Reflections

You should get over to see that exhibit

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7 ith a sense that my doctor-mother-homemaker horizons were, at times, discouragingly limited, I ignored the many other priorities tugging at my attention, hopped on my bicycle, and made the short trip to the St Norbert Arts Centre in Winnipeg, Man, where the exhibit was taking place. In the unseasonably warm October sunshine, I admired the colours and forms of the spent summer gardens and orchards, the heavyheaded giant Russian sunflowers, the otherworldly seedcases of the massed annuals, all of which are part of the grounds of this former monastery, now a place of seclusion for creative thought, process, and performance. Several members of my immediate family had been, and continue to be, very involved in its evolution from an abandoned place of spirituality, rapidly decaying from lack of attention and funds, to its present very vibrant state.

I feel fortunate to belong to a family in which a personal experience of the arts is considered valuable, essential even. Among the most profound healing experiences in my personal and professional life have been those connected with the creative process, translating in some way the pain of the body or soul, or both, into a work that both exorcizes the creator's suffering and allows the viewer to access his or her own most vulnerable parts, preparing the way for recovery. I look forward

to receiving the "medicine" an artist has to offer, although in what form it will come I almost never know beforehand.

"Wendy Geller: that which cannot be contained"

On approaching the exhibit, the first impression is of an avantgarde, technology-based study of one person's relationship with nature. Six television screens. Canadian Family Physician invites you to contribute to Reflections. We are looking for personal stories or experiences that illustrate unique or intriguing aspects of life as seen by family physicians. The stories should be personal, have human interest, and be written from the heart. They are not meant to be analytical. Writing style should be direct and in the first person, and articles should be no more than 1000 words long. Consider shar-

each arranged in its own outdoors-brought-indoors setting, display portions of a human body and emit sounds that are, from a distance, unintelligible. The effect is initially like walking into a densely wooded area where every insect, leaf, and animal is intent on emitting its own sound. The effect quickly shifts, however, as the viewer enters the "forest"; the body parts and vocalizations become more distinct.

A woman is writhing and moaning in what could be either intense ecstasy or pain. Another, her face filling the screen, is relating a convoluted story of being attacked and describing the emotions she experiences. A set of lips and teeth utter syllables, unendingly. A stick enters a vagina. On the farthest and largest screen, the camera tracks a woman as she attempts to flee through

It was too much. I had to leave that part of the exhibit, though I did not feel I had yet completely grasped all the artist had encompassed in that combined natural and artificial space. I certainly felt, however, that I had sufficient exposure to her treatment of the issues of attempts to control women and the forces of nature, the connectedness, and lack thereof, of our bodies to the natural world, and the disturbing undercurrent of violence and violation of women's bodies as yet another form of man's subjugation of nature. It also reminded

> me of the tensions that can exist between healer and patient, should a physician, hospital, or procedure represent a further invasion of a woman's body or values.

> Another section of the exhibit differed considerably in tone and content and, as I was soon to learn, related to a very different aspect of the artist's life. Here was a long shelf lined with various groups of objects, each about the

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ing your story with your colleagues.

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size of a child's toy, and each having an innocence as well as a complexity about it. All were wrapped in various types of string, thread, or fishing line. Just then my sister arrived. I was glad of her interpretive abilities: not only is she an artist, but she also curated this exhibit.

As she explained, an intimate sense of the works' connection with the woman who created them emerged. Wendy Geller was a visual artist living in New York State. Her previous public exhibit had been the videorocks-and-trees display I had just exited. It was entitled "Natural History: Case Studies," and reflected Geller's very worldly involvement in issues of sexual politics, relationships between humans and the natural world, and performance art.

Not long after completing this work, Ms Geller was taken to an emergency room with an unbearable headache. Within days she was diagnosed with, operated on for, and began to recover from a malignant brain tumour. She was given 3 months to live, but proceeded to live and produce her art for another 2 years. This

exhibit, entitled "Wendy Geller: That which cannot be contained," was the first since her death.

In this context, the unusual-looking objects lining the shelf became much easier to understand. Called schwabties, the rocks, shells, buttons and beads, leaves, pieces of fabric and yarn, and many other items were each collections unto themselves, while also a part of a larger, fuller collection called life. All possessed a sense of the holy, a means of sustenance in what could have been a time of desolation for Ms Geller and those who loved her. The schwabties reminded me of my own children's collections of "special things": those precious, usually found, items that give their small lives a sense of belonging, of time, and of connectedness.

Rupture with her former life

I could not help immediately thinking, in the calm October sunshine in that gallery space, of the rupture with her former life that medical intervention must have engendered: fear and pain, uncertainty and even

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expense, all this having taken place in the United States. Did she have medical insurance? Did her neurosurgeon have any appreciation of her sensitivity about bodily presence and any intrusion in it? Could she or her partner talk to the anesthetist about what they surely must have seen as a frightiningly symbolic prospect of "going to sleep"? How did they cope with the confines of hospitalization, never easy for anyone, but possibly almost unbearable for someone who fundamentally questions the very basis for authority?

As we walked through the remainder of the exhibit, I constantly marvelled at Geller's simultaneous bringing together of forces: fear and calm, rejection and acceptance, exuberance and annihilation. A series of simply framed pages from an ancient medical textbook (my guess is a turn-of-the-century edition of *Williams' Obstetrics* or the equivalent) had been ingeniously and tellingly altered by Geller. The diagrams would be immediately familiar to anyone with a medical background, but the whimsy and power of the alterations to

the original illustrations are what is striking. Cross-sections of female, gravid bodies metamorphose into an iris or an arching trout, perhaps trying to escape a predator (**Figure 1**). A term fetus in the classic left occiput anterior position relative to a disembodied pelvis becomes the body and head of a spider, perfectly centred in its web

Thus they proceed, superficially clever but with profound meaning, so different from her earlier works, telling of the connection between our bodies and the earth. This connection is much disregarded not only in the consumer-driven world but also in the world of medicine, especially the world of medical technology.

The exhibit was a powerful reminder of life lived beyond the emergency room, the test results, the time taken for the medical encounter. I hope that I am always sensitive to this consideration, and yet I think of the many superficial contacts physicians have with people. We might easily miss out on the vibrance, rebelliousness, and resilience of patients such as Wendy Geller.

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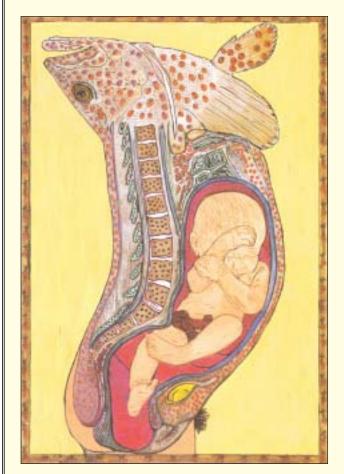


Figure 1. Medical illustration: Drawings from a medical textbook, subtly altered, remind viewers of the connection between our bodies and the earth.

The final component of the exhibit was perhaps the most obviously connected with healing. A series of oilstick drawings, as my sister explained, were therapeutic "visualizations" that Geller used in her healing process after the diagnosis. The meditative visualizations of teeth, bones, and stylized internal organs were displayed in bold colours and simple shapes. Release of tension, development of a sense of control, and the possibility of stimulating her much-needed immune system must have been a great source of solace during this time for Geller.

I was reminded of being taught and subsequently using the visualization technique during labour and delivery. I took it as a professional reminder also, given the constant comparisons and sometimes open conflict between "traditional" and "alternative" medicine these days, that what really matters in relieving suffering is where a person finds comfort and control. Helping patients achieve those ends is possibly the ultimate challenge for any healer.

My attention was drawn to a final picture as we headed toward the exit. "This is the last thing she painted," my sister told me. "The paint was still on her fingers when she lay down for the last time on the bed they had set up for her in her studio." It is a page from a medical textbook, a diagram of a human skeleton changed to a person who seems to be changing into a bird, quite possibly a raven, prophetic and remote (Figure 2).

It was a fitting end to a wonderful exhibit, asking, as a profound experience can do, as many questions as it answers and reminding us, as art does, of the spiritual nourishment and healing power of the act of creation.

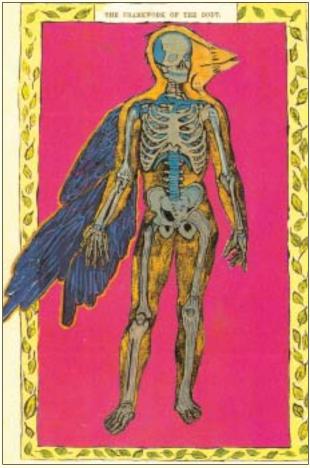


Figure 2. Last work Wendy Geller painted: Spiritual nourishment and healing power come from the act of creation.