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“A very Kafkaesque situation”: Reading Trans-Corporeal Tensions in Radhika Sachdev’s *Second Go*

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Abstract: The paper reads Radhika Sachdev's memoir *Second Go: First-hand Account of a Liver Transplant Recipient's Journey in India* (2018) through Stacy Alaimo's concept of trans-corporeality to examine how the narrating body is represented as porous and materially entangled with medical technology, anonymous donor tissue, family, and the economic and legal apparatus of Indian transplant medicine, rather than as a bounded, autonomous self. Using close reading of excerpted chapters, the paper traces two related phenomena: survivor's guilt, which surfaces not through direct confession but through irony, fantasy, and collective gratitude; and othering, enacted upon the anonymous cadaver donor, the narrator's own diseased organ, and the transplanted subject more broadly through institutional and clinical language. The paper argues that existing trans-corporeal and medical-humanities scholarship on transplantation, grounded largely in Euro-American memoirs, has not engaged an Indian cadaveric-donation narrative, and that *Second Go* offers a text through which this vocabulary can be tested and extended..

Keywords: trans-corporeality; survivor's guilt; othering; organ transplantation; Indian life-writing

I. Introduction

Organ transplantation occupies a peculiar place in the history of the human body: it is the one medical procedure in which survival is made contingent, materially and permanently, on the incorporation of another person's flesh (Shildrick 2021). Where most illness narratives chart a return to a prior, intact self, the transplant narrative cannot promise such a return, because the self that emerges from the operating theatre is, quite literally, no longer composed of a single body (Wasson 2021). It is this condition, the body as porous, relational, and irreducibly shared, that Stacy Alaimo's concept of trans-corporeality names: "human corporeality as trans-corporeality, in which the human is always intermeshed with the more-than-human world" (Alaimo 2010, 2). Trans-corporeality insists that the human is never a sealed, autonomous unit but a substance in continuous exchange with other bodies, tissues, and material systems (Alaimo 2010); nowhere is this claim more literal, or more urgent, than in the case of solid-organ transplantation, where the boundary between self and other is dissolved by clinical necessity rather than metaphor (Amin 2020; Gehrmann 2024). The paper examines these trans-corporeal tensions in Radhika Sachdev's *Second Go: First-hand Account of a Liver Transplant Recipient's Journey in India* (Sachdev 2018), a memoir composed in real time from a hospital bed and structured as a hybrid of confessional narrative, medical transcript, and SMS chat log, a formal hybridity that itself resonates with recent accounts of transplant temporality as disordered and non-linear (Wasson 2021; McCormack 2021). Sachdev's text opens by framing the search for a cadaver donor as "a very Kafkaesque situation" (Sachdev 2018, p. 15), and it is this bureaucratic, financial, and legal entanglement, as much as any surgical event, that this paper takes as its primary site of trans-corporeal analysis (Amin 2020). The body that emerges from *Second Go* is one written upon simultaneously by medical statistics ("the risk to the recipient is 80/20; while the risk to the liver donor is less than one per

cent,” Sachdev 2018, p. 15), hospital costing (“₹24 to 30 lakhs,” Sachdev 2018, p. 16), ICMR law (Sachdev 2018, p. 30), and cultural attitudes toward death and donation (“as Hindus, Christians, and Muslims, we simply believe in cremating or burying the body, rather than donat[ing] it,” Sachdev 2018, p. 16), a body, in other words, that is trans-corporeal long before the actual moment of surgery (Alaimo 2010; Shildrick 2021).

Alongside this primary concern, the paper traces two related and interlocking phenomena within the text: survivor’s guilt and othering. Guilt surfaces in *Second Go* not as direct confession but as displacement, routed through irony, fantasy, and the language of collective gratitude, a pattern that resonates with, and complicates, existing medical-humanities accounts of the affective economy imposed on transplant recipients (Frankel and Stern 2024). Othering, meanwhile, operates on multiple registers at once: the anonymous cadaver donor is othered by the legal erasure of his identity, described only as a “cadaveric liver... marginal[,]... of a seventy[-]... year old gentleman, whose identity could not be revealed” (Sachdev 2018, “D-Day: The Call Comes,” pp. 84-97; McCormack 2021; Shildrick 2021); the narrator’s own diseased organ is othered through her refusal to look at it, admitting, “I haven’t had the courage to look at my liver’s picture” (Sachdev 2018, “D-Day: The Call Comes,” pp. 84-97); and the clinical vocabulary of the transplant process, the surgeon’s blunt “Should we begin the hunt...?” (Sachdev 2018, p. 32), the narrator’s own observation that “every human part... [is] recyclable” (Sachdev 2018, p. 16), others the body itself, reducing it to biomedical utility even as the narrative works to restore its human particularity (Amin 2020).

While a substantial body of medical-humanities scholarship has theorized transplantation’s disruption of bodily and narrative identity (Wasson 2020, 2021; Shildrick 2021; McCormack 2021; Gehrmann 2024), this scholarship remains grounded almost entirely in Euro-American literary and memoir material. *Second Go*, composed within the specific pressures of India’s cadaveric-donation economy, offers a text through which the vocabulary of trans-corporeality, survivor’s guilt, and othering can be tested, extended, and reconsidered from an underexamined geographical and institutional location, the task this paper undertakes.

II. Objectives

- To analyse the trans-corporeal tensions (Alaimo 2010) in *Second Go*, the ways Sachdev’s narrating body is shown as porous, materially entangled with medical technology, anonymous donor tissue, family bodies, and the economic/legal apparatus of Indian transplant medicine (Sachdev 2018, pp. 15-17, 30-31), rather than as a bounded, autonomous self.
- To trace the emergence and textual manifestation of survivor’s guilt in the narrative (Frankel and Stern 2024), particularly at moments where the recipient’s desire to live is shadowed by awareness of the donor’s death (Sachdev 2018, p. 32) and of other patients still waiting (Sachdev 2018, p. 96).
- To trace the othering enacted in and by the text (Amin 2020; McCormack 2021), the othering of the anonymous cadaver donor (Sachdev 2018, pp. 84-97), the self-othering the narrator performs on her own body and organs (Sachdev 2018, pp. 84-97), and the othering effect of institutional/medical language (“recyclable,” Sachdev 2018, p. 16; “marginal liver” and “the hunt,” Sachdev 2018, pp. 32, 96) on the transplanted subject.

III. Literature Review

The trans-corporeal turn in medical humanities scholarship on transplantation converges on the claim that the transplanted body cannot sustain the fiction of a sealed, autonomous self (Alaimo 2010; Wasson 2020). Stacy Alaimo’s (2010) foundational concept of trans-corporeality, the human body as substance that “travels across” and is constituted by non-human and other-human material, underlies Sara Wasson’s (2020) account of transplant writing as a genre of Gothic hybridity in which recipient bodies are haunted by the erasure of donor-suppliers, and her claim, in “Waiting, strange” (Wasson 2021), that post-transplant existence resists the clean “before/after” plot of cure, instead producing a permanently contingent, waiting body. Margrit Shildrick’s (2021) “Hauntological dimensions of heart transplantation” and Donna McCormack’s (2021) “The haunting temporalities of transplantation” extend this by theorizing the donor’s ongoing spectral presence within the recipient’s sense of self, a presence that is neither fully internalized nor fully external (Shildrick 2021; McCormack 2021), precisely the trans-corporeal condition dramatized when Sachdev’s narrator notes her new liver “is getting friendlier with [her] other internal organs” (Sachdev 2018, p. 97). The affective economy imposed on recipients, Frankel and Stern’s (2024) “Raising aluminum foil fists” shows how the “gift of life” metaphor narrows the emotionally sanctioned range available to transplant recipients to gratitude alone, actively suppressing anger, ambivalence, and guilt (Frankel and Stern 2024). This is directly relevant to *Second Go*, where Sachdev’s own annotative gloss on her “Protected by Love” chapter, “Described survivor’s guilt passively from a different angle” (Sachdev 2018, p. 32, marginal note),

signals that guilt is present in the text but encoded obliquely, through tone and juxtaposition rather than direct confession, exactly the kind of affective foreclosure Frankel and Stern (2024) describe.

The biopolitics of otherness produced by transplantation as an institution needs attention. Kadji Amin's (2020) "Trans* Plasticity and the Ontology of Race and Species" demonstrates that transplant narratives historically encode categories of otherness, race, species, class, onto the transplanted body (Amin 2020); Ruth Gehrmann's (2024) edited volume *Future T/Issues* situates literary transplant narratives at the boundary between self and stranger (Gehrmann 2024). None of this scholarship, however, engages an Indian cadaveric-donation memoir (Wasson 2020, 2021; Shildrick 2021; McCormack 2021; Amin 2020; Gehrmann 2024). Second Go's specific vocabulary of "packages" and costs of "₹24 to 30 lakhs" (Sachdev 2018, p. 16), organ "recyclability" (Sachdev 2018, p. 16), and the surgeon's blunt clinical register ("Should we begin the hunt...?", Sachdev 2018, p. 32) stages an othering process, of the anonymous seventy-one-year-old donor (Sachdev 2018, p. 96), of the narrator's own diseased liver (Sachdev 2018, p. 97), and of the narrator herself within the waiting-list system, that has no direct precedent in the Euro-American memoirs (Pensack; McCann, discussed in Wasson 2021) that currently anchor the field.

IV. Research Gap

Existing trans-corporeality and Medical Humanities scholarship on transplant narrative (Alaimo 2010; Wasson 2020, 2021; Shildrick 2021; McCormack 2021; Amin 2020; Gehrmann 2024) is built almost entirely on Euro-American literary and memoir material, and its theoretical vocabulary, hauntology (Shildrick 2021; McCormack 2021), curative imaginaries (Frankel and Stern 2024), crip/queer temporality (Wasson 2021), has not been tested against a real-time, hybrid Indian transplant memoir composed under the specific pressures of India's cadaveric-donation economy: organ "packages" (Sachdev 2018, p. 16), cost negotiation (Sachdev 2018, pp. 140, 150, 276), waiting-list bureaucracy (Sachdev 2018, pp. 15, 30–31), and religious reluctance to donate (Sachdev 2018, p. 16). Further, while "survivor's guilt" is a recognized clinical and literary motif (Frankel and Stern 2024), no existing scholarship has examined how it is textually encoded passively, displaced onto fantasy, as in the narrator's extended vision of her daughter's dance school (Sachdev 2018, pp. 33–34), collective pronouns such as "my cup is brimming" (Sachdev 2018, p. 34), or clinical euphemism, rather than stated directly. Finally, no study (Amin 2020; McCormack 2021) has read the language of organ "recyclability" (Sachdev 2018, p. 16) and institutional othering, the anonymous, unnamed donor (Sachdev 2018, p. 96); the surgeon's "hunt" (Sachdev 2018, p. 32), as a trans-corporeal device (Alaimo 2010) that simultaneously binds the narrator to a stranger's body and estranges her from her own. Second Go offers precisely this understudied intersection.

V. Methodology

The paper adopts close reading as its primary method, working from the available excerpted chapters, "Second Innings" (Sachdev 2018, pp. 15–19), "From Potential Donor to Desperate Recipient" (Sachdev 2018, pp. 28–32), "Protected by Love" (Sachdev 2018, pp. 33–35), and "D-Day: The Call Comes" (Sachdev 2018, pp. 84–96). Passages are read for: (a) diction that materially merges self and other (donor tissue, family bodies, institutional bodies), consistent with Alaimo's (2010) trans-corporeal framework; (b) shifts in narrative register (clinical/legal vs. confessional/lyrical) that mark the suppression or displacement of guilt, following the affective-foreclosure model of Frankel and Stern (2024); and (c) moments where the anonymous donor or the narrator's own organ is linguistically distanced, objectified, or "othered," drawing on Amin (2020) and McCormack (2021). Alaimo's (2010, 2–4) trans-corporeality supplies the primary theoretical lens, particularly her account of "material memoir" as a genre in which "the self is constituted by material agencies that are simultaneously biological, political, and economic" (Alaimo 2010, 87), a description that closely anticipates Second Go's own hybrid, document-interspersed form.

VI. Textual Analysis

6.1 The Body as Site of Institutional Inscription

The opening chapter, "Second Innings," establishes the narrator's body not as a private, sovereign entity but as an object already scripted by systems external to her medical, legal, financial, and religious (cf. Shildrick 2021 on the institutional mediation of the transplanted body). The very first line, "I am caught in a very Kafkaesque situation" (Sachdev 2018, p. 15) is a deliberate genre signal: Kafka's fiction is preoccupied with bureaucratic apparatuses that process human bodies as case files, and Sachdev imports this framework immediately, before a single clinical detail has been given. Her body will be read, throughout the text, as a site upon which multiple discourses write themselves simultaneously, the discourse of statistical risk ("the risk to the recipient is 80/20; while the risk to the liver donor is less than one per cent," Sachdev 2018, p.

15), the discourse of cost (“the ‘package’ cost (all inclusive) for a liver transplant in India is formidable [₹]24 to 30 lakhs,” Sachdev 2018, p. 16, itemized further in “A Detailed Breakup of My Expenses” at p. 276), the discourse of religious custom (“as Hindus, Christians, and Muslims, we simply believe in cremating or burying the body, rather than donat[ing] it to a person battling for life,” Sachdev 2018, p. 16), and the discourse of law (the ICMR guidelines discussed at Sachdev 2018, p. 30). This layering is trans-corporeal in the fullest sense (Alaimo 2010): the self is not simply penetrated by another’s tissue at the moment of surgery, but is already, from the narrative’s first paragraph, constituted as permeable to institutional, economic, and cultural forces that exceed her control, an extension of Wasson’s (2020) claim that transplant narratives register “bioengineered hybridity” not only at the level of tissue but at the level of the surrounding cultural apparatus. The body’s boundary is shown to have been breached long before the scalpel, by paperwork, pricing, and the “month’s notice” the doctors issue her “to look for a cadaver, or else, [her] sister would have to be [her] live donor” (Sachdev 2018, p. 15).

This institutional inscription intensifies in “From Potential Donor to Desperate Recipient,” where the narrator recounts her own history as an organ pledger, noting that she “happened to pledge [her] family’s organs eight years ago and decided to donate [her] mom’s eyes four years ago” (Sachdev 2018, p. 30), before recounting her present position as a desperate recipient. The chapter title itself performs a trans-corporeal collapse: donor and recipient are not opposite poles but a single identity in transit, a fact the narrator makes explicit later when she states, “The irony is that I am on both lists now” (Sachdev 2018, p. 32). The self here is genuinely double-occupied, structurally incapable of the stable, single-directional identity (“I am a recipient,” full stop) that ordinary illness narratives might assume (cf. Wasson 2021 on the impossibility of a clean “before/after” transplant plot). Her body is legible simultaneously as a potential source of organs for others and as a vessel awaiting an organ from elsewhere, a chiasmus of giving and receiving that undoes any notion of the bounded liberal subject (Alaimo 2010; Amin 2020), reinforced by her own taxonomy of donor ethics into “three ethical-guided tiers” of personal choice (Sachdev 2018, pp. 31-32), and by her review, nineteen years earlier, of Manjula Padmanabhan’s *Harvest* — a play in which a pauper named Om Prakash sells his organs to “InterPlanta Services” (Sachdev 2018, p. 30), which the narrator now finds herself confronting “in the queue” (Sachdev 2018, p. 30).

6.2. Trans-Corporeal Tensions: Merging, Friendliness, and the Non-Sovereign Interior

The most striking trans-corporeal image in the excerpted material occurs in “D-Day: The Call Comes,” where the narrator describes her transplanted organ as “getting friendlier with [her] other internal organs” (Sachdev 2018, p. 87). This is not clinical language; it is social language transposed onto the interior body. Organs are imagined as acquaintances developing rapport, as though the inside of the body were itself a small society in which strangers must learn to coexist, a striking literalization of Alaimo’s (2010) claim that trans-corporeality names an ongoing material relation rather than a single event of merger. This single sentence does enormous theoretical work: it dramatizes trans-corporeality not as an abstract philosophical claim about permeability but as a lived, almost domestic negotiation, the donor liver is not simply absorbed or assimilated into a pre-existing self, but must build relationship with what is already there. The self, in this image, is decentralized into a small community of organs, no single one of which has final authority. This resists the common recipient-memoir trope identified in Wasson’s (2020, 2021) and Shildrick’s (2021) readings of Euro-American memoirs, in which the transplanted organ is figured as either fully “other” (threatening, alien, to be feared) or fully “assimilated” (the recipient simply “gets better” and moves on). Sachdev’s language instead sits in the uncomfortable middle: the organ is neither wholly self nor wholly other but is undergoing a slow, ongoing process of relation, closer to McCormack’s (2021) account of transplantation as productive of multiple, unresolved “hauntings” than to a narrative of assimilation.

The refusal to look at a photograph of her own diseased liver, “To date, I haven’t had the courage to look at my liver’s picture. Maybe one day, I will” (Sachdev 2018, p. 87), reinforces this same tension from the opposite direction. If the transplanted organ is imagined as achieving intimate “friendliness” with her interior, the diseased organ she has relinquished is held at a defensive, visual distance. The body she is leaving behind is unbearable to look at; the body she is receiving into herself is narrated with domestic warmth. This asymmetry demonstrates that trans-corporeal permeability in the text is not uniformly comfortable, it is selectively managed (cf. Alaimo 2010 on the uneven, non-uniform experience of material entanglement), with the narrator regulating which forms of bodily otherness she can bear to make intimate and which she must keep at arm’s length. This selectivity is further underscored by her earlier remark, on hearing that the tumour “sitting huge on the main hepatic artery came out intact,” that had it “ruptured or spread to other parts of the body, [she] would have been off the transplant list” (Sachdev 2018, p. 87), a moment in which her own body is narrated almost forensically, as an object that was evaluated and could have failed evaluation.

A further trans-corporeal tension appears in the description of the surgery itself: the narrator recalls being told “they would first operate on the cadaver, then wheel [her] inside the Operation Theatre” (Sachdev 2018, p. 86). This sequencing, quietly noted, almost procedural, nonetheless stages a literal, temporal overlap between two bodies, living and dead, being worked on in adjoining spaces as part of a single continuous surgical event, resonant with Shildrick’s (2021) account of the “hauntological” simultaneity of donor death and recipient survival in heart transplantation. The narrator’s aside, “(Pray, why do they call it a Theatre?)” (Sachdev 2018, p. 86), momentarily estranges the clinical vocabulary itself, suggesting that even the institutional language surrounding the procedure carries a residue of performance, spectacle, and unease that the narrator cannot fully suppress even as she consents to the process (cf. Wasson’s 2020 reading of the “Gothic” theatricality latent in clinical transplant discourse). Her blunt instruction to the surgical team, “I don’t want to be on the ventilator for longer than two days. If anything goes wrong, please declare me brain-dead and give all my organs away” (Sachdev 2018, p. 86), folds her own hypothetical death back into the donor economy she is about to draw from, collapsing donor and recipient positions even at the threshold of the operating theatre.

6.3. Survivor’s Guilt: Displacement, Irony, and the Passive Register

Survivor’s guilt in *Second Go* is never announced as such; it surfaces through structural irony and displacement rather than direct emotional confession, which is precisely what the author’s own marginal annotation on “Protected by Love”, describing it as guilt rendered “passively from a different angle” (Sachdev 2018, p. 32, marginal note), signals as a deliberate authorial strategy, consonant with Frankel and Stern’s (2024) finding that transplant recipients’ affective range is narrowed by dominant “gift of life” scripts to gratitude alone, forcing guilt, anger, and ambivalence into indirect or coded forms of expression. The clearest textual instance occurs in the exchange with Dr. Manish, whose blunt, almost callous question, “Should we begin the hunt...?” (Sachdev 2018, p. 32), provokes in the narrator a moment of visible breakdown: “My puffy eyes welled up tears at his response. For the acute shame and pain I felt, I wished I was on the donor’s rather than on the recipient’s list in India” (Sachdev 2018, p. 32). This is guilt in its most direct form, a wish to trade places, to absorb the ethical burden of needing another person’s death in order to live. But the narrator does not dwell in this admission. She moves immediately to irony, “The irony is that I am on both lists now” (Sachdev 2018, p. 32: a rhetorical pivot that resolves the emotional charge of the guilt into a kind of structural paradox, converting raw feeling into intellectual observation. This is a recurring pattern: guilt appears, briefly, nakedly, and is then re-routed into cleverness, irony, or classification: the “three ethical-guided tiers” of donor choice she constructs immediately afterward (Sachdev 2018, pp. 31), as though the analytical mind offers a refuge from the emotional one, a textual strategy that extends Frankel and Stern’s (2024) account of gratitude as a socially enforced substitute for more difficult feelings into the register of irony and taxonomy.

The chapter “Protected by Love” performs displacement even more elaborately. Rather than articulating guilt directly, guilt toward her sisters who have “volunteered as live donors” (Sachdev 2018, p. 34), guilt at consuming family resources and attention, guilt at the possibility of dying and abandoning her daughter, the narrator retreats into an extended, almost cinematic fantasy of her daughter’s future dance school, “quaint,” with “red bricks, lots of greenery, huge French windows,” filled with “the sound of ghungroos (ankle bells) and laughter of little girls” (Sachdev 2018, pp. 33-34). This fantasy is disproportionate in length and specificity relative to its narrative occasion (a chapter ostensibly about family support during hospitalization), and its disproportion is itself the textual symptom of displaced guilt: the anxiety too large to state directly about what might happen to her daughter is instead worked out through an elaborate wish-image of the daughter thriving without her. The chapter’s closing catalogue of others’ sacrifices, one sister “running two houses, mine and hers” (Sachdev 2018, p. 35), interns “not going to take any salary for the next three months” (Sachdev 2018, p. 35), further distributes the guilt outward, transforming the narrator’s private anxiety about being a burden into a communal narrative of collective generosity in which “love can help you sail through any crisis” and her “cup is brimming” (Sachdev 2018, p. 34), in which she is less a burden than a beneficiary of love, a reframing that manages guilt by converting it into gratitude, precisely the affective substitution Frankel and Stern (2024) identify as the dominant, if impoverishing, emotional script imposed on transplant recipients.

6.5 Othering: The Anonymous Donor and the Language of Recyclability

Othering in the text operates most sharply around the donor's absolute anonymity. The cadaveric liver is described only as "marginal... of a seventy[-]... year old gentleman, whose identity could not be revealed" (Sachdev 2018, p. 86). This legal anonymity, mandated by Indian transplant law, produces a donor who exists in the text purely as a clinical adjective and an age, a body reduced to biomedical utility even as it is, in the same moment, being folded into the narrator's own body and voice, a dynamic closely aligned with McCormack's (2021) and Shildrick's (2021) accounts of the donor as a spectral, only partially knowable presence within the recipient's narrative. The donor is other not because he is unknown to the narrator emotionally, but because the institutional apparatus itself has structurally othered him, stripping him of name and story so that only his organ remains legible, an institutional othering that resonates with Amin's (2020) broader claim that transplant discourse has historically encoded categories of otherness (there, race and species; here, anonymity and legal erasure) onto the transplanted body. The doctor's own euphemistic language for this process, "the hunt" (Sachdev 2018, p. 32), extends the othering from the donor's identity to the very process of seeking him out, casting the search for a body as something closer to a chase than a medical procedure.

This othering is reinforced by the recurring vocabulary of recyclability: "every human part—even hair, nails, skin, bones or cornea—[is] recyclable. Nature has given such tremendous reserve to the human body" (Sachdev 2018, p. 16), which, however affirmatively intended by the narrator (as an argument in favor of donation), linguistically converts the human body into fungible material, akin to industrial waste made useful again (cf. Amin 2020 on the ontological flattening effected by transplant vocabulary). The narrator's own gloss on this idea, invoking Manjula Padmanabhan's *Harvest* and its dystopian organ-sale economy involving the fictional agency "InterPlanta Services" (Sachdev 2018, p. 30), signals her awareness that the same vocabulary that redeems organ donation as generous and ecological also risks flattening bodies, donor and, implicitly, recipient into interchangeable biological commodities, a risk she explicitly names when she insists that without "tight legal, social, and ethical norms in place... the scope for misuse could be huge for a country like India" (Sachdev 2018, p. 31). The text thus others the donor twice over: legally, through anonymity (Sachdev 2018, p. 86), and rhetorically, through a vocabulary of recycling (Sachdev 2018, p. 16) that, even in its most compassionate register, cannot fully escape commodification (Amin 2020; Gehrmann 2024).

VII. Discussions and Conclusion

Second Go demonstrates that trans-corporeality (Alaimo 2010) in an Indian cadaveric-transplant context is inseparable from institutional and economic mediation: the narrator's porous, other-inhabited body is produced not only by donor tissue (Sachdev 2018, p. 86) but by cost sheets (Sachdev 2018, pp. 16, 276), ICMR guidelines (Sachdev 2018, p. 30), and waiting-list bureaucracy (Sachdev 2018, p. 15). Survivor's guilt in the text is systematically displaced rather than declared, routed through fantasy (Sachdev 2018, pp. 33-34), irony (Sachdev 2018, p. 32), and euphemism (Sachdev 2018, p. 34), confirming, in an Indian idiom, the affective-foreclosure pattern identified by Frankel and Stern (2024) in Euro-American transplant scholarship. Othering functions bidirectionally: the anonymous donor is othered by institutional erasure of identity (Sachdev 2018, p. 96; McCormack 2021; Shildrick 2021), while the narrator others her own body and organ (Sachdev 2018, p. 87) as a defensive, guilt-managing strategy. Together these findings suggest that Second Go does not simply illustrate existing trans-corporeal theory (Alaimo 2010; Wasson 2020, 2021) but complicates it, showing how bureaucratic and economic infrastructures of the Global South actively co-produce the blurred, guilt-laden, othered self that Western Medical-Humanities scholarship (Shildrick 2021; McCormack 2021; Amin 2020; Gehrmann 2024) has so far theorized mainly through individual psychology and Gothic metaphor.

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