

SAVING FACES

Portraits by Mark Gilbert



Saving Faces

The Facial Surgery Research Foundation



research today saves faces tomorrow



SAVING FACES

Portraits by Mark Gilbert

From his residency at the Oral and Maxillofacial Surgery Unit of St. Bartholomew's and the Royal London Hospital

These paintings, worked on over the year of my residency at the Royal London Hospital, apart from being a visual record of the incredibly powerful surgical process and the resulting changes in the facial appearance of the sitters are, I hope, as with any paintings I attempt, instilled with an emotional charge, conveying the character and spirit of the subject. I am always aware that being painted at the best of times requires a certain amount of courage, and it has not been uncommon for models in the past to be unsettled or even offended by my depiction of them, having felt that I had exaggerated or sometimes deliberately denigrated or manipulated their appearance for my own personal artistic aims. Therefore my initial excitement at this project was tempered by anxiety that I would be focusing on events and aspects of my subjects lives that were either too sensitive, upsetting or would rather have been forgotten.

My aims were largely concerned with amplifying a sense of human individuality. I wanted to become increasingly informed by the development of a relationship between myself and the sitter. Previously I have consciously insulated and protected myself from the views and criticisms of my subjects, especially when assessing the quality or otherwise of a picture. Yet one of the most rewarding aspects of the project for me has been that such concerns proved groundless once the opinions of the patients about their portraits had been sought. It was critical when first meeting new sitters that they were initially informed and reassured as to the nature of the project. I would show them all the previously completed paintings and, where relevant, relate these to their imminent or completed surgery.

At the same time I would describe the experiences and thoughts of my previous subjects in as frank, accessible and positive a manner as I could. To have been given the opportunity to work in such an intense and fascinating environment, and to have had the privileged access to such intimate, sensitive subject matter, thanks to the generosity of spirit of my sitters, has hopefully resulted in an exhibition that is both informative and emotionally positive for those who see it, and most of all those who took part.

Mark Gilbert

What is Oral and Maxillofacial Surgery?

Oral and Maxillofacial surgeons specialise in the treatment of facial, mouth and jaw disorders such as cancer, salivary gland disease, trauma, facial and jaw joint pain and facial disfigurement and deformity. They are also trained in reconstructive and microsurgery harvesting other parts of their patients' bodies such as ribs and hips to rebuild the face. It is the job of Oral and Maxillofacial surgeons not only to save lives but to save faces.



Hakeem (post-op)
1999

Facial surgery is challenging not only because of its intricacy, but also because the surgery often has a profound effect on the patient's psyche – the ability to be accepted within society so often depends on facial appearance. For example, patients with facial deformity are usually shy and reclusive before surgery. The surgery transforms them emotionally and, like every metamorphosis, their true character and psychological potential is released from the constraints of their pre-surgical facial appearance. Patients who suffer facial trauma may forever be haunted by the events leading to their injury simply by examining their face in the mirror each morning. Patients with facial cancer not only have to cope with a life threatening disease, but also with treatment which will have visible effects on their facial appearance, and affect their speech and diet.

The Saving Faces Art Project

Iain Hutchison is a Professor of Oral and Maxillofacial surgery (OMFS) at St. Bartholomew's and the Royal London Hospital, and Director of the National Facial, Oral and Oculoplastic Research Centre (NFORC). A great believer in the power of art to engage and transform, he established the Saving Faces Art Project in 1998. In 1989 when Iain's mother, Dr. Martha Redlich died, he set up a charity in her name and used this initially to purchase occasional pieces of surgical equipment. However, by 1995 he decided to use this legacy to repeat the Tonks/Gillies artist and surgeon collaboration of the First World War and started the search for an artist who would match his vision as an artist-in-residence within his surgical department.

At the outset, he hoped that the project would illustrate, in a form that was accessible to the general public, what is possible with modern facial surgery, and show that people with facial disfigurement are able to enjoy happy, successful and fulfilled lives. He also wanted to give an artist the opportunity to paint these unique faces as they progressed through their surgical and emotional journey. Finally he felt that sitting for and seeing their portraits might have a cathartic effect, allowing the patients to come to terms more rapidly with their altered appearance.

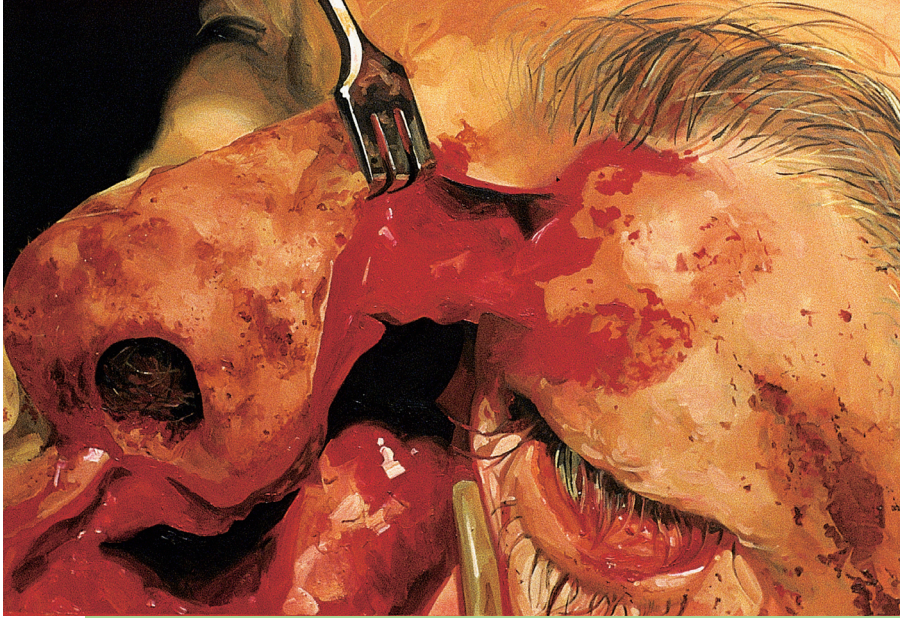
Mark Gilbert, the highly acclaimed Glaswegian portrait painter, took up the challenge of painting his patients before and after (and occasionally during) surgery on their faces. One of the first steps in this undertaking was to ensure that potential sitters gave clear and informed consent to being painted and did not feel any coercion to participate. The advice and approval of the hospital's Ethics Committee was secured from the outset.

When the artist arrived at the Royal London Hospital, as well as getting to know the patients, he wanted to understand the work of Iain Hutchison and his team. He joined them in the operating theatre and witnessed their surgery first hand, enabling him to paint operative sequences and to see the way the faces changed during surgery. The relationships which built up between Gilbert and his subjects informed the extraordinary works he painted in the following months.

It is clear that the painting and sketches which resulted represent more than the simple form and shape of the patients' faces. Gilbert has succeeded in conveying the intensity and power of the face changed by trauma, or unveiled during the surgical process, and the changing emotions and character of the patients as they experience one of their life's most dramatic events.



Hakeem (post-op)



Henry (operation) 1999

Portraiture as Therapy

Dr. Paul Farrand, *Medical Psychologist*

Conventionally, art therapy combines the disparate disciplines of art and psychotherapy in treating patients with a range of psychological problems. Whilst disagreement still exists as to its theoretical assumptions, the practical emphasis is usually placed upon the art therapist in facilitating the production of art by the patient. The main aim of this process is to promote catharsis within the patient, that is to allow the patient to release emotions which otherwise may prove difficult for the patient to discuss.

Using portraiture as a form of art therapy, however, is both unique and innovative. Rather than the emphasis being placed on the patients producing their own artwork the production of the portraiture was left entirely to the artist, Mark Gilbert. Irrespective of this, a research study devised to examine the nature of any psychological benefits arising from the project produced results which were surprising. The research study used a semi-structured interview in which patients' responses were taped and transcribed so that they could be coded and later analysed by computer. Questions were derived from previous research which identifies the particular types of psychological problems experienced by patients who have surgery on their faces, whether for facial cancer, as a result of assault or accident or to improve the function of certain regions of the face, particularly the jaw.

Overall the results of the study reveal that the project has brought numerous and often very idiosyncratic benefits which varied according to the patients' personal characteristics and the nature of the surgery. Several benefits to patients arise from viewing their portraits. When viewing their portraits together with other painted images of their surgery a better understanding of what they have been through is achieved. This often helps reinforce the true extent of the surgery they have undergone, and sometimes surprises them when they discover exactly what had to be done. Interestingly, knowing the true extent of the surgery has enabled some to adopt a 'fighting spirit' towards the future, which can be harnessed to deal with further cancer surgery, or just the everyday problems life throws at us all. Encouragingly, this state of mind has tended to produce a better prognosis in patients diagnosed with certain forms of cancer.



Henry 1999

Looking at the actual portrait itself also enables patients – predominantly those who have had surgery to correct facial function which has also dramatically improved facial appearance – to adjust psychologically to their new appearance. Often patients with facial disfigurement have difficulties reconciling differences they believe to exist between their appearance and their personality. Seeing their post-operative portraits however has provided these patients with an image of themselves which matches the image of the person they have always believed themselves to be. Interestingly, the view was often expressed that standard photographs did not serve the same function. Whilst these captured the physical characteristics of the patient they did not capture the patient's personality.

Common to many patients are the ways in which photographs of the portraits are used as 'tools' to facilitate better coping strategies. For example, one patient carries a wallet containing photos of his portraits. In the event of people staring at him in public the wallet is produced to engage them in conversation about his surgery and resultant appearance. This method of coping, known as "intellectualisation", allows this patient to take on the role of an expert regarding his own surgery thus enabling him to talk about his surgery whilst remaining more detached. In a similar manner another patient uses a photograph of his portrait prior to surgery to deliberately facilitate discussion with family and friends about the violent assault he had experienced, a topic of conversation that would otherwise be deliberately avoided.

A further benefit arising from the portraiture is similar to that derived from a therapeutic counselling relationship which has by necessity to be based on mutual trust. The portrait sittings appear to have been instrumental in establishing precisely this kind of relationship between patient and artist. Patients reported how easily they were able to talk to Mark, initially about everyday things but during later sittings also about issues related to their surgery or the effects of their disfigurement. Whilst Mark was obviously not involved in counselling the patients, as a result of the portrait sittings he was able to offer time and a 'safe' space in which to discuss their concerns and experiences.

Finally, a benefit unanimously expressed was related to the exhibition of the portraits. The patients expressed a strong desire to have their portraits exhibited to help educate the public about the nature of facial disfigurement. Research has consistently shown that we are all guilty of making a series of assumptions based on facial appearance. Generally the more attractive someone is believed to be the more positive the characteristics associated with them. Conversely, the less attractive or disfigured are associated with negative attributes. By exhibiting the portraits the patients hope that those who view them will begin to see the person beyond the appearance. It is hoped that this will begin to challenge the negative associations associated with facial disfigurement and reduce discrimination that many facial patients believe exists.

Irrespective of the benefits, the use of portrait painting as a means to help patients with psychological problems is likely to be limited. As an intervention it would prove far too time-consuming for the patients and expensive to be of widespread clinical benefit. However in an age where science is seen as offering the best and only way through which to treat patients, the widespread benefits derived from portraiture suggest that along with scientific advances, art, in its many guises, can also make a significant contribution.



Henry E and Jerry 1999

Iain Hutchison & the Saving Faces Art Project

Iain Hutchison's initial interest in OMFS grew from repairing people's faces in Emergency Departments after car crashes and other accidents. The immediacy of the physical and psychological effects of the treatment was so dramatic that he decided to undertake the prolonged training required for this surgical speciality. Like all his colleagues, he has studied dentistry as well as medicine and has undergone extensive training in general surgery before specialising in OMFS. He now focuses on the treatment of mouth and facial tumours as well as reconstructive surgery for patients with facial deformity and those who have suffered serious facial injuries. He is the founder and Chief Executive of the charity Saving Faces - The Facial Surgery Research Foundation.



Mazeeda (pre-op) 1999

Iain conceived and funded the Saving Faces art project as a tribute to his Mother, Martha Redlich, who had been a devoted General Practitioner in a working class area of Birmingham. She also loved the arts and was a skilled water-colourist. He used the money from her legacy to fund the project. Iain was aware of the paintings created by Henry Tonks of Harold Gillies' 1914-18 war soldier-patients and decided to re-create this project, recording the many advances made in facial surgery over the subsequent century.

Iain's vision was to illustrate for a lay audience the many advances in facial surgery since Henry Tonks' paintings of Harold Gillies' surgery on First World War soldier-patients a century earlier.

He aimed

- To inform the public about what is possible, and what is not possible, with modern facial surgery.
- To show the public that people with facial disfigurement could be powerful individuals who were able to live fulfilled and productive lives.
- To allow a portrait artist the opportunity to paint these extraordinary faces, not only at one point but also throughout the whole physical transition of pre-operation, the operation itself, and post-operative recovery. He hoped that the artist would capture the patients' emotional as well as physical transformation as they went through one of the most important periods of their lives.
- Finally, he thought that the process of sitting for the artist might enable the patients to achieve a catharsis following this traumatic event.



Mazeeda (post-op) 1999

Iain developed the project and chose Mark Gilbert to paint these works. Mark was an outstanding portrait artist who had been short-listed for The National Portrait Gallery's prestigious BP Award on several occasions. The project proved hugely successful and when the Martha Redlich Facial Surgery Research Fund dried up Iain continued funding the artist himself for a further two years.

The dramatic effect on the patients was studied by a psychologist, who discovered that the patients tended to use the artist as a counsellor and the paintings themselves as a coping strategy. All the patients are enthusiastic advocates of the project and are delighted when their images are shown to the public. The paintings help inform them of the process they have gone through and demonstrate their power at surviving their accidental injury or their cancer.

The paintings continue to be exhibited in public galleries around the world and have been viewed by over a million people.

Saving Faces - The Facial Surgery Research Foundation

We call it Saving Faces for short. It is an international research charity based at St. Bartholomew's Hospital. It is devoted to conducting clinical research to improve the care and treatment of all patients with disorders and injuries affecting the mouth and face. The charity was launched in June 2000 at the National Portrait Gallery by the Secretary of State for Culture, Media and Sport, Chris Smith MP.



The face is the only part of our anatomy which we cannot publicly hide. It conveys our emotions and registers our innermost feelings. We are all too ready to judge each other on the basis of our facial appearance, making assumptions on a whole range of issues from intelligence and trustworthiness to even the capacity for violence and criminality. People suffer the consequences of facial diseases, injuries and disfigurement every day and yet surprisingly there has been no previous charity in the UK devoted to research into facial diseases. Saving Faces aims to address this deficiency and works to secure much-needed funds for research into all aspects of the disorders affecting the mouth and face such as cancer, facial deformity, injuries and pain.

One of the charity's priorities is to conduct studies to improve the prevention, early detection and treatment of mouth and other head and neck cancers. Although there are as many people who develop oral cancer in the UK each year as there are diagnoses of cervical cancer or skin melanoma, oral cancer research receives less than one tenth of the funding of these other two cancers. Furthermore, oral cancer has received little attention from the media. As a result, many people are ignorant of its existence and patients often overlook the symptoms of their disease for several months until it is at an advanced stage and requires extensive surgery. According to the latest figures, oral cancer is rapidly on the rise. Unlike most other cancers where survival rates are improving, deaths from oral cancer are predicted to increase by 22% over the next 20 years. Research, early diagnosis and education for clinicians and patients are now more important than ever.

Our Work

- We provide a digital rapid diagnostic service for doctors and dentists to speed up the referral of mouth cancer patients to the most appropriate surgeon.
- We fund the National Oral and Oculoplastic Research Centre whose research will improve the treatment of patients worldwide.
- We lead nationwide schools campaigns using talks on facial injuries to discourage binge drinking and mouth cancer talks to discourage smoking.
- We are starting International research studies to improve the treatment for precancerous conditions in the mouth, jaw joint disorders, fractures of the jaw, melanoma of the eye, skin cancer and facial deformity.
- Our "expert" patients run a national telephone helpline where they provide advice and support to new patients who telephone us with anxieties about the treatment they are about to undergo.
- The results of our international surgical study on mouth cancer will change treatment practice for the better.
- We fund PhDs in psychology, molecular biology and stem cell biology to research better ways of treating patients with facial diseases and injuries.

Like all charities we urgently need funds to carry out our work. The Saving Faces Art Project tells the story for us.

To get information on how you can donate or organise your own fundraising event, visit our website at: www.savingfaces.co.uk



Henry 1999

Saving Faces
The Facial Surgery Research Foundation



Top image: Noora 1999
Cover image: Henry E 1999