Review article
Medical Museums and Metaphors of the Body
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*Morbid Curiosities*, by Samuel Alberti, and *Anatomy as Spectacle*, by Elizabeth Stephens, treat highly specialized types of medical museums. Alberti’s book focuses primarily on pathology museums beginning in the late eighteenth century and continuing into the twentieth century. Stephens, on the other hand, is more interested in displays related to particular topics in anatomy, whether they include anatomical models or preserved specimens. Her text spans from 1700 to today. Even though the historical accounts in these works occasionally overlap, the authors’ methods vary significantly, and therefore the books will likely appeal to different audiences. Nevertheless, taken together, the texts illustrate the increasing complexity and specificity of exhibitionary studies, particularly regarding medical museums.

In *The Knife Man: The Extraordinary Life and Times of John Hunter, Father of Modern Surgery*, journalist Wendy Moore narrates the captivating story of John Hunter’s surgical experiments and anatomical courses. *Morbid Curiosities* supplements Moore’s book by providing a broader historical and cultural context for Hunter’s work. Alberti’s study takes for its beginning John Hunter’s collection and the ensuing public fascination with preserved human remains. He explains how specimens served two purposes: first, they were deployed as educational tools for aspiring surgeons, and second, they formed a kind of cultural capital as collections of curiosities in the homes and offices of prominent medical men and others. Alberti’s subject is the transition of such specimens from living flesh to metonymic museum objects, from parts of individuals to ‘dividuated’ forms (Alberti 2011: 8), fragments of different bodies juxtaposed with each other but not making a complete whole. He claims that he is, therefore, particularly interested in *processes*, from body to collection, from collection to museum, from decaying flesh to preparation, and so forth.

One chapter of his work is a thorough geography of the location of healthy and diseased specimens within typical exhibitions. Next he offers a meticulous (perhaps too meticulous) mapping of medical museums within the United Kingdom. He then traces the movement of these collections with the development of pathology as a discipline during the nineteenth century.

In ‘A Repository for Bottled Monsters and Medical Curiosities: The Evolution of the Army Medical Museum’, Michael Rhode and James Connor have described the growth of the US Army pathology collections in the same period (Rhode 2007: 177-189). Alberti provides a more detailed analysis of this trend, focusing on the UK. Following his chapter on the geography of pathology collections, Alberti’s text grows more theoretically rich. He interweaves a history of the changing means of obtaining pathological specimens and methods for preparing them with an analysis of how these trends reflected larger cultural movements; for instance, how the interest in pathological specimens accompanied the Romantic fascination with ruins (Alberti 2011: 72), diseased fragments of humans serving as another metaphor for decay. Of equal interest is Alberti’s discussion of the ethics (or lack thereof) surrounding the ownership of specimens and the ways in which the wishes of patients and their families were rarely consulted. This discussion sheds an illuminating historical perspective on the popular book, *The Immortal Life of Henrietta Lacks*, by Rebecca Skloot. Evidently, Skloot’s account of twentieth-century
doctors' appropriation of an African-American woman’s cancer cells is part of a long tradition of disregard for the rights of the poor and disadvantaged even to own their own carcasses.

Alberti’s book is similarly strong when he moves from collecting and preserving specimens to displaying them. Again, his juxtaposition of developments in his field with larger cultural trends adds depth to his accounts, as when he suggests that as sexual differences became more regulated in the nineteenth century, so, too, did the anatomical museum become a ‘key site in the construction of the nature of woman’: ‘In three dimensions as in two, male anatomy was the norm against which female deviance was compared’ (Alberti 2011: 134). As women were forced out of midwifery and medicine, doctors developed a fascination with ‘the pathologies of pregnancy’ – indeed, Hunter’s model foetuses are lovingly rendered, tidy, and beautiful, in contrast to the ‘butchered fragment of the mother’ (Alberti 2011: 136). Finally, as the book moves to its close, Alberti outlines the importance of texts as supplements to pathology displays, which moved increasingly into hospitals, away from the public sphere. Women’s visits were limited, and there was a general effort to limit the sensational aspects of displays.

In the twentieth century, new techniques relying on chemistry and microscopy rendered many older pathological displays redundant. The demise of pathology museums was hurried by legislation that regulated the display of anatomical items based on their provenance. This belated effort to protect patients and their families proved too costly for many collecting institutions. In the end, Alberti’s tone verges on elegiac, as he reminds readers that at an earlier time the work of specimen preparation was both arduous and extremely skilled, dangerous yet aesthetic. Understanding the place of the specimen in the history of medicine (even more than in the history of museums) is essential to comprehending the scientific and cultural developments of the past two hundred years.

Elizabeth Stephens, too, is interested in the relationship of museums to larger cultural trends; in general, her study takes a broader perspective, treating the field of anatomy as a whole rather than focusing specifically on pathology. Stephens consistently compares developments in the professional practice and exhibition of anatomy with popular displays on the same subject, revealing how the two construct and deconstruct each other. While professional anatomy collections were initially intended to instruct medical personnel, popular exhibitions served several purposes, including pure entertainment and health education. As such, they reflected changing notions of the public and private as well as of individuals’ responsibility for their own well-being:

Public exhibitions of human anatomy have historically become most popular precisely during those periods in which the cultural significance of that body is most unstable. … Thus, these exhibitory spaces are not sites in which dominant ideas about bodies are reproduced or simply transmitted; rather, they are sites at which new ideas about bodies are both formulated and contested. (Stephens 2011: 22)

Stephens aligns these trends with the history of changing visual technologies, both for public display and medical purposes. She analyses the ways in which these technologies offer viewers representations of bodies that are culturally-determined metaphors for living flesh.

Her chapters focus on a series of these moments of instability in anatomical representation. The first focuses on waxwork models of female reproductive anatomy in the nineteenth century. Stephens traces the history of the anatomical Venus or model to the early 1700s, sidestepping the important role of Madame du Coudray’s anatomical ‘machines’ in training provincial French midwives in the eighteenth century (Gelbart 1998: 16). Stephens indicates how the anatomical Venuses, which were originally intended for medical professionals, found a place in public displays, becoming part of a disciplinary regime that strove to control female sexuality and separate it from the demands of maternity. Like Alberti, Stephens is concerned with the pathologizing of female anatomy.

Stephens continues her focus on sex and sexuality in her next chapter, which focuses on late nineteenth and early twentieth-century displays of male bodies, which were intended to draw attention to an epidemic of spermatorrhoea, or ‘lost manhood’ (Stephens 2011: 55), the result of excessive masturbation and promiscuity. This chapter focuses primarily on the US; in this case, too, the exhibitions had disciplinary aims, creating widespread male anxiety about virility and promoting many quack cures for sexually transmitted diseases. In the panic over ‘lost manhood’, medical men strove to distance themselves from sensationalism and developed
professional practices focusing on male genital and urinary anatomy. The fear of *spermatorrhoea* primarily affected heterosexual males; however, Stephens' chapter would benefit from some discussion about the ways in which the emphasis on virility and the deleterious effects of masturbation might have simultaneously served to police homosexuality.

Stephens turns next to exhibitions of freaks, their demise with the medicalization of disability, and the resurgence of interest in freaks through photography. Public displays of freaks express the way the larger culture perceives bodily variations. Stephens is particularly effective in her discussion of how today's displays of unusual bodies, including Coney Island, allow individuals to speak for themselves and reclaim the representation of their own bodies, often through irony. Such exhibitions challenge the seemingly objective and dispassionate discourse of medicine. At the same time, because these exhibitions almost always include fakes, they challenge viewers to consider the constructed nature of otherness.

Displays of plastinated remains, such as Gunther Von Hagens' *Body Worlds*, bring the issues Stephens discusses into the present. Like his predecessors, Von Hagens challenges the boundaries between education, entertainment, and science. Originally, his exhibitions constructed male bodies as the norm, showing males engaged in all manner of activities and females in passive roles. Von Hagens' flamboyant marketing of his exhibitions, together with his use of dyes and other techniques to render interiority visible, also echo back to the methods of his nineteenth century precursors. In closing, Stephens reminds readers that representations of anatomized bodies are visible everywhere in the media – in television shows, films, books, and on line (Stephens 2011: 141). Thus, anatomy is continually being transformed even as it recreates our bodies in ways that reflect current notions of what constitutes a healthy and disciplined self. Museums remain important places where professionals and show-people constantly renegotiate their right to exhibit the anatomized body.

While Alberti is more interested in the history of professional museums and collections as well as in the methods of pathology, Stephens applies post-modern theory to demonstrate the interrelations of bodily display, discipline, and cultural mediation. In both cases, the authors suggest that changing medical and communication technologies have transformed museums devoted to the human body and its remains. Moreover, the human body and its parts, like other museum objects, are placed in exhibitions on the basis of curatorial selection and interpretation. As such, they become vehicles for the expression of powerful attitudes and fears within the ritualized space of the Western museum.

**References**


