

# **Anaesthesia and Anatomy:**

## **the body caught between history and nature**

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“Caught between history and nature”. As I get older this sentence is establishing itself in my mind as a responsible description of bodily experience.

Here are some thoughts to illustrate what I mean. They are arranged firstly round some dreams, secondly round a book, and thirdly as an attempt to bring the dreams and the book together in imagining how our experience of the body may be changing.

### **Anaesthesia**

I've done some work on about a hundred dreams of mine, dreamed between 1991 and 1994, that is from the age of 65 to 68. One theme that recurs is that of anaesthesia. I have long believed that there must be a whole net work of connections between the medical application of anaesthetics, and the rise and dissemination of psychoanalysis. Surely the therapeutic idea that it makes sense to get in touch with psychic pain, that pain ought to be accessible because it may be fertile of understanding, must be related to the fact that physical pain is now controllable, making possible experimental investigation of a kind that was previously inconceivable, intolerable, impractical.

But I know of no books on the subject. So I have started sending copies of my dreams about anaesthesia to the author of any book I do come across which seems to touch on the theme. Which gets me some interesting replies.

Yet the dreams remain obscure. They seem to be saying something important, even urgent, about anaesthesia and how it affects our understanding of the body. Here are three of them, together with my associations.

**May 17, 1991**

A woman is to have major surgery to her brain, also confused with hysterectomy and caesarean.

It is the repeat of an earlier experience.

I have intense feeling of participation with her, having to go through it with her.

When they open her/it up, they will surely want to look at the results of the last op, the area/bit they were working on last time, to see what it looks like now, how it is lasting.

As he prepares her for it, the surgeon speaks with great feeling of her fate - is he so effective/clever/powerful (almost magic) that he can do something now about that, something retrospective as it were? She is taken off to the theatre.

The participation continues, very strong. Oh, she won't feel anything, I know about that, but her body must feel it, the incredible violence of what is happening, being done, to her. Will she be any 'better' for it?

### **October 17, 1992**

I/we have a huge snake, which we are taking to some exhibition, show, to 'show' (like some garden, animal, farm, 'show').

We arrive early, at house of woman organiser.

She asks if our snake has arthritis.

No, it is still young, sinuous, beautiful.

She says that when they get arthritis, and they come or are brought (as to vet) for an injection, to ease the pain, you can seem them 'longing for the needle'.

This image of a creature like a snake 'aware' of the pain easing effect of anaesthesia injection, I find extraordinarily powerful, comforting, revealing, as well as almost overwhelmingly sexual.

### **August 28, 1994**

I have made a simultaneous appointment for the dentist, and for some kind of psychotherapy/shiatzu/acupuncture. I have known about it for a long time, and it has been no problem.

But now the time has come to keep the double appointment. How can I? I can't. I can't be in two places at once.

Terrible, exhausting, pain/anxiety of getting - to which? It feels like all my repeated journeying, travel dreams.

I do get to the dentist, 25 minutes late, out of 30 minute 'slot'. He/she says I'd better come in and he/she'll see what he/she can do. This willingness to see what can be done in the little time left is partly due to E having been a singer. How do they know? Is it because in some sense I am identified with her?

Later sequence, trying to sew up skin round someone's groin, penis, a bit like doing up nappies, but it involves threading string through holes in the flesh. He lies still and patient.

In dream, it is said that this is the explanation of why I 'split'. Because I don't distinguish between the two kinds of appointment. Splitting caused by failure to appreciate the difference between them.

### **Commentary on the dreams**

#### **May 17, 1991**

Associations were with two cases of brain damage. One resulted from a massive cerebral thrombosis. There was no question of an operation. Damage could be ameliorated, but the stroke was irreversible. The other was caused by a tumour. Four years of apparently untreatable depression culminated in a successful operation, making the patient well again. A malign natural growth was cut out, removed.

Comparing the two raises questions about our ability to act now on what has already happened. The present can change the past. Or it cannot. And there are differing continuities. Is there an objective continuity against which subjective experience can be measured? What has been going on in the brain since the previous operation is not accessible to the continuity of the surgeon without further intervention. But is such intervention justified? Is it called for? If so, by whom, or what?

For surgeon and for patient the consistency of time is not the same. The patient's interest in the past is not the same as the surgeon's. The difference between them is marked by pain.

Questions such as these, about what is reversible and what irreversible, about interventions that test the hold of the present on the past, about what is objective and what subjective, are set within the associative field given by the word theatre. Theatre is showing, display, demonstration. Within the dream, there was an association with ordering the book *Chemical Theatre*, by Charles Nicholls, at the Bodleian the day before. Subject and object are played across each other. Theatre sets the passage of time between a beginning and an end of its own making. Process is subordinated to performance. Performance invites both satisfaction and repetition. We show that we can do the same operation again and again even though it is different each time. Note, *each* time. Time is being thought of as intrinsic to an event, not as a medium existing apart from events.

The dream places all this alongside caesarean and hysterectomy. Common to all the personal associations is the question of what our bodies are for. Are they for passing life on, or are they for us? Is their 'end' (which it seems only human to confuse with 'purpose') life or death? Are they nature or history? Old questions, so long unresolved that we grow lazy about asking them. But note that they include uncertainty about time. Perhaps we are lazy because they remind us of feelings about time which we are afraid might hurt.

The particular body has its own life time. It is also the vehicle for a time that goes on from generation to generation. There is a time that begins and ends with this particular body, and a time which uses this body to keep itself going. Are they the same? Or are they at cross purposes? Is the difference between caesarean and hysterectomy reminding us that in being alive we are responsible for something other than life, that life may be *for* time rather than time *for* life, that history is in some sense prior to nature? Questions like these are given new urgency in the application of genetic research.

So there are three matrices of association in this first dream. (1) Questions about reversal, repetition, intervention. (2) Demonstration and performance as compared to process. (3) The possibility of choice between phylogeny and ontogeny. The dream throws them together in an operation that associates brain with womb. It floods the operation with personal affect, with pity and with doubt, doubt that may give rise to protest.

On waking, the pity and the doubt remain. I cannot find words to comprehend the complexity, the confused mix of sensitivity and cognition, of sympathy and protest, that seems to be at stake behind the veil of anaesthesia. Years have gone by, and I am still left wondering at what is here being spoken of.

October 17, 1992

The 'show' is important. It picks up the theme of theatre once more. Associations are with childhood country shows, showing ponies, animals returning to the farm with first and second prizes, and later, adult, with the showing of fruit and vegetables, plants and flowers. Breeding, training, growing, are to be judged. A process that has gone on over months, perhaps years, reaches its conclusion. One moment fulfils, or disappoints, the work of time.

The word vet has figurative meaning. The organiser as vet suggests the sense of scrutiny, assessment, as well as treatment. Bringing an animal to be vetted is not the same as bringing an animal to be doctored.

But it is the snake which gives its power to the dream. Forty eight years of dream recall have left me with a seemingly inexhaustible range of association with the snake. Here, in the foreground, I identify connections with the spine, from the pain of osteoporosis to eastern traditions linking sexuality with breath and spirit. There are also, in the word sinuous, sexual associations of tongue with penis and vagina, which overlap with the spinal ("a snake with hips" P.G. Wodehouse). But more important perhaps in opening up the word "longing" are the Genesis-Darwinian associations.

For many years of my childhood the Biblical and Darwinian stories of creation existed side by side, with little sense of a need to choose between them. Then they got caught up into argument about time. Is time to be thought of as natural, or as historical? Psychoanalysis then brought incest to complicate the whole problem. My first recorded snake dream, in June 1948, associated the Garden of Eden story with the idea of time as itself active in separating daughter from father. This sense of the incest taboo as work of time as well as *in* time has marked all my experience of psychoanalysis.

Much later, at the time when I had this dream in 1992, I was beginning to hear and read more about the fresh wave in evolutionary description and thought following the genetic research of the last thirty years. Genes with an agenda of their own irrespective of the individual: the idea was taking me back to the break between Freud and Jung, into all the arguments about what is inherited and what is learned. The image of an arthritic snake longing for anaesthetic relief is embedded in feeling for what the evolutionists call adaptation, adaptation as "fit" of a kind that makes nonsense of our distinction between the benign and the cruel. But it revises and extends my understanding of that fit. The snake and its "longing for the needle" combines addiction and comfort in a way that "fits" both fucking and dying, but which I cannot get into words. And then it powers that fit with a future tense, so that the "longing for" has a temporal drive.

There is feeling here that I cannot place. In human terms, what pain, what kind of addiction, what sort of comfort, are we speaking of? I am reminded that when I read the new adaptationists I find myself wondering why they aren't more *frightened* by what they write.

And there is the vet. "You can see them longing for the needle". Where in waking experience can I locate such seeing? The vet as agent of history, of science, of research, of experiment, recognises an inhuman pain, and has in her merciful hands the power to ease it. This is something different to the merciful nursing of a kindly hospice. She is also the organiser of the "show" when breeding, training, growing, are judged. She has set it up. She is running it. Where can I locate such a figure?

**August 28, 1994**

This dream is about failure. That needs saying first, and last. It is about a failure in making, and therefore in keeping, an appointment. In doubling the appointment, one or other has been "forgotten".

But the lysis, the sense within the dream of where the dream is leading, is open ended. The dentist could have said that it was too late, not now worth coming in. He/she is willing to see what can be done in the time left.

I think the best way into both the failure and the willingness to see what can be done in the time left is to consider the blurredness of the difference between the two appointments. The difference is not about body and mind, though that sort of difference does seem to be in the air. It is more as if the dream is saying: the body-mind distinction is an important clue, but it misses the point. What really matters is to distinguish between two different kinds of appointment with body-mind, so that they can each have their proper time.

Dentistry is about pain. There are associations with the changes in pain expectancy that have occurred in my life time. Dentist dreams over the years have also related the mouth to other aspects of the body, digestive, excretory, genital. The tongue connects speech with the probing and twisting of both sex and story, and also with taste. The teeth themselves associate biting, and beyond biting, killing, with chewing, understanding as assimilation, and a whole complex of sensory/intellectual experience gathered round the German words Begriff and begreifen (a much stronger version of our English/Latin "cognitive"). Teeth dreams have also often led into work on the difference between the natural and the artificial.

Psychotherapy/shiatzu/acupuncture cover both mind, or psyche, and body. Psychotherapy is surely by definition about psyche rather than body. But how about acting out? Shiatzu on the other hand is surely about body. But then how about that indescribable giggle of abandonment evoked by the hand pressing on the tan t'ien? Acupuncture is also about body, but body so understood as to make me realise that what we mean by body varies from country to country, from culture to culture. I can and do dream of the five elements, but I do not expect them to be demonstrable when I am opened up in the operating theatre.

Why is this complex grouping being contrasted so sharply with dentistry? After two and a half years I still cannot translate the dream into words that have purchase on waking reality.

Pain seems to enter into it. The acupuncture needles remind me of pain that is bearable, as the dentist's needles remind me of pain that is unbearable. But there is more to the choice between the two appointments than degrees of pain.

What happens if we try "dead" and "living" as the contrast being made? We speak of the mouth or gum being made dead by the anaesthetic. But again, there is more to the dream than that. The mouth comes to life again when the anaesthetic wears off, and whether dentistry works or does not work is more obvious, more demonstrable, than is the case with psychotherapy, shiatzu or acupuncture.

I cannot get it into words. I am just left with an insistent sense of forgetfulness, of being unable to make a crucial distinction between kinds of appointment.

But the lysis encourages me to wonder what there may still be time for. The reference to my wife as singer is heavy with association. The scene with circumcision and nappy changing is suggestive of negotiation between pain and pleasure that it is impolite to own. There are anthropological connections between circumcision and the availability of time. Sewing together contrasts with cutting open, threading with hurting. Pricks can hurt in more ways than one. The bisexuality of the penis, with the possibility of incisive and inexplicable pain suppressed, is juxtaposed with the satisfactions both of natural excretion and of cultural making clean. This patient, whoever he may be, is simply patient. But he has kept the appointment. Perhaps he had no choice.

### **The three dreams together**

To a certain extent I can make some sense of these dreams. They make me think about my body, and the bodies of others, in new ways. They exercise my imagination, create references which were not available before. But by and large I have to recognise that they are beyond me. Messages are arriving which I cannot receive. My understanding of the body is simply inadequate to respond to the density and range of what is being suggested. There is more, much more, in these dreams than I can apply to the world in which I am awake.

So I turn now to my second theme, to review a book: Jonathan Sawday's *The Body Emblazoned: Dissection and the Human Body in Renaissance Culture* (Routledge, 1995). I read this book shortly after preparing these dreams for a seminar. It opened my thinking about them into a much wider historical perspective.

## **Anatomia**

Roy Porter, of the Wellcome Institute for the History of Medicine, has described this book as "a major event in the cultural history of the modern era". For me it has been something more personal than that: an encouragement to accept that our understanding of the body is always going to be not only subject to change but itself an agent of change. So that to be at home in the body is to recognise that it doesn't just exist in history. It is caught up in history making.

To explain what I mean I must persuade you to read the book. So let me summarise its argument.

It is about the practice of anatomy in the sixteenth and seventeenth centuries, with most attention to the years between about 1550 and 1650. There are eight chapters. The first, *The Autoptic Vision*, is about seeing the inside of one's own body with one's own eyes. Is this a sight which is in some ways taboo? Sawday quotes one modern surgeon who compares it to the Medusa's

head: "the hidden geography of the body is a Medusa's head one glimpse of which will render blind the presumptuous eye". There is need for a history of interiority, a history of our sense of our own insidedness.

Chapter 2, *The Renaissance Body*, is subtitled "from colonization to invention". The anatomies of Vesalius are presented as a work of discovery, as compared to those of Harvey which were prepared to be inventive. Are the anatomists discovering an "America", or inventing a machine? And there is a sub plot: the transformation of punishment into art. Plato, Augustine, John Donne (there's a lot about Donne throughout the book), Calvinist theology, Burton, Marvell, are all drawn on to describe how the body could be "transformed into a self reflexive instrument of torture".

Chapter 3, *The Body in the Theatre of Desire*, looks at the development of anatomy as part of larger imaginative exploration of sexuality and pain. There is a combination of fascination and horror. "What they had alighted upon was the possibility of reanimating an object which the anatomists had transformed into a commodity. What would it feel like, they ask, to be dissected?" There are seventeenth century examples from Donne, and also references to today, in Linda Williams' book on hard core film pornography. Reading this chapter I was reminded of the sexual excitement I felt when I first saw, aged eleven, the trial scene from *The Merchant of Venice*. For the first time, I am beginning to understand what happened for me in the theatre that day at Stratford as Antonio bared his chest to Shylock's knife.

Chapter 4, *Execution, Anatomy, and Infamy: inside the Renaissance Anatomy Theatre*, develops the historical connection between law court, punishment, and the practice of anatomy. "The body hovers, as it were, on the brink of science ... the focus of a fear which borders on desire".

The theme is taken further in Chapter 5, *Sacred Anatomy and the Order of Representation*. The problem of how to provide a fitting context for the anatomized body is saturated with christian tradition: "so powerful was the set of symbolic meanings invested in the figure of the self-dissecting Christ, that it came to inhabit the visual depiction of anatomization at every level". Sawday's argument here speaks again and again to my interest in anaesthesia and psychoanalysis. "Until well into the 18th century, the conventions of anatomical illustration demanded that the figure, even at the very deepest stages of dissection, should be represented as still alive ... The body... would have to speak of its own participation within the process of self-analysis".

Chapter 6, *The Uncanny Body*, relates anatomy to that fateful split between body and mind which we associate with the philosopher Descartes. In the early 1630's, both Rembrandt and Descartes were exploring the gallows and the "butchers' shambles" of Amsterdam. Sawday gives us analyses of Rembrandt's two great Anatomy Lesson paintings, which he compares to Mantegna's "Lamentation over the dead Christ", and relates them to Descartes' search for the anatomical link between body and soul. The chapter continues with Spenser's Fairie Queene as an example of the "unheimlichkeit" that so fascinated Freud in his essay on the uncanny. It concludes with a historical disinterment of a forgotten epic of Phineas Fletcher, *The Purple Island*, (1633), a work which James Joyce said was essential to a reading of his *Ulysses*.

If you read just one chapter in the book, choose this one. This is what I mean by the body as caught in history making. The body does not only *have* a history. It *is* history.

With Chapter 7, *The Realm of Anatomia*, the focus changes. Instead of the body, the act of display. Anatomy displays: what, or whom, and to whom? The difference between men and women is involved in this act of display. How?

Every paragraph here is relevant to contemporary argument and research that draws on religious, feminist, psychoanalytic, questioning of the body and its history. Sawday looks first at *Myths of Division and Origin*, to place Anatomia in her proper context. With her attributes of knife and mirror she is both an extension of the law, and also a mistress of erotic reduction. Biblical and Greek images come together in Renaissance fascination with the figure of Marsyas, flayed alive, to express “the contradictory emotions to be uncovered in the realm of Anatomia. Her servants were dedicated to achieving knowledge of the human body in order to alleviate pain and suffering, and yet that knowledge was only gained at the cost of enormous pain...”, which speaks directly to my interest in anaesthesia.

He then moves on to a section on *Decayed Appetite: the female body in the Renaissance Courts*, in which he for the first time fully explains the word “emblazoned” in the book’s title. In the French and English courts a poetic culture flourished which celebrated, blazoned, the parts of a woman’s body (the exchange between Viola and Olivia in Shakespeare’s *Twelfth Night*, Act I, Scene 5, is an example). Sawday shows it to have been “the way to a closer but homophobically proscribed bonding with another man”, in which the blazon, the praise and showing forth of women’s bodies, was a means of asserting male potency by turning the female body into a commodity. This was part of the same culture as the practice of anatomy. He demonstrates this by comparing Vesalius’ 1536 “construction” of a cadaver with erotic texts of the French court at the same time.

In a section on *Pitiless Rigour: the Reproductive Body*, he examines further instances of cross gendered approaches to the body: the feminisation of the male body, whether that of Christ in Passion or of the cadaver on the dissecting table, the female body of the Church, the dissective dynamism of the Eucharist. He sees them all as examples of how a culture seeks to protect itself from the danger and horror of “the quasi autonomous uterus”. And he concludes:

“*Anatomia* - the cultural domain of the Renaissance science of the body - was a hungry goddess, feeding off the bodies of condemned men and women in the cities of early modern Europe. But the anatomy theatre was not, it seems, the only place where she held sway. Appearing in different forms, she could be discovered not only at the scaffold, but in the very centres of political power. Given the absolute centrality of the body to Renaissance culture - whether understood as a source of fearful anxiety or hierarchical patterns of government - then the perverse vitality of *Anatomia* is readily comprehensible. But *Anatomia* operated according to a rigidly gendered set of rules and prohibitions. To those rules and prohibitions, the art, literature, and science of the body were subservient ... a culture of erotic partition and scientific fragmentation which operated through the same network of metaphors and codes of representation”.



The last chapter, *Royal Science*, looks at the way the new anatomies were harnessed to restoration politics in England after 1660, to the new awareness of commerce and trade as circulation of the life blood of society. And there are alternative visions, visions of protest which have a very modern ring to them.

Towards the end, Sawday summarises his argument and looks forward to our own century:

"The fantastic culture of the human body which emerged in Europe during the 16th and 17th centuries can perhaps best be understood as a kind of birth. What was born was an infant who sought to become an orphan, who would acknowledge no parentage other than its own processes of reason. The autonomy of reason was proclaimed amidst the devices of art, poetry, architecture, ritual, law, and philosophy, which we have uncovered in this account. So complete was this process of self-authoring and authorization that, during the 18th, 19th, and 20th centuries, the idea of a fundamental cultural dualism, a belief in 'two cultures', took root, and then became the paradigm within which human knowledge, in the west, was constituted. For all the many attempts informed by religious and philosophical analysis to build a bridge between these two cultures, any structure which emerged was bound to look fragile...given the historical foundation we have been tracing in this book".

"An infant who sought to become an orphan, who would acknowledge no parentage other than its own processes of reason." I found only one explicit reference to alchemy in Sawday's book (not indexed, on page 232). But the world he is describing is recognisably that of the European alchemists.

### **Bringing the dreams and the book together**

How does *The Body Emblazoned* help me with my dreams of anaesthesia? It gets me thinking about body and experiment.

I have quoted the sentences about the contradictory emotions to be uncovered in the realm of Anatomia, where knowledge necessary to alleviate pain is bought at the cost of enormous pain. *The Body Emblazoned* is all about those contradictory emotions, and how they are expressed in art, literature, religion, politics, science, as well as, and because of, the anatomists' dissecting table. How has anaesthesia affected those contradictory emotions? Has it simply done away with "the cost of enormous pain"? Or has the pain perhaps mutated into a different kind of sensation? Given anaesthesia, what does the body today tell us about the world, the world in the making of which we discover ourselves?

I answer these questions in trying to imagine a history of anaesthesia over the last hundred and fifty years comparable to Sawday's history of Renaissance anatomy. It would be an extraordinary, wonderful book. We could expect it to develop what would at first sight appear to be very unlikely connections between anaesthesia and a whole range of cultural experience, including politics, philosophy, religion, philosophy, law, as well as of course medicine. But one recurring theme would surely be experiment.

Anaesthesia has made possible experiments of a kind that were previously inconceivable, intolerable, impractical. Animals, and human indebtedness to animals, are an important aspect of this new culture of experiment. Also feeling, sensation, as distributed, shared and not shared, between the experimenter and what is being experimented on. Anaesthesia makes it possible for us to do things to others which in the absence of anaesthesia would be impossible, for us as well as for our subject, the object of our experiment. (The play with the words subject and object is deliberate, to remind us how their meanings have changed, almost reversed, in the course of history.)

But with those dreams of mine in mind I wonder also about time. How does our culture of experiment treat time? Are we justified in assuming that laboratory time and the time of the world outside are of the same order, so that there is no problem in applying the results of experiments into a temporal order other than that in which they were performed? I think not.

Here are two examples which our history might consider, linking anaesthesia to education, warfare, politics, of the problems that arise when the results of experiment are transposed from laboratory to the world outside.

Peter Høeg has written a book called *Borderliners*, about an experiment in the education of maladapted adolescents in Denmark in the 1970's. As with life, it is not clear how much is fiction, how much fact.

It is written from the point of view of one of three youngsters, one girl, two boys, one of whom ends by burning himself to death. Time is the leitmotif of the book. The time of those being experimented on (with the best of intentions) is shown as essentially discordant with the time of the experimenters. For a psychotherapist it makes compulsive reading. And the insistent theme is that it is not possible to think about time without pain.

Our experimental methods can ignore differences in timing because they bracket pain out of their performance. The children in Peter Høeg's book know this because they are hurting. They respond to their hurt by experimenting with time. The grown ups take time for granted. For them the difference between making and keeping an appointment does not compel doubt as to their understanding of time.

My other example is Tony Harrison's extraordinary theatre-piece (he does not call it play) *Square Rounds*, produced at the National Theatre in 1992. This is chemical theatre and chemical history in one: "chemistry as both *unheimlich*, uncanny, and *heimlich*, humdrum and homely, caught into the ordinary processes of living, cooking and consuming, excreting and fertilising. It can become a figure also for living itself, the body a cauldron of chemical activity".

It tells the story of gas. When I went to the dentist to have my teeth pulled out in the early 1930's, I was "given gas". I was frightened of it, but it put me out of action for a time, long enough to get the tooth out. It worked. The tooth pulling was made easier for me, for the dentist, for my mother. Tony Harrison's theatre-piece is about gas used to put people out of action in another context: Ypres, April 22, 1915. It places the military use of gas in the First World War in a wider perspective of economically driven chemical research, and in doing so takes in much of the most terrible European history of this century.

Its central figure is Fritz Haber, the German Jew "who was in 1919 awarded the 1918 Nobel prize for his contribution to the solution of world hunger problems by the development of the synthesis of ammonia. But the same Fritz Haber was at the end of the war labelled as a 'war criminal' by the Allies. He it was who made possible the use of chlorine gas as a weapon in the First World War. Haber believed that gas would quickly end the war. His wife, the chemist Clara Immerwahr (whose surname with extraordinary aptness means 'ever true') resisted his plans. When he persisted, she killed herself." In the theatre, as she fades from sight, Harrison has her sing of her husband

He'll never live to see his fellow Germans use  
his form of killing on his fellow Jews.

Experiment is taken up into warfare, and sensation that can be overlooked in the laboratory becomes the stuff of history.

(The quoted sentences are from Gillian Beer's article *Square Rounds and Other Awkward Fits*, *Ambix* Vol XLI No.1, March 1994.)

Just two examples. Our history of anaesthesia would draw on much more. But the work of people like Høeg and Harrison helps us understand pain as experimental, experiment as painful. And it helps us realise that experiment cannot simply ignore the problem of time. Because it makes time fit what it is doing, which is why experiment can be so effective, for good and for ill.

For the sake of that which is being experimented on (in this case growing children), this "making time fit" has to be allowed for. Only so can the 'subject' of the experiment, that is both its victim and the agent that makes it work, be truly included in the result. As Peter Høeg's "Peter" puts it: "We are not simply left to time. One way or another, it is also something we are constantly involved in creating". Like it or not, we, our bodies, these cauldrons of chemical activity, are caught in history making.

So what does all this have to say about those dreams of mine?

Let me just home in on the vet and that huge snake. I feel now, after nearly five years, that there is a certain tentative understanding between the three of us. We go for long walks together in Wytham woods, and talk to each other about sex and Genesis and evolution.

The snake is not altogether happy with what I have written about bodies caught in history making.

"That's not how it feels to me", it says. "I feel not so much caught in history as trapped between history and nature. Trapped like a nerve in pain, or like something wild imprisoned in domesticity. Can't you write about that?"

So I turn to the vet, to ask her what it is all about.

She says:

"I think the snake's got it about right, you know. We *are* trapped between history and nature. But we *set* the trap too, and the snake may not know much about that.

"You need to take your argument further. Think about trap and experiment together. Between history and nature there is experiment. It's what works them across each other. But it feels like a trap, because the experimenting is *with* nature and *against* nature. That's what our bodies are trapped in. If we want to spring the trap, that's what we have to learn to feel. And when we feel, the sense of being trapped changes. It becomes more like being caught. Instead of a trap there's a catch.

"You say it is a question of timing. Which is all right as far as it goes. Questions of timing are indeed constantly arising between history and nature. But there's more to it than that. You must allow for the feeling. Being caught in a trap of our own setting feels contrary. You've got to allow for that contrariness.

"Has it ever occurred to you that pain may be related to time in some way? Originally, as it were, at the point where history and nature catch on to each other, in the moment when history and nature are jointly embodied? It sounds far fetched, I know, but give it a thought. Think of "original sin", and of the meaning the evolutionists discover in the word "adaptive". Mix them together, and go back to the dream in which we first met. Pain could be a reminder of just how contrary time has to be for us to exist, a reminder of what it is like to be caught between nature and history. If that were the case, then the relief which anaesthesia affords may be an opportunity to reflect on time in ways that have not been possible before".

July, 1997