Art

The genesis of the Saving Faces art project

Last year, the Royal Society of Medicine (London, UK) launched a lecture series jointly with its sister society, the Royal Academy of Arts, with the overall title Arts, Society, and Medicine. There can be few doctors in the UK who bridge these three worlds better than the 2015 lecturer, Professor lain Hutchison, a consultant oral and maxillofacial surgeon at Barts Hospital in London and the sponsor, founder, and inspiration behind the Saving Faces art project.

Hutchison presented his lecture on Wednesday, April 15, to a packed audience at the Royal Society of Medicine's prestigious London head-quarters. In introducing his fellow surgeon, the society's president, Babulal Sethia, looked back to his medical student days in posing the question "Is medicine an art or a science?". Hutchison, whose 2010 TED talk on his work has clocked up more than half a million views, would certainly concur with Sethia's answer to his own question: it is both.

The art project involved collaboration with the award-winning portrait painter Mark Gilbert, who produced more than 100 portraits of Hutchison's patients before, after, and in some cases during facial surgery. Since 2000, when the final portraits were completed, the exhibition has toured extensively throughout Europe and north America. Gilbert's subjects included a number of patients with different types of oral and maxillofacial cancers as well as victims of trauma and disfigurement. In a fascinating, moving, and occasionally disturbing lecture-some of the slides were not for the squeamish-Hutchison described how the project came to be, told the stories of some of the patients involved, and explained some of its lasting effects.

Hutchison described the genesis of the project as a memorial to his mother, a Jew who worked as a young doctor in Vienna before the war, fled to the UK in 1939, and ended up working as a GP in Birmingham. He founded the Saving Faces art project with part of her legacy, and continued to fund it from his own income when this ran out. Much of his work has involved treating head and neck cancers, and he described the changes that he has seen in this discipline since his time as a junior doctor. "In the 1970s, these cancers were treated with radiotherapy and salvage surgery, and there was a debate about whether their treatment should involve surgery at all", he said. Facial reconstruction has now improved beyond recognition, yet patients who could benefit from it often find it hard to believe what is possible, and are frightened to come forward. "I sometimes encounter people with facial tumours when I go around London and feel frustrated that I can't treat them", he added. Thus, Hutchison devised the project partly to raise awareness of what facial surgery can achieve.

Another motivation was to tell the stories of the patients themselves: their bravery and resilience. Portrait painters, unlike photographers, work with their subjects for long enough to capture their personality and emotions and Hutchison needed an artist who could commit to the project for several years. Gilbert, a former BP National Portrait Award winner, took up the position of artist-in-residence at Barts Hospital in 1998 and stayed for 2 years.

Hutchison displayed the portraits and told the stories of some of those patients who had featured in the project, including patients with cancer. One of the youngest was a little Bangladeshi girl, Mazeeda B, who developed a malignant endodermal sinus tumour that grew from her face, and squeezed one optic nerve, making her blind in that eye. The full-length

portrait of her that Gilbert painted after surgery shows a pretty, smiling child in a bright green dress.

A strand that ran through the stories of adult patients with cancer was one of individuals living life to the full, sometimes to the end. Henry de Lotbinière was a distinguished barrister who developed a malignant tumour of the salivary gland, an adenoid cystic carcinoma, in 1988, and was first treated by Hutchison in 1991 after recurrence. Over the next 11 years, he endured 12 major operations while continuing to practice. He died soon after the exhibition was launched; Gilbert's portrait of him dressed in wig and robes still tours the world and empowers people with facial disfigurement. Another patient, Hakeem S, travelled to the UK from Nigeria for surgery on a recurrent sarcoma on the side of his head that had grown to the size of two further heads. "When I first met Hakeem his head was too heavy for him to hold up", said Hutchison. "I removed most of the tumours and he returned home 3 months later with his head held normally, although he has sadly since died." Gilbert's portrait of him before surgery shows dignity and courage through severe disfigurement.

Hutchison ended by describing some of the exhibition's impact. All the patients involved found the experience cathartic, and many came to view Gilbert as a counsellor. For more on the **Saving Faces art project** see http://www.savingfaces.co.uk/news-media/art-project

For **Hutchison's TED talk** see http://www.ted.com/talks/iain_ hutchison saving faces



(Left) Mazeeda B pre-surgery, (right) Mazeeda B post surgery.

Visitors' comments have shown that many of the 2 million visitors to the touring exhibition have been deeply moved. One National Portrait Gallery visitor described the patients as "the really beautiful people" by contrast with the conventionally "beautiful" subjects of most portraiture. Funding for projects linking medicine and the arts is now more readily available, particularly in new hospitals, and this pioneering exhibition shows what the approach can achieve.

Clare Sansom

TheatreSo It Goes

So It Goes was touring around the UK from Jan 29, to June 5, 2015

For more on So It Goes see http://www.ontheruntheatre.co.uk/#!current-production/cb3i

We are inured to grief. Suffering has become a ubiquitous part of life, with the war-torn and the displaced ever-present on our TV screens. In an environment such as this, how can you reach people to explain your private heartache? An A4 whiteboard, hung around the neck by a string in the play So It Goes, is an odd weapon in the battle against detachment, but it is one of the most effective I've seen.

So It Goes is Hannah Moss' attempt to explain how she came to terms with her father Mike's death from oesophageal cancer when she was 17 years old. Cowritten and produced with friend David Ralfe, Moss plays herself at various ages, while Ralfe plays Moss' father, mother, and anyone else relevant who passed though Moss' life. The play opens with Hannah cheerily scribbling the play's premise on the whiteboard: "I'm not talking. It's easier that way." What follows is the story of Mike, his illness, and how Hannah coped (or, largely failed to cope) with coming to terms with the loss of her father.

We see Hannah learning of her father's death early on in the narrative,

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Hannah Moss describing her father's life

her subsequent attempts and to detach herself from reality by obsessively watching TV and later, losing herself in alcohol-fuelled student life. However, her father is never far from her thoughts, which Moss and Ralfe show with several deft vignettes into Hannah's childhood and adolescence. Here, the audience gets snapshots of who this much-mourned man was: an avid runner; someone with questionable taste in music but who was determined to dance anyway; a good father and husband. The toll the cancer takes on Mike is given equal, if subtler billing. In one scene, Hannah as an adolescent and her father are out running. Hannah, like all adolescents, is most concerned about being fast and coming first, and her father is first indulgent, and then concerned, as he notices himself falling behind. Watching Mike try to catch up whenever Hannah turns around to watch him is beautiful and painful; it shows a good man trying to protect his daughter from his pain.

By eschewing verbal communication, Moss and Ralfe make every scrawled word count. Props are lovinglydrawn cardboard on poles, spun around to reveal changed meanings in the blink of the eye. Nowhere is the power of this alternative form of communication more apparent than in the heart-rending scene in which Hannah and her family learn that her father's diagnosis is terminal. Surrounded by doctors (several poles with whiteboards bearing the words "Oncologist", "Doctor", and in a delicious touch of the absurd, a small wooden train coaxed into the room, each carriage bearing the words "Junior Doctor"), and her family (poles with handbags and signs "Mother"; "Sister"; "Aunt"), Moss and Ralfe sit awkwardly, listening attentively to the "Doctor" pole, whose whiteboard is turned around to reveal on the other side the dreaded words: "I'm sorry". Around the room, the family's whiteboards. one-by-one, slowly, turn from their names to: "Oh.". The doctors' boards, in sympathy, follow in turn: "I'm sorry". All except Ralfe, playing Mike, who is frantically scribbling possible solutions on his whiteboard: "What if we tried...?"; "Surely we could...?" It is Hannah who gently takes the whiteboard from his shaking hands and writes for him: "Oh."

Hannah could not talk about her father's death. She had to use this method if she was to communicate her pain. In so doing, she and Ralfe have created an entirely new way of portraying the grief that comes from somebody being taken too soon. Moss and Ralfe show the complexity of different types of grief and loss. But perhaps even more importantly, I now have a sense of Hannah's father, Mike. In creating this play, Hannah brings a sense of Mike back to life. Her memorial to him allows others to know this man who meant so much to her. It is a profoundly moving portrait, and an example of creative, inventive theatre at its best. One of the strongest lines comes at the end, when Hannah writes that "He [her dad] didn't just die/ He lived." Now we know that he lived, too.

Cassandra Coburn