

Hablamos con **Natasha Ruiz-Gómez**, que trabaja como “senior lecturer” en Historia del Arte en la University of Essex. Especialista en arte francés del siglo XIX y principios del siglo XX e interesada en la intersección del arte y la medicina. Ha publicado en *Art History, Medical Humanities, Thresholds* y en varias antologías, así como en catálogos de exposiciones, como el que recién tuvo lugar en el Statens Museum for Kunst, Copenhagen. Está gestionando ahora la publicación de un libro donde examina los ‘scientific artworks’ del Dr Jean-Martin Charcot y la Escuela de la Salpêtrière. Natasha ha obtenido diversas becas internacionales, que incluyen un “Research Fellowship” del Leverhulme Trust, un “five-year Research Councils UK Fellowship” y un “Kress Curatorial Fellowship” en el Brooklyn Museum. También le fue concedida una “Medical Humanities Small Grant” del Wellcome Trust para co-organizar el simposio ‘Collect, Exchange, Display: Artistic Practice and the Medical Museum’ at the Hunterian Museum, London, en 2014.

Reproducimos aquí una conversación informal (entrevista realizada por Alfons Zarzoso en el mes de enero de 2018, en la red) que hemos mantenido con Natasha Ruiz-Gómez a propósito de la conferencia **“Curating Pathology at the Musée Charcot”** que impartió el pasado miércoles 24 de enero en el Institut d’Estudis Catalans (Sala Nicolau d’Olwer, calle del Carme, 47, Barcelona). La charla, gratuita y abierta a todas las audiencias, ha formado parte del ciclo **Objectes perduts: explicar i exposar ciència a museus i altres llocs públics** dentro de los coloquios que anualmente organiza la Societat Catalana d’Història de la Ciència i de la Tècnica (<http://schct.iec.cat/>).

Natasha Ruiz-Gómez se halla en la fase final de la publicación de su investigación sobre los “objetos de ciencia artísticos” producidos en y por la escuela y hospital de la Salpêtrière en el París del último tercio del siglo XIX. Aquellos objetos formaron lo que se conoce como “Musée Charcot”, fundamentaron la enunciación clínica de las enfermedades nerviosas y fueron ejecutados por médicos de gran reputación, como el mismo Jean-Martin Charcot o el gran Paul Richer. El arte y la medicina se cruzan de manera clara en este objeto de estudio. Un hecho tan relevante como significativo nos parece la aproximación que hace Natasha Ruiz-Gómez, como historiadora del arte interesada por la intersección del arte y de la medicina, en un contexto de formulación de la ciencia médico donde las formas de expresión y de comunicación permitían el uso de este recurso. La bibliografía que adjuntamos al final nos ha permitido descubrir algunas de las líneas de esta investigación, así como su aproximación a estos objetos de estudio. Conversamos con ella...

1. Necesitamos situar a Charcot y su forma de entender la construcción del conocimiento médico en el París de la segunda mitad del siglo XIX. ¿Por qué Charcot construye un museo de anatomía patológica? ¿En qué medida ese museo estaba en relación con otros lugares de trabajo hospitalario? Además de las salas clínicas, donde Charcot y su escuela disponían de un auténtico arsenal, un museo de patología viva, nos interesa saber cómo se fundamentó y comunicó el conocimiento creado a partir de la intersección con otros espacios, como el estudio fotográfico o la sala de electroterapia.

As you know, Charcot was famous during his life for giving primacy to the visual. One of his students, in fact, hypothesized that Charcot studied nervous diseases specifically because their symptomatology was *visible*. It makes sense, then, that he would ask the Assistance Publique in Paris to fund a photography studio, a casting studio, and a museum at the hospital, as these were all means to disseminate the visual records of the nervous diseases he and his students studied at the Salpêtrière. During his celebrated lectures—both in the hospital and abroad—he made use of the materials created in the various studios of the hospital. The photographs, casts and ‘specimens’ from the museum also helped to establish his reputation around the world, such as when he travelled with some of them to the International Medical Congress in London in 1881. They complemented the ‘living pathological museum’ of the hospital. And that ‘living’ hospital also acted in those new spaces: the hysterics were photographed, the ataxics were cast, etc. There is even an eye-witness account of the ‘Queen of the Hysterics’, Blanche Wittmann, wandering hypnotized around the Musée Charcot, becoming a specimen herself in the process.

2. Nos puedes comentar algo sobre qué tipo de objetos contenía el Musée Charcot, de donde procedían, cómo se ejecutaban. A través del estudio de la obra de Paul Richer, médico y artista en la Salpêtrière, en tu investigación destacas la creación de un nuevo espécimen médico que fue conceptualizado como “scientific artwork”. ¿Cómo puedes definir esta idea o describir este objeto? ¿Por qué aquellos médicos recurrieron a una forma artística de expresión de conocimiento que no se basaba en el registro mecánico? ¿De qué manera esta fabricación de objetividad pone límites a la idea hegemónica de la objetividad científica en aquel período?

The Musée Charcot exhibited bones, casts, drawings, photographs, equipment, sculptures and, as I've already mentioned, even patients. Paul Richer, one of Charcot's most important protégés and the resident artist at the Salpêtrière, created a series of pathological sculptures for the museum; they include a woman with Parkinson's and a young man with myopathy, among others. A colleague at the Salpêtrière, Henry Meige, called one of these sculptures a ‘scientific artwork’. To me, this term encapsulates the artistic project of Charcot and the Salpêtrière School (and it is why it is the title of my book). To the doctors at the Salpêtrière, the term ‘scientific artwork’ was not an oxymoron: instead, it indicates the deliberate conflation of the objective (scientific) and subjective (artistic) binary in Richer's sculptures specifically and in the myriad images and objects illustrating nervous pathology that emerged from the Salpêtrière at the end of the nineteenth century. This is what I find fascinating about Charcot and the Salpêtrière School: they claimed to be perfectly objective, but then they consciously utilized artistic practices and the history of art in order to craft medical imagery and objects. Of course, this runs counter to Daston and Galison's argument in *Objectivity* (Zone Books, 2007) that the dominant paradigm at the end of the nineteenth century

was 'mechanical objectivity', epitomized by the camera. Charcot and his students do not fit neatly into any of the 'epistemic virtues' that Daston and Galison attempt to define.

3. Nos interesa el proceso de creación de aquella cultura visual material en la Salpêtrière desde la perspectiva del sujeto enfermo. ¿Tuvo algún papel el paciente en aquel proceso? ¿Se convirtió el paciente en un simple caso clínico? ¿En la medida en qué se construyó un ejemplo patológico, el paciente representado perdió su identidad? Charcot was generally interested only in hearing patients recount their symptoms. It is well known that he often discounted what they were saying and, when giving a lecture using patients as examples, he could sometimes speak brutally about their symptoms or their fate.

One of the things that I've tried to do in my book is to return to the patients their name and their voices, as much as possible. Most of the patients at the Salpêtrière were working class women—individuals who already did not have much of a voice. It is significant that the titles of Richer's pathological sculptures give only the illness and not the patient. Yet, at least in one case, the name of the patient is 'written' on their chest, incised by Richer into the wet clay or plaster. These sculptures are meant to represent a 'type' but, at the same time, they are clearly portraits of specific individuals. The tension between these two concepts—'type' and 'individual'—is inherent in the work. However, I think that using art historical terminology—in this case, the term 'portrait'—is useful in providing a new way of thinking about this kind of medical specimen, which seems unique to the Salpêtrière.

4. La investigación sobre Charcot y Richer muestra que la Salpêtrière se convirtió en un lugar de fabricación de evidencias científicas relacionadas con la naciente neurología. Nos hallamos ante una cultura material formada por representaciones visuales en todo tipo de soportes –modelos anatómicos, bustos, fotografía, ilustraciones, dibujos, grabados, pinturas- que fueron comunicados a través del museo, de salones y congresos y, de manera especial, del mundo editorial. Incluso se plantearon la producción seriada de una colección de yesos neurológicos. ¿Se puede hablar en términos empresariales de un negocio fundamentado en aquella nueva ciencia?

This is an interesting question. I think that perhaps there was an *attempt* at disseminating some of these objects on a larger scale. As you mention, Richer's 'scientific artworks' are a case in point. In 1895 they were marketed, presumably to other medical museums, under the title 'Plaster Collection of the New Iconography of the Salpêtrière', without much success. Of course, by then there were new medical technologies that introduced other ways of seeing—I'm thinking here of x-rays, for example. A collection of sculptures might have seemed very old-fashioned.

5. ¿Qué sabemos sobre los públicos del Musée Charcot? Las representaciones pictóricas de la Salpêtrière suelen mostrar un ambiente docente o de sesión clínica. Nos preguntamos sobre el régimen de exhibición de aquellos objetos: ¿en qué condiciones se exhibían aquellos objetos? ¿Cómo se miraban estas piezas?

I have not found many mentions of the Musée Charcot in the press, so it is hard to speak of its public(s). One can presume that some of the attendees of Charcot's lectures must have seen it. We do know that it was visited by people as diverse as a Belgian psychologist and a writer—a man of science and a man of letters, which already says something about the diverse publics who had

access to it. The latter, Maurice Guillemot, wrote a very evocative description of the museum, in which he compares it to Dante's *Inferno* and 'the macabre work of Poe'.

6. Sabemos que Richer, autor de algunas de aquellas piezas, un científico sin formación artística reglada ganó el puesto de profesor de anatomía en la Escuela de Bellas Artes de París y llegó a ser el primer médico elegido miembro de la Academia de Bellas Artes. ¿Qué impacto tuvo Richer en los salones artísticos de su época? ¿Cuál ha sido la consideración de su obra escultórica desde la historia del arte? Por otra parte, si pensamos en los espectáculos populares del París fin-de-siècle, nos preguntamos si se puede establecer una relación entre los bustos parlantes del Musée Charcot –expresión de una enfermedad- y las cabezas parlantes de las barracas de feria?

Richer started exhibiting at the Paris Salon while still at the Salpêtrière. While one of his early artworks was vaguely scientific, the others could be characterized as Realist or Naturalist. They depict labourers, such as a *Harvester*, a *Reaper*, a *Sower*, etc. His work is in the style of Jules Dalou, who was an important figure at that time but is mostly forgotten today. Richer's Salon sculpture is not usually included in the art historical canon—and I don't think it should be! If we consider that Rodin was already working on the *Gates of Hell* at that time, then it becomes clear that Richer's sculpture is quite retrograde both in style and subject matter. It is nonetheless impressive, especially for a self-taught sculptor.

It is hard to make a comparison between the contents of the Musée Charcot and popular exhibitions from the time. The hospital setting gave the museum a legitimacy that itinerant shows lacked. However, one of these travelling shows—the collection of Dr Spitzner—used Charcot's image for its own purposes. A poster for the Spitzner collection included a reproduction of the famous Salon painting by André Brouillet, *Une Leçon clinique à la Salpêtrière* (1887), which shows Charcot discoursing to *le tout* Paris as a hypnotized hysteric swoons to his side. This painting may also have been reproduced on one of its facades. Moreover, Spitzner commissioned a life-size wax rendering of the group of Charcot and the hysteric from the Brouillet painting, which would have greeted the visitor to his collection. I'm sure Charcot never imagined that he himself would be turned into an image!

Further reading:

Natasha Ruiz-Gómez, A Hysterical Reading of Rodin's "Gates of Hell", *Art History*, 36.5 (2013): 994-1017 doi: <http://dx.doi.org/10.1111/1467-8365.12047>

Natasha Ruiz-Gómez, The "Scientific Artworks" of Doctor Paul Richer, *Medical Humanities*, 39:1 (2013), 4-10 doi: 10.1136/medhum-2012-010279.

Natasha Ruiz-Gómez, Shaking the tyranny of the cadaver: Doctor Paul Richer and the "Living Écorché", in K. Wils, R. de Bont, S. Au (eds), *Bodies Beyond Borders. Moving Anatomies, 1750-1950*, Leuven UP, pp. 231-257.

Resumen de la conferencia: **Curating Pathology at the Musée Charcot**

The Hôpital de la Salpêtrière was at the center of the hysteria 'epidemic' in late-nineteenth-century Paris, but its museum of pathological anatomy, the so-called Musée Charcot, exhibited photographs, drawings, skeletons, anatomical specimens, casts and sculptures of 'artistic pathology' that depicted other, more disquieting illnesses. Founded by artist-*manqué* Dr Jean-Martin Charcot (1825-1893), head of the hospital's medical service for over thirty years and one of the founders of modern neurology, the museum was populated by works created by the many doctors whose artistic sensibilities were nurtured by Charcot.

The Musée Charcot offered a partial and idiosyncratic vision of nervous disease. The only known photograph of this museum, which is no longer extant, shows a curious group of objects and images, which coalesce under the umbrella of medical evidence. If illumination was the presumed goal of the anatomical museum since the Enlightenment, the exhibits here more often resulted in the obfuscation of pathology. In addition to shedding light on this space of curated morbid anatomy, this talk focuses on the mostly unknown and unpublished albums from the Musée Charcot's collection that replicate the museum's methodology in miniature. In these 'lost objects', accomplished drawings and enigmatic photographs compete with more 'objective' graphs and diagrams to represent the pathologies seen at the Salpêtrière. Like the anatomical specimens, sculptures, wax casts, medical equipment and reproductions of artworks in the museum—or the objects in an early modern *Wunderkammer*—the contents of the albums cohere only when seen as the collection of a single individual: the Musée Charcot's formidable founder.