these two diseases in their respective historical contexts.

The connection between the two illnesses is not limited to the opera. As Linda and Michael Hutcheon claim, “What the two illnesses share, beyond their artistic fruitfulness, is a similar set of medical associations: their victims are seen to be the young, cut off in their prime; as chronic degenerative disease, they are both diseases of emaciation.”³ The characters of *La Boheme* and *Rent* are demonstrative of these associations: the victims of disease in each of the two plays are young Bohemian artists. There is a medical connection as well: tuberculosis is one of the “opportunistic infections” that takes advantage of the HIV-positive person’s weakened immune system, generally leading to his death. In 1988, the *New York Times* announced that

¹ Brantley, Ben. "Theater Review; Enter Singing: Young, Hopeful and Taking On the Big Time." *New York Times*. 31 April 1996, A1.

² *ibid*

³ Hutcheon, Linda and Michael Hutcheon, *Opera: Disease, Desire, Death*. (Lincoln and London: University of Nebraska Press, 1996), 218.

“federal researchers have reported a substantial increase in tuberculosis in the United States for 1986...They said AIDS was partly to blame.”⁴ This connection, as well as many others, have established a connection between the metaphors of AIDS and tuberculosis: these metaphors are not equal, however. AIDS has been associated with a variety of illnesses, becoming a cocktail of Western epidemics, conjuring associations with diseases such as cholera, syphilis, and the bubonic plague. It is also significant that tuberculosis and AIDS are presented very differently in *Rent* and *La Boheme*. Tuberculosis is in many ways relevant to *La Boheme* only at the level of discourse: the character Mimi is representative of the romanticized tubercular of the time, though her lifestyle is hardly affected by the disease itself. *Rent*, however, focuses almost exclusively on the ways in which HIV has altered the characters’ lifestyles—on experiences of HIV. In this paper, I intend to use *La Boheme* and *Rent* to bridge the discourses of these two diseases—and the experiences of those most affected by them—in their respective settings, and investigate what such a comparison reveals about tuberculosis and HIV.

The main focus of *La Boheme* is the penniless Bohemian lifestyle, which fosters love but inhibits commitment. Mimi, one of the central characters, captures the central theme of the opera when she declares, “The love that’s born of passion ends in grief.”⁵ The opening scene is a studio apartment in Paris, where Rodolfo, a poet, and Marcello, a painter, struggle in the cold with their art. Marcello soon departs with Colline and Schaunard—who complete the group of practically inseparable friends—leaving Rodolfo alone with his writing. Mimi enters, asking Rodolfo if he could light a candle. When Rodolfo notices her sickly appearance, it becomes clear, though she

⁴ “Increase in Tuberculosis Tied to Spread of AIDS” *New York Times*, 3 January 1988.

⁵ Giacosa, Giuseppe and Luigi Illica. *La Boheme*, ed and trans. Juliette Sutherland, Keith M. Eckrich, and the Project Gutenberg Online Distributed Proofreading Team. 24 October 2004, <http://www.projectgutenberg.net> (accessed 30 April 2009), 2005.

remains oblivious, that she suffers from tuberculosis. “This frail beauty allured Rodolfo,” and he quickly becomes infatuated with Mimi, as she falls in love with him.⁶

The love illustrated here is not pure, but quickly becomes tragic. Rodolfo’s jealousy, prominent from the start, continues to grow, making his relationship with Mimi “a veritable ‘hell-upon-earth’” as it follows the whims of his passion.⁷ When Mimi seeks Marcello’s advice, she is interrupted by Rodolfo’s entrance, and hides to conceal her presence. Rodolfo confides in Marcello that he has become convinced that Mimi suffers from consumption, and is dying as a result. He plans on leaving her, partially out of fear for his own health. Mimi overhears this diagnosis, and falls into despair, making her presence known. The two lovers decide that they will part ways in the spring, when her condition has worsened. After they have parted, Mimi takes a new, wealthier lover, but continues to pine after Rodolfo. They are reunited when Musetta, Marcello’s former lover, interrupts the friends’ dinner to announce that Mimi, close to death, is waiting to see Rodolfo. He goes to her, and the two recognize their undying love. Just after they have reconciled, Mimi gives into her consumption and dies. Tuberculosis, in *La Boheme*, is a pathway to Mimi’s death, forcing her relationship with Rodolfo to end in tragedy.

Disease plays a different role in *Rent* than does in *La Boheme*. The plot of *Rent* was directly influenced by that of *La Boheme*—in his creation of *Rent*, the play’s composer, Jonathan Larson, “analyzed the libretto [*La Boheme*], broke it down beat by beat.”⁸ As in *La Boheme*, the majority of the characters in *Rent* are extremely poor, and each struggles to overcome his or her current position in life. Disease becomes the central focus in *Rent*, in which half of these

⁶ Giacosa, Giuseppe and Luigi Illica, 4.

⁷ Giacosa, Giuseppe and Luigi Illica, 29.

⁸ Tommasini, Anthony. “Like Opera Inspiring It, ‘Rent’ Is Set to Endure.” *New York Times*. 5 September 2008.

characters are also HIV-positive. Roger (Larson's version of Rodolfo) struggles against his AIDS, which seems to have robbed him of the ability to give his own life meaning. Mimi, who is also HIV-positive, struggles with a heroin addiction. Although the two meet under circumstances almost identical to those in *La Boheme*, their relationship faces a slightly more complicated set of obstacles: her addiction, his jealousy, and AIDS. Eventually, Roger's jealousy becomes overwhelming, and the two part ways.

An important deviation from *La Boheme* is that in *Rent*, Mimi and Roger's relationship is not the only one complicated by disease. Their friends Collins (Colline) and Angel (Schaunard) both have AIDS as well. This shared illness not only sparks their relationship, but defines it until Angel's death. Another significant difference occurs at the very end of the play. When Roger and Mimi reunite, as in *La Boheme*, Mimi appears close to death. She is brought to the apartment that Roger shares with Mark (Marcello), where their love is reestablished. Although *La Boheme's* Mimi dies at this point, Larson lets her survive—Roger's love saves her. While the main function of tuberculosis in *La Boheme* is to make the tragedy of Mimi and Rodolfo's love inevitable, Larson focuses his play on the effect that HIV has on each of his characters.

La Vie Boheme

La Boheme made its debut in Turin, Italy four years after the discovery of the Koch bacillus on March 24, 1882.⁹ The play itself, however, takes place in the 1830s, years before this discovery. While tuberculosis was prevalent in Europe throughout the nineteenth century, it was perceived very differently after Koch's discovery. Prior to 1882, contagion was not one of the

⁹ "Historical Perspectives Centennial: Koch's Discovery of the Tubercle Bacillus," 19 March 1982. From CDC: MMWR Weekly. <http://www.cdc.gov/mmwr/preview/mmwrhtml/00000222.htm>. (accessed 3 May 2009).

primary causes of anxiety in European society. Fear of contagion, as well as the public health measures taken to battle tuberculosis in Europe, is all but absent from *La Boheme*. Although it can be speculated that Rodolfo's motivations for leaving Mimi include a fear for his own health, his anxiety is insignificant compared to that which would arise in Paris in the next century. Following the discovery of the Koch bacillus, a national phobia of contagion led to the condemnation of close physical contact as well as habits such as spitting.¹⁰ Germ theory was quickly popularized in this setting: by 1888 hygienist Jules Rochard declared, "Today, the contagiousness of phthisis is admitted by nearly all doctors" though ideas of moral susceptibility and miasma weren't entirely abandoned by the public.¹¹ The muted nature of Rodolfo's reaction is characteristic of the expected societal response to tuberculosis prior to Koch's discovery. Because there was no direct information on the infectious nature of the disease, other factors—most notably poverty—were generally assumed to be the cause of infection.

Prior to the discovery of the bacillus, "soil," environment, was considered as significant as the "seed," contagion, in the spread of disease.¹² In the case of tuberculosis, the aspect of the "soil" which provoked the most concern with respect to contagion was the unhealthy living conditions of those in poverty: poor ventilation, a sparse water supply, and crowded homes were considered to be factors in creating an area extremely conducive to tuberculosis infection. These miasmatic conditions associated with tuberculosis are essential to *La Boheme*, in which "the link between love and the conditions that foster illness is firmly established."¹³ These conditions are

¹⁰ Barnes, David S., *The Making of a Social Disease: Tuberculosis in Nineteenth-Century France*. (Berkeley and Los Angeles: University of California Press, 1995) 83.

¹¹ Lawlor, Clark, *Consumption and Literature: The Making of a Romantic Disease* (New York: Palgrave, 2006), 81.

¹² Barnes, 75.

¹³ Hutcheon and Hutcheon, 50.

illustrated in the beginning acts of the play, further indicating the importance of the Bohemian life in these stories of disease. While the causation of the disease was well understood after 1882, and preventative measures were taken, there was no cure for tuberculosis. Because of this, many of the metaphors surrounding tuberculosis—many associating it with lovesickness—remained prevalent through the opening of *La Boheme* in 1886. According to Susan Sontag, “the power of the myth was dispelled only when proper treatment was finally developed, with the discovering of streptomycin in 1944 and the introduction of isoniazid in 1952.”¹⁴ Tuberculosis was still very much a part of European life at the time of *La Boheme*’s debut, making it the opera “familiar and realistic in its subject matter.”¹⁵ The portrayal of disease in the opera reflects a common issue in European society in the nineteenth century.

HIV remained a relevant and familiar issue throughout *Rent*’s twelve years on Broadway. On August 16, 1985, an article in the *New York Times* confirmed the prevalence of the disease, declaring that “AIDS has topped murder as a cause of death among men in New York City.”¹⁶ The seriousness of the situation was further illustrated through an interview with Alan Kristal, the director of New York City’s Office of Epidemiological Surveillance and Statistics, who revealed that “AIDS is rapidly becoming the number one cause of death of all young males in New York City.”¹⁷ The seeming ubiquity of HIV in *Rent* is therefore not so exaggerated as it may seem to be today—especially in New York, which accounted for 23 percent of the national total of reported AIDS cases in 1989.¹⁸

¹⁴ Sontag, Susan, *Illness as Metaphor and AIDS and Its Metaphors*. (New York: Farrar, Straus and Giroux, 1989), 35.

¹⁵ Hutcheon and Hutcheon, 49.

¹⁶ “AIDS Deaths Top Murder” *New York Times*, 16 August 1985.

¹⁷ *ibid*

¹⁸ “New York’s New Cases of AIDS Level Off.” *New York Times*, 12 June 1990.

New advents in AIDS medication turned HIV into a chronic illness. In 1989—the year in which *Rent* takes place, and four years before its first production—the number of AIDS cases in New York began to level off, which 6,720 new cases reported.¹⁹ Azidothymidine (AZT), the first antiretroviral drug to be approved by the FDA, was determined to be the chief factor in the decreasing rate of seroconversion.²⁰ While AZT could not cure HIV, it was relatively successful in delaying the onset of AIDS²¹ in an HIV-positive person, and in doing so, significantly raised survival rates. By 1990, the New York State Health Department estimated that “about 18,960 people in the state are receiving these drug treatments, at an average cost of \$4,450 a year.”²² Of Larson’s characters, at least Roger and Mimi are among those 18,960 people. This provides further insight into the economic burden of these HIV-positive artists, who rely on medication beyond their financial means to stay alive.

A statistical decrease in new cases of AIDS did not assuage the public’s fear. In response to heightened anxiety, the surgeon general sent each family in the United States a brochure entitled “Understanding AIDS,” which detailed what kinds of “risky behavior” could expose an individual to HIV. Despite the surgeon general’s assurance that “Who you are has nothing to do with whether you are in danger of being infected with the AIDS virus. What matters is what you do,”²³ the original high risk groups named by the CDC in 1982—the 4H’s: homosexuals, hemophiliacs, Haitians, and heroin addicts—were heavily stigmatized.²⁴ This stigma—similar to

¹⁹ “New York’s New Cases of AIDS Level Off.”

²⁰ Jefferson, David. “AIDS at 25; How AIDS Changed America.” *Newsweek*, May 2006.

²¹ A person is said to have AIDS once his CD4 count (the cells infected by the HIV virus) sinks below 200, or he is diagnosed with an opportunistic infection (London, Elise. Class Lecture. 4 March 2008).

²² “New York’s New Cases of AIDS Level Off.”

²³ United State, Public Health Service, *Understanding AIDS: A Message from the Surgeon General*, (US Department of Health and Human Services, ca. 1988).

²⁴ London, Elise. Class Lecture. 8 March 2008.

that surrounding tuberculosis in nineteenth century Europe—was mostly directed towards the poor. Larson’s HIV-positive characters are all members of these stigmatized groups. Artists within these groups confronted the stigma by consciously and deliberately creating a new image of “high risk” groups to oppose the stigmatized stereotypes. Many representations of AIDS in theater therefore contain “a conscious rejection of the images both of the dangerous carrier (who must be under medical surveillance) and the victim of God’s anger.”²⁵ Larson confronts stigma by personalizing the experience of HIV, rather than socializing it. By excluding stigma as a major theme in his play, he undermines it.

In the years that *Rent* was playing off Broadway, AIDS continued to claim more lives. It seems that the Health Department spoke too soon in claiming that AIDS was no longer on the rise: by 1994 AIDS was “the leading cause of death in the U.S. for 25- to 44-year-olds.”²⁶ It was not until 1996, with the advent of NNRTIs (Non-Nucleotide Reverse Transcription Inhibitors) and the ARV cocktail, that AIDS would claim significantly fewer lives.²⁷

Living with vs. Dying from Disease

One of the most significant ways in which the plot of *Rent* deviates from that of *La Boheme* is its ending scene. *La Boheme*’s Mimi dies from consumption. In *Rent*, while her HIV appears to kill her, she makes a miraculous recovery. Larson’s decision to grant his Mimi life reveals more than his deliberate defiance of stereotypes. It suggests that while death is the defining aspect of tuberculosis, HIV is about life. *Rent* is about *living* with HIV. Tuberculosis was considered to be a long and aesthetic pathway to death. Susan Sontag demonstrates the

²⁵ Hutcheon and Hutcheon, 27.

²⁶ “AIDS Deaths Top Murder.”

²⁷ London, Elise. Class Lecture. 4 March 2008.

inextricable connection between tuberculosis and death by quoting a conversation from 1810: “I should like to die of a consumption. . . Because the ladies would all say ‘Look at that poor Byron, how interesting he looks in dying.’”²⁸ It was not the disease of tuberculosis that was romanticized, but the death that it was thought to offer. In *La Boheme*, Mimi’s death completes the story of a tragic love, epitomizing her character as the lovesick “tubercular heroin,” who allows her love to consume her.²⁹ As Susan Sontag explains, “Fever in TB was a sign of an inward burning: the tubercular is someone ‘consumed’ by ardor, that ardor leading to the dissolution of the body.”³⁰ Mimi is consumed by the disastrous love that she shares with Rodolfo. By allowing such tragic passion to devour her, she becomes a victim of the aestheticized tubercular death. This dramatic death in many ways defines Mimi as the idealized tubercular.

By the 1990s, HIV medication was advanced enough that the virus was not necessarily a direct path to death. It was transformed into a “lifestyle” disease, severely altering the identity and lifestyle of the HIV-positive individual. While imminent death was no longer definite, the Person Living With AIDS (PLWA) faced death daily without succumbing. Larson’s play focuses on the person defying death from AIDS. An example of this can be seen in Angle and Collins’ life support meeting, where a member explains that “reason says I should have died / Three years ago.” His life is defined by his continued survival of AIDS. Living with AIDS is a consistent theme throughout *Rent*, and its relevance is announced in the song “La Vie Boheme,” dedicated,

“To people living with, living with, living with

²⁸ Sontag, 31.

²⁹ Hutcheon and Huchon, 30.

³⁰ Sontag, 20.

Not dying from disease.”³¹

The perspective of “not dying from disease” is completely absent from *La Boheme*, in which death is more significant than disease. The significant discourses defining tuberculosis concern only death, while the experiences of those with AIDS concern life.

The importance of living with AIDS in *Rent* is reflective of the importance of the concept of living with AIDS in New York City in the 1980s and 1990s. The major scientific advance with respect to HIV in this time was the FDA’s approval of AZT in 1987. Throughout the 1980s and 1990s, HIV exhibited an affinity for social mobility as more and more celebrities announced their HIV-positivity. However, the scientific understanding of the disease remained static. Medical knowledge had become advanced enough to provide substantial understanding of the virus, and to control the disease for a given amount of time with AZT. PLWAs, even those taking AZT, lived significantly different lives from the HIV-negative. Aside from severe side effects—including anemia, insomnia, and a decrease in white blood cells—HIV drugs, even the much more successful and less severe ARVs, have considerable effects on the lifestyle of the patient. Siphso, an AIDS activist from South Africa, illustrates this very clearly in his declaration that “ARVs are now my life.”³²

Larson further illustrates the impact of AIDS on the lifestyle of PLWAs through the “Life Support” scenes, where new characters voice their fears of living with AIDS. They sing together:

“Will I lose my dignity?
Will someone care?
Will I wake tomorrow

³¹ Larson, Jonathan, *Rent*, (New York: HarperCollins Publishers, 1997), “La Vie Boheme.”

³² Robins, Steven. 2006. From “Rights” To “Ritual”: Aids Activism in South Africa. *American Anthropologist* 108(2): 317.

From this nightmare?”³³

These concerns are prominent not just for PLWAs, but with those affected by any severe chronic illness. Life is presented as the central fear in this song, outweighing even that of death. The last two lines could refer to death, suggesting that death provides a relief from the nightmare of living with AIDS. The concerns expressed in this song, especially dignity and loneliness, play a central role in *Rent*, and become most explicit in the final scene.

The song “Without You,” sung after the lovers have all parted, connects the final scene of *Rent* to that of *La Boheme*. The chorus of this song repeats the line “I die without you,” which has significance for each of the two plays.³⁴ In both of the plays, Mimi’s health severely declines when she is separated from her lover, and she returns to be with him as she dies. In *La Boheme*, she dies shortly following their reunion, immortalizing their love as a classical Bohemian tragedy. When Mimi is without Rodolfo, she dies, becoming a representation of the idealized lovesick woman:

Female love melancholy leads to consumption; in this cultural pattern, women are dependent on men, and life is the way in which they link themselves to men. When love goes wrong for a woman, she has no alternative but disease and ultimately death—preferably a beautiful one from consumption.³⁵

Mimi’s death is a result of her tragic love for Rodolfo, rather than her disease. In this sense, tuberculosis was a vessel for tragedy, rather than playing a significant role on its own.

Mimi’s altered fate in *Rent* demonstrates a different relationship between death and disease. When the two lovers are reunited, Mimi approaches the line between life and death, but, unlike in *La Boheme*, returns to life. She begins to lose consciousness as Roger sings to her, and

³³ Larson, “Will I?”

³⁴ Larson, “Without You.”

³⁵ Lawlor, 154.

claims that as she felt herself slipping away, she saw Angel, who died previously, and that Angel told her “Turn around, girlfriend, and listen to that boy’s song...”³⁶ In this context, the line, “I die without you” is quite specific and quite literal; Mimi is dying only when she is apart from Roger. When they are reunited, she regains her ability to live. This song, and Mimi’s embodiment of it, suggests that the only way to truly survive AIDS is to survive together. *Rent* illustrates the struggle of living with HIV, highlighting that survival requires love. This is central to one of the play’s most recognized songs, “Seasons of Love,” which prescribes, “Measure your life in love.”³⁷

Changing and Defining Identities

La Boheme’s Mimi is a hybridized representation of the stereotypical tubercular of the nineteenth century. Originally, tuberculosis was seen as a marker of high class and virtue. It was distinguishing, sexy, and offered spiritual promotion to those who got sick. However:

As the nineteenth century went on it became clear that tuberculosis was a disease of poverty, poor nutrition, and inadequate housing. With Koch’s confirmation of the transmissibility of tuberculosis, this connection made increasing medical sense. Nevertheless, what persists in Puccini’s 1896 opera, despite this new knowledge, is the predominant representation of Mimi as conventionally consumptive—that is, sexually attractive in part because of her physical appearance.³⁸

Although she is not from the upper class, Mimi represents the idealized character of the nineteenth century tubercular. However, it is my impression that the disease does not significantly affect her personal identity, mainly due to the fact that she does not accept her

³⁶ Larson, “Finale B.”

³⁷ Larson, “Seasons of Love.”

³⁸ Hutcheon and Hutcheon, 48.

illness throughout the majority of the opera. She embodies the disease, but does not engage with it.

HIV affects the characters of *Rent* on a much more personal basis. Though all of them do fit into the CDC's description of high risk groups, the focus of the play is to present these characters into people rather than stereotypes. This is accomplished most significantly in the representation of how each of them views his or her illness. The characters Angel and Collins fully accept their AIDS and allow it to become an integral part of their identities. In fact, the shared experience of AIDS is what sparks their relationship:

Angel: There's a "Life Support" meeting at nine-thirty
 Yes – this body provides a comfortable home
 For the Acquired Immune Deficiency Syndrome

Collins: As does mine

Angel: Well we'll get along fine³⁹

Roger's lifestyle is extremely affected by HIV. As I mentioned previously, Roger sees AIDS as an enemy to be vanquished. He is reluctant to allow AIDS to control his life, as can be witnessed by his unwillingness to take his AZT.⁴⁰ He is desperate to defeat the disease by giving his life the meaning that it has robbed from him, and to find a way to live on after AIDS has robbed him of his life as well. He attempts to do this by writing a song:

Find
 The one song
 Before the virus takes hold
 Glory
 Like a sunset
 One song
 To redeem this empty life⁴¹

³⁹ Larson, "You Okay Honey?"

⁴⁰ Larson, "Tune Up 3."

⁴¹ Larson, "One Song Glory."

Roger's struggle is personal. He is unwilling to accept his disease until he is forced to accept his love for Mimi, and the death that they both face. Upon doing so, he writes a song about her, and accepts himself and his disease, achieving a kind of spiritual ascension above AIDS, which allows him the freedom to write his song. The depth with which Larson brings these inner struggles to the center of *Rent* is a product of his dismissal of common stereotypes of HIV-positive individuals. Rather than contextualizing his characters, he personalizes them, creating an "extraordinary spirit of hopeful deviance and humanity" central to the play.⁴²

Conception of Time

Time is a recurring theme in *Rent*, and has a significant presence in *La Boheme*. Susan Sontag claims that HIV and tuberculosis are alike in that they are diseases of time—they progress linearly, as opposed to cancer, which spreads through the body. She explains, in *Illness as Metaphor* that "TB is a disease of time; it speeds up life, highlights it, spiritualizes it...cancer is not so much a disease of time as a disease or pathology of space. Its principle metaphors refer to topography."⁴³ She makes a comparable claim about HIV in *AIDS and Its Metaphors*, stating that "AIDS is progressive, a disease of time."⁴⁴ While I do agree that both tuberculosis and HIV are diseases that deal extensively with concepts of time, it is my opinion that they do so very differently.

Tuberculosis provides its victims with time to live as death approaches. In nineteenth century Europe, tuberculosis was considered to offer a desirable death. This is partially because it progressed relatively slowly and without any visibly degenerative effects, allowing the victim

⁴² Brantley.

⁴³ Sontag, 14.

⁴⁴ Sontag, 109.

to waste away slowly and romantically. The gradual progression of the disease warned the victim of a slowly approaching death. The effect of such a warning is evident in *La Boheme*. Shortly after Mimi discovers that she suffers from consumption, she and Rodolfo decide that they will remain together throughout the winter and then part in the spring, when it is anticipated that her health would be more severely declining.⁴⁵ The lovers' ability to anticipate the timeframe of the disease, and hence plan for their future, is a direct result of the slow development of tuberculosis.

The privilege of foresight is absent from AIDS. The tagline of *Rent*, "No Day but Today,"⁴⁶ expresses the immediacy inherent in living with AIDS: the PLWA lives with a considerably different conception of time than the HIV-negative person. This altered conception is primarily a result of the unpredictability of the progression of HIV infection. While AIDS was no longer considered a death sentence after the advent of AZT, the drug did not guarantee life. There was, and still is, always a chance that the virus could evolve to overcome a given drug—especially if the patient is less than vigilant with the timeliness of his medication—or that the patient could become exposed to an opportunistic infection. Though death is no longer seen as inevitable, it is always possible. *Rent*'s "No Day but Today" demonstrates the lifestyle and mindset caused by such unpredictability. Mimi is the primary example, and advocate, of such a lifestyle:

There is no future
 There is no past
 I live this moment as my last
 There's only us
 There's only this
 Forget regret
 Or life is yours to miss
 No other road

⁴⁵ Giacosa, Giuseppe and Luigi Illica, 36.

⁴⁶ Larson, "Another Day."

No other way
No day but today⁴⁷

The lifestyle of HIV, as presented here, is the quintessential representation of *carpe diem*. *La Boheme*, however, allows its characters the luxury of planning for the future. While AIDS and tuberculosis both invoke specific conceptions of time, these conceptions are extremely different, primarily due to the nature of the diseases themselves.

Spiritual Promotion

Images of spiritual purity and creativity were essential to the romantic representation of tuberculosis. These representations became a mythology, which claimed that the disease would take only the most refined spirits as its victims. It offered those victims the possibility of spiritual transcendence through an aestheticized death.⁴⁸ Death, inextricably connected with images of tuberculosis, confirmed and elevated its victims supposed virtue: according to Sontag, “The dying tubercular is pictured as made more beautiful and more soulful.”⁴⁹ Because of this transcendence, tuberculosis allowed its victims the illusion of moral and spiritual superiority. Hutcheon and Hutcheon illustrate the spiritual benefits associated with tuberculosis with a quote from Nicholas John:

Consumption singled out its victims, and they acquired an interesting individuality; the decline refined them in suffering, and they suffered the prototype of a passive death, consumed by an inner, unseen passion. Far from the clinical reality of foul breath and emaciation,⁵⁰ it was portrayed as a death of aesthetic beauty, directly allied to spiritual innocence.

⁴⁷ Larson, “Another Day”

⁴⁸ Sontag, 125.

⁴⁹ Sontag, 17.

⁵⁰ Hutcheon and Hutcheon, 226.

The tubercular's virtue allowed him to stand out from the rest of society. This virtue was not private, but rather a spectacle of society.

In *La Boheme*, Mimi's character fulfills this aspect of the romanticized tubercular identity as well. She is the only character directly associated with spirituality: as she describes herself to Rodolfo, she explains, "To Mass not oft repairing / Yet oft I pray to God."⁵¹ The spiritual purity of her character is evident not only in her lifestyle, but in her death as well. As Mimi dies, Musetta murmurs a prayer for her, declaring, "Our little Mimi is an angel from Heaven."⁵² Clark Lawlor draws a connection between the metaphors of tuberculosis concerning spirituality and passion, explaining that representations of tuberculosis in literature have often portrayed "the typically female death of pining for a lost love object in a form of Neo-Platonic ascension from secular to religious love."⁵³ Mimi portrays many of the romanticized associations of tuberculosis extremely well, despite their inherent contradictions. She dies because of a failed love and yet achieves a truer, spiritual love in death.

While death and disease present the same spiritual metaphors in *La Boheme*, *Rent* makes the distinction between death and disease very clear, especially with respect to spiritual promotion. It is not AIDS itself that offers transcendence, but the relief from the disease offered by death. Sontag claims that, unlike tuberculosis, HIV "does not allow romanticizing or sentimentalizing," because its effects are extremely devastating.⁵⁴ Life with AIDS, as represented by *Rent*, is inextricably linked with pain and the constant threat of death. Death seems to offer a release from that tension and anticipation.

⁵¹ Giacosa, Giuseppe and Luigi Illica, 16.

⁵² Giacosa, Giuseppe and Luigi Illica, 44.

⁵³ Lawlor, 9.

⁵⁴ Sontag, 112.

Rent suggests that the relief of death is reserved for the spiritually commendable, while others are left to struggle through life with HIV. Angel proves through the course of the first act to be the most morally admirable of the HIV-positive characters, and to have used her life to promote friendship and creation. The scene of her memorial, in which the other characters speak of her kindness, one of them declaring, “it was us, baby, who were the lucky ones,” attests to her goodness.⁵⁵ She is the only character to actually die during the course of the play. It is therefore not Angel’s AIDS that sets her apart from the rest of the characters, but rather her death. Roger and Mimi provide an interesting contrast. They each struggle to fully accept the importance of their love, as evidenced by their willingness to abandon it. Though they reconcile with each other at the end of the play, they are left to continue to in their struggle with—or in Roger’s case, against—AIDS.

Angel’s death also makes a connection between spirituality and the ability to love, as Collins illustrates after her memorial, declaring, “Angel helped us believe in love.”⁵⁶ This connection is also made in Tony Kushner’s *Angels in America*, which also focuses on the AIDS epidemic of the 1980s. Kushner’s characters include two lovers; Prior, who is HIV-positive, and Louis, who is not. When it becomes clear that Prior is dying from complications due to HIV, Louis leaves him, prompting Prior to accuse Louis of being unable to love. He exclaims, “A person could theoretically love and maybe many do but we both know now that you can’t...Love! Do you know what love means?”⁵⁷ Prior, on his deathbed, knows and feels real

⁵⁵ Larson, “I’ll Cover You (Reprise).”

⁵⁶ Larson, “Goodbye Love.”

⁵⁷ Kushner, Tony, *Angels in America*. (New York: Theatre Communications Group, 1992), 79.

love, and recognizes his healthy lover's inability to do so. After he dies, Prior experiences a very literal spiritual transcendence—he becomes an angel.

Diagnostic Moments

While the moment of Mimi's diagnosis is central to the drama of *La Boheme*, diagnosis plays a very different and much more subtle role in *Rent*. As part of his analysis of the framing of illness in society, Charles Rosenberg discusses the importance and power of diagnosis in society, as well as for the patient. He claims that "Once diagnosed... an individual became, in part, that diagnosis... With that diagnosis, a patient becomes an actor in a suddenly altered narrative."⁵⁸

While in less serious cases a medical definition for an ailment is generally welcome, Rosenberg states that a diagnosis such as cancer is often as devastating for a patient as the disease itself. The patient is no longer someone suffering from a sickness, but has become a cancer patient.

Moments in which characters in *La Boheme* and *Rent* are diagnosed, either by themselves or others, are essential to the two plays, but are presented in very different manners.

The diagnostic moment in *La Boheme* occurs when Mimi overhears Rodolfo explaining to Marcello that he thinks she is dying.⁵⁹ The way in which each of the two men in this situation attempt to hide Mimi's diagnosis from her reflects a common practice of the nineteenth century in which physicians would frequently inform the family members of a tubercular patient before addressing the patient herself. This was done because "doctors considere[ed] that the truth [would] be intolerable" for their patients, much as it is for Mimi.⁶⁰ The diagnosis in this case is not particular—Mimi is not devastated by the knowledge that she has tuberculosis, but rather that

⁵⁸ Rosenberg, Charles. *Framing Disease*. (New York: Rutgers University Press, 1992): xix.

⁵⁹ Giacosa, Giuseppe and Luigi Illica, 33.

⁶⁰ Sontag, 7.

she is dying. As I have discussed with respect to other aspects of her character, it seems here that while Mimi serves in many ways as a reflection of the many metaphors associated with tuberculosis, she herself is only marginally affected by the particularities of her disease.

There are several diagnostic moments in *Rent*, generally in which a character discloses his or her HIV status to someone else. The diagnostic moment in *La Boheme*, in which one character diagnoses another, has no place in *Rent*. This is largely because, as the surgeon general warned in 1988, “You can’t tell by looking if a person is infected,”⁶¹ whereas, “TB is understood to be, from early on, rich in visible symptoms.”⁶² The only diagnostic moment portrayed in *Rent* in which a person learns of his own illness is described in the past tense when Mark describes how Roger learned that he was HIV-positive:

His girlfriend April
Left a note saying “We’ve got AIDS”
Before slitting her wrists in the bathroom.⁶³

The candidness with which this background information is given, as well as the absence of other moments like this, implies that the transition from a HIV-negative individual to a HIV-positive individual, while significant, is not the focus on the play. In this context, what matters one is the new identity manufactured by the HIV-positive individual, and the way in which that identity is affected by disease.

Disclosure of HIV-status generally serves to bring the characters in *Rent* closer together. This provides a contrast to Mimi’s diagnosis in *La Boheme*, which splits Mimi and Rodolfo apart. Angel and Collins, as I discussed earlier, identify themselves as HIV-positive when they

⁶¹ United States, Public Health Service, *Understanding AIDS: A Message from the Surgeon General*, (US Department of Health and Human Services, ca. 1988), 3.

⁶² Sontag, 12.

⁶³ Larson, “Tune Up 3.”

first meet, and this shared experience serves to bring them closer together. Similarly, the tension between Roger and Mimi is alleviated when they each learn that the other has AIDS.⁶⁴ The moments of diagnosis within *Rent* therefore illustrate a previous claim: that living with HIV necessarily implies living within a community.

Catching the Bug

Representations of the perception of contagion in *La Boheme* are relatively disconnected from the reality of the time in which it is set. In Europe at the end of the nineteenth century, the spread of disease was the cause of a considerable amount of extreme public concern. These concerns had two main foci: certain environments considered to be breeding grounds for disease, and the spread of germs. Although the discovery of the Koch bacillus in 1882 identified the contagion responsible for the spread of tuberculosis, certain environments were still considered to be the ideal “soil” for the disease.⁶⁵ This type of environment provides the setting for *La Boheme*: the one of the poorer sections of the Quartier Latin, home to Paris’ poor Bohemian artists. Though attention was still given to the environment, the discovery of the Koch bacillus made an important impact of the public perception of contagion: “Koch’s discovery had proved that tuberculosis was an infectious disease, and he had suggested that it could be transmitted from the sick person to others.”⁶⁶ The suggestion of the transmissibility of tuberculosis led to a panic caused by a widespread fear of the spread of germs.

The characters of *La Boheme*, however, exhibit little apprehension of contagion. Tuberculosis has hardly any significance in the opening acts. Although Mimi is described as

⁶⁴ Larson, “I Should Tell You.”

⁶⁵ Barnes, 81.

⁶⁶ Hutcheon and Hutcheon, 54.

physically resembling a tubercular—pale, weak, and thin—there is no anticipation of her consumption until Rodolfo notices that she has begun coughing incessantly at night.⁶⁷ It is not until they live together, and her symptoms become all but impossible to ignore, that Rodolfo becomes nervous about her health and realizes that she is dying. His decision to leave her is at least partially influenced by fear of infection.⁶⁸

Contagion is even less significant in *Rent* than it is in *La Boheme*. As I discussed previously, there are no moments of seroconversion in *Rent*: none of the characters becomes infected during the course of the play, nor do they demonstrate any fear of infection. One explanation for the absence of contagion concerns the way in which HIV is transmitted—HIV is much less contagious than tuberculosis, in that a person must engage in specific, and oftentimes intimate, acts in order to become infected. These acts, referred to by the surgeon general as “risky behavior” have become increasingly stigmatized since they became much more highly publicized during the AIDS epidemic.⁶⁹ As part of Larson’s question to humanize this “risky behavior,” the focus of *Rent* is the effect that infection has had on each of the characters, rather than the infection itself. The manner in which each of the characters was infected is directly linked to his or her identity. Roger, for example, was infected by his girlfriend April, a heroin addict. His infection has therefore shaped his negative opinion of drug use, which defines much of his relationship with Mimi. The intimacy involved in Roger’s infection, as well as the influence of his infection on his intimate relationship with Mimi, further exemplifying the connection between HIV and love.

⁶⁷ Giacosa, Giuseppe and Luigi Illica, 13, 33.

⁶⁸ Giacosa, Giuseppe and Luigi Illica, 33.

⁶⁹ *Understanding AIDS: A Message from the Surgeon General*, 2.

Conclusions:

Many of the representations of tuberculosis in *La Boheme* concern discourse. Mimi embodies the metaphors commonly associated with tuberculosis, though she does not directly engage in her disease. It was the death offered by tuberculosis, however, rather than the disease itself, which had the greatest impact on her life. Because of this, it can be seen that in many ways the significance of consumption in *La Boheme* is found in its direct association with a graceful and slowly approaching death, and not in the specifics of the disease. In *Rent*, however, the focus is entirely on the experience of living with AIDS, and the many ways in which the disease alters the characters' lifestyles. This, in many ways, correlates with a larger movement among artists within the—mostly gay—communities of “high risk” individuals, who sought to de-stigmatize the disease by humanizing it. Therefore, while the main focus of *Rent* is living with AIDS, *La Boheme* focuses on death *vis a vis* tuberculosis. Nevertheless, there are significant themes prevalent in each of the two plays, which serve to connect the two diseases. Though they do so differently, each of the plays presents specific conceptions of time, as well as the power of diagnosis and the possibility of spiritual promotion through death. Though the two plays approach disease very differently, the similarity in their plots serves to bring together the discourses of tuberculosis with the experience of HIV, and shed new light on each of them.

Works Cited:

- “AIDS Deaths Top Murder” *New York Times* 16 August 1985.
- Barnes, David S., *The Making of a Social Disease: Tuberculosis in Nineteenth-Century France*. (Berkeley and Los Angeles: University of California Press, 1995).
- Brantley, Ben. “Theater Review; Enter Singing: Young, Hopeful and Taking On the Big Time.” *New York Times*. 31 April 1996, A1.
- Clark Lawlor. *Consumption and Literature: The Making of a Romantic Disease* (New York: Palgrave, 2006).
- Giacosa, Giuseppe and Luigi Illica. *La Boheme*, ed and trans. Juliette Sutherland, Keith M. Eckrich, and the Project Gutenberg Online Distributed Proofreading Team. 24 October 2004. <http://www.projectgutenberg.net> (accessed 30 April 2009).
- “Historical Perspectives Centennial: Koch’s Discovery of the Tubercle Bacillus,” 19 March 1982. From CDC: MMWR Weekly. <http://www.cdc.gov/mmwr/preview/mmwrhtml/00000222.htm>. (accessed 3 May 2009)
- Hutcheon, Linda and Michael Hutcheon. *Opera: Disease, Desire, Death*. Lincoln and London. University of Nebraska Press: 1996.
- “Increase in Tuberculosis Tied to Spread of AIDS.” *New York Times*, 3 January 1988.
- Jefferson, David. “AIDS at 25; How AIDS Changed America.” *Newsweek*, May 2006.
- Kushner, Tony. *Angels in America*. New York: Theater Communications Group, 1992.
- Larson, Jonathan. *Rent*. New York: HarperCollins Publishers, 1997.
- “New York’s New Cases of AIDS Level Off.” *New York Times*, 12 June 1990.
- Robins, Steven. 2006. From “Rights” To “Ritual”: Aids Activism in South Africa. *American Anthropologist* 108(2).
- Rosenberg, Charles. *Framing Disease*. New Jersey: Rutgers University Press, 1992.
- Sontag, Susan. *Illness as Metaphor and AIDS and Its Metaphors*. New York: Farrar, Straus and Giroux, 1989.
- Tommasini, Anthony. “Like Opera Inspiring It, ‘Rent’ Is Set to Endure.” *New York Times*. 5 September 2008.
- United States. Public Health Service. *Understanding AIDS: A Message from the Surgeon General*. US Department of Health and Human Services, ca. 1988.