

## Book Reviews

This, he adds sombrely, is “a step back into the past”.

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**Elisabeth Bronfen**, *The knotted subject: hysteria and its discontents*, Princeton University Press, 1998, pp. xviii, 469, illus., £15.95 (paperback 0-691-01230-X).

Bronfen’s menacing “knot” is the perennial paradox of mind and body, health and illness, the corporal body and its representations, all of whose antinomies have been annexed to hysteria in our century. ‘Hysteria and its discontents’, as her Freudian subtitle suggests: the medical malady, human condition, and cultural discourse for which all categories established have been adjudged inadequate. More specifically for Bronfen, as it had been for the most astute heirs of Charcot and Freud, the “knot” is also the often indescribable gap between theory and practice, being and seeming, image and reflection, even the corporal body and the body of language.

A “knot” construed in this grid is also an intellectual riddle, intellectual paradox, or set of incommensurabilities; and not all “knots” unravel (my word) or can be unravelled. Bronfen knows this and sensitively listens to these riddles while being attuned to our era’s Theory Revolution, especially versions of its Franco–American Deconstruction. In this well-researched solid book she seeks to demonstrate that only by penetrating to the heart of the matter—the “knot”—will the “hysterical” text, body, language, representation, performance, unravel. She problematizes her “knots” by elevating their threshold of explanation and aiming to include the whole fabric of culture. She claims, in effect, that unless you capture

hysteria in the *fullness* of its cultural constructions—historical, medical, biographical, performative—the “knot” will not unravel. Even more astutely, she proposes hysteria as the language of death, a dialect most of us cannot speak or read. In view of this ambitious agenda it is no surprise that she opposes monodisciplinary descriptions of any of hysteria’s “histories” or “herstories”.

It is a tall order and produces an expansive argument amounting to a new totalizing discourse for hysteria because of the author’s insistence on cultural synthesis through holism. Totalizing discourses are by definition inter- or trans-disciplinary. Bronfen’s method of cultural exhaustiveness provides a new epistemology of hysteria that grants the moment of Freudian transformation a century ago while explicating performative “case histories” in poet Anne Sexton’s “business of writing suicide”, Alfred Hitchcock’s hysterical case history in *Marnie*, Canadian author and film-maker David Cronenberg’s womb-obsessed films, and photographer Cindy Sherman’s “private theatre of horror”—these because what “hysterics broadcast” is as important as anything doctors write about them. Yet we never learn why these films are selected rather than the broad class, for example, of vulgar Freudian 1940s B movies and their method-influenced 1950s epigoni: *Belle de jour*, Polanski’s *Repulsion*, the many versions of *The devils of Loudon* such as Kawalerowicz’s *Mother Joanna of the Angels* and the fiercely hysterical “Elisabet” in *Persona*; or Tarkovsky’s *The sacrifice*, Ingmar Bergman’s hysterical female characters, Vivien Leigh in Tennessee Williams’ *Streetcar named Desire*, or (if male hysteria counts) James Dean in his diverse post-pubescent roles and Fassbinder as himself in *Germany in autumn*.

Nevertheless, Bronfen’s four examples indicate her *longue durée*: the necessary glance back to the world of c. 1800, as well as hysteria’s performative component in our

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time. Modern film and contemporary cinema are doubtlessly permeated with Freud's discontented daughters; Bronfen would have strengthened her case by explaining why Hitchcock and Cronenberg are more performatively hysterical than his. Even so, "performing hysteria" has not often been the subject of interpretation so astute as found here, this despite medicine's awareness that the hysteric "performs her illness" as a diva sings her opera. Hysteria's subjectivity, history, and abundant case histories have engaged many students; far fewer its performance and broadcasts, strong and weak.

Bronfen's sense of hysteria's cultural profile follows close on. Except among feminists, hysteria's histories (surely in the plural) have usually been monodisciplinary piecemeal presentations rather than broad transdisciplinary canvases on which the hysteric's condition is laid out. Hysteria's Gothic implications (i.e., Gothic fiction, Gothic sensibility, Gothic film, the world of Frankenstein and Dracula) have long been known and interpreted, "especially the Gothic text as a paradigmatic example of the family's romance" (p. 153). Yet her interpretations are always fresh. The material Bronfen presents on Karl Jaspers is new and worthy of even more treatment than she provides here, in part because nostalgia has been so ineptly configured in relation to health and disease. But the insistence that hysteria's performing history—its "broadcasts"—belongs in these discussions is by far the most original part.

It would be wrongheaded to construe *The knotted subject* as irrelevant to the history of medicine. Just the opposite is true: it represents a triumph for this subject. Here, in effect, is a well-informed authoritative cultural critic claiming that she cannot do *without* the history of psychiatry. The history of medicine is insufficient as a totalizing account in itself, but hysteria's profiles, Bronfen suggests, *must* begin in medical speculation. Despite Freud, little changes in our century regarding the

paradoxes of hysteria. Yet just a generation ago cultural critics flaunted their indifference to medicine; now they start *ab ovo* with it. Perhaps Foucault predicted all this in his archaeologies of madness and histories of the clinic.

No grand theory lurks here about hysteria's transformations throughout history, yet everywhere *The knotted subject* brims with critical insight couched in attractive prose. Although pushing 500 pages this is no dull Burtonian repository composed in the cast of Germanic thoroughness. Students of hysteria's eternal mysteries who read it will be persuaded that its cultural profile has been enlarged. Someone who can do this in the aftermath of the twentieth-century hysteria industry deserves praise.

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**Jonathan Andrews**, "*They're in the Trade ... of Lunacy/They 'cannot interfere'—they say*": the Scottish Lunacy Commissioners and lunacy reform in nineteenth-century Scotland, Occasional Publication, No. 8, London, Wellcome Institute for the History of Medicine, 1998, pp. 108, £8.00 (0-85484-0680).

Despite lacunae in the manuscript archive which might have modified the official version of events provided by printed publications, Jonathan Andrews has done an excellent job of providing a balanced, well referenced account of the Scottish Lunacy Commission. He unpicks previous, and generally hagiographical, accounts, drawing helpful comparisons throughout with the work of its English counterpart. The early identification of a lack of uniformity in the local Shrievalty's supervision of asylums, and the latter's opposition to centralized intervention, for example, clearly mirror the experience of