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Staging corpses: reanimating medical history through puppetry

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At the beginning of Jane Taylor's play *After Cardenio*, performed in an anatomy theatre at the University of Cape Town, South Africa in 2011, a puppet revives on the anatomy table. The moment stages the true event that occurred in Oxford in 1650, when Anne Greene, a woman who had been hung for infanticide, revived just before her anatomical dissection (Watkins, 1650). Taylor came across the story of Anne during her research into Cardenio, a character in the Miguel de Cervantes novel *Don Quixote*; she had been commissioned by Stephen Greenblatt to explore the 'missing' Shakespeare play *Cardenio* as part of The Cardenio Project. In Taylor's play, Anne is represented by both a puppet – who begins the play lying on the anatomy table as anatomists circle around her, observing her body – and by a woman who begins the play lying beneath the table, the soul to the puppet's body.

On another stage several years later, another puppet revives on an autopsy table. At the beginning of my company Wattle and Daub's 2017 puppet chamber opera *The Depraved Appetite of Tarrare the Freak*,¹ eighteenth-century French surgeon Baron Percy autopsies Tarrare, the polyphagist (person with excessive appetite) whom he had tried, and failed, to cure. Like *After Cardenio*, *Tarrare* tells a true story, though in this case the reanimation of the puppet is not drawn from historical records; Tarrare revives when Percy decides to tell his story, and

¹ *The Depraved Appetite of Tarrare the Freak*, Tobacco Factory Theatres, Bristol UK, January 2017: <https://vimeo.com/513433117/6871ef5f4d>

invites his medical assistants (two puppeteers and two singers) to assist him by bringing the corpses in the autopsy room to life. The stage is Percy's autopsy room, littered with corpses and body parts that are reanimated/puppeteered by the human performers to tell the story of medical 'monster' Tarrare, a man who could not stop eating but never gained weight.

Both shows explore true stories drawn from medical history. In the intervening years between the revival of Anne Greene and the autopsy of Tarrare, the European medical establishment's approach to cutting open bodies had shifted from an anatomical dissection model (cutting open bodies in order to understand their interior structures) to an emergent pathology, in which the autopsy was intended as a diagnostic tool (cutting open the body to identify disease or disorder). In *The Birth of the Clinic*, Michel Foucault argues for the emergence of the clinical or medical gaze in the late eighteenth century. He traces a shift in visibility from previous classificatory medical structures, in which the patient's body is rendered legible by viewing it through existing structures of medical spatialised knowledge, to the anatomo-clinical method, in which the patient's body and disease are produced through the clinician's gaze (2003: 2-4).

This paper analyses *After Cardenio* and *Tarrare* with a focus on this theme of medical visibility alongside each show's use of puppetry to explore visibility and the gaze. In *After Cardenio*, Anne is represented by both a human actor and her puppet counterpoint, who is the only puppet on stage for the bulk of the play. This splitting of the figure of Anne into human and puppet allowed Taylor to explore Cartesian questions of soul and body, though whether the human represented the soul and the puppet the body, or vice versa, was left intentionally ambiguous (Taylor, 2012). The show premiered in the Anatomy Lecture Theatre at the University of Cape Town; chalk

scenes by South African artist Penny Siopis covered the walls. Just before Anne's revival on the anatomy table, we see her anatomists, Dr Petty and his assistant (played by human actors), peering into the dark space between her legs in an unsuccessful attempt to observe her womb. This moment of peering – craning the neck, narrowing the eyes, tilting the head, bodily adjustments intended to find just the right angle that will allow one to catch a glimpse of that which is hidden – resonates throughout the production, as attempts by medical and legal institutions to peer into Anne's life, to see the truth of her narrative and her body, never cease. In one scene, Dr Petty admits to the audience that while he does not wish Anne dead, he is disappointed that her revival has denied him possession of her womb, which he had been promised. The puppet that portrays Anne is life size and fully intact, her body appearing whole and sealed. Designed by South African sculptor Gavin Younge, she is covered in vellum; Taylor emphasises the aptness of using a material that is both skin and book for the puppet that embodies the subject of her literary-theatrical project (Taylor, 2019: 2012). Her eyes (Younge used actual medical prosthetic eyes) look outward from their sockets; Taylor comments on the effect: 'when she looked at you, she *really* looked at you' (ibid: 2012). The only portal into her body is the hole in her back that takes her puppeteer's hand. She can be puppeteered, but she cannot be seen into.

In *Tarrare*, the question of medical visibility rests around an exploration of the medical gaze, and the puppet's ability to materialise this gaze. The characters from Tarrare's life, including himself and his doctor Percy, are all played by puppets, each of whom apart from Percy is designed to resemble a corpse. The show's conceit is that the six human performers on stage with Percy, who play his medical assistants, bring Tarrare's story to life in Percy's autopsy room through singing,

playing musical instruments, and puppeteering the corpses; reanimating corpses is used in the show as a metaphor for the staging of a historical story. At the end of the eighteenth century in France, hospitals became centralised and institutionalised. This was due in part to a shift in understanding of the role of medical treatment as governed by state oversight, and in part to the ongoing revolutionary military action that necessitated centralised medical treatment centres for wounded soldiers (Foucault, 2003). Foucault identifies this period with the emergence of the medical, or clinical, gaze, an epistemic shift in the organisation of medical knowledge. The new medical model replaced the holistic view of patient disease, which was based in part on the patient's own narrative of illness, with the doctor's authoritative ability to describe and diagnose disease based solely on his penetrating gaze onto the components of the patient's body. This is a body that is, in Foucault's words, 'entirely legible for the clinician's gaze: that is, recognisable by its signs, but also decipherable in the symptoms whose totality defined its essence without residue' (ibid: 159). Foucault links this shift with the 'minute but decisive change' in the doctor's first question to his patient from 'What is the matter with you?' to 'Where does it hurt?', a change that marks the decline of the patient narrative and the rise of the clinical model in which the patient's body is framed as legible object (ibid: xxi). Foucault's genealogical approach is set in contrast to a historical understanding of the development of modern medicine as simply the uncovering of transparent facts that had always been available to doctors. Foucault instead frames the birth of the clinical model of medicine as an epistemological rupture, allowing for an understanding of the resulting shifts in medical practice as both helpful and harmful to patients. This is a complexity that, as we dealt with the story of one particular patient from this time, we wished to maintain.

The titular puppet in *Tarrare* was constructed to look like a fragmented corpse. His torso ended at the sternum, leaving a gap where the belly would be. His skin was designed to look like wrinkled, decaying flesh. We made three different Tarrare puppets for the show, each of which could perform a particular function, like swallowing cats and snakes, grabbing his ribcage to stretch it open, or vomiting a large satin sheet of ‘blood’. Each of these puppets, in contrast to the Anne puppet in *After Cardenio*, is open and porous; the audience, and Percy, can always see into Tarrare’s interior. In the autopsy scene that bookends the performance, Tarrare’s body is ripped open, his guts spilling out (Figure 1). Unlike the Anne Greene puppet, whose interior is inaccessible both to the audience and to the anatomists, the interior of the Tarrare puppet is always accessible and visible.



Figure 1: Puppets of Tarrare and Baron Percy in *The Depraved Appetite of Tarrare the Freak*, with puppeteers Aya Nakamura and Tobi Poster-Su. Photo: Barney Witts. Image courtesy of Wattle and Daub.

In the sections that follow, I discuss visibility both in relation to puppet design in each of the two productions, and in relation to anatomical dissection in the mid-seventeenth century, and the late

eighteenth century emerging practice of pathological autopsy. I suggest that both productions use puppetry to make visible these respective medical epistemological paradigms. *After Cardenio* uses the puppet's interior inaccessibility to materialise the inaccessibilities of Anne's life and alleged crime, and to explore the mid seventeenth century English legal imperative to demonstrate that which can only be invisible (Anne's intention that her child would live) via the production of material objects. *Tarrare* draws on the fragmentation of the body made possible through puppetry, including the incompleteness of Tarrare's body, the visual accessibility of his interior, and the actual pulling apart of his body into specimens, including in the production's final image of his head in a jar. These fragmentations allowed us to use puppetry to represent, explore and intervene in medical historical narrative through materialising the medical gaze.

Visibility and hiddenness in *After Cardenio*

In *After Cardenio*, Taylor explores the discursive intersections between seventeenth-century philosophical and religious thought and emergent neurology, which sought to understand the workings of consciousness across states of alertness, sleep, coma and death (Taylor, 2019: 2012). The piece begins in the anatomy theatre, when Anne Greene, who had been hanged for infanticide, revives on the anatomy table. The remainder of the piece follows the struggles of Anne to remember what happened to her, to explain to her anatomists what happened to her between death and revival, and to prove to them her innocence of infanticide in an echo of her trial. A dream sequence later in the play sees Anne as puppet and Luscinda (the character name for Anne's puppeteer, who also plays Anne's human aspect) philosophising about issues raised by the play, including the inaccessibility of the female voice in the archive. It ends with an irruption of the Cervantes novel into the narrative, when Don Quixote, as a Sicilian marionette,

appears to rescue Anne from the Oxford dons, [Click here to enter text](#). though a final voiceover by the actor who plays Anne calls into question conventions of gendered narrative resolutions. Beginning with a thwarted dissection, the play can be read through the framing of anatomical dissection, a practice that is about revealing what is hidden, the interiority of the human body. *After Cardenio* engages with themes of hiddenness, and particularly inaccessibility, via intersecting medical, religious and legal discourses of the seventeenth century. At the core of these explorations is the figure of the puppet: the materiality that both promises and prevents access to the hidden.

The hidden, in *After Cardenio*, is multifaceted. The interior of Anne's body, rendered inaccessible through her unexpected revival of consciousness, is the first hidden and inaccessible space that the piece introduces. In a scene shortly after Anne revives, her anatomist William Petty, who at the beginning of the show was seen peering between the puppet's legs into the inaccessible dark space of the womb, laments to the audience the loss of the opportunity to examine this interior space of her body: 'I was sorry at first that she was so much alive / For I'd been promised her corpse so I could study her womb.' His regret at the lost opportunity reflects the status of the female body as only of value in relation to its reproductive organs; Petty's desire to possess Anne's womb reflects a male medical entitlement to the female reproductive system. His regret also reflects the shortage of corpses available for dissection at the time in England. The bodies of those sentenced to hanging were allowed to be dissected. In 1636, fourteen years before Anne's hanging, a charter of King Charles, in an attempt to address this, expanded the hanged criminals eligible for dissection at Oxford University from the city limits to within twenty-one miles of the city, but in practice this still did not produce enough cadavers to meet the demand (Mitchell et al., 2011).

The unexpected inaccessibility of Anne's womb to her anatomists serves as a starting point for a layering of inaccessibility in the piece, much of which is linked to themes of the womb: birth and child rearing. Anatomy here intersects with seventeenth century legal discourses, as the anatomists attempt to uncover the truth of what happened to Anne's child. Anne maintains that the infant was born dead, and that she is therefore innocent of her accused crime of infanticide. The fact of the birth, what Petty calls 'the fact of the matter', is inaccessible to her interlocutors, as there were no outside witnesses to it. Anne responds to Petty with 'I am the matter of fact. But fact is dead. So matter stands accused.' This line foregrounds the materiality of Anne's body, the only remaining trace of the death of her infant and its causes. Anne, as the sole remaining 'matter of fact' in the story of her childbirth, can only provide self-narrativising of her memory, which lacks two crucial elements under mid-seventeenth century English law: the observational gaze of the outsider (a witness to the birth), and material evidence of the mother's intention that her child have a future life.

After Cardenio explores the impossibility of each of these modes of visual revelation. Anne's infant, according to her (and the play takes Anne's side on this) was born dead while she worked in her employment as housekeeper for the wealthy family whose son had impregnated her; there was no live birth to witness. The anatomists in the play stand in for the legal system in the scenes in which they question her, as one of the crucial questions that her resuscitation raised was whether she should be put to death again. English law in the mid-seventeenth century prohibited the concealment of a birth; in the play, Petty's assistant voices this injunction: 'a child undisclosed is a child in danger.' Without the observational gaze of the outsider, then, a birth is rendered both suspicious and, in the case of a stillbirth, evidence of infanticide; in the words of

the assistant, 'Hidden facts are guilty acts.' In the absence of a witness, in order to prove her innocence, the bereaved mother must produce evidence of her intention that the child would live and thrive in her care. This evidence was often in the form of objects purchased or acquired for the child, such as a blanket or garment (Taylor, 2019: 211). Objects, then, stood in for imagined lives, the absent human bodies of infants who had died; they could be understood to make visible the invisible and inaccessible: the future life that would never be lived. In the absence of such material evidence, Anne herself is the only 'matter of fact' available; the past that she holds in her memory, as well as her intention for the life of her dead child, are as inaccessible to the anatomists as the womb within her living body.

Religious and proto-neurological questions provoked by Anne's resurrection similarly intertwine with issues of medical and legal inaccessibility raised in the play. Questioning is one of the devices of 'peering into' used by the anatomists: Anne's revival provokes Petty to begin questioning the location of her mind/soul between her death and her reawakening, and he considers sleep and dreaming as a metaphor. This reflects an emergent neurology in which Anne Greene's other anatomist, Thomas Willis (who does not appear in the play) was a key figure (Taylor, 2012). Anne provides no help in answering these questions, as she has no memory of the event; the location of her consciousness during the presumed death state remains inaccessible and a matter only for speculation, informed by Cartesian philosophy and religious understandings of the spatialisation of the soul. This latter question becomes of crucial importance to Anne as the anatomists question her about the location of her infant's body. For the anatomists, the body is a material trace of the truth of its birth that would render visible that moment in time; this resonates with the seventeenth century demand for corpses driven by the

practice of anatomical dissection. Petty's assistant is additionally concerned with revealing Anne's divine, or diabolical, allegiance. He draws on the language of dissection in his prayer at the end of the scene; if Anne is a servant of the Devil, he maintains, 'we will split her end to end and will turn her inside out.' For Anne, the only important question is the location of her child's soul, whether he is in heaven or hell. She either does not know or refuses to disclose the location of his body. Both the child's body and his soul are inaccessible, unable to reveal the truths that the anatomists and Anne wish to see.

Taylor additionally plays with archival inaccessibility in a dream sequence late in the play, in which the puppet and Luscinda (Anne's puppeteer and human aspect) pack some of the philosophical underpinnings of the play. Luscinda addresses the question of the visibility of history, speaking to the audience about the lack of archival traces of Anne's love affair with the father of her child: 'The archive knows nothing of desire.' This follows the fruitless interrogation of Anne by her anatomists, whose questions turn from the location of her dead child's body to the identity of the child's father. In the dream sequence, Luscinda and the puppet seem to function as a mouthpiece for Taylor herself conducting research for the play as they speculate on possibilities for Anne Greene's love affair, in the absence of any archival traces that might suggest certainty about the historical record.

The puppet materialises this multifaceted interplay between the visible and the hidden or inaccessible. The video edit of the piece begins with the invitation, in a stills montage, to view the puppet as a specimen. Anne's voiceover reflects on the textual traces of her story as images appear of the puppet, from different angles, lying naked on the anatomy table (in the theatrical

event, this voiceover was spoken in darkness). The audience is here invited to look at her body from multiple angles, as if they were anatomists circling the body and examining it prior to dissection. Not only is the womb of the historical figure of Anne Greene inaccessible to the anatomists once she revives, but in the play the audience knows that the puppet, despite looking strikingly human, has no inner organs. The specimen that the audience are invited to observe alongside the anatomists will never reveal the interiority of the human body; the puppet's body resists the gaze that would pry it open. It is constructed to represent a fully intact human body, down to the vellum that covers it. This intactness means that we, like the anatomists, never see inside the body; the puppet's interiority must be imagined, the material fact of its body standing in for Anne's imagined, inaccessible interiority. This frustration at the inaccessibility of the interior of Anne's body is mirrored in the inaccessibilities of legal and religious questions that Anne's accused crime and revival conjure, as well as the archival inaccessibilities that Taylor encountered in her research for the show. Theatre scholar Gianna Bouchard highlights the intended function of the specimen as exemplar or demonstration, under the gaze implicit in the word's Latin derivation '*specere*', 'to look' (Bouchard, 2016: 140). In *After Cardenio*, the puppet is presented as a specimen; as the 'material fact' onstage, it is the location of revelation of the hidden truths of Anne's story and body. However it resists the function of the specimen as an object of a gaze that reveals the truth of that which it exemplifies: it reveals nothing.

Tarrare: Materialising the medical gaze

The story of Tarrare, as told in Wattle and Daub's *The Depraved Appetite of Tarrare the Freak*, was drawn from his doctor Baron Percy's published case study *Mémoire sur la polyphagie*

(1804). The case study tells the life story of Tarrare, who experienced polyphagia or excessive appetite. It begins with Tarrare's ejection from his family home when they could no longer afford to feed him, after which he performed for a travelling mountebank, 'defying the public to satisfy him' (Percy, 1804,;91, author's translation) by throwing objects for him to swallow; his act evolved to include swallowing live cats and snakes and regurgitating the bones and the fur. He was, according to Percy, recruited by the French Revolutionary Army to swallow sensitive documents, smuggle them across Prussian lines, and regurgitate them. Tarrare failed miserably as a spy; he was quickly caught by the Prussian army and subjected to a mock execution, after which he returned to France, found Percy in a military hospital, and asked to be cured. Percy tried a series of cures, each of which failed to curb Tarrare's appetite. This appetite was growing – Tarrare was caught drinking the blood of bloodletting patients and eating limbs from corpses in the mortuary; Percy noted that Tarrare 'took so much pleasure in eating that he seemed to fear, rather than wish for, his recovery' (ibid: 96). He was eventually chased from the hospital under suspicion of having eaten a toddler. Percy found him several years later dying of tuberculosis; Percy noted that the disease 'put an end to the voracity' of Tarrare (ibid: 97). Tarrare claimed that he was being killed by a silver fork that he had swallowed. Following Tarrare's death, Percy autopsied him, looking for but not finding either the fork or the cause of Tarrare's polyphagia.

The project was a collaboration between Wattle and Daub and scientific, medical humanities and historical scholars and practitioners. The Wellcome Trust funded the development of this project as a public engagement project on biomedical history, specifically an exploration of the emergence of the pathological autopsy in the late eighteenth century. Doctors had been cutting up bodies after death for several centuries, but these procedures, such as Anne Greene's, were

framed as anatomical dissections with the pedagogical intention of exploring the geography of the human body's interior in order to produce knowledge, while pathological autopsy is undertaken in order to discover the cause of disease and death. Tarrare's autopsy occurred in 1798 during the formal emergence of pathology as a discipline in Europe; this was a few years following the 1793 publication of the first European textbook on pathology by Mathew Baillie (van den Tweel and Taylor, 2010). The opening of the piece, in which Percy cuts open Tarrare in a fruitless search for the fork that Tarrare had believed was killing him, therefore stages one of the first pathological autopsies in Western Europe (Bates, 2021). Percy's *Mémoire*, which recounts this pathological autopsy, is a case study of a shift within medical practice conventionally described, within the narrative of a linear progression of scientific knowledge, as the advancement of modern medicine. Displacing this historical framing rooted in the concept of progress is Foucault's genealogical identification of the historical moment with the emergence of the medical or clinical gaze, in which patients' bodies are visible only as body parts and symptoms, with a concurrent decline of the patient narrative (2003). The opening autopsy creates a tension between the emotional impact of the moment on Percy, who knew Tarrare as a human being, and his desperate search for the fork, which allows us to witness a medical procedure predicated on the medical gaze as Percy examines, describes and tears through individual body parts.

The written archive on Tarrare is found solely in Percy's case study; Tarrare's voice is absent. As theatre makers, this required attention to a mode of spectatorship that can be linked to Foucault's concept of the medical gaze. If the clinician's gaze allows penetration beyond the surface appearance of the body and the uncovering of hidden truths, thereby positioning the body

as docile object within a field of biopower, the twenty-first century artist's and audience member's gaze on the representation of a historical body on stage can similarly be assumed to penetrate the veil of history in order to uncover the 'truth' of a historical moment. This reduces the historical subject to the status of an object that is only legible through the act of artistic historical representation. Creating a show to be performed on a stage before a seated audience carries a particular risk of enacting this type of gesture, seeming to invite the audience to consume a fixed frame of historical events. Our attempt to avoid this issue, in which we included our own artist's gaze on the bodies and stories we were staging, was rooted in using the materiality of puppetry performance strategically to interrupt this type of spectatorship. Our intentions were threefold: to make visible the constructed nature of reanimating historical narrative, to displace conventional historical narratives of the progress of modern medicine, and to materialise the medical gaze – to make literal, in the construction and manipulation of the puppet bodies, the ways in which the medical gaze penetrates and fragments bodies.

Mirroring the source material for Tarrare's life story, the show's narrative is told through Percy's memories. Through this we intended to make the puppets into representations of material traces of the archive. Percy was excluded from this. He is the only 'living' puppet, the only puppet meant to represent a living human rather than a corpse, as his is the only living archival voice. The show's puppets, apart from Percy, were therefore puppets in a double sense: as literal puppets in the show, animated by their puppeteers, and as corpses in Percy's autopsy room, animated by medical assistants. The uncanniness of puppets rests partially in their uncertain status as living beings, simultaneously animated figures and dead objects; this simultaneity of perception has been described by Steve Tillis as the 'double vision' of puppetry spectatorship

(1992), and by myself as ‘(mis)perception’ (2022). This quality allowed us to play with the shifting perceptions of the audience as they watched the puppets on stage shift between dead corpses in an autopsy room within which the story is performed, and apparently living figures within a living story. This framing intentionally served as a material metaphor for the act of creating and performing historical narrative by reanimating corpses of the past, by shifting the status of the puppets between object and subject in order to stage the object/subject shifts of historical figures that historical narrative produces.

The piece explores the tension between Percy’s account of events, as narrated in his *Mémoire sur la Polyphagie*, and what we imagined the experience might have been like for Tarrare. This is evident in the ‘Cures’ song, which takes place late in the show when Tarrare asks Percy to cure him, thereby setting off a sequence of attempted, and failed, cures based on late eighteenth century medical practices including enemas and the ingestion of tobacco pills and boiled eggs. This scene was created to highlight two contrasting perceptions: Percy’s of his medical experiment couched within the advance of modern medical knowledge, and Tarrare’s as a patient whose body, under the medical gaze, is reduced to the status of object. Percy’s perception was conveyed through the lyrics (he sings the song and, when he invites Tarrare to sing along with him, Tarrare can only cry or scream) and through the music’s upbeat, swingy energy, culminating in a kick-line in which the medical assistants force a gagged Tarrare to dance with them. We staged the treatments as painful and requiring restraint in order to invoke the practice of surgery without anaesthesia. While European surgeons including English surgeon James Moore were experimenting with numbing the nerves during the late eighteenth century, effective anaesthesia was first demonstrated in the United States by William Morton in 1846 (Royal

College of Anaesthetists). The forced dance of Tarrare at the hands of Percy's medical assistants was, therefore, an act that, in its juxtaposition of brutality and medical innovation, we felt crystallised the complexities of patient experience during the emergence of the modern clinic that saw doctors simultaneously helping and hurting patients. The ability to cut into the body in order to cure it materialises the medical gaze with a knife; knowledge and violence co-exist as the interior of the body is made penetrable to the all-seeing gaze of the doctor. This scene juxtaposed music, movement, and heavy-handed manipulation of a puppet to create a dissonance in audience perception of a key moment in medical history, evoking both laughter and uneasiness.

It was in the 'Cures' song that we most explicitly explored the theme of the body as object under the medical gaze. As the medical assistants move him around the stage, on and off of a gurney, stuffing tobacco pills and eggs down his throat, holding him down and gagging him, making incisions in his arms, Tarrare's puppet body literally becomes a manipulated object. This produces a tension between the puppet seen as object and simultaneously experienced as human. Margaret Williams (2014) suggests that puppetry can be identified as a mode of spectatorship defined by an audience member assigning agency to the object on stage. When Tarrare's body is roughly moved around the stage by the medical assistants during 'Cures', the locus of perceived agency rapidly shifts between Tarrare struggling against medical assistants, an act already doubled by the manipulations of his puppeteer, and puppeteers grabbing and throwing a puppet. The Tarrare puppet is, in the audience's doubled perception, simultaneously a character and an object.

Conclusion

Puppetry offers routes into theatrical representations and explorations of often-invisible concepts within medical performance, through puppets as constructed bodies and the shifting play of agency between puppet and puppeteer. In *After Cardenio* and *Tarrare*, puppetry functions both as a device of making-visible, and as an enactment of resistance to the gaze. In one sense, the puppets that represent Anne Greene and Tarrare make visible abstract concepts that inform the medical discourses of the seventeenth and eighteenth centuries in Europe respectively. Anne Greene's dual embodiment in *After Cardenio*, as a living human via an actor, representing the mind or soul, and as a puppet, representing the body, allowed Taylor to stage mind/body dualism and to invite them to interact. These interactions occurred directly through puppetry, as when the actor puppeteers or gives focus to the puppet, through shifting focus between the figures (at times the puppet is the focus, at times it is the human, suggesting shifts between the actions of body and mind), and through interactions between the two figures, as when the puppet comforts the human, suggesting the simultaneous presence of two facets of the self, dual yet one. This technique of puppet/human performance also functioned as a device of inquiry: Taylor discusses how it allowed the artists to ask: 'Is the body the technology for the soul, or is the soul a technology for the body?' (2019: 216). In this sense Taylor and her collaborators restaged seventeenth century inquiries around consciousness and the mind/body split, emphasising the role of materiality within these enquiries through the dead-yet-alive figure of the puppet. Tarrare's fragmented corpse body served a similar function of making visible concepts at the core of eighteenth century medical discourse, in allowing Wattle and Daub to explore

materialisations of the medical gaze, making visible this gaze while simultaneously replicating it by making his subjectivity read as coherent.

In another sense, these puppets resist the gaze of both the anatomist and the pathologist, refusing to reveal that which the gaze seeks to bring to light. Anne's puppet body looks out through its prosthetic eyes, but does not allow her anatomists to look either into her body or into her past. Tarrare's fragmented body, into which we can always see, refuses to reveal its secrets; at the end of the show, Percy gives up on the autopsy, unable to find either the fork or the cause of his patient's polyphagia. His assistant places Tarrare's head, now a specimen, into a jar. In pathologist Alan Bates's commentary on the Tarrare case study drawn from his collaboration on the show (2021), he uses the fork as a metaphor for Percy's search, in his autopsy of Tarrare, for something 'that he could never have found' (Bates, 2021). As with Greene's puppet body as specimen, Tarrare as specimen is meant to serve as exemplar, revealing the truth of his condition, yet it reveals nothing.

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