that meta-narratives of social control do not work completely for the asylums here, as elsewhere.

Overall, this splendid study shows that there were several planks to colonialism as witnessed through medical and social institutions. Smith has found rich material to position the health institutions of the British Caribbean inside a potent and relevant discussion of the interrelationships between ‘race’, class, gender and colonialism.

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Samuel J.M.M. Alberti (ed.), War, Art, and Surgery. The Work of Henry Tonks and Julia Midgley (London: The Royal College of Surgeons of England, 2015), pp. 368, paperback, ISBN: 978-1-904096-23-8.

Most historians of medicine will be familiar with the works of surgeon and artist Henry Tonks. In 1916 he was posted to the Cambridge Military Hospital in Aldershot, where he painted portraits of men with severe facial injuries. Later in the war he spent time at the Queen’s Hospital in Sidcup (Kent) and then (after he was appointed an official war artist) in France. Using pastel – a medium that had been associated with portraiture from the eighteenth century, largely due to its ability to represent fleshy tones – Tonks created some of the most powerful representations of the destructive impact of war on men’s bodies. His portraits also served as a medical record of pioneering techniques of plastic surgery that would be of immense value to trainee surgeons. As scholar Suzannah Biernoff argues in her elegant, short essay in this volume, Tonks’s drawings are powerful because they are a ‘material transcription of a gaze that is at once clinical and arresting’. Facial disfigurement is one of the most stigmatised of all wounds, yet Tonks’s portraits insist that we look closely and calmly. What we see disturbs the notion of an individual, stable identity that can be ‘read’ through the face-to-face encounter.

What does this volume bring that will be new to those of us who are already acquainted with the heroic history of plastic surgery during the First World War and the art of men like Tonks? A great deal. Crucially, this is the first time that all of Tonks’s pastel portraits of facial wounds have been brought together, in colour, in one volume. Until recently, these portraits had been viewed only in clinical settings and by relatively few people. It was not until 2002 that they were shown publicly (at University College London), and in 2014 and 2015 the Royal College of Surgeons of England marked the centenary of the First World War in a spectacular exhibition. In this volume, the portraits are set alongside information about the individual men portrayed, often with before-and-after photographs and medical diagrams of the surgical procedures carried out.

The book’s short essays provide readers with reflections about the aesthetics of disfigurement. It is important to observe that Tonks always emphasised the artistic aspects of his work. In 1916 he boasted in a letter to a friend that:

I have done some . . . rather fine pastel fragments! One I did the other day of a young fellow with a rather classical face was exactly like a living damaged Greek head as his nose had been cut clean off just where the noses of antiques generally are cut off.

Indeed, Tonks worked alongside reconstructive surgeons who were equally obsessed with the beauty and symmetry of classical forms. The pioneering plastic surgeon
Sir Harold Gilles (who was also a painter) optimistically hoped that at some time in the future his ‘strange new art’ might actually be able to chisel the faces of men who had been disfigured into forms reserved for Greek gods.

The book is not only an exploration of Tonks’s First World War drawings. It is also a dignified, twenty-first-century response to Tonks’s work. One half of the book is dedicated to the artist Julia Midgley, who drew the wounded men being rehabilitated at the Army Medical Services Training Centre near York and at the Defence Medical Rehabilitation Centre, Headley Court, in Surrey. Midgley saw her task as that of making a documentary record of the injured servicemen and women returning from Afghanistan. Although she initially planned to directly mirror Tonks’s First World War portraits by focusing on maxillofacial reconstruction, the very different nature of war in Afghanistan forced her to broaden her focus to include images of military medical training, military operations and post-deployment reconstruction of limbless bodies.

Both Tonks and Midgley bring to their project a strong ethical standpoint. For Tonks, the drawings were an indictment of warmongers. ‘I for one will be against wars in the future’, he wrote, adding, ‘you have no right to ask men to endure such suffering’. Midgley takes a very different perspective. Asked why her pencil drawings and watercolours were not more graphic, she responded that she sought to ‘pull the reader in and gradually reveal the stoical endurance demonstrated by injured people during rehabilitation’. Her purpose was not to expose the horror, but to create a documentary record that would truthfully depict ‘the weighty subject matter of conflict, its resultant injuries and impact on the patients’. In an artistic world enmeshed in technologies of Photoshopping and other editing software, she insisted on the artist’s role as a ‘reliable witness’.

This is a beautifully designed book. I would have liked a discussion about the wider history of medical and surgical portraiture (most notably, the art of surgeon Charles Bell at the beginning of the nineteenth century), but the evocative sketches and paintings, along with the thoughtful reflections on the aesthetics of disfigurement, make a strong case for surgeon–artist collaborations.

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