



Article

The Monstrous Metallic in Medicine and Horror Cinema

Scott, Niall William richard

Available at <http://clock.uclan.ac.uk/28190/>

Scott, Niall William richard ORCID: 0000-0001-5120-4132 (2014) The Monstrous Metallic in Medicine and Horror Cinema. MEDICINA NEI SECOLI ARTE E SCIENZA, Journal of History of Medicine, 26 (1). pp. 313-332. ISSN 0394-9001

It is advisable to refer to the publisher's version if you intend to cite from the work.

For more information about UCLan's research in this area go to <http://www.uclan.ac.uk/researchgroups/> and search for <name of research Group>.

For information about Research generally at UCLan please go to <http://www.uclan.ac.uk/research/>

All outputs in CLoK are protected by Intellectual Property Rights law, including Copyright law. Copyright, IPR and Moral Rights for the works on this site are retained by the individual authors and/or other copyright owners. Terms and conditions for use of this material are defined in the [policies](#) page.

Articoli/Articles

THE MONSTROUS METALLIC IN MEDICINE AND HORROR CINEMA

NIALL SCOTT

School of Education and Social Science
University of Central Lancashire, Preston, UK

SUMMARY

THE MONSTROUS METALLIC IN MEDICINE AND HORROR CINEMA

This paper considers the monstrous nature of medical tools and devices through the lens of horror cinema and the art of Damien Hirst. In it I argue for a shift from the monster and the monstrous as organic to the threat of the monster as an inorganic object in tools such as the scalpel and syringe. However, the metaphorical significance of the monster is sustained in these tools where human technological creations continue the discourse of the monster as a product of human creativity.

Introduction

The monster and the concept of monstrosity continue to be a subject of fascination in both medicine and science. This relationship in the past has concerned various beliefs about the nature, origin and purpose of the monster and monstrosity through to its contemporary efficacious role in the popular imagination in cinema, literature and media discourses. The monster is a portent, a sign and a symbolic mediator, and has historically gone through recognizable phases of meaning that align closely with social and cultural change. Monstrosity in the biological/scientific understanding in the past had

Key words: Monster – Monstrous – Medical devices – Horror film

more to do with the notions of normality and abnormality under a particular aspect of the natural order of things. A key turning point in the history of teratology is the oft referred to study and classification of monsters by Francis Bacon. In Bacon's work we encounter a shift of the monster as a portent in the form of the monstrous birth (as a divine or supernatural sign) to the monster as a feature of a diverse and creative aspect of nature's agency¹. Although this still maintains the monster's relationship with a metaphysical and non-corporeal agency, Francis Bacon's emphasis is on the monster as part of nature as it becomes an object of scientific interest: the monster is generated by Nature's fertility rather than God's wrath². This view of the monster as a product of nature continues through to, amongst others, Charles Darwin who described monsters as having "some considerable deviation of structure generally injurious or not useful to the species and not generally propagated"³. Park and Daston argue that the study of monsters was important in case study research, and provided insight into the relationship between the popular imagination and academic culture in the past, referring to 16th and 17th century teratology⁴. The interest in monsters and monstrosity as a method for understanding contemporary insights is as important in the current climate as it was then. The contemporary notions of the monster and monstrous feeds off this past, enriching its value as a metaphor and sign, its hydraic reach extending beyond a mere peculiarity of scientific interest.

This paper will look at the relationship between the monster, monstrosity, science and medicine through the lens of moments in popular cinema culture and art. In addition it will consider an ontological shift from the monster and monstrous as an organic phenomenon to the monster and monstrous as an inorganic phenomenon. The shift in focus to the inorganic is encountered in science fiction literature in the well-known role of automatons, robots and such technological creations. These creations where they introduce a threat of the metallic,

a threat of the mechanized object and the robotic and the cybernetic organism as monstrous, are frequently humanized, as evident in the Terminator film series. In doing so, these creations remain recognizable to a degree, carrying with them the appearance of agency and ultimately softening their monstrous effect. In the development of human encounters with technology in medicine though, the location of the monster has undergone a migration from agency and autonomy through to a pseudo agency ending in a monstrosity of the inanimate object found for example in the prosthesis, scalpel, syringe or other medical technology, including the medical institution itself as monstrous. The inorganic, unrecognizable mindless efficacy of the metallic delineates the opportunity for a shift into a new kind of monstrosity that wields its power precisely in its unrecognizability; these come most readily in the form of medical tools that can be grasped in and on the one hand but not understood in and on the other.

Monsters in Medical Horror

The source par excellence for seeking the role of the monster and monstrous in medicine is through the lens of horror cinema. There is good reason to turn to cinema as a source of reflection on medicine the monster. The film philosopher Noel Carroll refers to horror as representing unnatural, fictional monsters⁵, but Philip Nickel argues that horror's monsters 'bleed' out from the screen and fictional world into the actual world⁶. For Nickel, horror functions much like philosophical skepticism, allowing us to doubt and test the strength of our convictions regarding security, trust and belief in the pragmatic constructions that the world around us is not going to annihilate us⁷. Using medical imagery ranging from the myopic surroundings of an operation room environment through to medical institutions, medicine, its technology tools and its agents are arguably as strong a part of our popular visual culture consumption as are our encounters with the real phenomenon of medicine itself. As Pete Boss claims

concerning horror cinema of the 1980's: "The contemporary cinema displays a considerable range of images informed by popular attitudes towards modern medicine and related areas. Surgery, terminal illness, organ transplants and biomedical research are topics which are regularly and eagerly exploited for their potentially disturbing values, providing material for single instances of graphic gore on the one hand or entire plots on the other"⁸.

In this paper I will be drawing on cinematic sources from the very beginning of horror cinema through to some very recent films. Various medical discourses run throughout many cinematic genres, from horror through to science fiction, not forgetting the television hospital drama, such as the ongoing British *Casualty* and *Holby City* running from 1986 and 1999 onwards respectively, the US series *ER* (1994-2009), *House* (2004-2012), *Bodies* (2004 onwards) and the US Horror hospital drama *All Souls* (2001) to name but a few⁹. Although medical horror is a feature that can be found in the cinema of specific directors, such as David Cronenberg who will be discussed below, the films I will be referring to are selected primarily to illustrate the case for a shift in the medical monster from the natural-organic to the unnatural-inorganic, rather than aiming to highlight this shift in a particular genre or auteur. It is the case though, that Cronenberg's work in general is of particular interest regarding this question as he specifically devotes much attention to the subject of monstrous in the context of medical technology in his films. In addition to the wide range of films discussed in this paper, readers will recall their own medical horror films that may be applicable, as the field is truly vast. Indeed it is neither possible nor is it the aim of this paper to provide a systematic history of medical horror, but it to scan the field briefly, involving the early days of cinema such as the original psychiatric Asylum horror *Das Kabinett des Dr Caligari* (1920)¹⁰ the medical exploitation horror of Jess Franco, such as the *Awful Dr Orloff* (1962)¹¹, through to the 'Bratpack' medical student thriller *Flatliners* (1991)¹²

and the recent *Human Centipede* to highlight a few. In *Flatliners*, a group of young medical students use technology to play with near death experiences with the aim of, post resuscitation, reporting on what death or ‘the other side’ is like. Rather than promoting reanimation and survival, this medical student theme is inverted in the 2008 horror/thriller *Pathology* where the medical institution is the locus of criticism, with medical students taking advantage of their medical training in aiming to commit the perfect murder. From the beginnings of the cinematic representation of the monster in the expressionist *Das Kabinett des Dr Caligari* (1920) and in *Frankenstein* (1931)¹³, the medically qualified practitioner cum scientist has oscillated between being an agent of terror and a victim of the thing he/she has created. What also fills the spectator and future patient with terror however is the interlocking of the devices used with the agency of the hands that wield these objects, often represented by the scalpel and syringe. As the image of the scientist and medical practitioner monster develops in cinematic culture alongside the growth of new technologies, a question can arise then as to where the agency and power of the monster and its associated monstrosity lies: is it in the devices or objects used or in the figure that creates and uses the devices? It would seem that the relationship is seamless in some respects. Like a Midas effect, all that the monster touches, wields and or generates becomes monstrous. We can identify a shift from monstrous progenies as the generation of natural process as described for example by Francis Bacon, to monstrous progenies as the birthing of technological artifice. Weight given to breaking down a boundary between the human and the technological is given in for example John Law’s look at the relationship between science and technology studies and sociology, where he rejects any notion of a separation between social structures on the one hand and merely technical structures on the other. Opting instead for the human machine relationships as a whole, as dealing with “the-social-and –the- technical all

in one breath”¹⁴, Law identifies the need for a heterogeneity that accepts humanity as part machine. The monstrosity of the machine, the medical device, the implant, in this sense would be a step backward, reintroducing a separation that Law sought to dissolve, for fear of being labeled as speciesist. In arguing for a monstrous shift from the organic to the inorganic, I would seek to maintain a distinction between humanity and technology.

David Cronenberg and the Vivisection of Technology

The tendency in horror cinema which deals with and exploits a series of contemporary anxieties surrounding medicine and the monster is nothing if not a “barometer of cultural anxiety”¹⁵. These are the issues of trust, pain, hygiene, disease, beauty and disfigurement, which Boss traces back to deeper problems of death and dying and which exploit “physical helplessness, frequently at the hands of, or rather the tools of, some brightly lit and hygienic publicly funded institution”¹⁶.

The director David Cronenberg has had a longstanding relationship with the medical world in his work, playing with images of benevolent doctors and medical scenarios; indeed in the film *Crash* (1996)¹⁷, based closely on the 1973 novel by J.G. Ballard¹⁸, he explores the relationship between humans, prosthetic technologies and autoerotic desire and the fulfillment of fantasy. Prior to this though, Cronenberg experimented with the primacy of the machine and its attempt to take control of the human by morphing with the body. In *Videodrome* (1983)¹⁹, we see James Wood’s character Max’s stomach open up a gaping vaginal cavity, the result of a brain tumor caused by a malicious broadcast embedded in the Videodrome film, into which videotapes can be inserted; a handgun becomes mechanically one with Max’s hand in a manner reminiscent of the mechanical transformation of the body in the Japanese classic *Testuo* (1989)²⁰. Max when carrying out an assassination cries out ‘This is Videodrome, long live the new flesh!’ In the virtual reality horror *eXistenZ* (1999)²¹ game

consoles are umbilically attached the spine; a chicken bone becomes a pistol; the organic and inorganic merge, but it seems that technology carries autonomy with the human at its mercy. It is in Croneberg's interpretation of *Crash* that the role of metal comes into its own. Cars are fetishized and the moment of crashing a car is paired with sexual encounters and experiences. The injuries sustained lead to the film's characters further fetishizing their prostheses, calipers, scars and artificial limbs. However, the focus of attention is quickly moved from the human players to the medical devices and agency of the car. In a vision of the agency of technology in desire fulfillment, a reversal of ontological priority gives the viewer the impression that the metallic and the machine fetishizes the human being, rather than the other way round: *Crash* sees the monstrosity of technology, the artificial and the metallic take over. It is as if the mechanical controls and plays with humans and we are witness to a reversal of the subject-object relationship and the technological/mechanical objectifies the human keeping it under its gaze. As a reversal it links to the reflective role of the metallic surface of the technological monstrosity held in the shiny medical device, anticipating a horror where humanity is trapped in its own reflection. This feature of the machine fetishizing the human is encountered in the returned gaze in Damien Hirst's work. In a manner that harks back to the primacy of technology articulated by Marinetti in the Futurist manifesto, machines and tools hold humanity in their gaze. Elsewhere in a study of bus transport in Santiago, this inversion is captured poignantly: "The engine becomes part of him; his strength is multiplied by the speed of the machine; his dexterity at controlling the monstrous metal prosthetics that grow from and around him is instrumental in making the machine what it is"²². The monster as an entirely inorganic object, which we will revisit in more detail in the medical installation work of Damien Hirst below, is also articulated in other (non- medical) horror films in the 1983 John Carpenters car horror *Christine*, based on Stephen King's novel²³. The car in its

familiarity and its metaphorical representation of an aspect of the American dream realized as trust in the vehicle as a source of adventurous freedom, sees the promise of free movement, the open road and the graduation gift come back to haunt its owner. The 1983 Dutch horror *De Lift* sees an elevator become the monster as it sets out on a murderous venture, killing its passengers seemingly at will²⁴. This inversion is also found throughout science fiction film and literature where robots and tools exercise degrees of control over the human subject, most famously screened in Stanley Kubrick's *2001: A Space Odyssey*²⁵, where the computer HAL's lens reflects an image of humanity cradled in the womb of technology. The reflective surface of HAL's lens traps the human inside the object with it no longer being present as a thing to be reflected. It is as if the reflective surface has full control over the human even entirely removing its ability to perceive itself as an autonomous subject reminiscent of a narcissistic submission. The eye gazing out from the technology has control, the gaze turns the tables and the subject, the human becomes the other, either as a reflection, or as object of the monstrous machine's interest, its creator long since gone. This monstrosity develops to such an extent that the power held in the machine can detach itself from its human origins, and still have its monstrous effect, much like Michel Foucault's description of the surveillance power held by the very architecture of Jeremy Bentham's panopticon: "So to arrange things that the surveillance is permanent in its effects, even if it is discontinuous in its action; that the perfection of power should tend to render its actual exercise unnecessary; that this architectural apparatus should be a machine for creating and sustaining a power relation independent of the person who exercises it ..."²⁶. In other words the monstrosity of the object is connected to the problem that we do not know what the device in question will do in the hands of the person using it, or even as autonomous with a mere memory of the absent person who created it. Will the knife cut or act as a mirror? Or both?

In some modern narratives, the scientist/medical figure retains the status of a complete monster, and is not just a reflection of the monstrosity created, as evident in the Frankenstein narratives. In horror cinema this develops where the objects in the medical world as well as its products provide new sources of anxiety and criticism. The Frankenstein narratives juxtapose medicine and science in the role of health and sustaining life, against the madness surrounding the creation of life from grafted body parts and the pursuit of perfection in the maintenance of the ideal of beauty and the surgical collaboration the beauty industry. This obsessive pursuit of beauty is critiqued in the 1959 French horror film *Eyes Without a Face* (*Les Yeux sans Visage*)²⁷, described by its director Georges Franju as “horror in homeopathic doses”²⁸ Andy Black points out that in this film we encounter the move from “the so called “civilized” nations ... not preoccupied with survival ...” in the face of global war, famine and disaster, “... but with the misguided quest for the ultimate body in order to hide the ravages of natural ageing”²⁹. The monstrous metallic comes to the fore: the scalpel and the syringe as surgical tools at the hand of the medical profession are an extension of the agency of the monstrous doctor (Professor Genessier, played by Pierre Brasseur) opposed to imperfection. In the film, Professor Genessier performs a series of failed facial skin grafts on his daughter following a disfiguring car accident which he has caused. Tracing the Frankenstein motif, the grafts are taken from unsuspecting victims; all the while Genessier’s daughter carries a mask to cover her disfigurement. The mask itself is virtually flawless, a demonstration that perfection lies in the image of technology not in the image of humanity. The sterilized scalpel raised to perform the operations is highly polished and reflective. In this sense the scalpel’s surface itself is monstrous - the metal tool carrying both the significance of the honesty of the mirror as well as the horror of dissection and possible death. The challenging and well-balanced portrayal of monstrous surgical

themes in *Eyes Without a Face* was revisited almost verbatim by Jess Franco in the much less sophisticated *The Awful Dr Orloff* (*Gritos en la Noche*, 1962) and again in *Faceless* (*Les Predateurs de Nuit*) in 1987³⁰, where exaggerated gore and over the top, camp horror are on display. In addition to the use of a builder's drill and chainsaw wielded by the plastic surgeon as well as the scalpel, a syringe provides one of the key moments of terror, when it is directly injected into a victim's eye. Given the time of the film's release in the late 80s, this use of a syringe probably plays into the hands of fears of infection and transmission, specifically regarding HIV. In both these films the monstrous agency is carried through to a tool that provides a dual threat despite the medical function of its opposite. In the use of the syringe, both the medical opportunities for healing through, for example inoculation and the role of the mechanisms in providing/administering anesthesia from pain are paired in opposition with injection providing the possibility of infection and the cause of pain. David Cronenberg's vampyric *Rabid*³¹ visits these themes in a convolution of plastic surgery and the spread of a rabies-like virus. Rose, played by Marilyn Chambers has a bizarre penile like proboscis growing out from skin grafted on to her armpit, following burn damage to her body after a motorcycle accident. Rose develops an appetite for blood following the surgery, where she seduces and feeds off and infects her hapless victims with the bizarre mutation. Where Boss, describing the skin graft scene in *Rabid*, holds that it's the flesh of the victim that is fascinating and appalling to the viewer as the character is reduced to 'mere tissue', I contend rather that the focus of interest is the monstrosity of the mechanism that does the grafting into Rose's (Marilyn Chambers') flesh. All the characters, including the surgeon are initially fairly benign and motivated by beneficence; even the surgeon (Dr. Dan Keloid) is not in any way monstrous. The initial cause of horror seems to be in the agency of the medical equipment as the source of the virus, although Rose be-

comes monstrous in spreading infection through feeding off her victims as the flick descends into a vampire-cum zombie gore fest. The ontological move from the organic human-like monster to the inanimate tool and machine is captured by Cronenberg describing his work, in the effect of disease on the machine: "It's my conceit that perhaps some diseases perceived as diseases which destroy a well-functioning machine, in fact change the machine into a machine that does something else, and we have to figure out what it is that machine now does. Instead of having a defective machine, we have a nicely functioning machine that just has a different purpose"³². The medical theme of grafting surgery is taken a step further in the recent and controversial *The Human Centipede [First Sequence]*³³, where an insane retired surgeon, Dr. Heiter (Dieter Laser) aims to experiment by splicing a series of hapless victims together mouth to anus to create a single centipede like organism. Not only a satire and commentary on consumption, the film's doctor is a medical figure whose monstrosity involves the inversion of the trust relationship held between a practitioner and patient and the tools he uses. The director, Tom Six in interviews is at pains to emphasize the medical accuracy of the film, having hired a surgeon to provide advice on the possibilities of Dr. Heiter's procedure³⁴. This additional information complements Nickel's claim above of horror bleeding into our everyday experience. The fully fitted out makeshift medical ward in Dr. Heiter's basement is transformed into a sanitized, light filled dungeon. The ward, normally associated with recovery, care, rest, recuperation and healing becomes a prison for the kidnapped victims. The three victims strapped to the hospital beds are trapped in a manner such that the metal framed bed itself becomes a monster of sorts; rather than the monster being under the bed the monster *is* the bed. This is highly reminiscent of the phagocytotic bed in the *Nightmare on Elm Street* series. Dr. Heiter's use of a shiny scalpel and stitching kit reflect the doctors activities, but the reflective surfaces, including mirrors in the

film betray the desperate failures of the victim's escapes, as they aid Dr. Heiter's manic attempts to hold on to his patients. Again, here the monstrosity is carried by the equipment and symbols of the medical institution, perhaps even more so than the monstrosity of the doctor.

Monstrous Tools of the Imagination

It is the imagination that feeds the growth and success of the monster as metaphor, but the history of the role of the imagination is more sinister when we consider the belief that was held concerning the maternal imagination in the generation of monstrous progeny³⁵. The idea that imagination is efficacious in giving the monster form, and indeed leaves traces behind in the object that is generated, still lingers in the metaphorical and social power of the monster. This creative and artistic influence on the nature of the monster by its creator is, I contend, ever present in the inorganic devices created and used in the context of medical monstrosities. Huet traces such thinking back to Aristotle on the monstrous birth, but he thought the generation of monsters to be accidental: "As for monstrosities, they are not necessary so far as the purposive or final cause is concerned, yet per accidens *they are necessary*"³⁶. It seems though that the way the imagination is treated in the past as well as in the present carries with it more of the notion of Aristotle's formal cause, namely that something of the sculptor's idea is present in the sculpture in thought regarding aesthetics and creativity. Huet argues that the function of the creative artist remains closely associated with imagination and the monster, from the ideas surrounding monstrous births in Aristotle through to the Romantic period. Specifically of interest here, she writes: "...monsters blur the differences between genres and disrupt the strict order of nature. Thus though the monster was first defined as that which did not resemble him who engendered it, it nevertheless displayed some sort of resemblance, albeit a false resemblance to an object external to its conception"³⁷. The dual difference and

resemblance is part of the monstrous nature of the (metallic) medical tools and devices.

The imagination imparted into monstrous medical tools by their creators, bound up in (re)productive agency is entertained horror cinema, and provides yet another example of the shift of monstrosity from the human, organic monster to the inorganic metallic object. The role of medical devices and tools as monstrous in the popular imagination is taken back to its gynecological soul in the twin horror/thriller *Dead Ringers*³⁸. Here the twins Beverly and Elliot (both played by Jeremy Irons) embark on a grotesque journey, not only expanding their research into women with gynecological abnormalities, but furthermore redeveloping surgical tools from antiquity to carry out explorations and operations on these women. The surgical tools function as medical devices as well as exquisite works of art in Cronenberg's exploration of the progeny of monstrous birth at a physical and psychological level. Dan Shaw describes the creations as positively prehistoric, one of the tools looking like a pterodactyl's claw, and the red surgical gown worn at the operation on the woman with a trifurcate uterus as more like a Spanish grand inquisitor at an Auto da Fe³⁹. Using the same claw like device, Beverly kills Elliot in a grotesque allusion to a Siamese twin separation, although the two are not physically attached. Rather than Shaw's interpretation of the claw-like metal tool as merely prehistoric, I would argue that it is more of a technological extension of the role of the eagles sent by Zeus to claw and pick away at Prometheus's liver; the eternal punishment in the face of a technology that supports the regeneration of monstrosity rather than banishing it. The above mentioned bed as monstrous in the horror the human centipede resonates with Boss's description of the shift in emphasis from the patient to the technology surrounding the patient: the ECG machine that the patient is attached to becomes the signifier of the patient's vital condition. Referring to the film *Faces of Death*, Boss writes: "The man's deteriorating con-

dition is registering and the machine begins to assume the role of a dispassionate arbiter of life itself. Eventually its signal becomes the familiar continuous tone; the corpse is mocked by the *Schadenfreude* of the machine's sheer disinterest⁴⁰. The reversal, like the primacy of the fetish object as subject, is illustrated here where the patient becomes the object, held in the gaze of technology

Damien's Omens

The mindless medical object having monstrous agency is made vivid in the art of Damien Hirst, through a series of medicine cabinets, and cabinets displaying medical devices. The medicine cabinets display medicine packets, but they are all empty; they originally contained the artist's deceased grandmother's medicines⁴¹. The hollow nature of both consumption of the products to put off death and the garishness of their colorful labels aim to mask the nature of their monstrous purpose. Damien Hirst further created a series of installations of medical devices named deliberately to draw attention to the viewer's relationship to the objects inside. These included amongst others *Still* (1994), *Stripteaser* (1996), and *End Game* (2004), which at the time of writing are on display in Houston's Museum of Fine Arts, *Lap Dancer* (2006) and *Night of the Long Knives* (2008)⁴². The installations show an array of medical devices, tools and implements on shelves in metal and glass cases, one with two full length skeletons alongside. The display cabinets do not just provide a view of sanitization and order – each device and tool is in a distinct space, all regularly arranged. The meticulous arrangement brings out a dual clinical nature – clinical in the literal sense of the word but also clinical in a monstrous sense. These implements are clean, shiny, and reflective, and designed to convey a sense of mindless precision. The glass in the cabinets too, provides multiple reflections of the viewer. The whole installation contains the active function of the monster, mirroring human anxieties regarding surgery, pain and death as well

as the threat of the efficacious function of the tools but with no mind controlling them. The title given to the piece mocks the salacious voyeurism that the viewer has regarding the horror of the objects in a similar manner to the voyeurism that allows the spectator to indulge in horror cinema. The viewer is only all too aware that the view is reflected back. This feature of the machine fetishizing the human is encountered in the returned gaze. The human being the fetish object, like in Cronenberg's *Crash* is supported by Jean Paul Sartre's account of subject object relationships in *Being and Nothingness*, where the object represents the eye: "But the look will be given just as well on occasion when there is a rustling of branches, or the sound of a foot-step followed by silence, or the slight opening of a shutter, or a light movement of a curtain"⁴³. The uneasiness, the chill, the shiver of the horrific realization that one has become an object under the gaze of technology, even the reflective gaze of oneself in the shiny surface of a knife blade this apparent reversion described here and above in Cronenberg's *Crash* is, I believe, captured in Sartre's expression: "Thus myself -as-object is neither knowledge nor a unity of knowledge, but an uneasiness, a lived wrenching away from the ecstatic unity of for-itself, a limit which I cannot reach and which yet I am". Hirst expresses the perceived other, yet absent, humans featured in reflection in the cabinets when he states: "I have always seen medicine cabinets as bodies. But also like a cityscape or civilization"⁴⁴. The monstrosity carried through by these devices in horror movie scenarios and in Hirst's exhibit is interestingly brought to the fore in a US patent application to alter the visual appearance of syringes and scalpels by decorating them with colorful shapes so that the metallic reflective surface or the sharp needle and the source of pain is softened. The aim of such inventions is to "actually prevent and treat needle phobia (fear of medical devices) and make the bad experience of a medical procedure or therapy better, gentler, kinder more interesting more meaningful ... and to provide a predictable and benefi-

cial therapeutic effect on the patient"⁴⁵. The decoration is aimed at helping those with a phobia of such devices, even a general metallophobia. At the same time it could be argued that the proper function of these tools is further psychologically sanitized to the point where they are not recognizable as surgical instruments. The very reflective quality provided by the metallic is removed, yet the blade and needle remain as sharp as ever.

Conclusion

The monstrous medical tool then has a function in being prodigious. We have seen that the nature of the monster has arguably undergone a change from being a natural product of human generation to being a creator of the unnatural through to the possibility of the monster being the artifact itself. The prior belief that maternal imagination was in part or wholly a cause of a monstrous birth returns in the monster as medical artifact. That is, in a similar metaphorical sense the creations of the insane medical doctor and scientist afford the opportunity to think of the human imagination as engendering agency to medical objects. Although of course not possible in one sense, the metaphorical and narrative weight that can be carried through is potentially informative about the human relationship between technology and agency. The reflected metallic surface represent the eye looking back; the viewer becomes an object held in the gaze of the reflective surface, the technological artifact condemns the viewer. The gynecological tools in Cronenberg's *Dead Ringers* are molded to the shape of the surgeon's hands; these are tools that can be wielded but also appear independent from the surgeon. The crux of this metallic is that it transforms the victim/patient from an active autonomous subject into a mere object; an objectification encountered in the cutting open of the flesh, where the interior is exposed, becomes exterior and object in the same manner that a machined tool is an object. The monster is then a reflection of its origins, and

this we have seen is brought into focus in the function of the metallic medical devices such as scalpels syringes and prosthetics. In previous narrative discourses, monsters have signified invention and fertility. What could be more fearful and threatening than to shift the emphasis to a technologically generated object that appears to have no recognizable agency, but is nonetheless active in the world? The memory of a creative force behind the object, the prosthesis or tool is enough to forge associations of humanity in the object: the artifice points back to its origins. Humanity as artificer can be recognized in the object, but the object itself is utterly alien. Where the monstrous nature of the object extends out from the monster, the medical tool as monster can become that which is subject to a sort of cultural vivisection. The thing which is not easily recognizable in the human side of the monster can be recognized in the machined features of the object that has been created. The monstrous reflective metallic surface of the clean medical tool reflects human anxieties regarding medicine, death and perfection.

BIBLIOGRAPHY AND NOTES

1. PARLK K., DASTON L., *Unnatural Conceptions: The Study of Monsters in Sixteenth and Seventeenth Century France and England*. Past and Present 1981; 92: 20-54.
2. *Ibid.*, p. 23.
3. DARWIN C., *The Origin of Species*. London, Penguin, 1985, p. 101.
4. PARK K., DASTON L., ref. note 1, p. 22.
5. CARROLL N., *The Philosophy of Horror: Or Paradoxes of the Heart*. New York, Routledge, 1990, pp. 18, 28.
6. NICKEL P. J., *Horror and the Idea of Everyday Life: On Skeptical Threats in Psycho and the Birds*. In: Fahy T. (ed.), *The Philosophy of Horror*. Lexington, University Press of Kentucky, 2010, p. 15.
7. *Ibid.*, p. 17.
8. BOSS P., *Vile Bodies and Bad Medicine*. Screen 1986; 27/1: 14-24.

9. Information collected at: <http://uk.imdb.com/list/iMjnlteiaEI/> accessed at 13/11/2012.
10. WIENE R., *Das Kabinett des Dr Caligari*. Decla Bioscop AG, 1920.
11. FRANCO J., *The Awful Dr Orloff (Gritos en La Noche)*. Hispamer films, 1962.
12. SCHUMACHER J., *Flatliners*. Columbia Pictures, 1991.
13. WHALE J., *Frankenstein*. Universal Pictures, 1931.
14. LAW J., *Monsters, Machines and Socio-Technological Relations*, In: LAW J., *A Sociology of Monsters*. New York, Routledge, 1991, p. 8.
15. DENDLE P., *The Zombie as A Barometer of Cultural Anxiety*. In: SCOTT N. (ed.), *Monsters and the Monstrous, Myths and Metaphors of Enduring Evil*. Amsterdam, Rodopi, 2007, pp. 45-57.
16. BOSS P., ref. note 8, p. 15.
17. CRONENBERG D., *Crash*. Telefilm Canada, 1996.
18. BALLARD J.G., *Crash*. London, Jonathan Cape, 1973.
19. CRONENBERG D., *Videodrome*. Canada Film Development Corporation, 1983.
20. TSUKAMOTO S., *Tetsuo*. Japan Home Video, 1989.
21. CRONENBERG D., *eXistenZ*. Alliance Atlantis, 1999.
22. TOMIC P., TRUMPER R., *Powerful Drivers and Meek Passengers: On the Buses in Santiago*. *Race and Class* 2005; 47 (1): 49-63.
23. CARPENTER J., *Christine*. Columbia Pictures, 1983.
24. MAAS D., *De Lift*. First Floor Features, 1983.
25. KUBRICK S., *2001: A Space Odyssey*. Metro Goldwyn Mayer, 1968.
26. FOUCAULT M., *Discipline and Punish*. Middlesex: Penguin, 1991, p. 201.
27. FRANJU G., *Eyes without a Face*. Lux Film, 1959.
28. BLACK A., *Plastic Surgery Disasters: Body Horror in Eyes without a Face and Faceless*. *Necronomicon: The Journal of Horror and Erotic Cinema* 1999; 3:140-160.
29. *Ibid.*, p. 140.
30. FRANCO J., *Faceless*. Iberoamerica Films, 1988; BROWN C. (ed.) *Eurotika, Is there a Doctor in the House. Medicine gone bad*. Episode 9 Channel 4, A Boum production, 1999.
31. CRONENBERG D., *Rabid*. CEE Cinepix, 1977.
32. CRONENBERG D., *quoted* In: NEWMANN K., *Nightmare Movies A Critical Guide to Contemporary Horror Movies*. New York, Harmony Books, 1988, p. 116.
33. SIX T., *The Human Centipede* [First sequence]. Six Entertainment, 2010.

The Monstrous Metallic

34. *Ibid.*
35. HUET M-H., *Living Images: Monstrosity and Representation*. Representations 1983; 4: 73-87.
36. HUET M-H., *Introduction to Monstrous Imagination*. In: GELDER K. (ed.), *The Horror Reader*. New York, Routledge, 2001, pp. 84-89. The section in italics is my completion of the quotation, which can be found in Aristotle's *Generation of Animals*, par. 403.
37. HUET M-H., ref. note 35, p. 86.
38. CRONENBERG D., *Dead Ringers*. Telefilm Canada, 1988.
39. SHAW D., *Psychological Determinism in Dead Ringers*. *Film and Philosophy* (no date) vol. 3 <http://www.davidcronenberg.de/psychoringers.html>. Accessed at: 15/08/2012
40. BOSS P., ref. note 8, p. 19.
41. These installations can be viewed online at Damien Hirst's website at:
42. <http://www.damienhirst.com/texts1/series/medicine-cabinets>. Accessed at: 10/09/2012.
43. The author drew original information from an exhibition at Houston's Museum of Fine Art, but thumbnail images of the medical cabinets can be viewed at:
44. http://www.damienhirst.com/artworks/catalogue?p=15&radiogroup_view=view_as_thumbs Accessed at: 10/09/2012.
45. SARTRE J.P., *Being and Nothingness*. New York, Routledge, 1999, p. 257.
46. HIRST D., *quoted*. In: CHEN O., *Damien HIRST-Recommendation*. Art and Investment 10 Dec. 2004:
47. <http://ravenel.com/article.php?id=126&lan=en> Accessed at: 10/09/2012.
48. SIBBITT Jr. W.L., *Stress Reducing Medical Devices*. United States Patent Application US2005/0209567 A1, filed May 31, 2005 p. 2.

Correspondence should be addressed to:

nwrscott@uclan.ac.uk

