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Sympathetic Vibrations: Sense-ability, Medical Performance, and Hearing Histories of Hurt

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Mary King, Joan McCarthy, Órla O'Donovan, Róisín O'Gorman, and Margaret Werry

What kind of thing is a wax moulage? Is it an image, a model, a representation of a diseased body part? Or is it a material trace of a suffering person, a remnant of a body physically impressed in wax? Is it a record of past medical performance or a past artistic one: a woman holding her face still against the sting of wet plaster; a mouleur (model maker) encasing that face, confronting or comforting that woman, pouring wax in the mold, warming it with his fingers, manipulating and coloring it over weeks of tactile labor? Or is it a performance in itself: the last gestural utterance that remains of a woman without a name (but with a disease)? Does that face (as Rebecca Schneider ("That the past may yet have another future" 287) would have it) "hail" us across a century and a half? And if so, what does it say?

This collaboration responds to a mostly forgotten and neglected collection of nineteenth-century medical wax moulages, currently in the storage facilities of University College Cork, Ireland. They were crafted using plaster casts of body parts taken (in an invasive and likely painful process) from people suffering the dermatological symptoms of various diseases and were likely part of a teaching collection held by the medical school, now largely obsolete. While we know much about the artist who crafted them, French mouleur Jules Baretta, the UCC archives preserve only the scantest information about their subjects. One of them, for example, is listed in the university's Heritage Service's inventory as Accession No W064, a moulage of the genitals of a woman with extensive syphilitic lesions but it is otherwise silent about her.

The moulages came to our attention when we were conducting research into the history of the university's institutional imagination of human remains (O'Donovan, O'Gorman, McCarthy). This research was conducted against the backdrop of intense public disquiet about the uncared-for remains of women and infants who suffered a social and living death before dying in one of Ireland's former so-called Mother and Baby Homes. While the country's other medical schools have archival records of the use of remains from these institutions, the University College Cork archive is silent on this matter. Further, the Irish state's recent Commission of Investigation into Mother and Baby Homes (2020) recorded that it found no evidence that children were used for anatomical studies in the Cork Medical School.

Alongside this absence, we found the moulages. Were some of them, we wondered, all that remains of the bodies that lived and often perished in the “care” of an ensemble of entangled institutions: “lock hospitals” where women suffering from syphilis were imprisoned, the university, and a professionalizing, transnationalizing medical establishment whose prestige was built on research conducted on charity cases — the bodies of the disenfranchised, the discarded, the socially dead? Bodies that didn’t matter.

There is so little information available about the moulages’ provenance that any link to this history can only be speculative. The moulages are not evidence of their subjects — the dermatologically afflicted, their travails, or their fates. Instead, we speculate about if and how the moulages might be put to queer use (Ahmed, *What’s the Use? On the Uses of Use*). How might they put pressure on what exactly is publicly allowed to speak to or for those absented by the archives of these powerful institutions, and how we listen to that speech? The moulages — as we have come to understand them — are material remains of past scenes of medical performance, cryptic letters from the past that we are unable to read but that nonetheless insistently demand our attention. They are more than simple representations of medical facts. They are the traces of painful entanglements between people and institutions and materials that, precisely because of their opacity, their undecidability, compel us to “stay with the trouble” (Haraway *Staying with the Trouble: Making Kin in the Chthulucene*). As such, they provoked us to consider a set of fundamentally ethical questions. What kind of consent could exist in the medical scenes that gave rise to these objects, and what kind of violence underpinned it? What is our responsibility to those erased from our own institutions’ archives, on whose bodies the institutions’ authority was built? How might things — especially these things, literally bearing the imprints and other traces of absent bodies — do a kind of “pastpresence work” (O’Donovan 247) that could allow us to ethically encounter the disenfranchised dead? Approaching wax moulages as agential assemblages, entangled in which are traces of human remains and marks of the power relations of nineteenth-century medicine, such pastpresence work foregrounds the erasures of those medical regimes. This unique temporality recognises the capacity of wax moulages to bring the dead into the present to spark questions and spin stories about the relations of the moulages’ production and use.

To theorize this ethical encounter, we adapted a concept from acoustic theory: “sympathetic vibrations”, the resonance produced by sound(s) that may or may not, itself, be heard. To attune oneself to sympathetic vibrations requires “deep listening” (Oliveros), a listening that reaches beyond habitual understandings and hears registers of sonic experience that can’t easily be grasped. Deep listening, as we endeavour to practice it in this collaboration, is a response to archival absence that resists evidence’s promise of representational plenitude, a response in which (as in the negative image of the plaster cast), what is missing comes to matter (Ahmed, *What’s the Use? On the Uses of Use*), without ever being restored to signification.

In what follows, we attempt to attune ourselves to the moulages’ resonances and listen for the spectrums they sound across our respective disciplines of applied social studies, medical ethics, music, and performance studies. And we listen with faculties — haptic

faculties, auralities, gazes — that sensitize us to them in different ways. Inspired by Haraway's "response-ability" (12), a praxis of care and responsibility, we attempt to imagine "sense-ability", a praxis of sensibility and care that expands our usual sensory regimes and disrupts conventional disciplinary hierarchies and divisions of the senses. As Rancière has argued, any given political order is secured by a regime of sense — meaning both the common sense shared by the body politic and what (facts, bodies, experiences, events) are perceptible by it; creating change means challenging this "distribution of the sensible" (7). Likewise, we seek to un-discipline our own academic faculties, unsettling the disciplinary ways of knowing by which the moulages were produced and displayed, and making counter-disciplinary interventions into our own scholarly habits and perceptual ranges. It is for this reason that we do not illustrate this article with an image of a moulage. Not only would this risk circulating traces of women's bodies in the ongoing absence of their own voices and agency, but it implies that the visual offers an epistemological and ontological grasp of these entities when it is precisely this certainty that we hope to unsettle. Instead, we bring speculative fiction to bioethics, new materialisms and a non-linear sense of time to acoustic theory and applied social studies and the history of performance aesthetics to medical epistemology. In sum, this article presents an archive of our own collaborative process, an assemblage of responses that critically and creatively reimagine the regimes of the sensible that prevail in our respective disciplines.

A Fragment, a Scene, a Refrain:

Mr. Baretta is a valuable collaborator of science. Without brutality, with the softness of a mother and an enduring patience, he places his equipment and while the substance is taking, he converses with the patient. He is interested in her condition, becomes the narrator of developments, wins, without forcing, the trust of his patient, as he inspires empathy. Does the patient prefer to be silent, as it takes a certain amount of time to let the material set… then he [Baretta] goes to the piano and soothes his client with a few old melodies.

— M. Sully Prud'homme, "Preface" in L. Roger-Miles, La Cite de Misere (Paris, 1891), 160-65; cited in Hunter (47)

The Useless Collection of Wax Moulages in University College Cork

Just as we know little about the people whose sore and lesioned skin was used to craft the nineteenth-century collection of wax moulages currently in storage in University College Cork, we know little about the uncanny collection itself and when and why it became useless matter out of place. Consisting of 150 moulages of diseased and disassembled faces, hands, genitals, feet, breasts, backs, legs, and arms, we have only faint traces of knowledge of the crafting, acquisition, "use", and eventual consignment to the oblivion of the collection. Sara Ahmed's history of the word use and utilitarian thought has attuned us to how and why the word useless is a powerful tool in the designation and discarding of things as well as people. In keeping with wax moulages' capacity to disrupt the conventional temporal order with their haunting pastpresence, Ahmed's work has

encouraged us to think about the “strange temporalities of use” (*What’s the Use? On the Uses of Use* , 26), how the original intended use of the collection is not the whole story, and to think about the collection’s past and possible future queer uses.

Searches for information about the biography of use of the collection in the university’s archive produce the repeated flat toned note that accompanies the message “the search item was not found”. However, the archive provides ample feel for the institutional culture and schemas of perception of the nineteenth-century colonial university, then Queen’s College Cork, which was primarily a medical school. The pedagogical importance attached to museums of various sorts is clear – museums’ use and display of specimens, sections, and models. Access and exclusions of use of the scientific collections are also apparent. For example, there are records from 1850 about the granting of permission to the Cuvierian Society of Cork to borrow museum items for display at a “scientific soirée”. That Society was named after Georges Cuvier, infamous for his contribution to scientific racism via the dissection and display in Paris of the remains of Sarah Baartman. We also know that controversy about who could see and touch what and with whom was central to debates about the exclusion of women from studying medicine that was circulating in the university around that time. Records from 1892 relating to the eventual admission of women to the study of anatomy, on condition that they dissect in a screened-off part of the dissecting room, includes a letter from the Registrar and Professor of Anatomy. He stated that “the reasons why they should not dissect alongside the other students are obvious”, so obvious that they were unsaid and unrecorded.

The normalised use of the bodies of the poor in teaching the useful knowledge of anatomy is also apparent. For example, in correspondence dating from 1853, the Professor of Medicine complained about the “lack of subjects for dissection”, blaming the Professor of Anatomy for refusing “to pay the workhouse what they demand for the subjects which means that the students are losing out on practical work”. Tracing the uses of the word “use” underpinning the 1832 Anatomy Act, Ahmed notes that it was “the poor, the paupers, the … unwanted, who were deemed appropriable, could we even say usable, for science” (*What’s the Use? On the Uses of Use*, 137). Masking violence and theft, the utilitarian logic was, according to Ahmed, that in death the useless are rendered useful resources, the “idle” are finally put to productive use. The Queen’s College Cork archive also emits evidence that the poor resisted this usage. Correspondence from 1854 acknowledges that “the populace being generally opposed to the practice of Human Anatomy” necessitated the use of “discretion”.

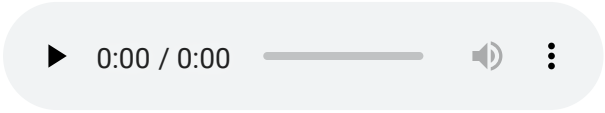
The distinctive signature in white paint on the black boards on which each of the moulages is mounted signals that they were crafted by the famous mouleur, Jules Baretta. Based in the Saint Louis Hospital in Paris, celebrated as the “temple” of French dermatology, Baretta crafted his first moulage in 1867 and went on to produce over 2,000 more before retiring in 1913. Copies of these made their way to medical schools internationally where they were used and valued as crucial teaching tools for diagnosing skin diseases, especially syphilis, the dreaded disease of nineteenth and early twentieth century Europe.

Variations in the condition of the moulages indicate that some may have been used more than others. Several are cracked and blackened, possibly from use and display in teaching rooms heated by coal fires. One of these is listed in the university's Heritage Service's inventory as Accession No W064, a moulage of the genitals of a woman with extensive syphilitic lesions. The digital archive of the dermatological collection at the Saint Louis Hospital, which includes information about all of Baretta's moulages, provides glimpses of some of the people behind the casted cast of the Cork collection. However, in this instance the archive is silent about the age and occupation of the casted woman, telling us only that in 1867 when the moulage was crafted, she had plaques syphilitiques végétantes de la vulve. As Jacques Derrida has helped us understand, the archive is as much about forgetting as it is remembering. As a repository of power relations and epistemes, for every record, there is an omission, something not included, a trace that remains only as a spectral absence. It is impossible for us to tell the story of the woman, traces of whose suffering remain in Accession No W064, but records from elsewhere reveal that many moulages representing syphilis were crafted using the bodies of socially dead and disenfranchised women confined because they had the disease. Nineteenth century France had a punitive system of "management" of prostitutes who were deemed responsible for the spread of syphilis and the threat it posed to the bourgeois family. Similarly, a "lock hospital" was established in Cork in 1869 as part of the operation of the British government's Contagious Diseases Acts. This gynocidal regime of blame permitted the compulsory inspection of women suspected of prostitution and the forcible confinement for up to nine months of those found to be suffering from venereal disease. This was in keeping with the broader colonial and genocidal regime of the disposal of disposable people in place around the time of the establishment of Queen's College in 1845. Two years later, Black '47 was the worst of Ireland's colonial-induced famines that saw a British state response governed by a Malthusian logic of extermination of the country's useless and surplus population.

At some point, in a reordering of the usefulness of things, the Cork medical school stopped utilizing the collection and, spared the status of rubbish, it was consigned to the university's storage facilities. Unlike other collections of wax moulages that were deemed to be completely useless and were dumped and destroyed, the Cork collection was judged by the university's archons to be worthy of a sequestered place under the guardianship of the institution's severely under-resourced Heritage Services. Having negotiated rarely-sanctioned admittance from the Heritage Services staff, it is there that two of us encountered them and were disturbed by their pastpresence work. Confusing the senses and conventional categories of thought, they looked life-like and alive, but were cold to the touch, leaving us with the eerie feeling of having met with the living dead. Off-staged and stored in cardboard and plastic boxes stacked on warehouse steel shelves and cooled by humming air conditioning, this is the liminal "grave" place where these uncanny entities now reside in a jumble of waste – abandoned furniture, obsolete medical instruments, and forgotten portraits. Later when we encountered their kin in wax moulage museums in Paris, Lisbon, and Zurich, they were largely displayed as part of collections that celebrate medical "progress," or they were being restaged and revalued as part of an international renaissance of the usefulness of the medical-art of the moulage. Even so, the marks of violence on these collections became more and more

apparent. Take for example the “signature moulage” (Morse) currently displayed in Zurich. Crafted by Lotte Volger in 1928, the moulage carries the initials of Marion B. Sulzberger who went on to be recognised as one of the “founding fathers” of American dermatology. Sulzberger scratched his initials on the back of a patient with psoriasis in order to demonstrate what is known as Koebner’s phenomenon.

Having come face to face with the moulages in Cork, but also with collections in Paris, Lisbon and Zurich, we have contracted a different archive fever to the one theorised by Derrida. Ours is brought on by an acute uncertainty about our “response-ability” and “sense-ability” to the moulages and the people used in their crafting. The collection has incited us to collective speculation about if and how a feminist and decolonising restaging of the collection might be desirable and possible, using what Ruth Fletcher and others (2) refer to as the “wench tactic” of “repurposing shrapnel”. Might the useless collection help us imagine counter-histories, demythologising, and putting to rest the conventional histories of medicine and the work and use of the university? Might it help us undertake deep critical research into the contribution of medical collections to shaping contemporary academic disciplines and divisions between them and their ways of knowing? Might these useless things help provoke different public responses to the troubling matter of the uncared-for remains from Mother and Baby Homes and help us learn how to mourn collectively for deaths once deemed ungrievable (Butler and Yancy)? In these pandemic times, might the collection help us recognise and go beyond contemporary forms of blame, disposable life, and exploitative use justified in the name of science and public health? But then, who are we to re-use the collection?



Case W907 A Speculative Ethical Analysis

This speculative fabulation is an imaginary account of the encounter between a young woman, Marie Etsy, and Jules Baretta. It draws on the limited information that we have about the mouleur, his workshop, and his work with the many hundreds of patients of the adjacent Saint Louis hospital, whose pathologies he re-created in wax (Schnalke, Tilles).

As a work of speculation, the imagining of the encounter between Marie Etsy and Jules Baretta diverges from the contemporary practice of generating medical ethics cases from clinical charts and specific circumstances often provided by health professionals. However, even these, supposedly neutral, medical scenarios pass through some lens, sieve, or strainer which determines who or what is included, who or what is attended to, who or what is ignored (Chambers). So, even if this case is a flight of fancy, it can still work, as other standard medical ethics cases do, to serve as a medium for speculation about the ethically salient dimensions of the practices involved in the production of wax moulages in nineteenth century Paris.

One way of analysing the case from an ethical perspective would be to view it through the prism of the ethical norms that prevailed at the time. Physicians, such as Dr. Lailler, who employed Jules Baretta, and who worked in public hospitals such as the Saint Louis

Hospital, were bound by the ethical standards set by ad hoc medical unions or syndicates of France in the late 1800s (Nye). These standards or duties were intended to regulate the practices, interprofessional relationships, and public responsibilities of medical professionals who were, ideally, male and from a certain class. They rested on the assumption that physicians were personally honourable along the lines of what has been described as the exclusively male honor codes of the bourgeois social and recreational societies which flourished in France at that time. Specifically, while their primary orientation was a concern for public health and the control of diseases such as syphilis and leprosy, physicians were perceived to have both an ethical and a legal duty to treat their patients competently and, with a kind of paternalistic consideration, not to intentionally harm them (Nye).

Returning again to W907, if Jules Baretta saw himself as equally bound by the same ethical norms that bound Dr. Lailler, he would have, at a minimum, perceived himself to have a duty to avoid intentionally harming Marie Etsy. Beyond that, he might have assumed that her agreement to sit for him and endure the processes involved in producing the wax moulages of her face and arm was voluntary, or free, in the most basic of senses i.e. that neither he nor Dr. Lailler should (literally) force her to do it.

Concerns about avoiding harm and patient voluntariness have persisted both in France and internationally, up to the present day. In keeping with the dominance of neoliberal bioethics internationally, a key ethical and legal standard governing current medical research and clinical practice is the requirement of informed consent on the part of the individual patient. The requirement to obtain the informed consent of patients and research subjects to undergo a medical intervention or participate in research is viewed as a means of ensuring that they are protected from the harm of manipulation, deception, or assault that a health professional might intentionally, or unintentionally, visit on them. It is also seen as an important means of protecting and promoting the voluntariness of patients and subjects — ensuring that their participation is genuinely free and uncoerced. Finally, the requirement of informed consent is considered to be central to protecting and promoting the autonomy of patients and subjects — their right to control their own lives and to decide what happens to their own bodies.

From the liberal perspective then of an understanding of medical ethics that prevailed in the second half of the nineteenth century and which continues to resonate today, the questions that come to fore in relation to W907 might include:

How was Marie Etsy recruited by Lailler/Baretta?

What information was she provided with about the processes that she would be subject to?

What risks of harm were involved?

Was there any remuneration or gratuity offered?

Was her participation unduly influenced or coerced?

Was she informed that the process was non-therapeutic — likely to be of benefit or use to education and research but of no direct benefit or use to her?

Given the many examples of medicine's abuse and exploitation of research subjects and patients in the intervening years (notable among them the Nazi experiments in Germany or the Tuskegee Syphilis Study in the US), the necessity for the requirement of informed consent as a basic standard of ethical research or clinical practice is indisputable. However, we wonder if more can be said about the ethically salient dimensions of W907 and its legacy for contemporary medical ethics discourse.

We suggest that an alternative reading of W907 is also possible — one that is more attentive to its narrative dimensions and more accommodating of the interdisciplinary focus of this project. Initially, attention to the narrative dimensions of medical cases was inspired, in part, by the work of Martha Nussbaum who argued that literature was a vast resource of moral knowledge and a means of sensitising people to the responsibilities, obligations, and challenges of a full moral life. In turn, narrative ethicists place emphasis on the uniqueness and unrepeatability of every encounter. They also shine a more critical light on the role of case histories in clinical practice — it matters what stories get told, how they are told, and who tells them. The work of Rita Charon, for example, pays attention to the narrative elements of medical cases and interrogates the function of the narrator both in engaging the reader and in shaping the story through the selection of content and the development of plot and character. Critically, a narrative approach attends to the deeper structures, foundational stories, asymmetries of power, and oppressive relationships within which stories are created and repeated (Lindemann Nelson).

Finally, for some who take a narrative view of ethics, the objective of ethical analysis is not to reduce difference through appeals to abstract principles or duties such as the prescription to avoid harm or gain informed consent. Rather, it is to open up dialogue, to develop new vocabularies, to seek out tensions between individual and shared meanings, not in order to reduce them but to multiply them (Brody; Hudson Jones). Narrative ethics, on this view, involves "a kind of poetic redescription that allows us to see the world in new ways" (Arras 92).

The project of this paper takes this task of "poetic redescription" further. If we examine W907 from a narrative perspective that is broadened to include visual, aural, haptic, temporal, and collective dimensions of human engagement, what ethical dimensions/queries come to the fore?

Who was Marie Etsy?

What were her life circumstances and important relationships?

What were her cares and concerns?

How long was she a patient in l'Hôpital Saint-Louis?

How did she experience Baretta's piano music? Or, the smell and touch of plaster, spoon, fingers?

Was she afraid – physically, emotionally?

What did she know about her disease? How did she feel about it?

Would she have been treated differently/spoken to differently by Baretta if she were a man? Or he, a woman?

How did Baretta understand his responsibilities in relation to her care?

Was she excited or appalled at the idea that “all the world” would come to see her face?

What did she thinkfeel about her body being used to craft a moulage, at the time and later in her life?

Did she share her experiences of being used to craft a moulage with other patients whose bodies were also used? Did she see the moulage that was made of her?

Did she imagine her face and arm might end up in storage in University College Cork? What was her imagination of the future? Of us?

How is contemporary medicine and bioethics haunted by Marie Etsy and others whose bodies were cast and used?

In writing history from the archive there is no recuperation or redemption; remembering is pock-marked and made up. “Is it possible,” Hartman wonders, “to exceed or negotiate the constitutive limits of the archive? By advancing a series of speculative arguments and exploiting the capacities of the subjunctive (a grammatical mood that expresses doubts, wishes, and possibilities)… both to tell an impossible story and to amplify the impossibility of its telling” (11). To speculate is to attend to the ways in which we search, to practices of looking (both looking at and looking for), and to the omissions and emissions of our practices of perception. We cannot find evidence, but we can hear emissions of authority that declare absences and assign use values. We begin possibly to see the processes of omission and disappearance central to both visual comprehension and the normalization of regimes of power. As Peggy Phelan reminds us “Learning to see is training in careful blindness. To apprehend and recognize the visible is to eliminate as well as absorb visual data” (13).

Touchy Art and Showbizzy Science: the Mediality of Wax

And what of the matter of wax itself, the matter of the medium? Does it matter? What part does it play in the perceptual economy that links woman, mouleur, moulage, medicine, and memory? Medical model makers of the nineteenth century valued wax for its realism and the supposedly mechanical objectivity of the casting process. The moulage could establish the medical facts of a disease through its power of representation, it was thought, neatly (literally) excising sign and symptom from the body of the patient or corpse, clinically isolating, classifying, and perfectly preserving it. But the wax moulage is no simple representation. It is an ontological tease, an impure object, that gives the lie to representation’s fictions. It drags the body and its history with it. It touches and asks to be

touched. It vibrates with the accumulated aesthetic conventions, social customs, phenomenological baggage, affects, fascinations, and mysteries of wax's centuries of use as a mimetic medium.

Both medical and art historians have remarked that because it originates in a physical impression, a moulage is (in Charles Sanders Peirce's terms) an index rather than an icon: that is, a sign that refers to its object by virtue of a material connection, that is "affected by its object." Depending "on association by contiguity" with the thing it represents — here, the face impressed in plaster — an index points us back to that thing. The wax moulage shares this indexical quality with other media such as photography (where reflected light from an object impresses itself on film) (Pierce). But wax is insistently more material. When a cast is taken, when that mold is filled, surfaces mingle: a model's skin cells adhere to plaster, pubic hairs entangle with wax, and even the modeler leaves forensic traces in the object. In this sense, a moulage is a durational touch, an ongoing choreography of skin, fabric, plaster, and wax — serially attenuated as the cast is used and reused to make sequences of wax forms. All these qualities make the moulage less a stable thing than (as Órla writes elsewhere) "a lively assemblage in process." (O'Donovan 234)

The moulage it seems blurs all the boundaries, the "agential cuts" (Barad 815) that representational thinking draws to distinguish actors from things, subjects from objects, matter from meaning, and human beings from inanimate forms (Panzanelli). Working with wax points us to what a material, imbricated act representation is in the first place because it pivots on touch. Touch is a sense-act that affects at the same time as it perceives; as such, it is a way of knowing that entertains no objectivity. When we touch, we impress that with which we make contact, but we also sense and are moved by that thing. Touch alters the body, ours and the other's, from the molecular mingling of surfaces to the currents of affect that move beneath. As Erin Manning has argued, touch has a politics distinct from that of vision: attending to touch reveals a processual, emergent body (politic) in relational matrices, not a static body (politic) that must be made — like Spivak's subaltern — to signify.

Wax also issues a call to be touched. "Everything in it," Georges Didi-Huberman contends, "plasticity, instability, fragility, sensitivity to heat, and so on – suggests the feeling or fantasy of flesh." Since its Renaissance heyday, wax has been demoted in the canons of art history because of this quality of "excessive resemblence", a quality "so radical, so unmediated, that the 'real' of the image obfuscates everything else" (66). Wax's mimetic power to evoke life threatens to reproduce rather than merely illustrate it. This accounts for why wax so frequently appears at the threshold of animacy, between death and life, thing and person. A cadaverous face is said to look waxen, while a wax image evokes death through the uncanny effect of lively corporeal presence stilled.

Wax's mimetic power to enliven, to reproduce life, also accounts for its association with the feminine. Baretta's forebears such as Clemente Susini and Gaetano Zumbo famously fashioned "wax Venuses": life-sized obstetric models that took the form of naked, unconscious women reclining alluringly, their bellies splayed to reveal the hidden, gory mysteries of reproductive anatomy. There is a tight link, Mary Hunter argues, between the

morbid erotics of these Venuses — with their unholy come-hither — and the dermatological moulages in the private collections of Doctors Jules Émile Péan and Alfred Fournier, many of which featured the ravages of syphilis on female genitalia. These waxen forms literally modeled a touch that granted intimate access to the forbidden: many featured the fingers of the mouleur holding the folds of the vulva open for inspection. Wax models in this medical-aesthetic genealogy teetered on the symbolically violent threshold of life and death, the pornographic and the scientific, desire and repulsion (Pierce; Ebenstein; Bouchard) Wax is queer, unsettling boundary matter. Touch! Don't touch! It shouts.

Wax is also a privileged medium for touching history, materially mediating between the living and the dead. Used since Roman times for funerary effigies and death masks, wax prolonged the social presence of the dead, exercising the ancient mimetic magic whereby the "representation shares in or takes power from the represented" (Taussig) by virtue of having touched it. In explicitly theatrical entertainments such as those of Mme Tussaud, wax's claims to scientific realism cross-bred with historiographic sensationalism: several of her early subjects were the decapitated hero-villains of the French Revolution and Tussaud claimed to have crafted the wax figures from death masks that she had personally cast. Tussaud's representations claimed authenticity by virtue of indexicality: like contact relics, they allowed the patron to touch history because they had themselves touched history's dead. The original Madame was, notably, trained by medical model maker, Philippe Curtius, suggesting that these two registers of ceroplasty, the popular and the scientific, are not as distant as the latter would claim.

Both medical and theatrical ceroplasty pivot on the mystical mimetic capacities and ontological instabilities of wax, which crystalize in what Uta Kornmeier calls the "waxwork moment" — the blink, the instant in which the viewer first encounters the wax figure and is plunged into a crisis of uncertainty: is it real, is it breathing, or is it dead? When disbelief is suspended, the dead/past momentarily surges back into life. When performance theorist Rebecca Schneider (*Performing Remains: Art and war in times of theatrical reenactment*) stumbles across a wax finger – a literal index – on the battlefield of a Civil War reenactment, she experiences this waxwork moment in all its queasiness and vertigo. Drawing on Fred Moten, she calls it inter(in)animacy: how performance's liveness and its pastness co-constitute one another in the material mediality of mimesis, animate one another, but also create temporal drag and leak. The threat-promise of theatricality, according to Schneider, is that time might go backwards as well as forward — that we might "touch history."

The medium matters. When medicine's archive enlists the wax moulage, it banishes its ontological ambiguity, its mimetic excess, the psychic or phenomenological tug that the medium exercises, its liminal pastpresence. And with them, it banishes the history of hurt that the moulage might tell. But wax is hard to make sense of. It cods the eye. And it is noisy stuff, with its murky notes of spectacle and fantasy, hypermimesis and indexicality, morbidity and liveliness. Its touchiness. Its vibration.

Spectralism and Sympathetic Vibrations

Can we understand these moulages in the context of their pastpresence (O'Donovan)? More to the point: can we hear the historical resonances that these supposedly inanimate objects sound in our present/ce? All matter has a sonic profile and all sounds are comprised of a complicated mixture of vibrations. Musical pitch is determined by the number of vibrations per second — the higher the pitch the more vibrations per second (frequency). Orchestras, for example, often tune together to A440 — meaning the pitch called A which has 440 vibrations per second (a frequency of 440 Hz). However, even musical pitched sounds are themselves composed of a complicated mixture of vibrations of different frequencies. A sound spectrum is the particular combination of frequencies (each at a specific volume) that sound for any given musical note. The spectrum is thus the primary way that we experience musical timbre — the distinctive qualities of the sounds we hear.

In the nineteenth century, through his sonic "spectrographs," Joseph Fourier demonstrated through analyses of any continuous sound, we hear the fundamental frequency as well as a combination of sympathetic frequencies at diminishing intensities above that frequency. This natural phenomenon — known since at least the time of Pythagoras — is referred to as "the harmonic series" and could be demonstrated with mathematical formulae and represented through musical notation. The first overtone of this series is one octave above the fundamental, the second is an octave and a fifth, the third is two octaves, and so forth. When you hear a C on piano, for example, you're actually hearing that particular C as well as all of its overtones in various strengths. For any sound, the particular combination of the strengths of these overtones determines the timbre, quality, or colour of the sound — they're what make a violin sound different than a trumpet and give each of us a unique voice.

While we may be aware of the spectrum when we hear a musical tone, we may be unable to hear the individual frequencies separate from one another. Those frequencies exist, however, whether we are aware of them or not. Notably, when vibrations come in contact with a string that is tuned to a ratio of the fundamental (when the string is an octave higher, for example) that string will begin to vibrate "sympathetically" — sounding its own new fundamental pitch (which is also part of the composite sound — the "overtone series" — of the first fundamental). Many people have had the experience of playing music, only to hear a lampshade rattling or some other unexplained buzzing. This is the invisible but ubiquitous phenomenon of sympathetic vibration. The lampshade is itself "tuned" to resonate with a particular frequency that the music (or other ambient sound) has activated. Things, it seems, are connected in this network of vibration. Indeed, quantum mechanics dictates that all matter not only has a resonant frequency (as the lampshade demonstrates) but is frequency — as the principle of wave-particle duality shows us. We are all, each one of us, vibrant matter — both responding to and emitting our own spectralities in an ever-vibrating, interconnected, and resonant physical environment.

It has been argued that "the modernist separation of the world into the passive matter and vibrant life" is an ideological imbalance, eschewing the reality that spectrality is a ubiquitous and binding force (Bennett 448). Indeed wave particle duality, like the yin and yang of Eastern philosophies, shows us that there are "being" and "doing" aspects to all

matter(s). The sympathetic vibration of spectrality models this simultaneous duality of matter and/as energy — of being and/as doing. In this regard, we might say that the matter of use is indelibly tied to the use of matter — that Bennett's vibrant matter is directly connected to Ahmed's usefulness. That which is useful matters. But in order to imagine the usefulness of the wax moulages, we must not desensitise ourselves, in addition to seeing (vibrations) and feeling (vibrations), we must also listen — even to the spectralities of inanimate objects.

Spectrality is at the heart of much musical training — though it is usually not taught in such a way. To learn to play "in tune" is to learn to sync up vibrations in relation to each other in ensemble playing. To learn to combine various instrumental colours together as a composer is to learn how instruments resonate with each other (or don't) — how they sympathetically vibrate together (or don't). An entire school of musical composition, termed "spectralism," exists that foregrounds this acoustic principle, using the sound spectrum of a particular fundamental — often a note so low as to be at the bottom of the range for audibility by humans — as the primary means of organizing the formal structure and generating the pitch material for the composition. As such, it also decenters our teleological sense of time — emphasising the sound spectrum rather than an unfolding of a progression of notes — the vertical always emphasised here over the horizontal, the linear.

An important distinction should be made here between hearing and listening. While hearing involves the sound waves interacting with our inner ear (enabling perception), listening involves quite a lot more. Listening requires that we turn our attention to, focus on, turn towards, and in some way actively respond to what is perceived sonically and psychologically. To be a good listener requires us to attune a number of our senses to the matter at hand and feel these sympathetic vibrations — to "vibe with" as the African American vernacular puts it. Good and attuned listening is what enables us to be "touched" by sound.

In the late 1980s, the composer Pauline Oliveros first theorized the concept of "deep listening." She writes, "Deep has to do with complexity and boundaries, or edges beyond ordinary or habitual understandings: 'the subject is too deep for me' or 'she is a deep one.' A subject that is 'too deep' surpasses one's present understanding or has too many unknown parts to grasp easily. A 'deep one' defies stereotypical knowing and may take either a long time or never to understand or get to know" (14). To listen deeply to this matter at hand, we might hear the spectralities as they mingle — we might be touched by Baretta's piano serenades as they waft through the high-ceilinged room, the sound of the wax being mixed and poured, the breath as a still posture is held while it sets. And we might hear the sound of this archive today — fans rumbling, the "ping" of search results unreturned, cardboard boxes and dust and loose ends all around.

As such, the interrelated phenomena of spectrality and sympathetic vibration are more than mere metaphor. These spectralities — are ever present but imperceptible without the sympathetic vibing of "deep listening." We might say that deep listening is akin to tuning

our ears to the fundamental, or as Paul Gilroy puts it, “this politics exists on a lower frequency because words…will never be enough to communicate its unsayable claims to truth” (37).

Yet, accessing this invisible, but ever-present archive is also fraught with the potential for violence — for violating the private sanctums of the pastpresent. As Saidiya Hartman writes of Edouard Glissant’s work on oppressed and enslaved people’s right to opacity and encoding, “The right to obscurity must be respected, for the ‘accumulated hurt,’ the ‘rasping whispers deep in the throat,’ the wild notes, and the screams lodged deep within confound simple expression” (36). To hear, listen, vibe with, and possibly even act upon these spectralities ethically is not a simple or straight-forward matter.

Sensing the Vibrant Matter of Wax Moulages

The rethinking of matter that is at the core of posthuman thought highlights the profound inadequacies of the utilitarian “resources” thinking that pervades many debates about wax moulages and other related matters. Rethinking time has accompanied this rethinking of matter, replacing linear temporalities with nonteleological time (Haraway “Speculative fabulations for technoculture’s generations: Taking care of unexpected country”). A pastpresence temporality attunes us to the presence of our inheritances from the past and the necessity to learn to care not only for our descendants but also our ancestors. What would it mean if these troubling entities were not thought of as potentially useful resources, but as “vibrant matter” (Bennett) that performs the pastpresence work of the disenfranchised dead?

Our collective efforts to respond to the troubling questions raised by the collection of wax moulages have been further troubled by different desensitisations and constraining conventions in our various disciplines, in which different things matter. But we recognise that, for both ethical and political reasons, we need to cultivate what we might term a new and shared sense-ability that is sensitive to the connectedness, liveliness, and agency of all things. Borrowing from Haraway’s explanation of response-ability as a praxis of care and responsibility, we propose the idea of sense-ability as a praxis of care and sensibility based on a non-linear sense of time. The challenge is to go beyond recognising that wax moulages are vibrant matter enmeshed in human and non-human relations to learning and conjuring ways to sense them, where such a sense-ability is a prerequisite of response-ability.

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Case W907 Audio Clip

Music composition: Mary King (based on Gabriel Fauré, "Adieu")

Performers: Joan McCarthy and Patrick McCarthy

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