When BioShock was released in 2007, reviewers praised the moral complexities of the narrative and the game’s dystopian vision of what Ayn Rand dubbed the “virtue of selfishness”. What critics overlooked was the extent to which the disturbingly realistic artwork and musical score relied on found images and sound, including a recording of distressed breathing from a physician’s website, and digitised First World War medical photographs of soldiers with facial injuries. This article examines the implications of these acts of appropriation from a range of critical perspectives including Susan Sontag’s commentary on the representation of suffering; recent literature on the ethics of computer games; and an online discussion forum in which players of BioShock discuss the moral “grey areas” of the game.

In 1997 the Hayward Gallery in London put on a touring exhibition called The Quick and the Dead: Artists and Anatomy. In the book accompanying the exhibition Ludmilla Jordanova reflected on the points of contact and dissonance between these two pursuits, art and anatomy: a history encapsulated in the title of her essay, “Happy Marriages and Dangerous Liaisons”. The study and representation of the human body has, since the Renaissance, been constrained by practical and moral considerations — a limited supply of cadavers, the politics of patronage, codes of decorum governing the circumstances in which a naked or dead body could be seen or depicted — but it is only in the last forty or so years that artists have openly exploited the subversive potential of medical themes and images. “Indeed”, writes Jordanova, “in recent decades, medicine has supplied the materials with which artists can openly explore the troubling, unsettling aspects of bodily phenomena” (101).

This article concerns one such troubling liaison between medicine and art, although it is true that computer games are not often described as art, or have not been until very recently (for a reassessment, see Lanchester). Jordanova mentions the “huge impact of photography in making widely available a disturbing literalism”: literalism being one of the attributes most often associated with “dangerous” images (101). Game designers are equally invested in the production of reality effects through computer graphics and sound. In the case explored here, the use of medical records as source material was intended to enhance the game’s realism, and hence its potential to frighten (or “unsettle” to use the term preferred by contemporary critics). But there is another reason to begin an article on medical archives and digital culture with a discussion of artists and anatomists. One of the achievements of The Quick and the Dead was to dislodge the idea of historical context as something singular (as in “it must be seen in context”) and to suggest, instead, the multiplicity of contexts and audiences. “For each image”, Jordanova reminds us, “there are innumerable contexts, since they are constantly being transplanted and transformed, re-viewed by each generation” (112).
Rather dreadful subjects for the public view

Over the last few years my research has focused on medical images from the First World War. Some of the most intriguing examples are those in which art and medicine converge, as in Henry Tonks’ delicate pastel portraits of British servicemen with severe facial injuries and the equally exquisite — and unsettling — prosthetic masks made by the sculptor Francis Derwent Wood for some of these patients to conceal their disfigurement when surgical reconstruction was impossible (Figures 1 and 2; Biernoff “Flesh Poems” and “Rhetoric”). In both of these examples, art could be said to ameliorate the horrors of war, and to humanise men who had suffered what were considered at the time to be the most dehumanising of injuries. They are, to use Jordanova’s expression, examples of the happy marriage of art and medical science: collaborations defined by mutual regard and a common goal. In both cases, however, the sources that have survived contain assumptions about how, where and by whom the injured body may be seen — assumptions that have changed over time. This article considers the afterlives of some of these sources. When we encounter medical images in a museum or art gallery, or on a website like Morbid Anatomy, what kind of cultural and imaginative work do they perform? Are there ethical considerations raised by their redeployment or appropriation within the contexts of art and entertainment, education and academic research?

I started thinking about these questions when I discovered that case photographs from First World War medical archives had been used in BioShock, a computer game designed by Ken Levine and released in August 2007. It won the BAFTA for Best Game that year, among a constellation of other awards, and is ranked in the top five Xbox 360 and PlayStation 3 games to date. Over 4 million copies of the game have been sold, BioShock II was released in February 2010, and Universal Studios has plans for a film. Without giving the plot away, this is a spectacularly gory game, and some of the most memorable encounters are with genetic mutants known as splicers. It is these sub-human monstrosities that bear an uncanny likeness to Tonks’ portraits and the case photographs of the same men housed in the Gillies Archives at Queen Mary’s Hospital in Sidcup.

Tonks regarded his surgical studies as “rather dreadful subjects for the public view” (n.p.) and complained of “all the more tedious visitors” to the hospital for whom the drawings were one of the “sights” (Hone, 128). In recent years, though, the portraits have found a wider audience. They have been exhibited at the Venice Biennale, Tate Britain, the Science Museum in London, the Hunterian Museum at the Royal College of Surgeons of England, the Wellcome Collection, University College London, and the National Army Museum in Chelsea. In June 2007 the full series was made digitally available on the website of the Gillies Archives, and Pat Barker has spoken of them as a source of inspiration for her new novel Toby’s Room.

The photographs of Gillies’ patients have entered the public domain alongside the drawings. A selection of complete case files from the Gillies Archives can be viewed online as part of the Wellcome-funded Sci-Art collaboration, Project Façade, and case photographs have featured in several recent exhibitions including Faces of Battle at the National Army Museum and War and Medicine at the Wellcome. Even more than the drawings, the photographs question the limits and propriety of spectatorship. At least with the pastels, one is aware — almost physically — of Tonks’ attentiveness, the quality
FIGURE 1  Photograph of Henry Tonks in his room at The Queen’s Hospital, Sidcup, 1917.
FIGURE 2  Horace Nicholls, *Repairing War’s Ravages: Renovating facial injuries. Captain Derwent Wood painting the plate*. Imperial War Museum, Q.30.457. © IWM.
of the artist’s touch and the duration of his gaze. His authority, as an artist and surgeon, licenses our own interest. The photographs appear unmediated by any aesthetic concerns: physically and psychologically naked.

When I teach this material (usually to history of art students), I tend not to use the most harrowing images of facial injury and reconstructive surgery. Apart from my own discomfort, I worry how my students will respond: with pity? With disgust? Fascination? Should I name the patient, or protect his anonymity? Would he, or his relatives, want the photograph to be shown in a non-medical context? Is there a happy ending — a redemptive “after surgery” to counterbalance the “before”? These questions might give me pause for thought, but they generally remain unspoken. Here, though, I have chosen one image precisely because it confronts the interested, curious or appalled viewer with the problematic nature of spectatorship and empathy. In an interview with Marq Smith, W.J.T. Mitchell speculated that “the most interesting new questions for visual studies . . . will be located at the frontiers of visuality, the places where seeing approaches a limit” (36). I would suggest that medical images are one such frontier: an ethical borderland in which legal definitions of privacy, personhood and human rights compete with the contemporary politics of witnessing, memory and memorialisation; a space of fantasy where fascination and aversion are found in equal measure.

The photograph in question (Figure 3) is a pre-operative record of one of Gillies’ patients, who was also drawn by Tonks: Henry Ralph Lumley. Figure 4 shows Lumley before his injury. These photographs, like the other images reproduced in this article, can be found quite easily on the web, along with Lumley’s case notes, a series of photographs documenting the operations, and Tonks’ portrait.7 When I last checked, the pre-operative photograph had 254,405 hits, so either it has been seen by a considerable number of individuals, or there are people — like me — who’ve returned to it repeatedly, for whatever reason.

Henry Lumley was admitted to the specialist hospital for facial casualties in October 1917. In his notes, Harold Gillies describes Lumley’s condition on admission: the skin and subcutaneous tissue of his face had been destroyed by severe petrol burns, including the left eye and eyelid, both eyebrows, and the nose down to the cartilage. A Second Lieutenant in the Royal Flying Corps, Lumley had been wounded on 14 July 1916: by the time he came to Sidcup, he had lived with his injuries for over a year. No further mention is made of the accident in the case notes, but a genealogist working on Project Façade looked up Lumley’s service records in The National Archives.8 A former operator with the Eastern Telegraph Company, Lumley was selected for the RFC’s Special Reserve of Officers in April 1916. He never made it out of England though: a letter from the Central Flying School in Upavon, dated 9 August 1916, reveals that the accident happened on the day of his graduation.

The two operations at Sidcup, in November 1917 and February 1918, are documented in detail in the case notes, and revisited in Gillies’ 1920 textbook, *Plastic Surgery of the Face*, which is now out of copyright and freely available online.9 A diagram shows Gillies’ ambitious plan to remove the existing scar tissue and raise a large flap of skin from Lumley’s chest with pedicle tubes providing a further blood supply to the graft (Figure 5). Despite ongoing complications, the initial signs were encouraging, but by day three after the second operation the graft had developed gangrene. Henry Lumley died twenty-four days later on 11 March 1918. He was 26.
FIGURE 3  Photograph of patient before surgery, Lumley case file. Gillies Archives, Queen Mary’s Hospital Sidcup. Photograph courtesy of the Gillies Archives.
FIGURE 4  Pre-injury photograph, Lumley case file. Gillies Archives, Queen Mary’s Hospital Sidcup. Photograph courtesy of the Gillies Archives.
FIGURE 5  Notes from Lumley case file. Reproduced with permission of the Gillies Archives, Queen Mary’s Hospital Sidcup.
The burdens of representation

What do we gain from seeing images like these? What would constitute their proper — or improper — use? Susan Sontag’s book Regarding the Pain of Others is probably the most famous attempt to answer this question. In it she returns to the scene of her earlier study, On Photography, and reconsiders the claim, almost three decades on, that we (in the West) have become desensitised to the suffering of others; that this moral anaesthesia is directly attributable to the proliferation of images of appalling suffering. In On Photography Sontag pointed out an innate paradox of photographs: that they could, simultaneously, make an event more real than if one had never seen the photograph; but also — through “repeated exposure” — less real (20).

Regarding the Pain of Others is not easy to précis. Despite its urgency and brevity it is a book in which conclusions proliferate. Here are just a few of Sontag’s arguments, each one a serviceable truism:

No “we” should be taken for granted when the subject is looking at other people’s pain. (6)

Being a spectator of calamities taking place in another country is a quintessential modern experience. (16)

The problem is not that people remember through photographs, but that they remember only the photographs. (79)

Harrowing photographs do not inevitably lose their power to shock. But they are not much help if the task is to understand. (80)

Our sympathy proclaims our innocence as well as our impotence. (91)

Sontag at first seems to be making a case against the photographic portrayal of suffering (interestingly, she is less sceptical about art). Ultimately, however, she defends photography. “Let the atrocious images haunt us” is one of the most unequivocal statements in the book: “No one after a certain age”, she argues, “has the right to this kind of innocence, or superficiality, to this degree of ignorance or amnesia” (102). She is talking about atrocity and “human wickedness” at this point, rather than pain and tragedy in a broader sense, but perhaps troubling reminders (and unpalatable histories) are preferable to the comforts of forgetfulness. Photographs — whether personal mementos or public archives — might be mute or misleading guides to history, but they are better than nothing.

I don’t think Sontag is advocating the use of photographs as aides-memoire here, as Jeremy Harding suggests in his review of Regarding the Pain of Others. The term she uses is “secular icons” (107). Approachsed as objects of contemplation, some photographs have the capacity, she insists, to “deepen one’s sense of reality”. Physical context is crucial, though: pursuing the analogy with religious art and ritual, she despairs of the “ambience of distraction” that pervades contemporary museums. She wonders if it is “exploitative to look at harrowing photographs of other people’s pain in an art gallery” (107). Instead, she advocates more intimate, quieter settings, “the equivalent of a sacred or meditative space” (107). Materiality is important, too: the feel of “rough newsprint”, the ritual
of looking through an album. Even a book of photographs affords an immediacy and intimacy that transform the disembodied “image” into a material trace: a relic.

There is, however, a caveat. Some photographs are so horrific, Sontag reasons, that it is almost impossible to look at them (74). They seem immune to sentimentality and spectacle. The three examples she gives are historically disparate: photographs taken in Hiroshima and Nagasaki in August 1945 that record men, women and children with their faces burned — like Lumley’s — beyond recognition; photographs of the Rwandan genocide, displaying the mutilated faces of Tutsi victims of machete attacks; and the faces in Ernst Friedrich’s 1924 anarcho-pacifist album, *Krieg dem Kriege! (War Against War!).* Friedrich reproduced restricted First World War medical photographs, including 23 images of German soldiers with severe facial injuries: the exact equivalent of the material in the Gillies archives. By confronting the public with these *Schreckensbilder* — horror pictures — he hoped to stem the rising tide of German militarism (hence “War Against War”).

There is, Sontag insists:

shame as well as shock in looking at the close-up of a real horror. Perhaps the only people with the right to look at images of suffering of this extreme order are those who could do something to alleviate it — say the surgeons at the military hospital where the photograph was taken — or those who could learn from it. The rest of us are voyeurs, whether or not we mean to be. (37–38)

When the photographs of Lieutenant Lumley and Gillies’ other patients were taken, they were certainly never intended for the curious or contemplative or horrified gaze of the general public: not because of patient confidentiality laws, which didn’t exist, but because of the nature of the injuries, which were considered potentially demoralising. The public response to facial disfigurement was then (and still is) characterised by visual anxiety. During and after the First World War, this taboo took many forms: the physical and social isolation of facial casualties, both in specialist hospitals and in the community; the personal and professional efforts made to conceal disfiguring injuries — from simple patches to delicately crafted portrait masks — and the relative invisibility of disfigured servicemen in the press and propaganda. Patients refused to see their families and fiancées; children reportedly fled at the sight of their fathers; nurses and orderlies struggled to look their patients in the face.

In *Dismembering the Male: Men’s Bodies, Britain and the Great War,* Joanna Bourke observes that depictions of the wounded male body were dominated by an iconography of heroic sacrifice that denied the “obscenity” of mutilation and death on the battlefield (213). We might take this observation a step further. In Christian art, the face is a site of transcendence, even — or especially — at the moment of the body’s destruction. In its inviolate wholeness, the face of the crucified Christ denotes the incorporeal self; the soul or spirit: separable from and emphatically other than the suffering, mortal, earthbound body. In this particular iconographic tradition, facial mutilation is impossible to reconcile with the ideal of patriotic self-sacrifice. Rather than being seen as evidence of bravery or virtue, facial mutilation was feared as a fate worse than death (Biernoff “Rhetoric”). Disfigurement was a loss — a sacrifice — that could never be commemorated in a culture that, as Gabriel Koureas has shown, institutionalised the “sanitised and aestheticised
body of the ‘picturesque soldier’” while banishing — at least in the public sphere — the private memories of pain and mutilation (186) (Figure 6).

This tangled history of symbolism and aversion creates a dilemma for historians, and for anyone dealing with the visual record of facial mutilation and disfigurement in the contexts of publication, exhibition or education. The stigmatisation and censorship of servicemen with facial injuries was, and is, clearly reprehensible; and there is a powerful case for making disfigurement and disability (and “difference” in general) much more visible. It is in this spirit that the British charity Changing Faces launched its Face Equality campaign in May 2008, challenging negative perceptions of facial disfigurement. One of their strategies is to encourage the media, film industry and advertisers to “adopt more factual and unbiased portrayals of people with disfigurements”.16 One of the studies they cite — analysing 8,650 hours of British television — recommends (amongst other things) “more people with disfigurement in front of and behind the camera” (Wardle and Boyce, 137). More than 11,000 operations were performed at The Queen’s Hospital in Sidcup on some 5,000 servicemen between 1917 and 1925 (Bamji, 495). The psychological toll of their injuries was never assessed. We cannot, now, restore these men to their place in society; but we might give them a place in history.

Yet representation — indeed visibility itself — can be a burden as well as a privilege. Writing in the 1980s, John Tagg detailed the “burden of subjection” implicit in legal, medical and police photography in the last decades of the nineteenth century (64). The wish not to be represented — not to be exposed, or made public, or held up as an example, or pitied, or studied — is surely something to be mindful of, particularly in cases like Lumley’s, where there is no possibility of collaboration or consent.

The afterlife of Henry Lumley

While I was looking online for images from the Gillies Archives, I came across a discussion forum hosted by 2K Games. 2K — formerly Irrational Games — are the developers of BioShock, a first-person shooter critically acclaimed for its narrative complexity and artistic ambition. This is how the game’s copywriters describe the story:

After your plane crashes into icy uncharted waters, you discover a rusted bathysphere and descend into Rapture, a city hidden beneath the sea. Constructed as an idealistic society for a hand-picked group of scientists, artists and industrialists, the idealism is no more.

Now the city is littered with corpses, wildly powerful guardians roam the corridors as little girls loot the dead, and genetically mutated citizens ambush you at every turn. BioShock forces you to question the lengths to which you will go and how much of your humanity you will sacrifice . . . to save your own life.17

The online discussion is headed “Project Façade vs Bioshock?” and begins on 18 July 2007, amidst the flurry of publicity just prior to the game’s release.18 The original posting is simply a set of links: the first takes you to Project Façade, the second to Henry Lumley’s photograph, the third to one of the concept drawings for BioShock (Figure 7), and the last two to stills from the game itself (Figures 8).19 The debate circles around
FIGURE 6  A young soldier lies dying in a woman’s arms on a deserted battlefield. Colour halftone, c. 1915, after Dudley Tennant. 32.7 x 45.3 cm. Published by S.H. & Co. Ltd, London and Manchester. Wellcome Library, London.
a series of questions: Did the game’s designers use real people (Lumley is not alone) as inspiration for the monstrous inhabitants of Rapture? Does that matter? Will it change the way you play the game, knowing that the enemy you are shooting, bludgeoning or blowing up is based on someone who was shot, burned or blown up for real? Are there, in other words, ethical limits to artistic “inspiration”, on the one hand, and immersiveness or realism on the other?

No consensus is reached regarding the moral rightness or wrongness of BioShock. The discussion thread offers a snapshot of ethical reasoning in action, as a process of working through an open-ended series of questions, rather than the application of set of agreed principles, as in a legal code or religious text. One has to bear in mind, of course, that this is a site for players, who are probably going to buy and enjoy the game regardless. For them, BioShock’s “creepiness” and moral ambiguity are its greatest virtues. “This just excites me even more”, writes “Poopypooperson” (the most dogged witness for the defence): “the level of detail they put into the game, that these portraits existed before! Should make it even scarier playing it in the dark at midnight because of all this historical depth to the design”.

In the grey zone

There have been several sustained attempts to think through the ethical implications of violent computer and video games, including a special issue of the International Review of Information Ethics devoted to “The Ethics of E-Games” (2005). Variously informed by moral philosophy, computer game theory, literary and cultural studies, phenomenology and social psychology, this nascent interdisciplinary field has several distinguishing features: a fairly unanimous desire to defend computer games and their players from tabloid stereotypes of mindless and addictive violence; and an understanding of ethics and morality as something internal to the game experience: the interaction between a designed object (with elements of narrative, game world and game play) and a rational, creative, morally reflective subject (the player). Miguel Sicart’s book, The Ethics of Computer Games, is the most recent contribution to this project. Taking his cue from virtue ethics (a theory first formulated by Aristotle), Sicart asks a simple question: does playing a computer game make you a good or bad person? Is it, in other words, a virtuous thing to do? He concludes that the player of a computer game is “a moral user capable of reflecting ethically about her presence in the game, and aware of how that experience configures her values both inside the game world and in relation to the world outside the game” (17).

It would be hard to disagree with Sicart that computer games “are now what cinema and rock and roll once were: the bull’s-eye of morality” (3). Why this should be the case he doesn’t say. An exercise in applied philosophy, The Ethics of Computer Games does not, unfortunately, pursue historical questions of cause and context. It is an approach that has its uses — not least in defusing moral panic — but it produces a peculiar blindness when it comes to the question of violence. In Sicart’s vivid analysis of the game world, the “world outside the game” hardly exists at all. In a book on ethics this is problematic to say the least, because it fails to consider any possible interaction between fantasy and reality. The psychological effects of playing violent computer games — and their wider social ramifications — simply remain questions in need of “further development” (228).
FIGURE 7 Concept artwork for the ‘Toasty’ model in *BioShock*. Take 2 Games.23
FIGURE 8  *BioShock* screenshot. Take 2 Games.²⁴
BioShock is the perfect case study for Sicart because moral choices and consequences are built into the game, making it a kind of labyrinthine Pilgrim’s Progress. Rapture — a darkly sumptuous “City of Destruction” — is a testament to the corrupting power of human greed and untrammeled individualism. Built in 1946 as a utopian experiment, it is now (circa 1960 in the game) in a state of terminal but beautiful decay. BioShock’s Lead Designer, Joe McDonagh explained in an interview that they wanted to:

create a game which deals with moral shades of grey and doesn’t try and patronise us with two-dimensional cut outs. . . . We thought that gamers are mature enough, sophisticated enough to deal with sophisticated moral issues.

The artists who worked on BioShock are surprisingly open about their sources, given their apparent lack of concern for copyright protocol. In the Making of BioShock DVD, which has been posted on You Tube, Nate Wells (one of the technical artists) admits — slightly uncomfortably — that the Project Façade website provided “disturbing inspiration” for their splicer artwork. Of course, artists since the Renaissance have used medical subjects and images for inspiration: from Leonardo da Vinci’s grotesques to Francis Bacon’s collection of medical textbooks. When the contents of Bacon’s studio in Reece Mews were posthumously catalogued by archaeologists, one of the items that came to light was a chromolithograph of diseased gums that Bacon had torn from a copy of the Atlas-Manuel des maladies de la bouche, a French translation of an 1894 German medical textbook, acquired while Bacon was in Paris in 1927. The scrap of paper shows “Fig. 1”:

a heavily retouched photo of lips prised apart by forceps to reveal gums disfigured by an abscess, chipped teeth, and froth about the tongue. The chromolithograph with its flesh reds stands as an oval vignette on the creamy fragment of coated paper. But then the scrap has been scuffed by brushes loaded with green and cerulean; there are fingerprints to the right in blue-black and mauve, little splats of yellow and scarlet.

The gaping mouth of the Atlas-Manuel reappears throughout Bacon’s oeuvre, most famously in the central canvas of Three Studies for Figures at the Base of a Crucifixion (1945) and the “screaming popes” of the 1950s. It cannot have crossed his mind to seek permission. What is the difference between Bacon’s fascination with those “beautiful” diseased mouths — as he described them in a 1966 interview with David Sylvester — and the use of Gillies’ case photographs in BioShock?

Is the difference that one is art, the other entertainment? Although the distinction is ultimately unsustainable, it is still widely believed that “art” is morally beneficial (except perhaps when it is too entertaining) and that computer games are not. In art (it is said) cruelty and violence are sublimated or contemplated rather than simply enjoyed. There is, however, a more tenable difference, to do with recognition and identity. To begin with, the mouths in the Atlas-Manuel are anonymous — unlike Gillies’ patients. We recognise faces and names, and familiar voices, but not (unless you are a dentist or
forensic pathologist) teeth or gums. Furthermore, the creative distance between the coloured plate in the textbook and the eventual painting makes recognition impossible: even a dentist would fail to identify Bacon’s sources from his operatic deformations of the human. The problem with *BioShock* is that the splicers are identifiable individuals, who — if they were alive — would be entitled to sue for defamation or slander. All of Gillies’ patients are now dead, but many live on in the memories of their children and grandchildren. For them, *BioShock* can only be a perverse transgression of the pledge not to forget.

**Reality effects**

Neither the Gillies Archives nor Project Façade were set up to deal with commercial clients or the finer points of copyright law. Curious how a larger organisation might have responded, I contacted the Head of Wellcome Images, Catherine Draycott. The Wellcome has over 40,000 clinical and biomedical images in its online database, alongside over 100,000 photographs of paintings, prints, drawings, manuscripts, rare books and archive material from the Wellcome Library collections. A search for historical images of plastic surgery turns up an album of First World War photographs from King George Military Hospital (later the Red Cross Hospital) in London: pictures that would have served the purposes of *BioShock*’s art department just as well as those featured in Project Façade. Wellcome images are generally free of charge for study, teaching and academic publication, but commercial use is chargeable and governed by terms and conditions. The Wellcome’s definition of “commercial” is specific and wide-ranging, covering everything from the reproduction of images in medical textbooks to “artist reference” fees for CGI and special effects. If a makeup artist on the BBC hospital drama *Casualty* needs to make a gunshot wound look realistic, they can — in the absence of an actual shooting — use the service provided by Wellcome Images. Would Wellcome have permitted the developers of *BioShock* to use their photographs in the game? No, said Draycott, they wouldn’t: even though such a request might fall under the rubric of “artist reference”, it would have been considered unethical. The comparison she made was Benetton asking for images for an advertising campaign “for shock value”. Even if the patient could not be identified, “the usage would still have been unethical”.

Pending a trans-Atlantic copyright case, where does this leave Henry Lumley? Should we conclude that his ghostly presence in *BioShock* only “deepens the moral grey areas” of the game, to quote one blogger? One of the problems with this conclusion is that it fails to address the concerns raised by players in the discussion forum, who point to a troubling interaction — or blurring — of real and imaginary worlds. In contrast to Sicart, who brackets the world outside the game, what disturbs the players (or some of them) is precisely the intrusion of the historical Real. Here is the case against *BioShock*, from someone whose *nom de plume* is Nias Wolf:

I just feel a little bad that we are using these poor souls (who fought in a war by the way) for entertainment. If I was disfigured horribly, and saw my face being portrayed [sic.] as a monster, I would be greatly offended.
A few posts later he (or she) adds: “Honor the dead people. And honor soldiers too. I just want to keep that in mind.”

One of the genuinely innovative — and truly eerie — things about *BioShock* is the way it incorporates found objects into the game world. One of these objects is Lumley’s photograph, but the commitment to realism is not confined to the game’s visuals. Each level or “deck” in Rapture has a different theme: the fisheries, the medical deck, arcadia all have distinctive musical and ambient elements: aleatoric music, solo cello and violin, and jazz piano are interspersed with recordings of buoy bells and boats, the distant sound of a concertina, footsteps, a car horn, voices. “I actually found the sound of an insane woman on the internet”, Garry Schyman explained, “and messed with her voice digitally and infused it into the score and it becomes a very scary element”. Schyman, who composed the soundtrack for *BioShock*, cites *musique concrete* as an important influence on his score. He was asked to produce something “radically different . . . unique and experimental”. The resulting montage of just under 80 minutes of orchestral music and incidental sound reflects his “very realistic approach”.

In a lecture at the annual Game Developers Conference in 2007, Schyman gave his audience a sneak preview of the soundtrack. One of the clips featured what sounded like a man’s dying breaths. “I found a website of some doctor at a university”, Schyman explained over the sound of laboured breathing. “[T]his is diseased breathing. I took his sick people breathing sounds and used it. I don’t know if that’s a copyright infringement.” We will probably never know who the breathing man is, but his spectral presence in *BioShock* is as haunting as any of Sontag’s photographs. Breath has ancient associations with the spirit or soul: our word “spirit” comes from the Latin *spiritus*, meaning “breath”. The Greek term *pneuma* has the same double meaning. The pre-Socratic philosopher Heraclitus (535–475 BC), for example, believed that the afterworld was a place of smoky exhalations, where the souls of the dead intermingled (Kahn 256–59). The breathing in Schyman’s score is a recording of a recording; just as Lumley’s presence in the game is a computer animation of a drawing of a photograph, but there is something about these particular found objects that transcends the distance between the original and its representation. They perform what Roland Barthes called a “reality effect” — and in the process they bring us into uncanny proximity with the dead and the dying.

Unmoored from their original clinical contexts, Lumley’s image and the dying man’s breath become signifiers of disfigurement and abjection. They no longer possess the ability to speak of particular injuries and illnesses, or the experience of pain, endurance or resignation. They are not “medical records” or “documentary photographs”: institutional and discursive categories that belong to a less fluid world. As a source of “disturbing inspiration”, the faces taken from Project Façade perform a job in the present rather than illuminating the past. There is an unfortunate irony here: the photographs taken at the Queen’s Hospital record the effects of weapons that were designed to mutilate and kill. Their human subjects are redeployed within *BioShock* as targets.

Allan Sekula referred to the photographic archive as a “‘clearing house’ of meaning” (“Reading an Archive” 445), but in these cases the archive also seems an appropriate resting-place, something perhaps best left undisturbed. Sekula, of course, was thinking of the photographic archive (as institution and aspiration) in its repressive nineteenth-century incarnations, as an apparatus of surveillance, classification and social control.
Photography, he argues in “The Body and the Archive”, “came to establish and delimit the terrain of the other, to define both the generalized look — the typology — and the contingent instance of deviance and social pathology” (7). Medical photography is part of this history, but as I have argued elsewhere, it is far from monolithic in its aims or methods (Biernoff, “Flesh Poems” 9–12).

In a recent special issue of this journal on “Photography, Archive and Memory”, Karen Cross and Julia Peck note the persistence of Sekula’s Foucauldian vision of photography. It has become difficult, they write in their editorial, “to conceive photography and the archive to involve anything other than the negative operations of power” (128). While acknowledging the necessity of the critique of photography pursued by Sekula and Tagg, amongst others, Cross and Peck set a new agenda: one that would begin with the excluded and the overlooked. A counter-archive, if you like, of residual or repressed images, memories and meanings. It is a project, they suggest, that resonates with the “growing desire to salvage images produced in ordinary and everyday circumstances by ordinary people” — from the photos in family albums to the old black and white prints for sale at antique markets (128).

On the surface there is nothing to connect our case study to either of these approaches to the photographic archive. The makers of BioShock are not interested in challenging the ideology or normalising effects of medical archives: if they were aware of the Gillies Archives at all, it can only have been in the partial and highly mediated form of Project Façade. BioShock’s investment in historical veracity is entirely stylistic. As Frederic Jameson observed of nostalgia films and historical novels, what matters is conveying “pastness” (20). (The BioShock concept artist Robb Waters also mentions using “old mug shots from the 1940s”.37) On the other hand, trawling the Internet for old medical and police photographs is not so different from rummaging through boxes of photographs at flea markets — or buying photographic memorabilia on ebay. If there is indeed a growing interest in (and market for) historical photographs, BioShock is part of the trend.

There is no definitive answer to the questions posed at the beginning of this article: what do we gain from looking at images like these, and what would constitute their proper (or improper) use? Sontag, as we have seen, emphasises the contexts of viewing, but she also distinguishes between “photographs with the most solemn or heart-rending subject matter” — which might, in the right circumstances, serve as secular icons — and those that shock and shame us with their depiction of “real horror” (Regarding the Pain of Others 37, 108). Unless we are in a position to do something about the suffering documented in these “extreme” images, we are simply voyeurs. Against this emotional taxonomy of images (moving versus shocking) it may be argued that “real horror” has a subjective element. Sontag’s selection of most shocking photographs might not be yours or mine.

An alternative approach to such images might pay closer attention to the manifold ways in which suffering is mediated, and the circumstances under which it becomes possible to look (to really look) at horror. Tonks’ drawings, for example, mediate and contain suffering in a way that the case photographs of the same patients cannot, but the intimacy and beauty of the drawings is not the exclusive preserve of art. As an image, “something may be beautiful — or terrifying, or unbearable, or quite bearable — as
it is not in real life” (Sontag 68). There are other ways of mediating horror: through narrative or autobiography, or by formalising the encounter between viewer and image, as in Sontag’s example of the surgeon in a military hospital. Her disquiet, however, is provoked by a different kind of mediation, the “marketing of experiences, tastes and simulacra” in the name of art, education and entertainment (109). There seems “no way”, she concludes, “to guarantee reverential conditions in which to look at these pictures and be fully responsive to them” (108). BioShock certainly denies us the possibility of “regarding” Lumley’s pain in any meaningful sense, but it also complicates the idea of the simulacrum as a representation that replaces the real.

Within the game — as well as in the archive and the antiques and collectibles market — the value of the photographic image depends on its perceived authenticity and indexical relationship to the subject. If it turned out that the resemblance to Henry Lumley was coincidental, or that Schyman had used actors, things would be completely different. When Nias Wolf writes “honor the dead”, I suspect that what he really means is “honor the remains of the dead”. His concern with the appropriate use of a photograph stems from the belief that photographs “capture” their subjects; that there is, magically, something of us in our likenesses. The way personhood is understood in law is very different. The Human Tissue Act, for example, works on the premise that an individual is the sum of his or her body parts. Thus defined, the “person” is protected by the legal requirement of consent. The Act is silent, though, on the subject of photography and film, including clinical images and images of human remains.38 It seems to me that Lumley and the breathing man point us towards a more dispersed understanding of personhood than that enshrined in the law: one that would encompass facial likeness and perhaps even the historical connotations of breath. If BioShock is unethical, it is surely because it violates a common feeling that photographs of suffering somehow contain or embody their subjects; and that they therefore carry a burden of care.

Acknowledgements

Several people have played a part in the evolution of this article: in particular, Andrew Bamji, Curator of the Gillies Archives; Paddy Hartley, artistic director of Project Façade and co-curator of the exhibition Faces of Battle at the National Army Museum; Simon Chaplin and Catherine Draycott at the Wellcome Library; Nick Lambert, Principal Investigator on the AHRC Computer Art & Technocultures Project (CAT); James Partridge and Jane Frances of Changing Faces, and Claudia Stein. I am very grateful for their comments.

This work was supported by a Wellcome Trust Research Leave Award [grant no. 082864].
Notes

1 Launching in April 2007 by Joanna Ebenstein, a Brooklyn-based graphic designer and photographer, the Morbid Anatomy website is devoted to “the interstices of art and medicine, death and culture”.

2 Game Rankings: http://www.gamerankings.com/ (accessed 8 Feb. 2011). The BioShock II website claims more than 50 Game of the Year awards for the franchise.

3 http://www.2kgamesinternational.com/uk/games/bioshock2/ (accessed 8 Feb. 2011).

4 http://www.gilliesarchives.org.uk/Tonks%20pastels/index.html (accessed 8 Feb. 2011).

5 http://www.readinggroupguides.com/guides_L/life_class2.asp (accessed 8 Feb. 2011).

6 Project Façade: http://www.projectfacade.com (accessed 8 Feb. 2011). Faces of Battle, Nov. 2007–Aug. 2008 NAM, London. War and Medicine, Nov. 2009–Feb. 2009, Wellcome Collection, London.

7 http://www.projectfacade.com/index.php/?case/C81/, http://www.projectfacade.com/index.php/?galleries/comments/lumley, http://www.gilliesarchives.org.uk/Tonks%20pastels/content/tonks67_lumley_large.html (accessed 1 Oct. 2009).

8 The relevant records are: WO 372: Medal Index Card entry; WO 339/57830: Officers’ service records; and MH 106/2204: Medical Sheets: Royal Flying Corps, I–O. I am grateful to Paddy Hartley of Project Façade for this information.

9 Canadian Libraries Internet Archive: http://www.archive.org/details/plasticsurgeryof00gilluoft (accessed 8 Feb. 2011).

10 The phrase “let the atrocious images haunt us” appears in Sontag’s preface for a 2001 book of Don McCullin’s photographs. Under the title “Witnessing”, the essay concludes: “A photograph can’t coerce. It won’t do the moral work for us. But it can start us on the way.”

11 Sontag acknowledges the influence of Brink and Zelizer.

12 The “Face of War” photographs in Friedrich’s book are mentioned several times (see 13–14 and 37).

13 The “morale of the fighting soldier who dreaded facial disfigurement” was a reason for not returning disfigured servicemen to active service (Pound 39).

14 In a recent study of responses to the portrayal of disfigurement on television, focus group participants spoke of disfigurement as a “last taboo” compared to the representation of other minority groups (Wardle and Boyce 4).

15 “Always look a man straight in the face”, one Sister told her staff. Nurse Grace Bignold’s recollections of the 3rd London General Hospital are reported by Macdonald (149–50).

16 Face Equality information leaflet, Changing Faces.

17 http://www.2kgames.com/#/games/bioshock (accessed 30 June 2009).

18 “Project Façade vs BioShock?” http://forums.2kgames.com/forums/archive/index.php/t-1836.html (accessed 30 June 2009)
The link to the concept art is now inactive, but the artwork is reproduced in the BioShock players’ manual (Walsh 51). Examples can also be seen on the BioShock Wiki: http://bioshock.wikia.com/wiki/Toasty (accessed 8 Feb. 2011).

In Lumley’s case there are no known relatives. In order to protect the privacy of the other families, no identifying details have been included here.

The term “ethics” is used in this article (as in the OED) to refer to a set of moral principles or rules concerning human conduct. Both ethics and morality are taken to be socio-historical formations. In this, my approach differs from much of the philosophical literature on ethics.

Pornography is mentioned here too, as deserving of further study, particularly in light of cultural preferences and prohibitions. Sicart notes that “Japanese pornographic games could scandalize any given European culture, while Western role-playing games are often deemed uninteresting in Japan” (228).

Source: http://img58.imageshack.us/img58/4852/bioshock200706071105476pl3.jpg. Please note that this link is no longer active.

Source: http://files.xboxic.com/xbox-360/bioshock/bioshock-screen-2.jpg. Please note that this link is no longer active.

The literary references most often mentioned by reviewers are George Orwell and Ayn Rand, the latter embodied in the game by Rapture’s megalomaniac creator, the business magnate Andrew Ryan.

Joe McDonagh interviewed by Patrick Kolan, IGN AU. “AU BioShock Q&A: The Moral Dilemma.” http://uk.pc.ign.com/articles/798/798746p1.html (accessed 8 Feb. 2011).

Bioshock Making Of (view from 5:50): http://www.youtube.com/watch?v=FQ7YT8Ajr0c (accessed 8 Feb. 2011). Wells credits Ken Levine with the discovery of Project Façade. The monstrous portrayal of plastic surgery within the game serves as an allegory for the progressive commodification of the body/self in late capitalism. For an interesting parallel, see Jones.

On Leonardo da Vinci’s Grotesque Heads, see: Clark, 120–24; Gombrich; and Clayton.

The conversation took place on 7 Dec. 2009 at the Wellcome Trust, London.

Wellcome Library, Archives and Manuscripts RAMC 760. The photographs were taken by Dr Albert Norman, Honorary Scientific Photographer, between 1916 and 1918.

The public part of the database is divided into “historical” and “contemporary” images. A third category — clinical images — is password protected and restricted to registered users (mostly doctors, public health officials and medical publishers). Wellcome Images also does specific searches on behalf of commercial clients. Where a patient can be identified, their permission is required before a photograph can be published.

Catherine Draycott, email correspondence, 17 Dec. 2009.

“Project Façade vs BioShock?” not_john_galt, 19 July 2007, 1.23 pm. That BioShock deals in “moral grey areas” is a claim made repeatedly in reviews and publicity. In a preview on Yahoo Games, for example, Ken Levine promises “plenty of moral ambiguity. . . . We wanted a different system than the typical dark side/light side thing. . . . For us, it’s all grey side”, 3 July 2007. http://videogames.yahoo.com/printview_feature?eid=523932 (accessed 1 Dec. 2009).
The lecture can be downloaded from the GDC website. The distressed breathing is at 32:20–33:35.

Bioshock Making Of (view from 5:50): http://www.youtube.com/watch?v=FQ7YT8Ajr0c (retrieved 8 Feb. 11).

Interestingly, the Science Museum in London does take account of “cultural objections or taboos surrounding the representation of remains, as well as the display of remains themselves.” However, this sensitivity extends only to images of non-European remains. http://www.sciencemuseum.org.uk/about_us/about_the_museum/collections/human_remains/human_remains_policy.aspx (accessed 8 Feb. 2011).

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