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CHRISTINE SLOBOGIN started as a research student at Birkbeck in October 2018 in the History of Art department. Her doctoral thesis focuses on World War II surgical art, but she is also interested in all aspects of the medical humanities, trauma theory, and Modern British art. She runs the blog Morbid Art History.

cslobo01@mail.bbk.ac.uk

Review

Breathless Rictus: Ken Currie's Krankenhaus

Christine Slobogin



Ken Currie's *Krankenhaus* is a painting that takes your breath away. (Fig. 1) ¹ There were seventeen works in Currie's show *Rictus* at Flowers Gallery, and yet *Krankenhaus* was the piece that stood out, sticking in the mind long after leaving. ² The painting, like many of Currie's works, makes viewers uncomfortable in their own skin. An examination of *Krankenhaus* stimulates reflection on the possible failings of the human body and how others can bring about those failings. Currie plays upon common fears associated with the hospital: he paints a scene of injury and disfigurement, creating a fictional war hospital much like the historical one that scholar Santau Das describes as 'a combination of an industrial factory, a grisly kitchen, and a house of magic, throbbing and humming with the remaking of men'.³

Currie's hospital focuses more on the *breaking* of men. The artist populates his scene with incongruities that make his viewer excruciatingly aware of how their own body could deteriorate and how it could be mutilated or made useless by those responsible for its safekeeping. The respiratory system deserves particular attention in this work, since many of Currie's visual allusions relate to this integral bodily process; this review focuses on *Krankenhaus*'s depiction of the fragility of one's ability to breathe and the power that those practicing medicine have both to revitalize and to arrest that process.

Krankenhaus dominated Flowers Gallery for several reasons. The size of the painting created an oppressive atmosphere in the space. The Abstract-

Expressionist-large canvas of this work (over four metres long and over two metres high) made the details of the medical madhouse even more overwhelming in the gallery. Its magnitude is such that it took up all peripheral vision of the rest of the room when a viewer stood closely before it. The work's intimidating presence and the breathlessness that it invokes engulfed the viewer's space, leaving them feeling claustrophobic and stifled.

While this physical impact is immediately felt, *Krankenhaus*'s temporal setting is mysterious, as the world that Currie created is fantastical, combining elements of several eras and locations. The closest comparison to a setting from our universe would be to a World War II hospital. One clue is the emaciated figure slung over a shoulder on the right-hand side of the canvas. This visually alludes to concentration camp victims, the body bearing a striking resemblance to those pictured in the photographs of liberated camps that circulated after the Second World War. Additionally, Currie chose a German name for the piece, subtly pointing a finger at those who committed similar atrocities during World War II. However, the Victorian-era prosthetic arm of the figure at the left-hand side of the painting and the coarse barbarism of the actions in the work hold *Krankenhaus* back from the twentieth century. The uncertainty of the setting suggests that abuse by doctors is a timeless affront.

These oddities within Krankenhaus speak to Currie's unique and twisted vision of the human body and the medical world. The work differs from some of Currie's other paintings that were featured in the Flowers Gallery show, such as the Hiroshima Smile series or the War Paint series. Both are heavily indebted to the art of Henry Tonks, who during World War I worked with British plastic surgeons to create before-and-after drawings of facial reconstruction patients. Both the Hiroshima Smile and the War Paint series could be read as straightforward references to Tonks, suggesting that Currie shares some of Tonks's values relating to facial injury and surgical medicine. Krankenhaus shows that Currie is not like Tonks - he does not portray wounds to bring humanity to the victims or knowledge to medical professionals.⁴ Unlike Tonks, Currie is not allied with clinicians; rather he is skeptical of their absolute power over our bodies. He conveys this skepticism by showing practitioners yielding dangerous and ominous tools, hacking at meat, and carrying atrophied bodies for burial. Within this perverted hospital, Currie contradicts the ideas that the body is a well-oiled machine and that doctors are meant to help us. Instead, he suggests that the body is an abject entity apt to break down and to cause discomfort, especially when medical practitioners are involved.



Figure 1. Ken Currie, *Krankenhaus*, 2016, oil on canvas, 244.5 x 418 cm, (AFG 56461) © Ken Currie, Courtesy of Flowers Gallery London and New York.

Suffocation is a major focus of the work, and it is most apparent where a long red hose intubates the patient lying on a stretcher in the foreground. Intubation usually ensures that a patient *can* breathe, but following the tube's snaking path reveals that the hospital's employees have set up this blood-hued instrument to transport material from the patient's genitalia to his mouth. Currie implies that the patient is choking on the products of this sadistic dialysis by painting silvery tears leaking from his pained, open eyes. The World War I diary of nurse and author Enid Bagnold suggests how the eerie red tube could be a signal of a patient's death. She writes:

[He] had no nostrils; they were blown away, and he breathes through two pieces of red rubber tubing: it gave a more horrible look to his face than I have ever seen. The Sister came out and told me she thought he was 'not up to much.' I think she means he is dying. I wonder if he thinks it better to die.⁵

There is a tension between the use of these red tubes as a signal for death and as a tool to bring respiration and life back to a human being. The same could be said of the doctors in *Krankenhaus*: they have the ability to heal patients, but in this painting they are more the harbingers of death than of life.

The other two patients worthy of close analysis are the nose-less musician and the figure with breasts in the forefront of the painting. The disfigured musician notably plays a wind instrument, one that would require inhaling and exhaling to make sound. There is no way that he could play his clarinet well, or at least without pain. The breathing process of the naked patient in the foreground has also been impeded. This sickly figure covered in spots and sporting sagging skin opens their mouth so that a clinician with bloodshot eyes and a sinister-looking pair of scissors in his pocket can compress the patient's tongue. The viewer is unable to see the other end of the tool and, therefore, is unaware of its length, sharpness, and its restriction of airways.

Currie's references to rhythm and to what Das phrased as the 'throbbing and humming' of the war hospital also bring our attention to the pulse of bodily functions. Currie's imagery suggests that this should be a noisy place full of music, the clinking of surgical instruments, and the groans of patients – cut through by the ticking of a clock. Yet the symmetrical and motionless composition makes this scene conspicuously still and soundless.

The conductor seems out of place. Their central presence compounds the symmetrical placement of the other figures, perfectly balancing a composition devoid of strong diagonals and motion. Even the lines of the slightly bent musicians form a compositional triangle that meets at the top centre of the painting, contributing to the unsettling stillness of the work. The conductor serves an important role by drawing attention to the ominous quiet of *Krankenhaus*; musicians are conducted, yet there is no music, no bustle, no noise, and no breathing.

The painting's ruptures, both material and compositional, further this halt in and silence of the rhythmic breath of a normal working hospital. The breakages of patients' bodies, including the interruption of one man's respiration via the red tube, are echoed by the disjunction in between two canvases. This fissure is not immediately perceptible, and only upon close inspection can it be discerned that the work is split into two pieces. This mirrors how the unnatural affront on the breathing of the patient in the foreground is not instantly apparent; it takes more than one examination to realize that the tube feeds from his genitalia.

Krankenhaus argues that those meant to combat the ravages of injury, war, or disease can also disfigure, suffocate, and even murder their patients. Doctors are expected to put breath *into* their charges – through CPR, intubation, or other treatments – but they can just as easily arrest that lifegiving process. The far left- and right-hand sides of the composition show the exit options for patients in this institution. On the left, a prosthetic-armed butcher carves a slab of meat (possibly human) beneath a cavernous hunk of flesh. On the right, a surgical assistant and / or undertaker carries a shovel and a skeletal corpse. The exposed anus and genitalia, resembling and mirroring the hole in the meat hanging on the left-hand side, underline the vulnerability and exposure of these people to the mechanization of the hospital staff. The two patients still being treated in this scene could be destined for one of these dismal exits.

These doomed patients, and the disjointed canvas onto which they are painted, perform breathlessness and hopelessness. The patient being gagged on his own excrement, the pockmarked being with the doctor's tool on their tongue, the nose-less musician and the faceless conductor – these figures make one hyper-attentive to the rhythms of the body, especially that of the respiratory system. The frigid and claustrophobic suffocation invoked in this piece suggests what is in store for all of these patients at the mercy of *Krankenhaus*: death, without breath.

Birkbeck, University of London

Notes

1 Translated as 'hospital' from the German.

² Rictus ran from 8 November to 9 December 2017 at the Flowers Gallery on Cork Street in London

Santanu Das, *Touch and Intimacy in First World War Literature* (Cambridge, UK: Cambridge University Press, 2005), p. 221.

⁴ For more information on Henry Tonks's World War I works see: Suzannah Biernoff, 'Flesh Poems: Henry Tonks and the Art of Surgery' *Visual Culture in Britain* 11.1 (February 10, 2010), pp. 25-47; Emma Chambers, 'Fragmented Identities: Reading

Subjectivity in Henry Tonks' Surgical Portraits', $Art\ History\ 32.3$ (June 2009), pp. 578-607.

Enid Bagnold, *A Diary without Dates* (London: Virago, 1978), p. 7.

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