Diagnosing the Invisible: Grant Morrison’s *The Invisibles* and the Ontology of Graphic Medicine

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Problems of Autobiography

• Graphic medicine is commonly based on autobiography
• Autobiography is often partially fictional
• What are some problems and veracity that can occur in autobiography?
  1. Problems with memory
  2. Bias
  3. Missing information that could better contribute to or hurt context
  4. Lies
  5. Remediation into a different medium that affects depiction of a topic
  6. Poetic license or exaggeration
  7. Surrealism in art that stresses emotion over veracity.
Autobifictionalography

• Considering that graphic medicine is heavily based on autobiography, we then have to reconsider the ontology of graphic medicine text itself.

• Imagine if you went to the doctors and you omitted information or lied about symptoms or over-exaggerated problems, would the doctor then be able to give a proper diagnosis?

• What would be the impact of an entire subset of medical literature being ontologically dubious?
The Invisibles as graphic medicine text

• Main character King Mob is tortured in *The Invisibles* I.17 to 24, resulting in a collapsed lung and “necrotizing fasciitis bacteria”

• At the same time, author Grant Morrison becomes ill from a *Staphylococcus aureus* infection, including facial boils and abscesses and a collapsed lung from pneumonia.
The Invisibles as graphic medicine text

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• At the same time, author Grant Morrison becomes ill from a *Staphylococcus aureus* infection, including facial boils and abscesses and a collapsed lung from pneumonia.

• Morrison claims that his writing of *The Invisibles* caused his illness through a sympathetic magic relationship like a voodoo doll between him and King Mob.
The Invisibles as graphic medicine text

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• Verbal paratextual narrative about Morrison’s illness through letter columns and interviews
The Invisibles as graphic medicine text

- Considering the ontological instability of traditional graphic narrative autobiography, how do we treat less factual or even purely fictional depictions of medicine in graphic narrative?

- How do such representations and their media affordances affect notions of graphic medicine and correspondingly medical diagnosis itself?
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In constructing his partially fictional illness narrative, Morrison deconstructs the narrative and media properties of graphic narrative to challenge authoritative writing and reading of graphic medicine texts.

This presentation will look at how the graphic narrative medium affects the authority of medical diagnosis, using *The Invisibles* as a deconstructive text.

Michel Foucault’s concept of the medical gaze will be used to discuss the ontology of medical diagnosis.

Medical diagnosis and autobiographical graphic narrative share multiple media properties that establish the authority of the text, including visual-verbal hybridity and emphasis on temporality, chronology, and sequence.

The importance of paratext in establishing authority will be explored.
The Medical Gaze

• In *The Birth of the Clinic* (1963), Foucault introduces multiple components of medical rhetoric

• First, it is a matter of ontology

• The medical gaze involves “the perceptual attention of the doctor...to communicate with the *ontological* order—which organizes from the inside, prior to all manifestation—the world of disease”
The Visible Invisible (The Visual Verbal)

• Foucault continues, disease is “a mixed web of the visible and the readable”

• “the general indication of the first stage [of an illness] is visual: one observes the present state in its manifestations.”

• We then involve “the place of language within this examination; immediately afterwards the patient is questioned as to the pains he feels, and lastly, by observation, the state of the most important physiological functions is described.”

• The medical gaze involves similar hybrid functions as graphic narrative
Visual-Verbal

• Morrison’s near-death experience is presented visually and verbally through the surrogacy of King Mob
• “You have a collapsed lung”
• “programmable necrotizing fasciitis bacteria”
• But this is a representation rather than an actual occurrence (as is all autobiography and thus graphic medicine)
• We never see Morrison’s actual visual symptoms – not invisible but absent
• Despite the visuality of King Mob’s near-death experience in *The Invisibles*, the majority of information on Morrison’s own illness is presented verbally in “Invisible Ink” and interviews of Morrison, behind the scenes of the actual graphic narrative itself.

• Which medium, then, is to be taken as more authoritative – the verbal or the visual?

• Or is hybridity of medium necessary for proper ontology?

“It started with weird boils appearing on the back of my neck, these really horrible, bizarre things. And just after King Mob had been convinced by the bad guys that he’d been given a necrotizing fasciitis bacteria that was eating through his face, I suddenly get this huge boil on my face. And within three days, it’s enormous, distorting my entire features, and I’m in the hospital having this thing lanced and probed and dug out, and this sort of hole eaten right through my face.”

“The infection was beaten and I finally tottered out of the hospital with arms so full of needle tracks and bruises I looked like I was auditioning for *Trainspotting*. I’d also lost a stone and a half in weight, and all I could see in the mirror was one of those skeleton bastards who fought Jason and his Argonaut pals”
a succession of signs

• Furthermore, both graphic narrative and the medical gaze involve issues of closure of sequential signs:

• “What relation is there between a coated tongue, a trembling of the lower lip, and a tendency to vomit?”

• “Disease is a set of forms and deformations, figures, and accidents … bound together in sequence” –

• diagnosis is a sequential art involving the closure of … “a series of isolatable [ENCAPSULATED] events” similar to panels
The Chronology of Diagnosis

• The chronology of an illness needs to be figured out by sequencing the series of symptoms

• The medical gaze and graphic narrative, thus, are both indebted to (biographical) narrative chronology

• These similarities are reinforced (or complicated) by what Foucault calls “a phenomenon involving two pathological layers … with different chronologies” – the invisible and the visible
a phenomenon involving different chronologies

The Medical Gaze
• THE INVISIBLE: the progression of the illness prior to visible symptoms, including unseen symptoms or aspects of the illness
• THE VISIBLE: the symptoms themselves which are an effect of the illness

Comic Studies
• THE INVISIBLE: events as they took place
• THE VISIBLE: events transcribed in a medium
Temporality of the Invisible

• As such, autobiography and graphic medicine are subject, if not defined, by particular temporalities – primarily retrospective

• “retrospective prose narrative” (Joseph Lejeune)

• “though they read chronologically forward, [autobiographies] are composed essentially backwards” (Louis Menand)

• “efforts to bring [the] past into the intentional purview of [the] present narrative project” (Louis A. Renza)

• How does the retrospective temporality of graphic narrative / graphic medicine affect the medical gaze?
Deconstruction of temporality

• Furthermore and however, in interviews, Morrison establishes the chronology of The Invisibles as present tense rather than retrospect.

• What if graphic medicine texts were instead published as monthly serials?

• How does the format of graphic narrative – how we read it – impact or interact with the ways in which we diagnose (that is, read) symptoms?

“I was living that comic as a diary as it was being written”

“I prefer to see [The Invisibles] simply as my record of my passage through the years 1994-2000 processed down onto paper in the service of the relentless monthly deadlines of my chosen format”
This switch from retrospect to present tense is one of multiple ways in which Morrison complicates autobiographical matters.

In addition, *The Invisibles* plays with standard autobiographical authentication that is haphazardly present in graphic medicine texts.

Nancy Pedri writes, “Not only do memoirs openly adopt many recognizable authenticating strategies, but they also draw attention to gaps and omissions, to doubt and invention.”
• art spiegelman’s *Metamaus* has as its main purpose to validate the history behind *Maus*

• While authenticating texts like *Maus* seek to validate their life narratives, *The Invisibles* instead emphasizes the ontologically dubious nature of many media types that compose the intertext of actual experience identities.
Authenticating Paratext

• art spiegelman’s *Metamaus* has as its main purpose to validate the history behind *Maus*

• Alison Bechdel despite her attempts at authenticating her memoir through material proofs also reports an “epistemological crisis” (141) as she gets lost in these attempts to support the accuracy of her graphic narrative.

• While authenticating texts like *Maus* and *Fun Home* seek to validate their life narratives, Morrison uses the paratext to *The Invisibles* to deconstruct the authenticity of his own medical narrative.
Temporal obedience vs temporal ambiguity

• In his interviews, Morrison’s NDE narratives are told with inconsistent time frames.
• According to McCloud, temporal conditions in encapsulation and closure are often by nature irresolute.
• Graphic narrative, despite its focus on narrative, struggles with forming a solid chronology – how does this impact the medical gaze?

“King Mob believes his face is being eaten away, and a month or two later I get an abscess in my cheek.”

“Within three months my face was being eaten away by a bug” (108)

“Three weeks after I write the story—I’m lying in hospital”
Change in diagnosis

• Similarly, in the paratextual letter columns to *The Invisibles*, we see multiple changes in the diagnosis of Morrison’s illness, emphasizing and deconstructing the unreliability of medical evaluation

• In graphic medicine, authenticating paratext is frequently absent – we see only the visible and not the invisible

• Without the invisible, we see medicine and medical narrative as a stable product rather than a dynamic process

“Grant Morrison is dead. Actually, that’s a lie but he is seriously ill. His mother called me today and said he’s been taken into the hospital from suffering from nervous exhaustion”

“Grant was only suffering from nervous exhaustion. Since then, doctors have discovered a collapsed lung, chronic pneumonia and some kind of fungal parasite which has become attached to the damaged lung itself”

“You may also have mislead many readers with his wildly inaccurate accounts of my illness. Here then—more for my own peace of mind than anyone else’s—is the true story from the horse’s very mouth”
Key Takeaways

1. Graphic medicine is frequently based upon autobiographical narratives that are ontologically unsound.
2. Graphic medicine uses visual and verbal media (and their hybrid form) to present information but how ontologically sound are these media and their hybrids?
3. Medical narrative relies upon chronological and temporal obedience which graphic narrative both simulates and deconstructs.
4. Autobiographical narratives frequently rely upon authenticating paratexts which appear absent in graphic medicine texts.