**Medicine in the movies**

**It’s still alive: Victor Frankenstein**

Lester D. Friedman

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**Victor Frankenstein**

Starring Daniel Radcliffe, James McAvoy, Jessica Brown Findlay.


Something was waiting for him in the darkness, a part of himself he could not deny.

—Alice Hoffman

_The Museum of Extraordinary Things_1

Mary Shelley’s *Frankenstein* (1818) remains as popular today as it was during the author’s era—perhaps even more so. Her novel has become the fountainhead for seemingly endless rivers of remakes, sequels, plays, video games, and various other types of productions that continue to inundate our TV, Internet, and movie screens. None of the friends—Lord Byron, Percy Shelley, John Polidori, MD—telling ghost stories in the elegant Villa Diodati near Lake Geneva (Switzerland) during the wet summer of 1816 could possibly have imagined the astounding success of young Mary’s story. Neither could they have envisioned that her book’s title would become a perennial catchword encapsulating society’s fears of misguided scientific experimentation and unruly technologies. Far more than simply a work of fiction, Frankenstein has morphed into a cultural myth that continues to exert a profound
influence on the dreams and nightmares of Western civilization.

Had it not been for the movies, as Stephen King observes in *Danse Macabre* (1980), Mary Shelley's "modest gothic tale" might well have remained the province of earnest English majors, instead of transforming into an immensely popular cultural archetype.

At last count, some 200 movie titles with the word “Frankenstein” embedded within them currently exist. This list includes titles with the words “Frankenstein” and “Monster,” titles with the words “Frankenstein” and “Doctor,” and titles with a reference to “Frankenstein” noted. These productions about the man and his creation have an extensive history, stretching from silent films such as Edison's *Frankenstein* (1910), to *Victor Frankenstein* (2015), and forward into forthcoming productions such as *This Dark Endeavor: The Apprenticeship of Victor Frankenstein*, *The Casebook of Victor Frankenstein*, *Frankenstein Created Bikers*, and director Guillermo del Toro's planned adaptation. That’s not even considering ongoing TV programs (*Penny Dreadful*), and video games for children (*Island of Dr. Frankenstein*) and adults (*Frankenstein: Through the Eyes of the Monster*).


Both the Universal and the Hammer films circle around the same general ideas gleaned from Mary Shelley, including scientific hubris, the morality of medical research and experimentation, and the enduring battle between doing good for society and being seduced by hubris to do evil, but with a different emphasis. While the Universal directors shot in black-and-white, their later counterparts saturated Hammer’s productions in vibrant color—mostly a lurid red, of course.

Universal’s directors filled their worlds with the cavernous residences of aristocrats, while Hammer’s characters usually work within more middle-class environments. The Universal films exist in an uncertain time frame and fictional countries, whereas most Hammer versions take place during the Victorian era. In the earlier Frankenstein movies, violence is usually depicted off screen, in the
shadows or in quick sequences, while the later movies show their characters’ nasty deeds and macabre murders in more graphic detail. Finally, in the Hammer movies, Frankenstein’s creation usually appears opaque, one-dimensional, and animalistic, unlike his more sympathetic portrayal in previous films produced by Universal.

Most crucially, however, the Hammer cycle shifts the focus of the Frankenstein films from reanimating dead tissue to transplanting organs and body parts. When Universal’s creature awakes, he has no idea whose body parts and organs compose him, no memory of a past history, and he never inquires about the identities of his donors. Is he, therefore, human, animal, or something in between? Conversely, the Hammer films never question whether the creature is human or something entirely different. Such fundamental identity questions strike a decidedly modern note.

The newest branch of the Frankenstein family tree, *Victor Frankenstein*, offers an intriguing perspective from which to consider the basic flow of the Frankenstein narratives that examine the outcomes, costs, and responsibilities of creating artificial beings or reanimating dead bodies.

Here, Frankenstein’s (James McAvoy) assistant Igor (Daniel Radcliffe) becomes the central figure. (Although Shelley never included such a figure in her novel, he first appeared in nineteenth-century stage adaptations and later became a staple in the Universal movies.) Frankenstein frees Igor from his life as an abused circus clown, eliminates his physical deformity, recognizes his brilliance, and employs him as an assistant in his laboratory experiments to create life from dead matter using electricity. Together, they build a large human being, called Prometheus (Spencer Wilding), that contains two hearts and two sets of lungs, and shock him into life using a variety of devices and lightning.

From there, of course, things go badly and people are murdered. Eventually, the creature is killed, while Frankenstein escapes to the Scottish countryside, perhaps to continue his experimental quest. Although Director Paul McGuigan mounts a stylish production, *Victor Frankenstein’s* almost two-hour running time moves in fits and starts. The plot never manages to capture the viewer’s attention, and the characters are basically one-dimensional. It also engages only superficially with the profound questions raised in Shelley’s novel and the best of its adaptations, choosing instead to focus on a trite romantic story, and appending characters who add little to the overall complexity of the story.

Take my advice and save some money. Instead, download the 1931 Boris Karloff version or, perhaps even better, watch *Bride of Frankenstein* (1935).

Frankenstein is inescapable. As Allison Kavey notes in *Monstrous Progeny: A History of the Frankenstein Narratives*, this morning you could have eaten a marshmallow Frankenstein creature for breakfast, while reading your newspaper, encountered an analogy between Monsanto’s genetic manipulation of crops and Victor Frankenstein’s creation. On the way to work, you might have seen a billboard advertising the latest Frankenstein film while your local radio station compared the generation of organs from stem cells to Victor’s transformation of dead flesh into a living monster. At Dairy Queen, you could purchase an ice cream bar—in an attractive shade of green—made to look like the creature, while watching his cartoonish offshoot on *The Munsters*.

Frankenstein and his creature appear as icons of scientific hubris, consumable tasty treats, and artistic representations of the monstrous—sometimes comic, sometimes tragic, but always the same story with the same characters struggling through serial murders, madness, despair, and pitchfork-wielding mobs.

Kavey rightly contends that we turn back to Mary Shelley’s fictional character and his grotesque creation to tell us more about how to be human, and we are frustrated when we find more questions than answers. The novel emphasizes the importance of limiting scientific inquiry to approved topics and methodologies, but it goes silent on some very important points, not the least of which is
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what constitutes humanity, and can it be manufactured? The flip side of that question is also important: Are all people inherently capable of humane behavior, or must the human characteristics of ambition and desire derail the angels of our better natures and thus endanger our ability to be human?

These are not simple questions, and they keep us coming back. Our constant need for Frankenstein tells us not how far we have come in the last two hundred years, but how little distance we have covered in reconciling ourselves to the complicated competing demands of defining “good” scientific work in balance with ethical treatment of subjects. Like the creature himself, these questions remain omnipresent despite our best efforts to banish them.

Interesting medical connection

The pacemaker came from the Frankenstein movie.
—Jean Rosenbaum, MD from the short film, Frankenstein and the Heart Machine (The Pacemaker)

Jean Rosenbaum, MD, the inventor of the pacemaker, freely admits that his inspiration for this widely used invention “comes from the Frankenstein movie.” In 1951, as a freshman medical student, he witnessed the untimely death of a young woman whose heart stopped beating, a disturbing event that almost caused him to drop out. That night, Rosenbaum had a vivid dream about Frankenstein’s creature (he had seen the 1931 film as a young child) being hoisted into the lightning storm and the electricity that brings him to life. Inspired by this, Rosenbaum wondered if a small jolt of electric current could be mechanically produced to stimulate a damaged heart to cause it to beat regularly, thus reviving a patient. He put together a portable machine to perform this function but, after testing the results successfully on animals and freshly arrived DOAs, his superiors still deemed the process too dangerous for use on a living human being. Frustrated during this two-year waiting period, Rosenbaum (nicknamed the “Black Vulture” by his colleagues) felt like he was Dr. Frankenstein, and the timorous medical community the frightened town mob. Finally, he was given a chance to demonstrate how the machine would work on a patient whose heart had stopped for three minutes. The rest is medical history.

References

Thank you, Dr. Dans

After twenty-six years of writing “The physician at the movies,” Dr. Peter Dans (AΩA, Columbia University, 1960) is retiring to sit back and enjoy movies as entertainment.

I know I speak for all of us at The Pharos, and for all our readers in saying, “Thank you, Dr. Dans.”

Dr. Dans is a graduate of Columbia University College of Physicians and Surgeons, and did his residency on the Osler Medical Service at Johns Hopkins Hospital. He was one of the first assistant residents to be sent to Calcutta for three months to care for cholera patients, following which he finished his residency at Presbyterian Hospital in New York. He subsequently was a United States Public Health Service research associate in viral diseases at the National Institutes of Health, and did an infectious diseases fellowship at Boston City Hospital.