

# Hysteria, Doctor-Patient Relationships, and Identity Boundaries in Siri

## Hustvedt's *What I Loved*

By Christine Marks, University of Mainz, Germany

### Abstracts:

In her novel *What I Loved* a fictional autobiography written from the perspective of a male art historian, American author Siri Hustvedt reinterprets the relationship between female hysterical patients and their male doctors at the French hospital La Salpêtrière at the end of the nineteenth century. Hustvedt's portrayal of the way doctors at the time – most prominently Jean-Martin Charcot – treated their female patients at the Salpêtrière reveals complex negotiations of identities; the author's examination oscillates between an emphasis on the doctor as the dominating mastermind of the hysterics' behavior and explorations of hysteria as an escape from a society in which women were overpoweringly restricted. In particular, the representation of hysterical patients in one of the main character's artwork – a series of paintings and installations on the theme of hysteria – highlights aspects of the doctor-patient relationship emerging as an extreme example of a self mastered by the other. The patient is displayed as an object of study (and photography), trapped by the clinical gaze, and a blank slate to be inscribed by the investigator (dermagraphism). Hustvedt's works highlight the fragility of identity constructions, always showing the self in relation to the other and emphasizing moments of transgression and undecidability. This paper puts Hustvedt's notions of self into communication with interpretations of hysteria as a disease affixed to a femininity allegedly characterized by impressionability, susceptibility, and a lack of moral agency.

1 In her autobiographical essay "Extracts from a Story of the Wounded Self," American author Siri Hustvedt confesses to her existential fear "that thresholds and boundaries won't hold, that things will go to pieces" (197). This anxiety over the fragility of boundaries finds expression in most of Hustvedt's works: physical thresholds and distinctions between self and other emerge as permeable and unstable constructs. When considering questions of the body and identity, Hustvedt emphasizes the inevitable transgression of physical and symbolical limits and the inseparability of the self from the world. The bounded self as idealized in a Cartesian worldview, safely detached from the body it inhabits, does not exist in Hustvedt's oeuvre. In an essay on the painter Philip Guston, she writes that "the world penetrates us. We eat, we smoke, and have sex. But language and images enter us too. They become us" (*Mysteries* 58). Rather than imagining an inner self that is somehow separated from the outside by fixed borders, Hustvedt thus envisions the self as a compound of physical matter and "idea-winds that gust through people's minds and then become scars on the landscape" (*Loved* 366).

2 The author's fascination with the penetrable boundaries of the self, in which the material and the symbolical interfuse, may find its furthest development in her contemplation of hysteria in the 2003 novel *What I Loved*. In the novel, a fictional autobiography written from the perspective of a male art historian, Hustvedt reinterprets the relationship between female hysterical patients and their doctors at the French hospital La Salpêtrière at the end of the nineteenth century. Hustvedt's portrayal of the way doctors – most prominently Jean-Martin Charcot – treat their female patients at the Salpêtrière reveals complex negotiations of identity boundaries, oscillating between an emphasis on the doctor as the dominating mastermind guiding the hysterics' behavior, on the one hand, and explorations of hysteria as an escape from a society in which women were overpoweringly restricted, on the other. This paper sets out to analyze the relation between illness and constructions of feminine identity in Hustvedt's interpretation of hysteria. It traces the relation between hysterics and their physicians as an example of a self which has become overmixed with its environment, in which the distinction between inside and outside has become blurred to the point of dissolution.

3 Narrated from the point of a view of art historian Leo Hertzberg, the novel is set in the New York art world and deals with questions of identity, love, loss, art, madness, and perception, among other themes. Violet Blom, the lover and later wife of Leo's best friend, the artist Bill Wechsler, writes her dissertation about hysteria at the French hospital La Salpêtrière. Bill takes this as inspiration to create a series of art works on hysteria. In the second half of the nineteenth century, La Salpêtrière became (in)famous for the way its doctors treated hysterical patients—through hypnosis, dermagrism, public stagings, and photographic documentation. At the Salpêtrière, hysteria was turned into a staged performance of symptoms, with doctors as directors and patients as actors. As Elizabeth Bronfen describes the relationship between doctors and patients,

the patients styled their attacks according to the questions posed to them by the physicians, supporting and sustaining their desire by behaving the way they surmised these physicians [...] wanted them to behave, watching and learning from each other, becoming ever more dramatic as they saw the effect their performances had on the audience. (183)

In *What I Loved*, Hustvedt conceptualizes the relationship between female hysterical patients and their doctors at the Salpêtrière as a performance of transgression, in which the hysteric is converted into an object of the clinical gaze, a canvas for the doctor's artistic skills, and a

spectacle of a self without boundaries.<sup>1</sup> Violet points out how strongly the hysterics' symptoms were related to the expectations of their doctors. Talking about one of the most famous patients, Blanche Wittmann, she remarks: "They called her 'the Queen of the Hysterics.'" She was featured in Charcot's demonstrations of hysteria and hypnosis. [...] But after Charcot died, Blanche Wittmann never had another hysterical attack.' [...] 'She adored Charcot and wanted to please him, so she gave him what he wanted'" (275). The mutability of symptoms and the complete absence thereof after the death of the master physician Charcot highlights the heteronomy at work between doctors and patients at the Salpêtrière. Their relationship was coined by the hysteric's modeling of her behavior according to her physician's suggestion, an opening up of her identity boundaries that transformed her into a spectacular performer of the physician's desire.

4 Making a spectacle of oneself is, according to Mary Russo, "a specifically feminine danger" closely connected to a "loss of boundaries" (318). This remark reverberates with an idea of women's bodies as being more open than men's (see, for example, Margrit Shildrick's *Leaky Bodies and Boundaries*) and female ego boundaries as more permeable than male ego boundaries (see, for example, Nancy Chodorow's *Reproduction of Mothering*). Doctors' representations of the hysterics, as Janet Beizer points out, characterized their patients as "incontinent slave to her secretions, unable to control her dripping, flowing, spurting, oozing bodily fluids" (41), which served to underline the notion of the female body as "intrinsically pathological" (Hurley 120). The body of the hysteric is thus located in the midst of a far-reaching debate over feminine identity and social norms. "If the body is synecdochal for the social system *per se* or a site in which open systems converge," Judith Butler holds, "then any kind of unregulated permeability constitutes a site of pollution and endangerment" (132). While Butler applies this to criticize constructions of "homosexual pollution" (132), the concept also appears to match the sexually open and unregulated body displayed by the hysterics and their accordant marginalization in society (they were, after all, institutionalized in asylums). The pathologization of the female body reinforced the epistemological control of medical science and a patriarchal social order that denied female agency: "the doctor symbolizes truth, health, the moral and spiritual foundations of society while the hysteric is the fallen woman/villainess, infecting the social body" (Diamond 10).

---

<sup>1</sup> Hustvedt's references to hysteria and other medical disorders such as anorexia nervosa are carefully researched. In the back of the book, she lists a number of scientific publications that she consulted in her research; for her interpretation of hysteria, Hustvedt also profited from her sister Asti Hustvedt's research – whose unpublished Ph.D thesis serves as the basis for Violet's dissertation – research in the Salpêtrière Hospital archives (*Loved* 370).

5       Hustvedt's protagonist Violet draws attention to the miserable conditions under which most hysterics had to suffer before being institutionalized. Hysteria, she claims, may have been ““a permissible way out”” (54). This way out, however, turned out to lead most hysterics into deeper confinement; no matter how suffocating and traumatizing their lives had been before their institutionalization, their situation can hardly be described as improved by the kind of treatment they received at the Salpêtrière. The real way out, and this is a significant aspect of the novel, was to escape both from the Salpêtrière and the confinements of society in general by cross-dressing as a man, thus disguising the femininity to which the illness seemed to be tied.

### **Boundaries of the Self**

6       Since questions of the self and its boundaries seem so immanent to a perception of hysterical identity as prototypically feminine, I regard Hustvedt's conception of boundaries as crucial to her renegotiation of the doctor-patient relationship at the Salpêtrière. In *What I Loved*, Violet states that ““Nowadays girls *make* boundaries,’ [...] ‘The hysterics wanted to explode them”” (81). The force of this explosion lies in the discursive struggle unfolding on the body of the hysteric. How does Hustvedt present the hysterics' struggle to explode boundaries? Which boundaries are to be exploded and which are in need of protection? Hustvedt's concept of boundaries is marked by a conflation of the physical and the symbolical – the body is inseparable from its symbolical functions. In her collection of essays on painting, *Mysteries of the Rectangle*, Hustvedt quotes from Mary Douglas's seminal work *Purity and Danger*: ““All margins are dangerous. If they are pulled this way or that the shape of fundamental experience is altered. Any structure of ideas is vulnerable at its margins. We should expect orifices of the body to symbolize specially vulnerable points”” (80). This quotation exposes the vulnerability inherent in margins, a susceptibility to threats from the outside that fundamentally shapes the identity of hysterics at the Salpêtrière. At the same time, it reads the body in its symbolical function. The body becomes a site of recycling and transfiguring both physical and ideational material. It is in this exchange between inside and outside that the body's interactions assume discursive signification and the body becomes a cultural medium.

7       The danger and vulnerability inherent in boundaries are also central to Hustvedt's latest novel, *The Sorrows of an American* (2008). Subjectivity, Hustvedt demonstrates, needs borders. The novel's protagonist Eric—a psychiatrist whom Hustvedt has called her “imaginary brother” (qtd. in Cooke n.pag.)—reflects on a dialogue with a patient: ““Some

days, it's like I don't have any skin. I'm all raw and bleeding.' This comment had helped me. I had talked to her about following a metaphor. No skin, no barrier, no protection. The borders are important" (155). Erik's conversation with his patient reveals to him the need for a protective borderline between self and the world. This notion is fortified by Erik's contemplation of an instance of pathological border crossing in a schizophrenic patient:

The forms of things – the outlines. We can't live without them. 'Don't touch my nose, you shit!' one of the inpatients had screamed at me after I had briefly scratched my own during the interview. I was a young psychiatric resident then, and his words passed through me with a jolt. After that, I learned how precarious it all is – where we begin and end, our bodies, our words, inside and outside. (184)<sup>2</sup>

The maintenance of such distinctions between inside and outside, self and other, is exceedingly manipulated in the case of the hysterics at the Salpêtrière. Instead of encouraging the formation of protective borders, the physicians there are shown to do everything they can to invade their patients' private physical and mental territory. Although transgression and intersections between self and other are essential parts of life, identity also requires an inner core, an "inner sanctum" (Hustvedt, *Loved* 48), which is what the doctors at the Salpêtrière repeatedly attempt to get access to and control via the body.

8 Michel Foucault theorizes the mutual dependence of boundaries and transgression in an essay on Georges Bataille: "The limit and transgression depend on each other for whatever density of being they possess: a limit could not exist if it were absolutely uncrossable, and, reciprocally, transgression would be pointless if it merely crossed a limit composed of illusions and shadows" ("Preface" 27). Similarly, identity thrives on both limits and transgression; its very existence depends on outlines and boundaries, yet at the same time these boundaries are always already crossed. Taking the idea of transgression to the level of the social order, the hysterics serve as living reconfirmations of the boundary between normal and abnormal—they strengthen the taboo (see Bataille: "*The transgression does not deny the taboo but transcends and completes it*" [55; italics in original]).

9 Jean Starobinski has observed that "A living organism exists only by the virtue of the margin (dictated by the species, by the genetic code) through which it determines, defines and opposes itself, becoming individual: limit, finiteness, individuality, the struggle waged against the outside—all these are correlative" (342). Hustvedt is aware of both the need for margins and the inevitability of those margins to be crossed. She turns to pregnancy as a moment in which the limit between self and other is trespassed. In "Yonder," another autobiographical

---

<sup>2</sup> In a related scene in *What I Loved*, Bill's schizophrenic brother Dan exclaims: "'You cut my hair!'" when Bill comes to the hospital with short hair (301).

essay, she points to the particular feminine experience of being two in one during pregnancy that marks woman's identity as defying secure borders between self and other: "When I was pregnant with Sophie, I felt it was the only time I had been physically plural—two in one" (*Yonder* 11). However, she extends this idea beyond the realm of femininity by pointing to the universal human experience of life in the womb: "By its very nature, original space, maternal space, is nonsense; human experience there is undifferentiated and so can't be put into words. It lives on in our bodies, however, when we curl up to sleep, when we eat, when some of us bathe or swim. And surely it leaves its traces in our physical desire for another" (11). French philosopher Sylviane Agacinski also portrays the transgression of boundaries as a universal ingredient of human existence. "The boundaries of my physical existence have already been crossed by the other" (50), she writes. This boundary crossing which lies at the very beginning of all human existence results in the questioning of safe assumptions of a separate and autonomous identity – an insecurity at odds with a Cartesian consciousness grounded on a clear distinction between inside and outside. Hustvedt regards human existence as shaped by an original state of symbiosis and a desire to recover the unity disrupted at birth – tugging subjectivity away from autonomy and isolation to a space in which identity is fused with the other. However, in the case of the hysterical patients at the Salpêtrière, as will be illustrated in the following, the natural desire to return to a state of undifferentiated being, the desire to explode the boundaries of the self, is bound to end in a disaster, since identity requires limits – crossable limits, yet limits nevertheless.

### **Speaking or Muted? The Language of the Hysterical Body**

10 In a series of artworks on hysteria, Bill gives expression to the way that the hysterics found their identities encroached upon by the various "therapies" administered at the Salpêtrière. In one of his artworks, a box ten feet high and seven feet wide, he shows a small doll with blond curls, screaming in agony:

Her eyes were screwed shut and her mouth was stretched wide in a silent scream as she clamped her arms around a pole that divided the little room in half. In her fit she had contorted her body to one side so that her dress had twisted up around her waist, and when I scrutinized her little face more closely, I saw that a long bloody scratch ran down one of her cheeks. On the walls that surrounded her, Bill had painted ten shadowy male figures in black and white. Each man was holding a book and had turned his gray eyes toward the howling girl. (*Loved* 72)

The portrayal of the howling creature prey to the gaze of scientific observers fixing their gray eyes on her from all sides gives an intense expression to the disempowered position of the hysteric patient. The books hint at the doctors' epistemological power – they watch and judge, they

record and chart, and thus assign meaning to hysterical identity. In a “classical” allocation of the female as the objectified target of the male gaze, this artistic representation makes the observer complicit in a scene of voyeurism – since the people looking at the artwork share their position with those of the shadows on the wall. Like the men in the box, they are mere shadows, their identities hidden and protected. Bill’s rendering of the hysteric in the midst of the male shadows does not allow for hysterical body language as a sign of empowerment: the doll’s scream is silent, her body is contorted, exposed, and hurt. However, although the hysteric’s body seems powerless and victimized, it does convey its message of pain—though ignored by the clinical gaze, it may be perceived by the more empathic gaze of people looking at Bill’s art.

11 Another of Bill’s artworks exhibits four Barbie dolls lying on the ground, each blindfolded and with their mouths taped; three of the mouth tapes have words printed on them: HYSTERIA, ANOREXIA NERVOSA, EXQUISITE MUTILATION, while the last one is blank (*Loved* 73). The hysterics are muted by the discourse of medical classification. The question of who speaks through the hysterical body has been a central concern in a number of interpretations of hysteria. The hysterics’ various symptoms have been interpreted as a specific body language, and much has been written about hysterical semiotics and the hysterics’ use of a repertory of signs to communicate. Manfred Schneider, for example, in his essay “Hysterie als Gesamtkunstwerk: Aufstieg und Verfall einer Semiotik der Weiblichkeit” (Hysteria as a Synthesis of the Arts: Rise and Fall of a Semiotics of the Female), writes about the medical lecture of women’s bodies and the register of female suffering as a poetry album (882). He also calls hysteria the register of deceiving female forms of expression, a rhetoric of female desire, and refers to the rule of metaphor and the pathological symbolism of sex (883). In a similar vein, Peter Stallybrass and Allon White read the hysterics’ behavior as an endeavor to speak through the body; they conceptualize hysterical symptoms as an “attempt to produce their own pastiche and parody in an effort to embody semiotically their distress” (174). Susan Bordo argues that the symptomatology of hysteria – along with disorders such as agoraphobia and anorexia nervosa – “reveals itself as textuality” (93) and that the “bodies of disordered women in this way offer themselves as an aggressively graphic text for the interpreter—a text that insists, actually demands, that it be read as a cultural statement, a statement about gender” (94). The Surrealist thinkers André Breton and Louis Aragon have even called hysteria the “most poetic discovery of the 19<sup>th</sup> century” and a “supreme mode of expression” (qtd. in Filipovic 194). Yet the question remains whether the message conveyed by the hysteric’s body was received or ignored. Elaine Showalter points to the fact

that French feminists like Hélène Cixous and Julia Kristeva have defined hysteria “as a female signifying system outside of language” (86) and have created an *écriture féminine* inspired by a wish to find a voice for the silenced language of the female body. Janet Beizer stresses the semiotic struggle between hysterical incoherence and a medical appropriation of the hysteric’s body language:

The silences and incoherences of hysteria were perceived as an invitation to narrate: it is precisely because the hysteric cannot tell her story that this story, in the form of a blank to be filled in, is so readily accessible as narrative matter. But also, it is because the hysteric’s story is not *only* hers – it is a more inclusive cultural story that, repressed, can be spoken only in the Other’s name – that the hysteric is so readily appropriated as narrative screen. (9)

What this passage, like the other texts considered here, brings to the foreground is the tension between the signifying power of the body and the discursive repression of its voice through the medical institution. The transformations enacted upon the body through a variety of symptoms figure as signifying practices in a network of socio-political power relations—the body is always infused with cultural meaning. In a Foucauldian vein, the body is commonly viewed as a parchment on which discourses and social pressures are inscribed, a textual construction that is beyond the control of the individual. This idea is prominent in the application of dermagraphism – the practice of tracing the hysteric’s supposedly more impressionable skin with a blunt instrument to make letters and paintings visible on her body – repeatedly exercised at the Salpêtrière. In *What I Loved*, Bill expresses the violence immanent in such an inscription of the body in his artwork.

### **Dermagraphism: Turning the Hysteric into an Art Object**

12 The cruelty of the clinical gaze and the objectification of the female patient highlighted in Bill’s artwork are most clearly enunciated in his representations of dermagraphism. In one of the hysteria boxes, he shows a naked woman straddled by a dressed man: “She was lying on the floor as the young man straddled her back. Gripping a large pen in his left hand, he appeared to be writing vigorously on one of her buttocks” (*Loved* 72). When Leo and his wife Erica visit Bill’s studio to have a look at some of the hysteria exhibits, Erica and Violet have a conversation about dermagraphism, in which Violet draws a parallel between the body of the hysterics and works of art: “‘They turned living women into things,’ she said. ‘Charcot called the hypnotized women ‘artificial hysterics.’ That was his term. Dermagraphism makes the idea more potent. Doctors like Barthélémy signed women’s bodies



just as if they were works of art” (74).<sup>3</sup> One source of inspiration for Bill’s portrayal is Georges Didi-Huberman’s *Invention de l’hysterie*. As narrator Leo points out: “The book had been written by a Frenchman, Georges Didi-Huberman, but what interested Bill were its photographs. They all had been taken at the Salpêtrière Hospital in Paris, where the famous neurologist Jean-Martin Charcot had conducted experiments on women suffering from hysteria” (50). Didi-Huberman, as the subtitle of his book reveals, analyzes the *Iconography of the Salpêtrière* – a collection of photographically documented case histories – examining the “extraordinary complicity between patients and doctors, a relationship of desires, gazes, and knowledge” (xi). One of Bill’s hysteria boxes described by Leo is based on an actual picture taken at the Salpêtrière:

Drawing close to her, I peeked into a small room, harshly lit by a miniature ceiling lamp that shone on an old black-and-white photograph that had been pasted to the far wall. It showed a woman’s head and torso from behind. The word SATAN had been written in large letters on the skin between her shoulder blades. (Hustvedt, *Loved* 71)

The traced and imprinted skin of the patient is defenselessly exposed to the observer’s gaze – the identity of the hysteric is reduced to its impressionable and manipulable outer surface. Not only is the woman’s body inscribed with the word SATAN, which evokes the idea of a self possessed by an evil power, denied of self-control and agency; in addition, this inscription is captured in a photograph, which, as will be illustrated below, heightens the sense of an identity determined by outside forces, of the woman as an object to be observed and judged against her will. Leo’s further description of the installation illuminates the transformation of the hysteric into an art object effected by dermagraphism:

In front of the photo was the image of another woman kneeling on the ground. She had been painted on heavy canvas and then cut out. For her exposed back and arms, Bill had used pearly, idealized flesh tones reminiscent of Titian. The nightgown she had pulled down over her shoulders was the palest of blues. The third figure in the room was a man, a small wax sculpture. He stood over the cutout woman with a pointer, like the ones used in geography classes, and seemed to be tracing something onto her skin – a crude landscape of a tree, a house, and a cloud. (Hustvedt, *Loved* 71)

The installation focuses on the topography of the female body mapped out by the clinical observer. Art and medicine are conflated in the body of the woman – the man uses the pointer to create an image on the skin, thus reducing his patient to an empty canvas for his own creation. Drawing attention to this peculiar practice at the Salpêtrière,<sup>4</sup> Hustvedt lays

---

<sup>3</sup> Charcot called the Salpêtrière a “museum of living pathology” (quoted, for example, in Bronfen 174).

<sup>4</sup> Janet Beizer notes that “late twentieth-century medicine finds the condition [dermagraphism] in approximately 5 percent of the general population” (20) – it is thus not a phenomenon reduced to hysterical patients at the Salpêtrière. In the novel, Violet demonstrates it on her own arm (*Loved* 74).

particular emphasis on the various similarities between the objectification of women practiced in both the medical field and art. Transforming the body of the woman into a supposedly blank slate<sup>5</sup> used for inscription, writing on the body plays a central role in metamorphosing the female patients into art objects. The doctors assume creative control over their patients by treating them like a canvas to be inscribed with a meaning dictated by the hand of the master physician. More than just a physical cover of the body, the skin is the symbolical field between the self and the world (cf. Benthien 7). It is a site of contact, a site of exchange: “*In between* the outside and the inside, the contact surface – whether it be membrane, film, or skin – is alike the place of exchanges, of adjustments, of sensory signals, and the place of conflicts or wounds” (Starobinski 342; emphasis in original). As Benthien argues in her literary history of the skin, the skin has been developed into a central metaphor of separation, especially in the twentieth century (7). According to Benthien, in the eighteenth century the skin was still seen as a porous layer with manifold openings (51) – this notion of permeability has been increasingly suppressed. The inscription of the skin, the penetration and marking of this symbolical field with a writing instrument, suggests authorial control of the doctor and the impressionability of the patient.

13 The symbolical power assigned to the skin as dividing line between inside and outside can again be tied to the discursive powers at play in the body in general. As Butler holds, in her reading of Foucault’s notion of the body and culture in “Nietzsche, Genealogy, History”: “In a sense, for Foucault, as for Nietzsche, cultural values emerge as the result of an inscription on the body, understood as a medium, indeed, a blank page; in order for this inscription to signify, however, that medium must itself be destroyed – that is, fully transvaluated into a sublimated domain of values” (130). This transvaluation is exercised very directly on the body of the hysteric – the presence of the body and any kind of message communicated by the body are muted by the enforced transformation of the medium into a blank page. Although both Foucault and Butler use the term “inscriptions” in a metaphorical sense, the literal, physical realization of impregnating a person’s body with a text authored by the doctor stands out as a forceful encroachment on that person’s identity.

14 Hustvedt furthermore extends the scope of this male fantasy of objectification and subjection to a prominent myth of male creation: the Pygmalion myth. Leo observes,

Medicine had granted permission to a fantasy that men have never abandoned, a muddled version of what Pygmalion wanted—something between a real woman and a beautiful thing. [...] I thought of Ovid’s Pygmalion kissing, embracing, and dressing

---

<sup>5</sup> For an elaborate account of literary representations of woman as a blank slate to be inscribed, a passive creation of the male artist, see Gubar’s “‘The Blank Page’ and the Issues of Female Creativity.”

the girl he had carved out of ivory. When his wish comes true, he touches her new warm skin and his fingers leave an imprint. (*Loved* 74)

In a reverted version of this myth, the doctors at the Salpêtrière turn their Galateas from living beings into statues. Rather than creating life, they create art. Although the imprint the physician leaves on the hysteric's body is a sign of the skin's vulnerability, the lasting impression of dermagraphism is one denying the living interior of the patient, reducing her to the surface. Peter Brooks regards the myth of Pygmalion as the story that best exemplifies what Brooks calls "the interplay of eros and artistic creation":

What presides at the inscription and imprinting of bodies is, in the broadest sense, a set of desires: a desire that the body not be lost to meaning – that it be brought into the realm of the semiotic and the significant – and, underneath this, a desire for the body itself, and erotic longing to have or to be the body. (*Body Work* 22)

While the desire in the case of the doctors seems to be a desire of mastering the patient's body, it is not free from erotic undertones. The erotic desire connected to the sensation of leaving an imprint on another person's body evokes another scene right at the beginning of *What I Loved*. The stimulating connection between leaving a mark on the skin and leaving a mark on the canvas already emerges on the first page of the novel, when Violet describes her feelings as she was painted by Bill: "I wanted you to turn around and walk over to me and rub my skin the way you rubbed the painting. I wanted you to press hard on me with your thumb the way you pressed on the picture ..." (3). The erotic tension present in this scene is complimented by Leo's reaction to seeing a bruise in the very same painting that Violet is referring to: Leo gets aroused and has sex with his wife Erica. "Later," Leo writes, "Erica said that she thought my response had something to do with a desire to leave a mark on another person's body. 'Skin is soft' she said. 'We're easily cut and bruised'" (6). These hints at the erotic potential in marking another body but also at the skin as a site of violence and injury foreshadow the practice of dermagraphism at the Salpêtrière. Furthermore, Violet's posing as a model for Bill's art constitutes a counter model to the hysterics' conversion into art objects. Rather than emphasizing elements of objectification and domination, Bill's art work becomes a true co-production; mapping out "a territory between her [Violet] and me [Bill]" (15), the work of art melts the identity of the artist and his model, as emphasized by the title of the painting: *Self-Portrait* (4).

### **Hysteria and Photography**

15 Bill's *Self-Portrait* series stands in stark contrast to the photographic representations of the hysterics in the Salpêtrière. While Bill's portrait of Violet seems to come into being in

an interactive field between himself, his model, and the observer, transcending the gap between self and other, this gap is strictly upheld in the photographs of the iconography. The medium of photography is employed to further enhance the implications of other-determination and loss of agency caused by the practice of marking the hysterics' skin. As shown above, Bill's interpretation of hysterical identity at the Salpêtrière displays the hysterics' agony in the grip of their doctors' violent inscription and photographic documentation. The possibility of violence inherent in photography is an issue that Hustvedt also explores in two other novels. In *The Blindfold*, her first novel, the protagonist Iris feels bereft of her identity due to a photograph taken by George, an acquaintance of her boyfriend. The photographic representation seems to gain control over and disrupt her identity: "I don't know where I am anymore, and that picture is part of it." [...] "You robbed me," she accuses George (78). The fixed representation of the self as caught in a photograph becomes an instrument of terror. Significantly, Elizabeth Bronfen indicates that Iris's comportment regarding the photograph resembles that of a hysteric: "[...] she begins, much along the lines of the classic hysteric, to somatically enact the murky interface between fiction and reality which this image comes to represent for her. The photograph initially takes on the function of a fetish in her fantasy life" (285). Moreover, in Hustvedt's recent novel *The Sorrows of an American*, protagonist Erik is shocked when confronted with the idea that one of his patients has seen his photograph in an exhibition – the photograph had been taken and published without his consent: "It's hard to describe the loss I felt at that moment. It was as if I had been robbed of something very dear to me, and without even having seen the image or the images, I felt the burn of humiliation" (257). In both cases, photography implies an intrusion into one's privacy, delivering a part of the self to the world in a representation that is beyond the control of the person photographed.

16 Taking these examples into consideration, the horror and agony of the hysterics appear to be caused by the theft of agency procured by the iconography at the Salpêtrière. Susan Sontag characterizes photography as a medium of power: "But a photograph is not only like its subject, a homage to the subject. It is part of, an extension of that subject; and a potent means of acquiring it, of gaining control over it" (351). Photographs, according to Sontag, redefine reality "as an item for exhibition, as a record for scrutiny, as a target for surveillance" (351) – they freeze the fleeting moments of time into a single, graspable, and observable instant, thus relinquishing their subject to the objectifying gaze of the other. James Elkins's conceptualization of photography as a material intrusion on the identity of the subject intensifies the notion of violence in representation: "Every photograph is a little sting, a small

hurt inflicted on its subject, but even more: every glance *hurts* in some way by freezing and condensing what's seen into something that it is not" (29). This resembles Didi-Huberman's characterization of the clinical gaze at the Salpêtrière: "The clinical glance is already *contact*, simultaneously ideal and percussive. It is a stroke [*trait*] that goes directly to the body of the patient, almost palpating it" (28-29). Although a conception of the gaze as contact bears the possibility of subverting notions of the distancing power of ocularcentrism (see, for example, Luce Irigaray's reflection on tactile vision in *An Ethics of Sexual Difference* 185-92), quite the opposite is the case at the Salpêtrière. Here, the doctors' gaze takes effect as intrusion and violation of the hysteric's embodied identity. Photography is installed as an enforcement of "museumological authority of the sick body, the museumological agency of its 'observation'" (Didi-Huberman 30). In the moment of being fixed in the gaze of the photographer, the subject loses its authoring capacity. The assumption of such authority through photographic representation is inevitably violent. As Sontag makes evident, "there is something predatory in the act of taking a picture. To photograph people is to violate them, by seeing them as they never see themselves, by having knowledge of them they can never have; it turns people into objects that can be symbolically possessed" (14). This symbolical possession robs the hysteric of the ability to assume control over her identity and leaves her prey to the gaze of the readers of the iconography, including us. Her identity having been reduced to being "body-for-others" in the photographic representation, the hysteric is shown to be unable to occupy a stable position as center of relations, as center of reference.

### **Conclusion: Feminine Subversion, Cross-Dressing, and Escape**

17     Inscribed, symbolically possessed, catalogued – what could the hysterics do to save themselves? The final box of Bill's hysteria series shows a person dressed in a top hat and a long coat walking out through a door (*Loved* 71). What the observer first thinks to be a man turns out to be woman in disguise, escaping from the hospital (73). As Violet explains, it is a representation of Augustine, probably the most famous inmate at the Salpêtrière. Violet, who is particularly fascinated with Augustine's story, describes her as the "pinup girl for hysteria" (50), since she was the most photographed patient at the Salpêtrière.<sup>6</sup> Elizabeth Bronfen points out that

[...] Augustine seems to not only function as the medium for a culturally given iconography that speaks through her but she also knots together the phantomatic presences of two other scenes, serving as the medium for Charcot's phantasy of a

---

<sup>6</sup> A Google image search will exhibit Augustine starring in the "attitudes passionelles," as captured in one of the iconography's photographic plates.

standard, universal formula of hysteria as well as the medium for a message emitting from her unconscious. (196)

Augustine thus epitomizes the complicated constellation of hysterical identity: a subjectivity balancing on the threshold between the language of her unconscious, her culturally determined symbolical value, and the Pygmalion dream of her physician.

18 As Violet tells the reader, Augustine ““escaped from the Salpêtrière dressed as a man”” (73). Significantly, the path to freedom is taken via disguising her gender: abandoning the stylized symptoms she performed as an icon of hysteria, Augustine at the same time abandons her feminine identity. By dressing up as a man, she performs one final act that liberates her from medical observation and the restraints that come with it. Augustine’s story of escape exemplifies other “tales of women who made daring escapes from hospitals and husbands, fathers and employers” (51) that Violet encounters during her research. They all share the element of cross-dressing as a strategy to gain freedom: “They chopped off their hair and disguised themselves as men. They climbed over walls, jumped out windows, and leapt from roof to roof. They boarded ships and sailed out to sea” (51). The hysterics who thus dressed up exploded yet another boundary: they crossed the limit of gender. In a society in which identity was so restricted and determined by gender divisions, cross-dressing must be seen as an act of rebellion against the discursive pressures weighing on the female subject. By crossing the boundary of gender, these patients finally also crossed the boundary between imprisonment and freedom, escaping the confinement of the medical institution.

19 As Hustvedt suggests in her essay “Being a Man,” “there are times when the body feels like a limitation” (95) – at a medical institution in late nineteenth-century France, the “cultural expectations that burden femininity” (Hustvedt, “Being a Man” 96) certainly weighed heavily on the female patients. Iris, the protagonist of *The Blindfold*, also dresses as a man, which changes her behavior and identity profoundly. Hustvedt analyzes her protagonist’s cross-dressing as “defensive, an escape from the openness, fragility, and boundlessness she connects to her femininity” (“Being a Man” 102). This brings us back to the beginning: conceptions of the female body as open and boundless have been crucial to interpretations of hysteria. Like Iris, the patients at the hospital may have sensed that by sidestepping their gendered identity, they could also sidestep their weakened and objectified positions in society. Hustvedt’s look back at the Salpêtrière in *What I Loved* reveals the patients to be ambivalent subjects in whom the private and the public, the inside and the outside, clash in a struggle between individual rebellion and discursive regulation. The “idea-winds” of the time carried along stories of feminine madness and disempowerment – a

performance of masculinity may have helped the hysterics to strengthen their boundaries, yet the scars on the landscape of the self could not be undone.

## Works Cited

- Agacinski, Sylviane. "The Question of the Other (Critique of Egocentrism)." Trans. Oliver Davis. *French Women Philosophers: A Contemporary Reader. Subjectivity, Identity, Alterity*. Ed. Christina Howells. London: Routledge, 2004. 39-55.
- Bataille, Georges. *Essential Writings*. Ed. Michael Richardson. London: Sage Publications, 1998.
- Beizer, Janet. *Ventriloquized Bodies: Narratives of Hysteria in Nineteenth-Century France*. Ithaca: Cornell UP, 1994.
- Benthien, Claudia. *Haut: Literaturgeschichte – Körperbilder – Grenzdiskurse*. 1999. 2<sup>nd</sup> ed. Reinbek bei Hamburg: Rowohlt, 2001.
- Bordo, Susan. "The Body and the Reproduction of Femininity." *Writing on the Body: Female Embodiment and Feminist Theory*. Ed. Katie Conboy, Nadia Medina, and Sarah Stanbury. New York: Columbia UP, 1997. 90-110.
- Bronfen, Elizabeth. *The Knotted Subject: Hysteria and Its Discontents*. Princeton: Princeton UP, 1998.
- Brooks, Peter. *Body Work: Objects of Desire in Modern Narrative*. Cambridge: Harvard UP, 1993.
- Butler, Judith. *Gender Trouble: Feminism and the Subversion of Identity*. New York: Routledge, 1990.
- Chodorow, Nancy. *The Reproduction of Mothering: Psychoanalysis and the Sociology of Gender*. Berkeley: U of California P, 1978.
- Cooke, Rachel. "'I Used to Feel Like People Were Trampling All over Me to Get to My Husband. I Had Print Marks on My Body.'" *The Observer* 25 May 2008. <<http://www.guardian.co.uk/books/2008/may/25/paulauster>>.
- Diamond, Elin. *Unmaking Mimesis: Essays on Feminism and Theater*. London: Routledge, 1997.
- Didi-Huberman, Georges. *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière*. 1982. Trans. Alisa Hartz. Cambridge, MA: MIT Press, 2003.
- Elkins, James. *The Object Stares Back: On the Nature of Seeing*. 1996. New York: Harvest, 1997.
- Filipovic, Elena. "Surrealism in 1938: The Exhibition at War." *Surrealism, Politics, and Culture*. Ed. Raymond Spiteri and Donald LaCoss. Aldershot, Hants, England: Ashgate, 2003. 179-203.



- Foucault, Michel. "Nietzsche, Genealogy, History." 1971. *Language, Counter-Memory, Practice: Selected Essays and Interviews by Michel Foucault*. Ed. Donald F. Bouchard. Ithaca: Cornell UP, 1977. 139-64.
- . "A Preface to Transgression." *Bataille: A Critical Reader*. Ed. Fred Botting and Scott Wilson. Oxford: Blackwell, 1998. 24-40.
- Gubar, Susan. "'The Blank Page' and the Issues of Female Creativity." *Critical Inquiry* 8.2 (Winter 1981): 243-63.
- Hurley, Kelly. *The Gothic Body: Sexuality, Materialism, and Degeneration at the fin de siècle*. Cambridge: Cambridge UP, 1996.
- Hustvedt, Siri. "Being a Man." *A Plea for Eros: Essays*. New York: Picador, 2006. 95-103.
- . *The Blindfold*. New York: Picador, 1992.
- . "Extracts from a Story of the Wounded Self." *A Plea for Eros: Essays*. New York: Picador, 2006. 195-228.
- . *Mysteries of the Rectangle: Essays on Painting*. New York: Princeton Architectural Press, 2005.
- . *The Sorrows of an American*. London: Sceptre, 2008.
- . *What I Loved*. New York: Holt, 2003.
- . *Yonder: Essays*. New York: Holt, 1998.
- Irigaray, Luce. *An Ethics of Sexual Difference*. 1984. Trans. Carolyn Burke and Gillian C. Gill. London: Athlone, 1993.
- Russo, Mary. "Female Grotesques: Carnival and Theory." *Writing on the Body: Female Embodiment and Feminist Theory*. Ed. Katie Conboy, Nadia Medina, and Sarah Stanbury. New York: Columbia UP, 1997. 318-36.
- Schaps, Regina. *Hysterie und Weiblichkeit: Wissenschaftsmythen über die Frau*. Frankfurt/Main: Campus Verlag, 1992.
- Schneider, Manfred. "Hysterie als Gesamtkunstwerk: Aufstieg und Verfall einer Semiotik der Weiblichkeit." *Merkur* 39 (1985): 879-95.
- Shildrick, Margrit. *Leaky Bodies and Boundaries: Feminism, Postmodernism and (Bio)ethics*. London: Routledge, 1997.
- Showalter, Elaine. *Hystories: Hysterical Epidemics and Modern Culture*. London: Picador, 1997.
- Sontag, Susan. "On Photography." 1977. *A Susan Sontag Reader*. New York: Farrar, Straus and Giroux, 1982. 349-67.

Stallybrass, Peter, and Allon White. *The Politics and Poetics of Transgression*. London: Methuen, 1986.

Starobinski, Jean. "The Inside and the Outside." Trans. Frederick Brown. *The Hudson Review* 28.3 (1975): 333-51.