

## **Participants' Reflections on the workshop 'Anatomical Bodies'** **University of Warwick, 13-14<sup>th</sup> April 2010**

My aim in attending the anatomical bodies workshop was to develop my ideas for a research proposal relating to the teaching of anatomy in medical education. The workshop discussions and presentations sharpened my understanding of relevant debates around the authenticity of anatomical knowledge, the value of an idealised model versus the infinite variation of 'real' bodies, and the plastinates' continuity with such 'real' bodies. The visit to the anatomy lab, to experience the use of plastinates as pedagogical tools, gave what was for me an interesting area of further study, a practical first-hand flavour in which to ground academic inquiry.

*Dawn Goodwin, Lancaster University*

The main benefit of the workshop for me were two fold: (i) acquiring an appreciation of the importance of lab tours to inspect authentic specimens, and (ii) developing interdisciplinary skills to study visual and material culture. Although I had attended the Body Worlds exhibition previously, I found that I did not have an accurate understanding of plastinate specimens as teaching aids. For example, I had a pre-conception that the specimens would be relatively light since it was largely composed of plastic but that did not turn out to be the case when I got the chance to hold and lift a limb. In comparison to the images from the Visible Human Project, the plastinate cross sections are a better anatomical specimen for study. The details of these artefacts were clearly illuminated by the light boxes.

The lab tour complimented the readings, lectures and discussions. Overall, the workshop demonstrated that interdisciplinary research could be accessible and need not be a struggle (as I generally experience it).

*Myra Cheng, University College London*

The 'Anatomical Bodies' workshop has been a fascinating experience for me as a history of medicine PhD student allowing me to form research questions outside of the archives, and to engage with other disciplines from medicine to anthropology and sociology. My research is on visual representations of disease, specifically venereal disease, in the eighteenth and nineteenth centuries, particularly focusing on how they emerged during this period as objects capable of creating and transmitting medical knowledge. I have been looking at illustrations in medical atlases, unpublished images created of hospital patients, wax models as well as anatomical and pathological preparations, all forms of visual representation emerging from the late eighteenth century as ways of forming and disseminating knowledge of venereal disease. Viewing the plastinates and their place in modern medical practice

raises some fascinating questions about the ontological status of many of the visual representations I work on in the eighteenth and nineteenth centuries. At the moment I am looking in particular at medical pedagogical practices and how visual representations were used to train surgeons and physicians, so taking part in an anatomy lesson during this workshop, where so many different visual representations were used alongside the plastinates with so little textual content, provoked some really interesting parallels between modern practice and the earlier period I study.

*Harriet Palfreyman, University of Warwick*

A recurring theme underlying the Biomedical Visualisations and Society series of workshops is a discussion of disembodiment as experienced through virtual representations of the body mediated by medical technology. The experience of seeing and handling plastinated specimens 'made' from 'real flesh' provides an interesting counter-point to the other workshops. Our visit to Professor Abraham's high-security anatomy lab provided an opportunity to familiarise ourselves with a variety of plastinated body parts, challenging our perceptions of what it meant to be embodied 'in the flesh'. The sterility, plastic texture, and lack of odour of the plastinates were their most striking features and produced none of the symptoms of disgust that one might anticipate with handling of oozing, squishy, pungent cadavers in the dissection room. The only features of the plastinates to provide a detectable trace of the individuality of the donor were size differences and anatomical variations between specimens. The fact that no two specimens were alike, and their exceptional three-dimensional realism, highlighted the limitations of conventional 'textbook' representations of anatomy. Modern anatomical images diverge considerably from early 'artistic' illustrations of dissection by reducing body parts to an 'idealised' average anatomy featuring stylised diagrams and labelled arterial segments linked by topographical relationships, and floating in disembodied space rather than contextualised within the physical body. Through medical imaging technology the human experience of our bodily interior seems, on the one hand, to have become increasingly intimate, formed from multiple views on MRI scans, atlas images, and visualised through computational modelling. On the other hand, our perceptions of the body have become increasingly 'disembodied'. In handling the plastinates, we were frequently encouraged to hold up the plastinate against our own bodies as a necessary reminder of the relationship between the plastinates and our own anatomy. But whose body are we imagining? Are contemporary images of anatomy used in Medical Education really just generating a 'one size fits all' visualisation? Is there pressure on patients (or cadavers) to conform to specific imaging 'views' or visions of 'perfect' anatomy implanted to the mind of the medical student? Our keynote speaker, Maryon McDonald, highlighted a wealth of interesting material. I was particularly interested in the work of Varela on autopoiesis in the cell and the permeable body boundary. Biomedical visualisations tend to depict the body as static or 'frozen', rather than a fluctuating, dynamic, metabolic body which is constantly in flux, exuding mucus, firing neurons, and regulating the flow of blood in response to metabolic demand. The overwhelming (over)dependence of visualisation over other sensory experiences of the body such as touch, smell, and hearing, could potentially impoverish perception of the body, producing a passive shell as the subject of the prosector's knife, or gaze of the MRI machine, rather than that of an 'alive', responsive and interactive, autonomous organism inextricably linked to consciousness.

Since attending the workshop I've read a couple of interesting articles. The first by Haviland and Parrish is about the use of wax anatomical models in medicine (*Haviland TN, Parrish LC. A brief account of the use of wax models. J Hist Med Allied Sci. 1970 Jan; 25(1):52-75*). Gunther von Hagens 'Body Worlds' exhibition seems part of a much older tradition of public 'anatomical spectacle' (see e.g. Rackstrow's museum in London: <http://thequackdoctor.com/index.php/more-medical-curiosities/mr-rackstrows-museum/>). I also read a nice article by Alison Muri (*Muri M. Of Shit and the Soul: Tropes of Cybernetic Disembodiment in Contemporary Culture. Body & Society 9.3(2003):73-92*). This captures the confusion surrounding 'disembodiment' and the need for consciousness to be inalienably enmeshed with corporality. This is completely unrelated to the plastinates, but the last thing I read was Rebecca Solnit's book '*Wanderlust. A History of Walking*'. Solnit suggests that we are becoming increasingly immobilised and alienated from our bodies as "people forget that their bodies could be adequate to the challenges that face them" resorting to technology (e.g. segway scooters) in disbelief of the adequacy of the feet. She says "*The fight against this collapse of imagination and engagement may be as important as the battles for political freedom, because only by recuperating a sense of inherent power can we begin to resist both oppressions and erosion of the vital body in action*".

In all, the Anatomical Bodies workshop has helped me position my Medical Physics research within a broader research context. On a personal level, the workshop has encouraged me to reflect more generally on perceptions of the human body within science and society, and I hope to be able to continue this interdisciplinary research in the future.

*Emma Chung, University of Leicester*