

## HYSTERIA AS A STRATEGY OF REPRESENTATION IN THE ART OF FRANCE IN THE SECOND HALF OF THE NINETEENTH CENTURY

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### Abstract:

This article will consider the process of turning the disease called hysteria into a socio-cultural phenomenon and the strategy of representation in the second half of the XIXth century. It can be concluded that the verification of symptoms and phases of hysteria by artistic means coincides with Foucault's concept of the process of aestheticizing the disease. The use of the artistic iconography of hysteria, which sharpened the problems of the binary opposition of health and disease and the relationship between doctor and patient, becomes a tempting way of veiled representation of various discourses of the second half of the XIXth century: political, social and others. The intertexts of hysterical contractures can be traced in the artworks. Analyzing and comparing these artworks with the iconography of hysteria formed in the hospital, it is possible to trace the processes of changes in the representation of the human body in art under the influence of new medical discoveries. It seems relevant to continue the research of hysteria in the field of visibility, because there is still no full-fledged study of the penetration of hysteria into the sphere of art.

**Keywords:** French art, aestheticization of disease, psychiatry and art, artistic representations of hysteria, Salpêtrière discourse, intertextuality

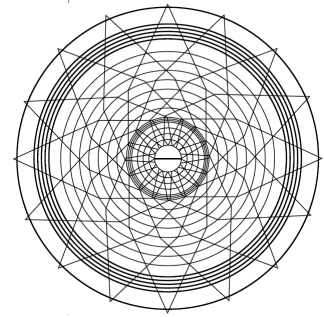
In 2021, cultural and art studies on hysteria have become more relevant than ever, which is confirmed by the publication of a number of collective monographs on such a topic (Braun, 2020, 2021). The analysis of changes in the psyche, hysterical personality disorders, and in general pathologies of human behavior were actualized due to the epidemic and endemic world situation of recent years.

However, “hysterical researches”, as well as “hysterical methodology”, according to Johanna Braun (Braun, 2021), were particularly relevant already in the second half of the XIXth century, which is confirmed by a number of literary works by Guy de Maupassant

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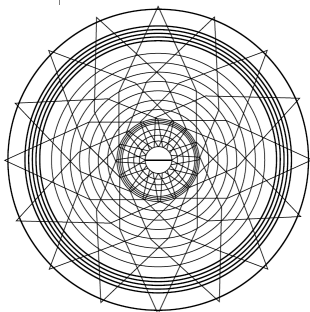


and Octave Mirbeau, who praised the Salpêtrière Hospital and its hysterics (Maupassant, 1882; Mirbeau, 1885). It can be said that it was in the second half of the XIXth century, thanks to the research of Dr. Charcot and his pupils and followers, that the “birth” of hysterical discourse took place, as Georges Didi-Huberman wrote (Didi-Huberman, 1982), a kind of formation of “hysterical bodies” in art cultivated in the artworks of surrealists (“hysterical arches” by Salvador Dali (L’Arc hystérique 1937) and appealing to hysterics in the collage novel and artist’s book by Max Ernst “A Week of Kindness” (“Une semaine de bonté”)) and Louise Bourgeois (“The Arch of Hysteria” 1993 and textile sculptures by Bourgeois).

By virtue of researches of the “philosopher of madness” Michel Foucault, whose personality is mainly associated with philosophy or history, the “birth” of hysteria has remained to some extent on the “periphery” of scientific studies. Foucault also devoted a significant place to art in his works, conducting an artistic analysis of trauma (about this: Rajchman, 1988). A number of art historians develop Foucault’s approach, which he used when writing works about the disciplinary power of hospitals and prisons. For instance, the visual culture theorist Nicholas Mirzoeff turns to Foucault to explore the “bodily landscape” (he uses the term – “bodyscape”), identifying bodies as a cluster of multiple signs and highlighting the so-called bodily language (“bodyscape”) that responds to various disciplinary restrictions (Mirzoeff, 1995). One of these bodily languages attracted Foucault’s special attention, since the philosopher believed that it was he who began the process of “aestheticizing disease” – the language of hysteria (the process of “hysterization of women’s bodies” (Foucault, 1998, p. 104).

The comparison of hysteria with linguistic, semiotic systems began in the second half of the XIXth century (Showalter, 1993, 1997), at a time when scientific illustrations were particularly popular, interpreting in detail and explaining the mechanism of development of a particular pathology. The creation of artistic fixations was acutely critical for the representations of elusive mental pathologies. One of these elusive pathologies was hysteria – a proteus disease, as the doctors of the XIXth century put it (Richer, 1885).

An 1887 illustration by Charles Paul Renouard, which depicts Dr. Charcot’s as “Napoleon of Neuroses” against the background of a table consisting of illustrations of hysterical poses and gestures (Guerin, 1887), indirectly indicates that a special sign language has been formed in the Salpêtrière hospital, based on a hysterical strategy of representation. In regard to this hypothesis, the main purpose of the article is to analyze the formation of a hysterical strategy of representation in art. To achieve this goal, a number of tasks will be analyzed: search for the origins of the hysterical strategy of representation; analysis of the reasons for the formation of the hysterical strategy of



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representation in the second half of the XIXth century; analysis of the process of creating images of hysterical bodies by doctors on the example of little-known and little-studied drawings and photographs made by hospital employees (Paul Richer, Désiré-Magloire Bourneville, Dr. Loro) and combined in a series of albums with articles called “the Photographic Iconography of the Salpêtrière” (“Iconographie photographique de la Salpêtrière”) and “the New Iconography of the Salpêtrière” (“Nouvelle iconographie de la Salpêtrière”).

The phenomenon of hysteria as the word “hysteria” – is multivalent and difficult to explain in a single way. The etymology of this word itself contains gender restrictions that influenced the consolidation of the feminine characteristic “hysterical” (hysteria (ὑστερικός or ὑστέρα) in Greek means “uterus”, “womb”) in colloquial speech. It is worth noting that this characteristic is also multi-faceted, versatile and is not limited to a single interpretation. The lack of homogeneity in the research and characteristics of hysteria is a consequence of gaps in the study of women’s diseases: for a long time, it was believed that the cause of all diseases in a woman is a wandering uterus. In this regard, in the period of Antiquity, any deviation from the “norm” was interpreted as a problem with the “hysterion”, that is, with the uterus (Edwards, 1960). Thus, the ecstatic states of the maenads were a consequence of their problems with the uterus, which subsequently introduced these images into the field of the hysterical in the second half of the XIXth century (Meige, 1894).

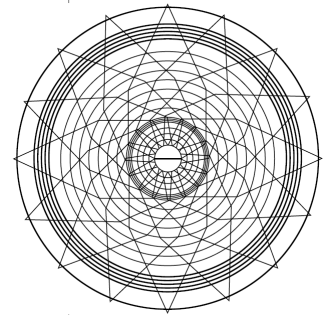
In the Middle Ages, the vector changed: women with any pathologies (physical or mental diseases) were inscribed in the marginal area, they were labeled “possessed” (you can recall the stigmatization of the so-called “witches”) (Starkey, 1949). However, during this period, the formation of the so-called “hysterical strategy of representation” was completed, which later formed the concept of “neuromimesis” of the Salpêtrière hospital, so crucial for the artistic environment of France in the second half of the XIXth century. The convulsions and S-shaped poses of the maenads, which became emphatic and difficult to interpret, “migrated” and were embodied in the artistic images of the “possessed”, which can be clearly seen in the images of the St. Vitus’ Dance by Pieter Brueghel the Elder (“Epileptic Women of Molenbeek” 1564) or monumental canvases by Peter Paul Rubens (“Saint Ignatius Loyola Healing the Sick and Possessed” ca. between 1620 and 1639).

The main question facing the researcher of images of pathologies in art when studying hysterical discourse is the question of the reasons for the popularity and actualization of hysteria in the second half of the XIXth century. The answer to this question was given by the historian Joachim Radkau in his book “The Era of Nervousness. Germany between Bismarck and Hitler” (“Das Zeitalter der Nervosität:

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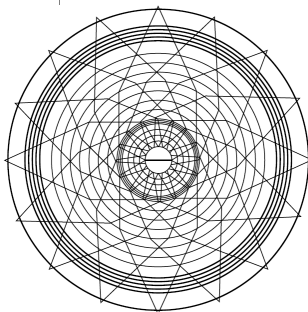


Deutschland zwischen Bismarck und Hitler”) (Radkau, 1998). Radkau wrote that in the second half of the XIXth century, technological progress and sexual emancipation outstripped the mental capabilities of a person, accumulating “nervous” mechanisms (Radkau, 1998). The embodiment of the “Era of Nervousness” was the construct of hysteria, a disease that carried many disguises, during which a person lost control, but at the same time was controlled.

The hysterical strategy of representation became a kind of “unattainable dream” of the “era of nervousness”: the body of the hysteric clearly fit into the master scheme of the Hysteric and the Master described by Jacques Lacan (it is worth noting that, of course, Lacan described the problems of object-subject relations with a hysterical person much later than the second half of the XIXth century). According to Lacan, the Hysteric becomes a kind of material in the hands of the Master, in fact, everyone went through a “hysterical stage” in his life: the teacher controls the student, the parent controls the child, “collecting” the emerging personality, setting behavior models (Gherovici, 2014).

In the second half of the XIXth century, a person who entered a certain “terra incognita”, an environment that was ahead of his physical and mental capabilities, needed such “set coordinates”. The patient with hysteria had a hope of entering the field of “norm”: he became (more often she) a puppet in the hands of a doctor who manipulated the patient’s body, set him the behavioral model. This ambivalence of the hysterical strategy of representation can be traced if we turn to the large-format canvas of Pierre Aristide André Brouillet “A Clinical Lesson at the Salpêtrière” (“Une leçon clinique à la Salpêtrière”) 1887. This artwork became a sensation at the Paris Salon of 1887 due to the fact that Brouillet deciphered the mechanism of the hysterical strategy of representation: the stages of the “hysterical performance/show”. Brouillet presented a demonstration of a hysterical seizure by Dr. Charcot for his students and interns, the process of “rehearsing” before a public demonstration of a hysterical body. The fact that before the viewer there is a construction, neuromimesis (that is, the forcible copying of a pose from a work of art), the determination of the “hysterical coordinates” of the body is evidenced by not the most noticeable element of the canvas: a drawing that hangs on the wall behind the backs of interns who are carefully watching the development of convulsions in a hospital patient. Charcot points out to her this drawing, which shows a hysterical arch – a kind of culminating point of a hysterical seizure, and the patient dutifully copies this pose.

This drawing was created in the space of the Salpêtrière Hospital by the medical artist Paul Richer for his dissertation “Clinical Studies on Hysteric-Epilepsy or Great Hysteria” (“Études cliniques sur l’hystero-épilepsie ou grande hystérie”) (Richer, 1885).



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The construction of hysteria with the help of artistic means has become a consequence of the centuries-old problem of the representation of psychopathologies: the “inner body”, and even more so the psyche, could not be expressed in any way, only physically. For a long time, this problem associated with mental diseases was used to create images of the possessed and obsessed in the bosom of the church, but with the “birth” of psychiatry in the XIXth century, a struggle for disciplinary power between these two institutions began.

Jean-Martin Charcot decided to put the hospital at the service of developing the artistic iconography of hysteria, as he sought to use visual images to indicate the “reality” of hysteria. The reliance on visual means is connected with the dominance of the concept of oculocentrism in the XIXth century: to see = to exist. To visualize hysteria, Charcot created art services at the hospital: photo laboratories, foundries and sculpture workshops. With the help of photofixations, doctors cataloged the bodies, creating certain “types” of the disease, resorting to repressive practices and methods: mesmerism, hypnosis and current. All these tools made it possible to manipulate the bodies and set the necessary poses for patients. Charcot became the second Mesmer: with the help of suggestion, he manipulated the bodies of patients, creating a kind of “factory of stars”, it is no coincidence that Guy de Maupassant dubbed Dr. Charcot the “breeder of hysterics” (Maupassant, 1882, p. 2). Charcot’s reliance on Mesmer’s practice is confirmed when getting acquainted with his collection of works of art: Charcot carefully collected prints depicting mesmeric sessions (Tourette, 1889).

By means of suggestion, Charcot created the “Salpêtrière theater”, which made it possible to turn hysteria into a mass phenomenon, which launched the process of aestheticizing the disease. Historical bodies and Charcot became permanent heroes of graphic sheets of the 1870s-1880s, which was facilitated by Charcot’s intern Dr. Richer. Richer fixed the cataloging of the hysterical body by decomposing it into the “letters” of this “hysterical alphabet”. With the help of the conventional rules of art history, Richer represented hysteria in the form of a table of poses: each column of the table artistically characterized a certain phase of an elusive hysterical fit.

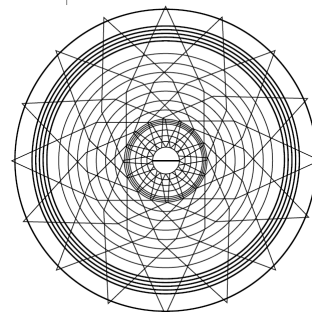
Analyzing Richer’s table, in which he drew hysterical bodies in poses similar to the movements of ancient maenads, one can recall Abi Warburg’s idea of the “Pathos formula” (“Pathosformeln”), published by him in 1905 to indicate the problems of symbolic form, the emotions and the framework of which are difficult to identify and understand.

Warburg himself, in fact, continued the idea of the biologist of the second half of the XIXth century Richard Semon, expressed in his concept of engrams (engram definition) (or dynamograms) about “common places” in the image, cyclically repeated in art, which

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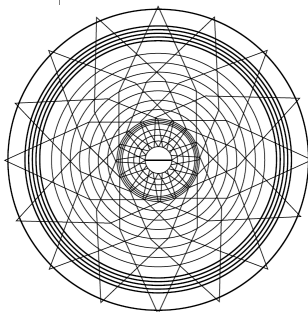


are imprints of affective-orgiastic experience, according to Elena Petrovskaya (Petrovskaya, 2019). As can be seen, Richer's drawings and his synoptic table of hysterical forms precede the theories of Semon and Warburg about "common places" in the image, which differ in the variability of emotions. Richer's artistic images, borrowed from the history of art, became the basis for Charcot. Charcot focused on the concept of neuromimesis, that is, the circulation of certain images from the art history and their embodiment in the bodies of hysterics.

Richer's drawings have become a certain "set of rules" for the hysterical body. The hysterical performance, that is, the public demonstration of the bodies of hysterics, was played out in three stages: the preparation stage is the demonstration of the hysterical body to the doctors at a closed Tuesday lesson at the Salpêtrière hospital (which was captured by Brouillet), during which, using the suggestion method, the hysterical woman was set a behavior model and "taught" the desired pose; the stage of public performance (protoperformative practice) is a stage during which a hysterical woman on stage played a hysterical fit in front of the audience; the stage of participation is the involvement of the audience in a hysterical fit during the annual Madness Ball, during which doctors demonstrated hysterical bodies to the general public, and the audience could interact with hysterical women.

Researcher Amanda du Preez compared such a dramatization of pathology with the concept of Laura Mulvey "to-be-looked-at-ness" (Preez, 2004): the hysterics themselves liked when they were looked at, because the hysterical person needs a viewer, the viewer set him a model of behavior, calmed him down. This positioning coincides with the concept of being-under-the-eye (to-be-looked-at-ness): a man projects his desires on a woman, and her body adapts to them.

As a result, this violent relationship between the doctor and the hysteric had a reverse form: hysteria became synonymous with freedom, hysteria was associated with the suffragette movement, as well as with the grassroots culture – café-chantant (singing café). In the artistic environment, a special kind of epileptic song ("épileptique") is formed, which was directly associated with turning to psychiatric practices, with hysteria. This type of song appeared due to censorship restrictions that prohibited singers from singing certain lines (Goldstein, 2012). The way out was found in the hysterical manifestation of the singers: the peculiar appropriation of gestures of mentally ill people allowed them to embody not only their unconscious, but also forbidden themes and motives with the help of bodily language ("bodyscape" according to Mirzoeff) (Gordon, 1989). It is symptomatic that a patient of the Salpêtrière hospital, the star of the Ball of Madness, Jane Avril (Bonduelle & Gelfand, 1998) became the favorite model of the artist Henri de Toulouse-Lautrec, as well as a cabaret star. Her



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dance, which she performed at the Salpêtrière Hospital, made her a star of the end of the era. Avril suffered from chorea (the so-called St. Vitus' Dance), which influenced the style of her dance: she lifted her legs high, jumping rhythmically. Such a dance imitated the famous dances of St. Vitus – the epitome of dance mania.

Avril emphasized her “hysteria”: in the famous 1899 lithographic poster by Toulouse-Lautrec, Avril was depicted in a black dress, on which a python is embroidered, as if strangling her. Avril raises his hands in horror and screams. Such a pose can be associated with the pose of “hysterical bow” or “hysterical ecstasy”, and the python, according to the researchers, symbolized the doctor who heals and controls Avril (Eidenbenz, 2012). It was not only Lautrec who was inspired by the hysterical strategy of representation: Auguste Rodin used the hysterical bodies to embody the modern hell in the monumental sculptural composition “The Gates of Hell”, the Belgian artist Félicien Rops in the graphic cycles “Diaboliades” (“Les Diaboliques”) and “Sataniades” (“Les Sataniques”) used hysterical poses, derived by Paul Richer and photographers of the “Photographic Iconography of Salpêtrière” Bourneville and Regnard, to demonstrate the “witch essence” of a woman.

Despite this, in the 30s of the XXth century, this bright and significant phenomenon of visual culture was forgotten and was not covered by either critics or researchers. The surge in the study of the influence of “hysterical” representations resumed during the antipsychiatry movement and the second wave of feminism. A number of researchers have found that seemingly closed systems of representation (for example, medical or anatomical illustrations) are inappropriately replete with sexualized female images, especially in the XIXth century, and the discourse of health, which dominated in this era, developed the opposite cult – pathologies, as a result of which the body became a vessel for the articulation of extremely politicized problems (Archimedes, 2005; Harsin, 1992).

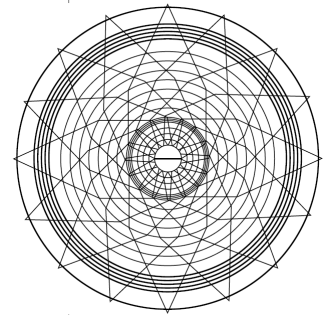
Feminist art historian Rosemary Betterton wrote that, given the public attention and the discussions that have arisen around the disease, we can assume that hysteria has become an explanation for any female deviant behavior (mental problems, prostitution) (Betterton, 1996). As a result, the medical view created certain ideas about the female body, and, accordingly, influenced artistic female images. Indeed, the hysteria visualizations relied on photographic images and documentation based on an intensive study of specific female subjects.

Such a multivalence of the hysterical strategy of representation has influenced contemporary art and visual culture: hysteria becomes tempting for visualization in films and TV series (“Stonehearst Asylum/Eliza Graves” 2014, “Freud” 2020, “Augustine” 2012), and also affected artists: for example, the British artist Sam-Taylor Wood created

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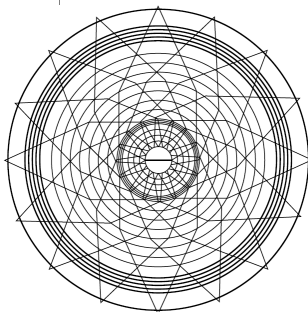
a video work called “Hysteria” in 1997, during which the viewer sees only a screaming female face, whose emotions cannot be identified.

Consequently, using representative medicine (that is, proving the historicity of a number of diseases through the works of old masters) as a statement of hysterical symptoms and, according to Michel Foucault, creating the aesthetics of the disease, the doctors of the Salpêtrière Hospital introduced pathological and hysterical bodies into the visual art of France: for example, the cartoonist Louis Morin identified the sculptures of Auguste Rodin’s “the Gates of Hell” with the hysterical bodily distortions of the Salpêtrière. This was facilitated by the hysterical discourse that emerged as a visual phenomenon in the second half of the XIXth century owing to the activities of Jean-Martin Charcot and the medics of the Salpêtrière: they initiated artistic representations of hysteria with the help of photographic documentation of the bodies of Salpêtrière patients, and also used the mimetic abilities of hysterically ill patients, forcing them to copy “demonic” manifestations from the canvases of old masters (such an idea was clearly expressed in the “historical and art criticism book” authored by Charcot and Richer called “Madness (Demoniacs) in Art” (Charcot & Richer, 1887)). Ultimately, the ideas about hysteria are not only based on the theatricalization and mimeticism of the female body, but also on the interaction of the object with the subject, which becomes important for modern and contemporary artists who use the proteic phenomenology of the hysterical representation strategy for their artworks. In this regard, in our opinion, it seems relevant to continue the research of hysteria in the field of visibility: today a number of researchers touch on this area (Ruiz-Gómez, 2013; Bogousslavsky & Boller, 2013; Marshall, 2016; Furse, 2020), but there is still no full-fledged study of the penetration of hysteria into the sphere of art.

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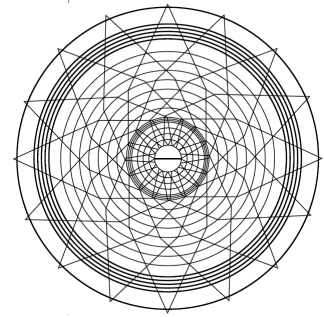
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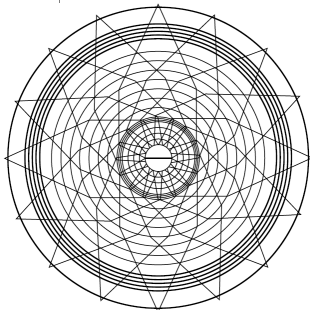
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## ИСТЕРИЯ КАК СТРАТЕГИЯ РЕПРЕЗЕНТАЦИИ В ИСКУССТВЕ ФРАНЦИИ ВТОРОЙ ПОЛОВИНЫ XIX ВЕКА

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### **Аннотация:**

В статье будет рассмотрен процесс превращения болезни истерии в социокультурный феномен и стратегию репрезентации во второй половине XIX века. Автор приходит к выводу, что верификация симптомов и фаз истерии художественными средствами совпадает с концепцией Фуко о процессе эстетизации болезни. Использование художественной иконографии истерии, заострявшей проблематики бинарной оппозиции здоровья и болезни и отношений между врачом и пациентом, становится заманчивым способом завуалированной репрезентации различных дискурсов второй половины XIX века: политических, социальных и других. Интертексты истерических контрактур можно проследить в ряде произведений искусства. Анализируя и сравнивая эти произведения со сформированной в больнице иконографией истерии, можно проследить процессы изменений репрезентации человеческого тела в искусстве под влиянием новых открытий медицины. В связи с этим представляется актуальным продолжить исследование истерии в области визуальности, поскольку до сих пор нет полноценного исследования проникновения истерии в сферу искусства.

**Ключевые слова:** искусство Франции, эстетизация болезни, психиатрия и искусство, художественные репрезентации истерии, дискурс больницы Сальпетриер, интертекстуальность