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Physicians, Society, and the Science Fiction Genre in the  
Film Versions of Invasion of the Body Snatchers:  
or Doctors with a Serious Pod Complex

Brett S. Stifflemire

A thesis submitted to the faculty of  
Brigham Young University  
in partial fulfillment of the requirements for the degree of  
Master of Arts

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## ABSTRACT

Physicians, Society, and the Science Fiction Genre in the

Film Versions of Invasion of the Body Snatchers:

or Doctors with a Serious Pod Complex

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Department of Theatre and Media Arts

Master of Arts

Close textual analysis of the four extant film versions of *Invasion of the Body Snatchers* reveals that each film modifies the original story such that it reflects changing societal attitudes toward physicians and the medical profession, as well as depictions of military and government in the science fiction genre. The changing depictions of characters and events in these films respond to changes in medical history, social history, and the science fiction genre across five decades. Each film reflects the contemporary anxieties of its time and the perceived ability of physicians to relieve those anxieties.

Doctors are important semantic elements of the science fiction genre, and their position within the syntax of a film helps to determine its meaning. By focusing on the physician character, this study finds that in addition to being a metaphor for threats such as Communism, *Invasion of the Body Snatchers* also reflects concerns about disease and other medical threats.

Keywords: Invasion of the Body Snatchers, physicians, medicine, disease, science fiction

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## Chapter 1

### Introduction

From the beginning of film history, films have been documents of the societies which produce them. Whether intentional or not, “movies are social representations” because “they derive their images and sounds, themes and stories ultimately from their social environment” (Allen and Gomery 158). Films are mirrors that reflect society.

In fiction films, characters are given attitudes, gestures, sentiments, motivations, and appearances that are, in part at least, based on social roles and on general notions about how a policeman, factory worker, debutante, mother, or husband is “supposed” to act. (158)

Since the attitudes, themes, and characters that are represented in films are informed by the societies from which they are created, they can be instructive documents of their times. By considering films as social documents, it is possible to observe the changes in society and changing social roles by looking at how film depictions change over time.

As Allen and Gomery mention in the quote above, members of society are often depicted as they are “supposed” to be. This thesis is particularly concerned with how depictions of physicians have changed to reflect changing societal attitudes toward medical practitioners and the medical profession. Many early depictions of doctors represent them in social roles that emphasize their power to provide comfort and healing. In this capacity, their knowledge and training allow them to allay fear and anxiety, especially toward disease. Through the years, however, depictions of physicians have changed reflecting changes in the field of medicine as well as changes in the attitudes and anxieties of society.

As early as the 4<sup>th</sup> century BC, fear has been recognized as a foundational element of artistic expression. Aristotle, in his *Poetics*, explains that tragedy should elicit pity and fear—emotions which can be experienced and purged, ultimately providing triumphant and beneficial catharsis. This same idea applies to watching films because through catharsis films can be therapeutic for those who engaged with them. In particular, the science fiction genre, which has roots in the tradition of Gothic horror literature, is specifically concerned with depicting fear. Appropriately, the horror author H.P. Lovecraft writes, “The oldest and strongest emotion of mankind is fear, and the oldest and strongest kind of fear is fear of the unknown.” The science fiction genre allows readers and viewers to vicariously confront and conquer their fears of and anxieties about the unknown. The genre endures because it continues to cathartically overcome the “oldest and strongest emotion of mankind.” It is indispensable.

This study focuses significantly on the four film adaptations of a text which is as enduring and indispensable as the science fiction (sf) genre itself—Jack Finney's 1955 novel *The Body Snatchers*. This text is centered around the fear of losing one's own identity and individuality. It embodies what Vivian Sobchack sees as the fear depicted in sf films—“the future possibility that we may—in a sense—lose contact with our bodies” (39). In *The Body Snatchers*, alien seed pods come to Earth from outer space and begin replacing human beings with pod-grown replicas. These invaders are “the perfect parasite” with “the ability to reform and reconstitute themselves into perfect duplication, cell for living cell, of any life form they may encounter” (Finney 153). After replication, they look exactly like those whom they “snatched,” but they lack emotions, feelings, and desires. The aliens' only ambition is to stay alive, so they move from one planet to another parasitically living off of each planet's inhabitants. Mankind is threatened to become just another used up and discarded host. The

narrator of the story, Dr. Miles Bennell, a general practitioner in a small, California town, tells his story of resisting the invasion. Finney depicts the physician protagonist as a community hero who is “right in the thick” of the fight (7). In the end, the alien pods retreat into the sky because, as Dr. Bennell says, Earth is “a fierce and inhospitable planet” (188). Triumphantly, the host rejects the parasite, and Bennell remembers the words of Winston Churchill, “We shall fight them in the fields, and in the streets, we shall fight in the hills; we shall never surrender” (188). However didactic or propagandistic it may seem now, this bit of patriotic fervor was not out of place in the Cold War era during which Finney wrote his story. This glorious victory over the invading parasitic alien race reaffirms the faith that mankind still has the power to defeat the forces that threaten individuality.

Some may agree with the comment made in Robert Rodriguez's *The Faculty* (1998) that “Jack Finney's *The Body Snatchers* is a blatant rip-off of *The Puppet Masters* by Robert Heinlein. So you can completely disregard that entire work.” However, Rodriguez's well-informed, intertextual, and (at times) self-indulgent film is indebted to Finney's novel and its enduring (and, perhaps, endearing) legacy. Finney states that *The Body Snatchers* “was just a story meant to entertain, and with no more meaning than that” (King 4). However, his story has proven to be more than mere entertainment—it continues to connect and reconnect with individuals on a deeper, more meaningful level as it contemplates a loss of humanity. The author Dean Koontz writes, “In the twentieth century, so *many* powerful forces have reshaped society so rapidly, compared to the more measured pace of change in previous centuries, that it's no surprise when we feel besieged and in danger of losing our humanity” (vii; italics in original). The continuing legacy of *Body Snatchers* is due, in large part, to its impact on the sf film genre. There are four extant film adaptations of Finney's story—Don Siegel's 1956 *Invasion of the Body*



*Snatchers*, Philip Kaufman's 1978 *Invasion of the Body Snatchers*, Abel Ferrara's 1993 *Body Snatchers*, and Oliver Hirschbiegel's 2007 *The Invasion*. The fact that this story resurfaces on the big screen every 15 or 20 years indicates that it still resonates with audiences. The frailty and vulnerability of humanity is no less frightening today than it was 55 years ago, and as mankind continues to pride itself on its rationality, that pride is still accompanied by the fear of becoming too rational.

Considering the power of *Invasion of the Body Snatchers* (1956) in a modern, technological age, Dean Koontz writes:

When modern men and women lost religious faith, they lost the associated belief that human beings are special, that we were created with purpose to undertake a life with meaning. Science, technology, and politics have not yet filled that void and probably never will be able to do so, especially not if they continue to be powered by the ideologies that have thus far informed them. If we believe that we are just animals, without immortal souls, we are already but one step removed from pod people. The original *Invasion of the Body Snatchers* has at its center this fundamental truth of modern life, which is why year by year its power as art grows rather than diminishes. (ix)

*Body Snatchers* presents human beings themselves as the threatening unknown. In this story, the alien, the robot, the monster is perfectly human in form. Friends, neighbors, and lovers are replaced by dehumanized duplicates, but even more frightening is the danger of losing one's own humanity and unknowingly becoming the emotionless "other." As technology advances,

essential human qualities of mankind continue to be threatened. The digital age has changed communication—direct human interaction is being replaced by email, texting, and web-based networking/communication tools like Facebook and Twitter. With the expanding popularity of social media (a somewhat ironical term), human social interaction is becoming increasingly technologically mediated. It is no wonder that *Body Snatchers* continues to resonate today.

Genre films often act as mirrors that reflect the concerns of those who produce them, and *Invasion of the Body Snatchers* (1956) is certainly such a mirror. It is also an important text to consider because it exists, generically, as both a science fiction film and a horror film. These sister genres—sf and horror—have roots in the Gothic horror tradition and are both deeply concerned with fear and anxiety. The genres overlap in many ways, which has led to some disagreement (or, at least, confusion) as to how to clearly and distinctly separate the two. However, Vivian Sobchack, very helpfully, has written, “Rather than futilely attempting to isolate the genres from each other, it is far more critically useful to see them as the two ends of a spectrum” (58). This sf-horror spectrum is greatly beneficial when considering *Invasion of the Body Snatchers*. The 1956 film exhibits qualities of both the sf genre and the horror genre, and it is considered a canonical text in both. It is often described as either a science fiction film with horror elements or a horror film with science fiction elements. However, these approaches attempt to isolate into a single genre a film which operates perfectly well within both genres. Therefore, it is helpful to view the film as a point on the sf-horror spectrum rather than a dual-natured anomaly.

In his essay “The Mummy's Pool,” Bruce Kawin seeks to define the horror genre by comparing it with the sf genre: “The clearest way to define the horror film genre is to compare it with that of science fiction, since the two are regularly confused with each other and often draw

on the same materials” (468). Although he does not explicitly accept that the two genres exist on a spectrum as Sobchack does, Kawin does acknowledge that the two can overlap. He states that the genres are “comparable in that both tend to organize themselves around some confrontation between an unknown and a would-be knower,” and he considers it folly to assume “that a film is science fiction if it has scientists in it and horror if it has monsters” (468). For Kawin, the genres diverge in the way they treat specific elements, such as differing roles of the military and scientists and the use of open and closed spaces. His ideas about the sf and horror genres are helpful when thinking about the *Body Snatchers* films because while Finney's story is one that facilitates exploring society's fears from one time period to another, each film adaptation is distinct from the others not only in the modifications to the story but also in the approach to genre. Of particular interest are the different films' incorporations of sf and horror elements, uses of rural and urban spaces, and portrayals of the military and the federal government.

In addition to location, military, and government, focus will also be given to the role of physicians in these films. Members of the medical community are often key players in the sf genre, but the inclusion of these characters not only serves generic and narrative purposes but also reveals the attitude of society toward the medical profession and medical practitioners themselves. Finney's *The Body Snatchers* features a small-town general practitioner as its central protagonist, and each *Body Snatchers* film has concerned itself with characters that are, to varying degrees, associated with the field of medicine. Therefore, this text lends itself to studying how societal attitudes toward medicine and physicians have changed across five decades. In terms used by Rick Altman, the medical figures in these films are semantic elements that are repositioned with the syntax of each film, creating a new meaning for that character and for the film itself. According to Altman's theory, “The distinction between the semantic and the

syntactic . . . corresponds to a distinction between the primary, linguistic elements of which all texts are made, and the secondary, textual meanings which are sometimes constructed by virtue of the syntactic bonds established between primary elements” (100). In the *Body Snatchers* films, the physician characters function as primary, semantic, elements that serve certain functions within each film. However, when the physician is recontextualized from film to film, the character does not only serve a different function within the syntax of the plot but also reveals a difference within the society that created each film. Altman further explains that “the semantic/syntactic distinction is fundamental to a theory of how meaning of one kind contributes to and eventually establishes meaning of another” (100). In each time period—the 1950s, the 1970s, the 1990s, and the 2000s—doctors and diseases were viewed differently by society, and in each version of *Body Snatchers*, the use of the semantic physician in a modified syntax reveals the different attitudes, concerns, and anxieties about them.

Science fiction films act as mirrors to reflect the societies which produce them, and they also reflect societal changes over time. By using a methodology which incorporates theories from Vivian Sobchack, Bruce Kawin, and Rick Altman, this study seeks to explore how each of the four *Body Snatchers* films situates itself along the sf-horror spectrum by the way it uses elements of the sf genre and reflects the changing attitude of society toward the field of medicine, medical practitioners, and disease.

#### Description of each chapter

Chapter 1 introduces the critical issues surrounding the distinction between the sf and horror film genres and a methodology for this study. It also introduces the key text that this

thesis explores—Jack Finney's *The Body Snatchers*—and its importance as a recurring text in the sf film genre.

Each subsequent chapter focuses on one of the film adaptations of *Body Snatchers* and explores how each permutation of the story reflects the anxieties and fears of the time period and society from which it is produced. Chapter 2 discusses Don Siegel's 1956 *Invasion of the Body Snatchers*, which scholars and critics consistently argue reflects the Red Scare of Communist invasion—a fear that was intensified by McCarthyism and the attempted discovery and suppression of Communist activities by the House Un-American Activities Committee. A common reading of Siegel's film argues that the loss of humanity and individuality reflects the effects (or at least the feared effects) of Communism and McCarthyism. This chapter accepts this argument and explores through close analysis of the physician character how the film also reflects the elevated position of doctors in society at the time and the positive, optimistic attitude that was generally felt toward medicine.

Chapter 3 specifically considers Philip Kaufman's 1978 *Invasion of the Body Snatchers*, which is concerned more with the fear of New Age thinking and cults—a fear which was reinforced by the mass suicide of Jim Jones and his followers at Jonestown only a month before Kaufman's film was released. The chapter acknowledges the absence of a physician, especially in comparison to the previous *Body Snatchers* film, which is a significant change as it reflects the trend of the time for general practice physicians to migrate away from large metropolitan areas. Analysis also reveals that the film couches within the invasion the fall of medicine from an exalted status to one of mistrust and skepticism.

Chapter 4 focuses on Abel Ferrara's 1993 *Body Snatchers*, which shifts its protagonist from a professional adult to an angst-ridden teenage girl. The chapter explores how altering this

character is important for how the film operates generically but also explores the position to which the physician character has been relegated. Considering the film in its context of the early 1990s, the meaning of the invasion differs from that of the previous films, and the role of the physician is one of ineffectiveness. (Interestingly, in *Psycho House* (1990), the third book of his *Psycho* trilogy, Robert Bloch describes a small-town doctor as “one of the last of a dying breed of balding, horn-rimmed-wearing general practitioners” (56). Bloch recognizes a trend in the medical profession that informs the depiction of the physician in *Body Snatchers* (1993).) The ineffective physician in Ferrara's film reflects societal uneasiness toward the medical field as it faced the uncertainty of health care reform and the difficulty of treating AIDS.

Chapter 5 looks primarily at the latest version of *Body Snatchers*—Oliver Hirschbiegel's 2007 *The Invasion*. In this film, the main character is again female as well as a specialized physician—a psychiatrist—and a mother. The chapter explores why the changes made to the role are important and what they reveal about the current status of doctors and medicine in society. Additionally, the threat of invasion is no longer from giant seed pods but from an alien virus. This chapter discusses what this reveals about current anxieties toward the possibility of a worldwide pandemic caused by a communicable disease like SARS or avian flu.

Chapter 6 explains the conclusions of the study—the science fiction film genre, in general, provides a way to discuss and deal with societal issues, controversial topics, and philosophical questions, and *Body Snatchers*, in particular, is a text that continues to be adopted and adapted for these purposes. There is still more to explore in these areas, so this final chapter also indicates ideas for further study that may be beneficial.

## Chapter 2

### Don Siegel's 1956 *Invasion of the Body Snatchers*

Don Siegel's 1956 version of *Invasion of the Body Snatchers* is commonly accepted in the canon of significant 1950s American science fiction films. Although scholars such as Vivian Sobchack, Susan Sontag, and Peter Biskind may differ in their analyses of the film, it certainly has earned a prominent place among other “golden age” sf films. Like other films during this period, it reflects the fears, anxieties, and apprehensions of 1950s America—paranoia of nuclear power, fear of communist invasion, desire for successful heterosexual coupling, and so forth. Building on the foundation laid by other canonized sf films like *The Thing from Another World* (1951; directed by Christian Nyby and produced by Howard Hawks), Siegel was able to establish a tone of fear and paranoia in *Invasion of the Body Snatchers* from the opening title sequence. The opening credits are shown over a shot of the sky with clouds rapidly floating past. This image immediately calls to mind the warning given at the end of *The Thing from Another World*: “Watch the skies, everywhere! Keep looking. Keep watching the skies!” A simple image of the sky has the power to threaten the earth's inhabitants with intercontinental nuclear warheads, mutually assured destruction, and of course, imminent alien invasion. This image (with its associated connotation) simply and succinctly reflects the general anxiety of Cold War-era America from the fear of Communism to the paranoia of McCarthyism.

*Invasion of the Body Snatchers* is an important representative text of the sf film genre in the 1950s; however, it is also often considered a horror film. As mentioned earlier, the overlapping of the sf and horror genres is common. In addition to the ominous portent of the alien-filled sky, *Body Snatchers* holds other commonalities with *The Thing from Another World*,

and it is helpful to compare the two, as Kawin does in his article, in terms of how each uses the elements of the sf and horror genres to correctly place *Invasion of the Body Snatchers* on the sf-horror spectrum. One characteristic that Kawin identifies to distinguish between sf and horror is the space in which the action takes place—open system vs. closed system (470). Many sf films are more concerned with open spaces—large urban locales with threats that endanger large populations (such as *When Worlds Collide* (1951) and *The Day the Earth Stood Still* (1951) in which the entire planet is threatened), while horror films often present events in a more closed space—a confined area, such as a rural setting, in which a small group of people are threatened by a monster (such as *Frankenstein* (1931) and *Psycho* (1960)). *The Thing from Another World* is set in a closed system in an isolated military camp near the North Pole. The monster that is unleashed initially only threatens those immediately involved, which puts it more in realm of horror than in sf. Similarly, *Invasion of the Body Snatchers* is set in a rural California town, which presents a fairly closed system (though there are roads and a train that lead to the outside world). The immediate concern is for a small group of friends (and ultimately only for the two main characters). Although the threat begins in a small town, it is spreading and could potentially threaten the entire world. Thus, there is no clear distinction as to whether this fits in the horror genre or in the sf fiction. Because the focus is centered on the immediate threat to the two main characters—Miles Bennell and Becky Driscoll, it can be argued to lean further toward horror, but the ambiguity remains.

In both *The Thing from Another World* and *Invasion of the Body Snatchers*, the hero is a virile, white male, which follows the conventions of the 1950s sf genre without much departure. The hero seeks heterosexual union, another element that conforms with the genre. However, in *Body Snatchers*, Miles Bennell seeks to actually rekindle a relationship with his high school



sweetheart Becky Driscoll because they both went separate ways after high school. There is an interesting nuance to these characters which departs a little from convention—they are both divorced. Thus, the successful coupling that they are seeking is undercut somewhat by the fact that they have both already failed in marriage. Even though they are fairly recognizable characters, they have both been unsuccessful at something they are once again pursuing, which may raise doubts as to whether they can be successful in other ways in the film—such as defeating the invading enemy. Their relationship and their abilities to succeed are called into question, and the power that is typically possessed by key narrative figures in the sf genre is ambiguous here.

Another important generic element that is worth mentioning is the presence of military and science. In *The Thing from Another World*, the Russian-looking scientist is clearly the enemy, and his carelessness (and Faustian willingness to do whatever it takes) in his pursuit for knowledge unleashes a monster that the heroic military must destroy. Science vs. military is a very typical confrontation in the sf genre, which shows how *The Thing from Another World* is effectively blending elements of genre to create a hybrid sf-horror film. On the other hand, *Invasion of the Body Snatchers* does not offer a clear dichotomous rivalry. Dr. Miles Bennell, who represents science and particularly medicine, is certainly the unwavering hero, while other doctors represent less commitment to quashing the alien invasion. Meanwhile, there is no military presence in the film, which is particularly interesting. The enemy is not a forceful army of foreign soldiers but is, rather, an emotionless group of impostors who look and sound like friends and loved ones. The threat is less identifiable which makes it less of a horror film but which makes it more horrific.

The generically ambiguous nature of *Invasion of the Body Snatchers* is very effective in undermining expectations and creating uneasiness. This atmosphere is very effective for the film which is essentially asking viewers to avoid complacency in what they are witnessing and experiencing in the progressing world around them. The danger of Communist invasion through infiltration should make one uneasy, and it will succeed unless complacency is set aside.

As much as *Invasion of the Body Snatchers* is an artifact revealing American attitudes toward foreign aggression and invasion in the 1950s, it is also a reflection of general attitudes toward medical science and medical practitioners during the period. Generally in sf films of the time, physicians (and general practitioners in particular) are depicted as highly esteemed members of their communities and are accepted as knowledgeable, altruistic healers. These depictions continued the tradition of the “doctor hero” that became popular with the Hollywood medical epics of the 1930s—such as *Arrowsmith* (1931), *Men in White* (1934), and *Interns Can't Take Money* (1937), which introduced the character of Dr. Kildare. In his essay “The Positive Image of the Physician in American Cinema During the 1930s,” Todd Wider remarks that the film version of *Arrowsmith* alters Sinclair Lewis' original novel such that the “archetypal medical practitioner becomes somehow synonymous with the 'country doctor' and is out to save lives in the present, whereas the scientist emerges as a colder, more rational entity, motivated by either vainglory or the pursuit of innate truth” (141). This distinction between the “doctor hero” and the research scientist that was made in the 1930s is an important element in sf films of the 1950s. Susan Sontag writes that “science fiction films are strongly moralistic. The standard message is the one about the proper, or humane, use of science, versus the mad obsessional use of science” (219). In these films, scientists range from savior (*When Worlds Collide*) to satanist (*The Thing from Another World*), but medical practitioners are almost always heroes. These doctor-heroes

possess more knowledge than other members of the community, and they belong to a “noble profession” that endows them with power and cultural authority to heal. Thus, once an abnormality is discovered, doctors are often sought for sage wisdom and/or healing, such as Doc Hallen in *The Blob* (1958). Although Doc Hallen is consumed by the alien life form, he dies an honorable death as he strives to fulfill his role as hero.

The prominence of the Romantic doctor-hero was a reaction to the medical advancements that were taking place early in the 1930s, and he (the vast majority of doctors were male<sup>1</sup>) continued into 1950s sf films as a result of the continuing medical advancements of the '40s and '50s. These advancements—particularly the development of penicillin and polio vaccination—helped to place the 1950s physician in a position to be respected and revered by society. His occupation was one rooted in factual science that had the ability to treat and cure diseases that had previously ravaged the world. It is this positive attitude toward the medical practitioner that, for the most part, permeates the science fiction film genre in the 1950s. And it is certainly this positive image of medicine that is portrayed by Dr. Bennell, the doctor-hero in the 1956 *Invasion of the Body Snatchers*.

Interestingly, the doctor-hero is introduced in a medical setting. After the opening credits, the film immediately pushes the viewer into the middle of the plot as a police squad car, siren screaming, speeds down a dark street to the entrance of a city emergency hospital. Two policemen emerge as well as Dr. Hill, a psychiatrist who has been called to the hospital by Dr. Bassett, the emergency physician on duty. When Dr. Bassett opens the door to his office, a raving man grabs his lapels and yells, “Doctor, will you tell these fools I'm not crazy? Make them listen to me before it's too late!” In response, Dr. Hill walks into the room and says, “I'll listen to you.” The patient asks, “Who are you?” to which he replies, “I'm Dr. Hill from the state

mental hospital.” This introduction causes the patient to erupt, “I am not insane!” As if to prove his sanity, he states, “I am a doctor, too.” This is the introduction of the main character, Dr. Bennell. At the request of Dr. Hill, Dr. Bennell then begins telling his story, and the main portion of the film begins through a flashback. In these few minutes, three different depictions of physicians are offered—Dr. Bassett, the specialized physician working in the hospital; Dr. Hill, the psychiatrist working at the state mental hospital, a separate entity from the city emergency hospital; and Dr. Bennell, the small-town general practitioner who has his own private practice in Santa Mira, California. Later, two more physicians will be introduced—Dr. Percy, a fellow small-town general practitioner who has a private practice in or around Santa Mira, and Dr. Danny Kauffman, a psychiatrist who has his own private practice in the area. These five physicians demonstrate both the progress and the tradition of medicine in the world of the film. In the mid-1950s, medical practice was changing in such a way that it created several dichotomies within the field that are presented by the five physicians in this film—specialist vs. generalist; urban vs. rural; and hospital-based practice vs. private practice. Medicine was changing—for both the practitioner and the patient—forever.

This atmosphere of specialized vs. general and urban vs. rural medicine is seen (at least implicitly) in many science fiction films of the 1950s, and it can be seen in the 1956 *Invasion of the Body Snatchers*. It is in this atmosphere that Dr. Bennell is placed in the film which is significant because he is a general practitioner serving in a rural area at a time when fewer medical students wanted to be “country doctors.” By the 1950s, greater numbers of physicians were practicing in specialized areas of medicine, and fewer were deciding to be general practitioners. In fact, by the end of World War II, the number of general practitioners was “dwindling fast” (Cantafio 17).<sup>2</sup> There were several factors which contributed to this shift.

Perhaps the most significant reason (because the others tended to grow out of this) was the formation of health insurance companies, which began toward the end of the 1930s. It was common for unions to provide their workers with insurance coverage, and thus, with the increase in union membership after the Great Depression, a large number of the workforce was covered by these insurance companies for in-hospital procedures. Having insurance coverage was an enticement for many to seek more treatment at hospitals, which pleased specialists who worked at the hospital because seeing more patients meant more income. However, during this period most general practitioners were still allowed to admit their patients to the hospital and treat them there. This caused a division between general practitioners, who wanted to treat their own patients in the hospital, and specialists, who wanted exclusive care of hospital patients. Thus, specialists and their organizations began to attack the competence of general practitioners. However, since general practitioners were still highly thought of among general patient populations, the attack “was not trumpeted from the tree tops, but was insidiously pursued quietly through the ranks and echelons of the medical profession. The corruption began in medical schools” (16). This “corruption” was especially seen during medical students' clinical training with medical school faculty deriding the work of general practitioners and portraying specialization as the superior choice. Thus, “students graduated from medical school with two distinct impressions, one that all general practitioners were incompetent, and that the field of general practice was to be avoided in favor of a specialty” (17). This contributed directly to a diminished number of general practitioners by the 1950s, yet generalists, especially rural physicians were still highly regarded in the eyes of their patients.

Despite the declining number of general physicians, many medical students still chose to pursue general medicine because they were inspired by their experiences with their own family

physicians. “The post war graduates, who embraced the general practice of medicine, were in the most part veterans of the great war who were more mature and hardened by the rigors of war time. They accepted the new challenge with vigor” (18). Even though these physicians were “armed with all the new concepts in medicine, a by-product of the medical advances produced by the war effort,” they were certainly faced with a “challenge” (18).

As the older general practitioners retired or expired, there were less recent graduates to take their places. This coupled with the attitude of the majority of the public still preferring general practitioners as their family doctor, led to the overburdening of the practicing generalist. His office was always full, he had a long list of patients to visit at home after his office hours, and in addition he had patients in the hospital to attend. (17)

Yet, if anyone could handle the challenge, it was the “mature and hardened” veteran who approached his practice with “vigor.”

Another factor that helped to shape the general practitioner of the 1950s was the differentiation between urban and rural medicine. Because the vast majority of medical schools were located in or adjacent to large cities, students trained in urban hospitals and became accustomed to life in the big city. Therefore, after graduation, most students sought employment in the cities and hospitals where they training or in other large metropolitan areas. Few medical school graduates wanted to work in rural areas, and even most students from small towns did not return to work there. Many of the doctors who did practice in rural areas were enticed there by a special connection—home town, family, etc.—and most were general practitioners. As specialists began to dominate the medical profession in urban areas, these areas became less

inviting for general practitioners, especially because hospital privileges for these physicians were being diminished more and more. At this time, most urban hospitals required physicians to be board certified, which meant that most general practitioners could not work there. Thus, rural practice seemed to become synonymous with general practitioners because they were still allowed hospital privileges and they were treating patients who still preferred to see a general practitioner (Cantafio 24). “In the rural area . . . the method of medical practice for a time did not change much. The general practitioners were unchallenged and practiced in the same manner that their medical philosophy dictated” (26). This division between urban and rural medicine after World War II continued to increase into the 1950s.

Significantly, Dr. Bennell, the doctor-hero in *Invasion of the Body Snatchers*, upholds the traditional role of general practitioner, who has a personal knowledge of his patients socially as well as physiologically. The trust that his patients have in him is revealed as he is talking to Sally, his secretary, at the train station at the beginning of the film. When Sally informs him of the patients who have been waiting for him to return, he asks, “Why didn't you send them to Percy or Carmichael like I told you to?” She responds, “Most of them wouldn't go. They want to see you.” This exchange reveals the importance that these patients place on their relationship with their physician. Because these patients want to tell Dr. Bennell that their loved ones, who look exactly the same, are actually different, they are shown to trust him enough to tell him something that may make them appear to be insane. This level of trust is at the core of the relationships between the doctor-hero and his patients. Even the little boy Jimmy Grimaldi, who cannot trust his own mother, willingly and unquestioningly swallows the pill that Dr. Bennell gives him. Also, Miles is the “mature and hardened” veteran with “vigor” who has chosen to practice in the small, rural town in which he was raised. As he watches the townspeople after the

pod people have transformed everyone except himself and Becky, Miles names several residents and remarks that they are “people I've known all my life.” He tells Wilma Lentz, “My business is people in trouble.” His patients are like family, and he does all he can to help them. In the end, he loses Becky and can't save the people of Santa Mira, but he is still determined to save the lives of anyone who will listen.

In addition to being the trustworthy traditional physician, Miles is also proof that general practitioners can be competent, even more competent than specialists. He begins telling his story, “I hurried home from a medical convention I'd been attending.” The fact he was attending a convention shows that he keeps abreast of the advancements and innovations in medical science. However, he does not just passively learn from other doctors but contributes to the body of medical knowledge—he presented a paper at the convention. Although he may be a “country doctor,” he is far from being incompetent, and his knowledge of medicine is far from being out-of-date. When he arrives at the house of Jack Belicec, the writer, Miles asks, “What's going on?” To which Jack replies, “Maybe you can tell me. You're the doctor.” Dr. Bennell surely embodied the knowledge, competence, and positive advancements of medicine to his patients. And although we do not know exactly how long he had been practicing medicine in Santa Mira, it is possible that he introduced penicillin to them in the 1940s, which would have made him more than a healer. He would have been a savior.

Prior to 1956, several medical advancements were achieved, which radically altered the perception of how to treat illness and of which diseases were treatable and curable. Perhaps, the most significant discovery during the first half of the 20<sup>th</sup> century was that of penicillin. The advent of penicillin as a viable treatment was, in many ways, a miracle cure. Prior to penicillin treatment, bacterial infections, even minor ones, caused great pain and suffering to those



infected. There was no effective treatment short of lancing swollen glands and amputating diseased limbs. It was common for these minor infections to even cause death. “It is hard to comprehend now the fear that arose from even a minor infection . . . The advent of penicillin changed not only the course of medicine, but of society as well, as it permitted physicians to prescribe a medication that could save lives within a few days of its administration” (Hamdy 192). The changes resulting from the discovery of penicillin were especially dramatic due to the long history of developing penicillin into a viable pharmaceutical that could be mass-produced and widely distributed.

Penicillin has been called black magic, a wonder drug, and a miracle cure, among other exultant monikers. The advent of this drug certainly revolutionized medicine in the 1940s. And although many bacteria developed antibiotic resistance—some quite quickly, there was still a hopeful optimism in the 1950s, which helped society to think positively of medical practitioners. Before penicillin was available, physicians were relegated to treating patients with painful procedures like amputation that may or may not have saved them from a life of complications due to infection. In the 1950s, physicians, endowed with effective pharmaceuticals, were empowered with the ability to treat and even cure infections—syphilis, tuberculosis, sepsis, etc.—with a relatively painless, noninvasive, and effective drug. In comparison to physicians of the past, those of the 1950s were saviors thanks in part to new pharmaceutical capabilities.

The use of penicillin introduced a new competence in pharmaceutical medicine which proved that science-based medicine had merit and was capable of developing effective drug treatments. Gone were the days of ineffective homemade concoctions, potions, and elixirs. Instead, by the 1950s, pharmaceutical therapy was backed by knowledgeable scientists and solid research, and pharmaceutical companies were in place to produce these drugs and distribute them

to doctors who could competently prescribe them to their patients. The face of medicine was indeed changing and becoming more scientifically founded.

In addition to penicillin and changes in psychiatric medicine, there were other medical advancements that demonstrated the competence of medical practitioners and the benefit of medicine to society. A vaccine for polio, one of the most dreaded childhood ailments of the early 20<sup>th</sup> century, which crippled, paralyzed, and killed many throughout the world, was developed by Jonas Salk in 1952, and in 1955, large-scale polio vaccination was introduced. Also in 1952, a polio epidemic in Copenhagen led to the creation of the concept of intensive care, a concept which is a permanent fixture in medical thought to this day. Penicillin aided in significant advancements in surgical procedures that were previously impossible (or, at least, impractical) due to the risk of infection. These advances in surgery included improved transplantation capabilities and cardiac surgeries. In 1950, Lawrence Craven, a Cleveland-based family physician discovered that aspirin could prevent blood clotting. In 1952 at the Georgetown University Medical Center, an artificial aortic valve was implanted into a patient. Also, the first successful open-heart surgery was performed in 1955 (Sebastian 397-404). These were significant advancements in medicine being able to prolong life and to specifically improve the health of the heart—the body's life-sustaining organ. Not only was medicine allowing doctors to treat the most vital organ in the body by 1956, but scientists were also making discoveries about the genetic material that makes us human. In 1953, Watson and Crick published their monumental work describing the double-helix structure of DNA. By the mid-1950s, science was exploring the very genetic code of mankind. These important discoveries were made in an era of advancing scientific and medical knowledge that would greatly benefit the world.

Advances in medical science were beneficial, yet many were still apprehensive about progress. This apprehension is revealed in many science fiction films of the period. These films raise a warning voice against the dangers of letting progress go too far. This is certainly the case in *Invasion of the Body Snatchers*, and it is particularly interesting how the danger of progress is revealed through the medical profession. The only one in Santa Mira who survives is the altruistic, traditional general practitioner who is competent and understands how to appropriately utilize new discoveries in medical science. Dr. Kauffman cannot resist the invasion, and Dr. Hill is only willing to help once there is clear evidence to support Dr. Bennell's story. The film shows that it is possible to benefit from advancement if the knowledge is in the proper hands, but it also warns that there is danger in abandoning tradition in pursuit of progress—whether that “progress” is Communism or medicine.

Even though the psychiatrists in this film are not heroes like the general practitioner, they are not demonized, and the value of their medical specialty is not marginalized, either. Dr. Kauffman jokingly refers to himself as a “witch doctor,” but the doctor-hero is his friend, and Bennell fully accepts the worth of psychiatric medicine. The changing perception of psychiatry is revealed in the conversation between Miles and Wilma when he tells her, “Even these days it isn't as easy to go crazy as you'd think.” He understood how psychiatric medicine and views of mental illness were changing. In fact, the shift to a solid scientific foundation of medicine by the 1950s is no more apparent than in the changing perception of mental illness. The field of psychiatry changed drastically both in its approach to mental disorders as treatable diseases and in its acceptance by society as a real medical discipline that could provide demonstrably beneficial results. Approaches to psychiatric medicine dramatically changed during the century preceding the 1950s. The middle of the 19<sup>th</sup> century witnessed “the rise of professional bodies,

journals and legislation concerning the insane” and is viewed as “the high point of asylum psychiatry in Britain and America” (Porter, “Greatest Benefit” 501-502). In fact, asylums were specifically designed to have an architecture and an atmosphere that were intended to make them the best method of treating the mentally ill. “Asylums were prized as scientific, humane, cost-effective, curative institutions” (502). Despite the “therapeutic faith” that some had in the effectiveness of asylums, many people criticized them during the the latter half of the 1800s. However, treatment of mental illness in the early 1900s was still heavily influenced by 19<sup>th</sup>-century thinking. No popular, effective alternative had been found, so asylums were still the dominant method of dealing with the insane.

Psychiatric medicine began to significantly change at the beginning of the 20<sup>th</sup> century. Asylums were being further attacked for cruelty to patients, and as ideas about mental disorders and the human psyche changed, asylums (as they then existed) were destined for obsolescence. Early 20<sup>th</sup>-century psychoanalysts, particularly Sigmund Freud and Carl Jung, revolutionized the field of psychiatry with their theories of the unconscious psyche. Freud and Jung worked together from 1907 until schisms in theories developed and the two split in 1912. Jung developed his “analytic psychology,” which was less rooted in sexuality than Freud's theories of repression and desire (Porter, “Greatest Benefit” 517). Although the press generally preferred Jung's ideas, Freudian psychoanalysis prevailed and “gained respectability after psychoanalysis was used to treat some 'shell-shocked' soldiers during the First World War” (Harrison 169).

A significant breakthrough in psychiatric medicine came with the introduction of pharmaceutical treatment for mental illness. In 1949, the first use of psychotropic drugs to treat psychiatric disorders was proven to be beneficial when lithium was used to manage manic depression (Porter, “Greatest Benefit” 520). This was followed by the development and use of

other effective psychiatric pharmaceuticals, including chlorpromazine, which was first used to treat schizophrenia in 1952 (Sebastian 399). These drugs “had remarkable success in stabilizing behaviour. They made it possible for patients to leave the sheltered but numbing environment of the psychiatric hospital” (Porter, “Cambridge History” 300).

Psychopharmacology certainly brought a new self-confidence and therapeutic optimism to the psychiatric profession. It promised a relatively safe, cost-effective method of alleviating mental suffering without recourse to lengthy hospital stays, psychoanalysis or irreversible surgery. It also restored psychiatry's wishful identity as a 'hard' science. (Porter, “Greatest Benefit” 521)

Additionally, with the release of the first *Diagnostic and Statistical Manual of Mental Disorders* (*DSM*, or *DSM-I*) in 1952, mental disorders were shown to have validity as actual diseases that can be classified and categorized and that have real, identifiable etiologies (Porter, “Cambridge History” 300). Although the classifications in the *DSM* are continually debated, its creation in 1951-52 reveals a significant change in the scientific foundation of psychiatry and its acceptance as a valid, hard science. Thus, with the discovery of definable and treatable mental illnesses and the advent of effective therapeutic pharmacology, psychiatry established itself as a credible, science-based medical field. By the 1950s, it had moved away from crack-pot science full of quacks and “head-shrinkers” and had become practical, beneficial medicine.

Even with these advancements in psychiatric medicine, psychiatrists were aware of their limited understanding. During World War II, “[o]nly about 10% of the total cases seen [by military psychiatrists] fell into any of the categories ordinarily seen in public mental hospitals” (*DSM* vi). By 1956, psychiatrists understood a lot about mental disorders, yet they fully

recognized their limited knowledge of the complexities of the human mind. Thus, it is no surprise when Dr. Kauffman tells Dr. Bennell, “The mind is a strange and wonderful thing. I'm not sure it'll ever be able to figure itself out. Everything else, maybe—from the atom to the universe—everything except itself.” This statement reveals a difficulty of psychiatric medicine—doctors with practically finite human minds trying to figure out how the theoretically infinite human mind works. Dr. Kauffman describes the invasion as “a curious, unexplainable, epidemic mass hysteria. Men, women, and children suddenly convinced themselves that their relatives weren't their relatives at all.” The one doctor in Santa Mira with specialized knowledge of the human psyche is incapable of giving a detailed description of the phenomenon; he can only use words like “curious” and “unexplainable.” Dr. Kauffman himself is not entirely at fault for the ambiguity in his assessment of the situation, for there were in 1956 (as there are in 2010) psychiatric conditions that really could not be explained. One of these conditions is known as Capgras syndrome (or more properly Capgras delusion), which is a delusional disorder in which the patient believes that a close relative has been replaced by an impostor who exactly resembles the loved one. Originally identified by the French psychiatrist Joseph Capgras in 1923, it is a very rare disorder, and prior to 1956 only a few cases had been reported. For example, there was a case reported in British medical literature in 1936; and in American medical journals, two cases were reported in 1941, two more in 1945, and seven in 1956 (Prabhu 56). The fear of invasion is first brought to the attention of Dr. Bennell by Wilma Lentz and young Jimmy Grimaldi, who both present a clear diagnosis of Capgras delusion. However, considering the rarity of the disorder and the lack of knowledge about it in 1956, it is no wonder that even Dr. Kauffman cannot (or at least does not) identify it. Despite significant advances in medicine, medical practitioners were aware of their limited understanding.

The increasing abilities of psychiatrists and psychiatric medicine were being embraced by the medical community, by society, and by the characters in this film. *Body Snatchers* does not shun psychiatry, but it still warns of the dangers that reside in the unknown. Ultimately, the danger presented by Dr. Kauffman is not that he lacks knowledge of a rare disorder but that he does not realize what truly makes one human. After the invasion is in full force, Miles and Becky become the last two real humans left in Santa Mira. As they evade their friends-turned-captors, they hide in Dr. Bennell's office where they begin discussing what it means to be human. Miles remarks to Becky, "In my practice I've seen how people have allowed their humanity to drain away. Only, it happens slowly instead of all at once. They didn't seem to mind." Refusing to give up on the entire human race, Becky responds, "But only some people, Miles." She is unwilling to group all of humanity together and wants to remain hopeful and optimistic. Miles reaffirms and clarifies his comment about losing humanity: "All of us—a little bit." He does not view society as a collective, but he recognizes within each individual the tendency to lose a bit of our humanity, which means that "[w]e harden our hearts and grow callous." For Miles, to be human means to actually have emotions—to care about things and people. Later, the "snatched" Jack Belicec and Danny Kauffman impostors enter the office intending to force Miles and Becky to succumb—surrender their wills—to the alien invasion. As Kauffman speaks to Bennell, he reveals his fatal error—it is not a lack of medical knowledge but a lack of understanding what makes one human that has led to his downfall. He tells Miles, "Your new bodies are in there. They're taking you over cell for cell, atom for atom." For Dr. Kauffman, humanity is merely a body composed of cells and atoms. He completely neglects the emotional aspect of being human—"Love, desire, ambition, faith—without them, life's so simple, believe me." Dr. Kauffman's scientific detachment has led him to his fate while Dr. Bennell's understanding of

what truly makes one human has been his salvation. The traditional general practitioner is, once again, superior to the specialist. Miles declares, "Only when we have to fight to stay human do we realize how precious it is to us... how dear... as you are to me." He is human because he has the capacity to love, which is demonstrated through his love for Becky but also, and perhaps more importantly, through his love for his patients and humanity in general.



## Chapter 3

### Philip Kaufman's 1978 *Invasion of the Body Snatchers*

Although Philip Kaufman's 1978 *Invasion of the Body Snatchers* is based on the same source material as Don Siegel's 1956 version, the two films differ dramatically. The changes made in the 1978 version are very significant as they reflect genre and social changes that occurred during the 22 years that passed between each film's release. As discussed in the previous chapter, Siegel's *Body Snatchers* is considered to be a classic film from the golden age of Hollywood science fiction film during the 1950s. By 1978, the sf genre had changed drastically, and this change is certainly reflected in Kaufman's *Body Snatchers*. Films made during the golden age of sf film tended to be targeted more toward children and teenagers. However, in 1968, Stanley Kubrick's *2001: A Space Odyssey* changed the sf film genre forever. Vivian Sobchack writes that *2001* (which she calls “an intellectually provocative film on a number of levels”) proves “that the film medium can accommodate 'adult' science fiction. And it is also interesting to note that since 1968 and Kubrick's film, SF movies have been made primarily for adult audiences” (26). Although the 1956 *Body Snatchers* is fairly “adult” in comparison to other contemporary sf films like *Them!* (1954) and *The Monolith Monsters* (1957), it is clear that the 1978 version has a seriousness that is the product of post-1968 “adult” sf films like *The Andromeda Strain* (1971) and *Silent Running* (1972).

Philip Kaufman's *Body Snatchers* distinguishes itself from Siegel's version from the very beginning with the opening title sequence. As described before, the 1956 film displays titles over a cloudy sky, evoking the warning: “Keep watching the skies!” During the 1950s, the fear of the unknown was reflected in sf films in which space itself is the unknown. Thus, the first

*Body Snatchers* film presents the audience with a view from Earth. Since the sky is the limit of our known world, the threat comes from somewhere beyond the sky—from space, a distant place which has yet to be explored by man. However, by 1978, manned spaceflight was a reality, and man had walked on the moon. The reality of space exploration changed depictions of space in sf films, as evidenced in films such as *2001*. In Kaufman's version of *Body Snatchers*, the threat is no longer from “out there” because the audience actually sees the planet from which the threat originates. The opening credits are shown while the camera explores a barren, rocky planet that appears to be void of all life except for a colony of mysterious spores. Spores float away from the alien planet and travel through space until they land on the planet Earth, which is shown from space. The threat in the 1956 *Body Snatchers* is from somewhere out in the unknown expanse of space, and viewers remain entirely detached from the invading pods. However, in the 1978 version, the audience follows the alien spores (from which pods are created) as they travel from an alien planet through space (which is now familiar) to invade the earth.

Additionally, the distance placed between Earth and space in Siegel's film reinforces the view that in 1956, the alien invasion was successful only inasmuch as mankind allowed it to happen. Man is not responsible for the invasion, but as seen with the character of Miles Bennell, resistance against the alien invasion was worthwhile and productive. This optimism disappears by 1978. Reminiscent of Robert Wise's 1971 *The Andromeda Strain*, blame for the alien invasion in Kaufman's film could perhaps fall upon the inhabitants of the earth, who have been meddling in space—launching satellites, conducting manned spaceflight, etc. And ultimately, the efforts of man to survive, particularly by characters like Matthew Bennell, are futile—mankind is powerless to stop the invasion. This nihilism reflects a more “adult” approach to the sf genre (meaning greater verisimilitude, especially in the special effects, and often increased

levels of pessimism) that differs greatly from sf films of the 1950s that is reflected in the 1956 *Body Snatchers*.

Although Philip Kaufman's *Invasion of the Body Snatchers* is more serious, “adult,” and nihilistic, the director intended for it to be a science fiction film rather than a horror film. While commenting on the beginning of the film, as described above, Kaufman remarked that “we made it clear from the very beginning that it was a science fiction film, as opposed to the Don Siegel version, by beginning on another planet” (Timpone 91). In fact, the generic elements employed by the film do help to align it more with the sf genre than its predecessor, which generously blended sf with horror. As discussed before, one element that makes the 1956 *Body Snatchers* more of a horror film is its small California town setting, which (although the threat is potentially larger in scope) creates an immediate closed system in which the action takes place. In contrast to this, the 1978 version of *Body Snatchers* moves the action to San Francisco. By moving the setting to a large metropolitan area, Kaufman emphasizes the larger threat of the alien invasion. In addition, it is clear in the opening scene in which the alien spores travel to Earth that the invasion is global. Thus, although there are still only a few main characters, they are operating in a much more open system, which is characteristic of the sf genre. According to Kaufman, W.D. Richter, the screenwriter, had set the film in a small town in the first draft of his screenplay, but the director wanted more of an open system. In reference to Kevin McCarthy's cameo in the 1978 film, Kaufman said, “He's shouting the same things that he was shouting at the end of the first film: 'They're here, they're here!' And he's being chased by the crowd and it's as if he's run twenty years from the first movie all across the landscape from a small town into a big city to try and warn us” (96). The use of Kevin McCarthy in this manner supports the idea that the invasion is spreading and that the threat is not confined or limited in its scope.

Like Siegel's 1956 *Body Snatchers*, there is certainly no dearth of suspense, tension, and terror in Kaufman's version. Both Siegel and Kaufman use a film noir style to varying degrees in their films. However, the aspects of film noir in Siegel's film seem to be a product of drawing upon elements of the horror genre to create an atmosphere of paranoia and fear. Kaufman uses elements of the film noir style more deliberately—exploiting dark shadows and oblique camera angles—to heighten the paranoia in his film. Although *Body Snatchers* pre-dates *Blade Runner* (1982), which is perhaps the ultimate example of sf-noir, it was not the first venture into a neo-noir aesthetic. Although the era of classical Hollywood film noir had run its course by the early 1960s, the aesthetic had already been picked up by French filmmakers (such as Jean-Pierre Melville) who were making their own film noir and gangster pictures. Both Hollywood and French film noir, in turn, influenced filmmakers in the 1970s, as seen in films such as Roman Polanski's *Chinatown* (1974) and Martin Scorsese's *Taxi Driver* (1976). Thus, it was not out of place in 1978 for film noir elements to be used, and in fact, the look of *Body Snatchers* owes much to the cinematographer Michael Chapman, who was also the cinematographer for *Taxi Driver*. In fact, many films (including *The Maltese Falcon* (1941), *Bullitt* (1968), and *Dirty Harry* (1971)) have used San Francisco (with its steep, angular hills and foggy bay) because of its film noir quality. It is interesting to consider why the film noir aesthetic was incorporated into Kaufman's version of *Body Snatchers* (and other films in the '70s). The dark, pessimistic mood in post-WWII film noir reflects, at least in part, the disillusionment that was felt by returning soldiers (and civilians) toward their world, which changed during the war. Upon returning from the war, many servicemen had to deal with post-traumatic stress, the Cold War, and a difficult economic situation. Many men had lost their jobs to women during the war, and these women on the homefront did not want to give up their newly elevated status in the workplace. Commenting

on this disillusionment, Paul Schrader writes, “The war continues, but now the antagonism turns with a new viciousness toward American society itself” (232). The cynicism felt by Americans toward their own society was directly reflected in film noir of the period. Thus, it is no surprise that American cinema of the 1970s returned to this aesthetic. The renewed interest in film noir in the '70s reflects renewed cynicism, skepticism, and pessimism among the American populace. The Vietnam War left soldiers and civilians even more disillusioned toward the efficacy and humanity of war and destroyed the confidence of the American people toward their government and toward each other. Even more than WWII, the Vietnam War had a disastrous effect on those involved directly and indirectly in the war. Many held the “conviction that the United States was waging a pointless and immoral war” (D. Cook 174). The cynicism and pessimism caused by the quagmire of the Vietnam War were further exacerbated by the Watergate scandal. The confidence of the American people in their government leaders took another huge hit when the U.S. President himself was found to be involved in suspicious and illegal activities. These events, compounded by violence like that at Kent State, “produced a mood of cultural despair” (174). With this in mind, it is not surprising that the 1970s witnessed a resurgence of darker-themed films that reflected a neo-noir sentiment in style and content. Also, a story such as *Body Snatchers* that is concerned with paranoia and distrust fits perfectly into the atmosphere of 1970s America, and by blending film noir with sf, this film is an interesting comment on the 1970s, the sf genre, and the versatility of *Invasion of the Body Snatchers*.

Although Kaufman's *Body Snatchers* resides well within the realm of the sf genre—in some ways moreso than Siegel's version, there is a generically significant element that is noticeably absent from both films—the military. The absence of a military presence in Siegel's film is interesting, but it seems to be more a product of the horror focus of the film. There seems

to be no antagonism toward the military or war veterans, and it is not a stretch to assume that Miles Bennell and his contemporaries are WWII veterans. However, in Kaufman's film, the military is not only absent, but it also seems to be omitted. Even though the alien invasion is spreading rapidly, there is no attempt to contain it. There is an indication that civil service types have been some of the first to be replaced, and it could be argued that the military was never deployed because government/military leaders were replaced by pod people early in the invasion. Also, the invasion appears to happen very quickly in comparison to the 1956 version, which may have precluded the military from responding. The only person that might possibly be a war veteran is the character of Jack Bellicec played by Jeff Goldblum, who wears a military-type jacket in certain scenes in the film. Overall, the film seems to entirely avoid the issue of war, which may have been untended or possibly due to strong differing opinions about the Vietnam conflict. Whether or not the film is deliberately avoiding war and military, it is certainly a conspicuous absence.

Another significant absence is that of positive medical figures. There are a few characters who are involved in science in some capacity—Dr. Geoffrey Howell, a dentist; Dr. David Kibner, a psychiatrist; and Matthew Bennell, a health inspector, and others who work with him. However, these characters are only marginally associated with medicine, and they do not reflect the positive doctor-hero image that Miles Bennell does in the 1956 film.

Although we know that Geoffrey Howell is a dentist, we never see him practicing dentistry. Geoffrey and Elizabeth Driscoll live together, and he is first seen at the beginning of the film when Elizabeth returns home after finding a small, interesting-looking pod. While she is trying to talk with him, Geoffrey is wearing headphones and watching a basketball game on television. He has already disconnected himself from interacting with the human world.

Geoffrey's disconnection is more significant when considering that he is living in the permissive culture of San Francisco. He seems to be following the words of Timothy Leary to “turn on, tune-in, and drop-out” (D. Cook 172). That night, the pod that Elizabeth found replaces Geoffrey, and he then only interacts with other pod people with the intent of replacing everyone else with pods. The fear in the first *Body Snatchers* film is of an impending invasion in which outsiders turn human beings into unfeeling, emotionless drones, which many see to be the fear of Communism. However, in this second film and with the character of Geoffrey, the fear is certainly less concerned about an outside invasion and more concerned about mankind having already dehumanized itself. Instead of the alien spore finding a planet full of inhabitants it has to subdue, this film seems to portray an alien entity that has been watching Earth from space until the time when the inhabitants have already prepared themselves to be invaded and replaced. Geoffrey is not any more human before the invasion than after, and he might actually be perceived as more human after being replaced by the pod. This is the real fear: that one's own complacency and withdrawal from human interaction can be dehumanizing to the point where life is nothing more than fluff—like the fluff that remains after someone has been replaced by a pod. Even those who are entrusted with the health care of others (dentists, psychiatrists, etc.) are not immune from this self-dehumanization.

Another character worth discussing is David Kibner, who reflects the pop-psychology trend of the 1960s and '70s and who is essentially a fictionalized caricature of Eric Berne, psychiatrist and author of *Games People Play: The Psychology of Human Relationships* (1964), and Thomas A. Harris, student of Eric Berne and author of *I'm OK – You're OK* (1967). Kibner is first mentioned while Matthew and Elizabeth are having dinner at his apartment after the real Geoffrey has been replaced by a pod person. Elizabeth is concerned about her mental health

because she is convinced that Geoffrey is different than usual—that he is acting “weird.” Matthew asks, “Do you want to go see my friend David Kibner?” To which she responds, “The psychiatrist?” To allay Elizabeth's suspicion that he may think that she is crazy, Matthew says, “Not like that. I mean, you'd talk to him and he would put things in perspective for you.” Soberly and straightforwardly, she affirms, “I'm not crazy.” Not to be misunderstood, Matthew further explains,

No, no, no. I'm serious. He would eliminate a lot of things. He would eliminate whether Geoffrey was having an affair, whether he'd become gay, whether he . . . had a social disease, whether he'd become a Republican. All the alternatives. All the things that could have happened to him to have made you feel that he had changed something that he was doing. You know what I mean? Want to go see him?

Matthew is convinced that Kibner will be able to help, and his introduction of Kibner constructs him as a professional with a legitimate chance of helping. However, this view of Kibner is entirely undercut once he is shown interacting with others. His first scene is a party for his newest book, which is attended by authors and other San Francisco socialites. The party scene immediately follows the death of Kevin McCarthy's character, who was chased and killed by pod people as he was trying to warn others of the invasion. Among those at Kibner's party are Matthew, Elizabeth, and Jack Bellicec, who has only criticism for Kibner's books. The partygoers are surrounded by large portraits of Kibner, who stares at them (and those watching the film) from these pictures with a wide pretentious smile. He is first seen talking to a woman, who is complaining that her husband has changed, even though he looks exactly the same—the same



concern that Elizabeth has about Geoffrey. The woman is in tears and is noticeably distant from her husband, and all Kibner does is reaffirm to her that her husband really is her husband. His only advice is “trust me,” which he delivers with a patronizing grin, and then he forces the woman, her husband, and himself into an awkward three-way hug. Later, while talking to Elizabeth, Kibner says, “People are changing. They're becoming less human. It's happening all around us.” He says the “right” thing but is not really listening to Elizabeth, who responds, “That's not what we're talking about. This has nothing to do with the man that I live with.” With the air of the all-knowing pop-psychologist, Kibner replies, “It has everything to do with it. Don't you see? People are stepping in and out of relationships too fast because they don't want the responsibility. That's why marriages are going to hell. The whole family unity is shot to hell.” Having assumed the role of authority, Kibner seems to be merely quoting from his book. Matthew calls him on this, “You're not listening to what she's saying.” Whatever authority and power Kibner might have once possessed (perhaps only in theory or in his books) is lost (at least to Bennell) in this moment. His communication is hollow and platitudinous discourse based on ineffectual transactional analysis. It is actually a relief (for the audience and, perhaps, for Kibner himself) when he is later replaced by his pod duplicate—or he might have always been a pod person.

The character of David Kibner, played by Leonard Nimoy, is certainly providing commentary on the New Age thinking and socialite culture of 1970s San Francisco.

In 1978, San Francisco was the acknowledged capital of the 'culture of narcissism' denounced by Christopher Lasch, Peter Marin, Tom Wolfe, and others (including, finally, President Jimmy Carter). It epitomized the contradictions of the 'Me-Decade' in

both its hedonism and its anomie—functions, generally, of the nation's soaring divorce rate and 60 percent increase in the number of people living alone between 1970 and 1978. (D. Cook 249-50)

In fact, according to Philip Kaufman, the film “was really meant to be the feelings you could feel around San Francisco at that time, with really believable characters” (Timpone 91). He also commented that the late '70s

is a perfect time to restate the message of *Body Snatchers* . . . We were all asleep in a lot of ways in the Fifties, living conforming, other-directed types of lives. Maybe we woke up a little in the Sixties, but now we've gone back to sleep again . . . modern life is turning people into unfeeling, conforming pods who resist getting involved with each other on any level—and we've put them directly into the script. Our characters [particularly the David Kibner character] talk openly and directly about the social reality of 'podiness' (Freund 23).

However, Kibner also reflects the difficulties that were being experienced by psychiatry at the time. As mentioned in the previous chapter, psychiatry had actually gained credibility by the mid-1950s due in large measure to the development of useful psychopharmacotherapy.

Psychiatrists themselves were viewed more favorably, and this is reflected in Siegel's 1956 *Body Snatchers* in which Danny Kauffman is respected and competent, although perhaps a little naive, and certainly unable to stop the invasion. However, views toward psychiatry had turned fairly negative in 22 years. The same biopsychosocial model of psychiatric treatment that gained in popularity after World War II was still the dominant thinking until the mid-1970s. This was an

effective and legitimate approach to the psychiatric experience in WWII, and it broadened the definition of mental illness to allow for social activism as the biopsychosocial model was applied to “a wide variety of social practices, from child rearing to elementary education to the scourge of poverty to the organizational functioning of business and industry” (Wilson 401). However, while the biopsychosocial model was versatile, it could not clearly delineate between the mentally sick and the mentally well.

Thus, by the late 1960s, the model came under attack both from within and from without the psychiatric profession. Attackers from outside the psychiatric profession comprised a very diverse group of individuals who criticized psychiatry on various ideological and political grounds. Collectively, these critical attacks are known as the “antipsychiatry movement” of the 1960s, which had three main beliefs: “mental illness was not an objective behavioural or biochemical phenomenon but a label; madness had a truth of its own; and, under the right circumstances, psychotic madness could be a healing process and should not be pharmacologically suppressed” (Porter, “Greatest Benefit” 522). Although there was already a move away from insane asylums, the antipsychiatry movement pushed even harder against asylums and mental hospitals, and films such as *One Flew Over the Cuckoo's Nest* (1975) were influential in rallying public support for the deinstitutionalization of the mentally insane, which became a reality in the late 1970s and the 1980s. While psychiatrists were trying to defend themselves and their profession from the antipsychiatry movement, they were also debating among themselves about the effectiveness of the biopsychosocial model. Some psychiatrists believed in the validity of the model—Berne's transactional analysis theory is very strongly rooted in this model, but many felt it was inadequate (largely, because of the fluidity between mental health and illness under the broad scope of the model) and argued for a more research-

based medical approach to psychiatry. David Kibner, the psychiatrist in Kaufman's 1978 *Body Snatchers* is positioned in the middle of this conflict—his approach to psychiatric medicine is being attacked from outside as well as from inside his profession—during a period when “growing cynicism, patients' rights lobbies, the exposure of administrative abuses and similar scandals, feminism, and other critical currents . . . questioned and undermined dramatically the standing of orthodox professional psychiatric services and Freudian psychoanalysis” (523).

Societal attitudes toward psychiatric medicine in the late 1970s are reflected (perhaps unfairly) in the ludicrous and, at times, laughable Kibner character in this 1978 version of the film. As quoted above, Kaufman said that in the '70s society had “gone back to sleep again.” His film seems to be more than just a wake-up call; it seems to be asking 1970s America to get out of their Valium-induced stupor. (Valium was the most widely prescribed drug in the world in the 1960s (523).) In addition to prescribed Valium, many were tranquilizing themselves with recreational drugs—LSD was particularly popular and effective in allowing people to disconnect from society. By willingly being sedated and following outdated and ineffective psychiatric practices, mankind had opened themselves up to be manipulated by New Age thinking, pop psychology, and “the 1970s 'cult of the self' and its pursuit of 'new consciousness'—tendencies that in San Francisco would lead to the ritualized mass suicide at Jonestown in November 1978 and, inversely, to the assassinations of Mayor George Moscone and city supervisor Harvey Milk a few days later” (D. Cook 250). Kaufman's *Body Snatchers* has its finger on the pulse of late 1970s San Francisco, which makes it a very intriguing and effective adaptation of Finney's story as well as an important document of the time—in social history, cinematic history, and medical history.

In addition to Geoffrey Howell, the dentist, and David Kibner, the psychiatrist, the only other characters representing the various health professions are Matthew Bennell and Elizabeth Driscoll, who work for the San Francisco Health Department. Bennell is a city health inspector, and Elizabeth works for Matthew in the lab at the health department. This is of particular note because it is such a significant change from Siegel's *Body Snatchers* and from Finney's original novel. Although Bennell works in a health-related profession, he is only on the periphery of the medical profession. In previous versions of *Body Snatchers*, the physician is a very important character in the narrative because he is the member of the community with a unique and extensive understanding of what makes someone human. The family doctor (particularly, the general practitioner) is a respected and revered authority figure who has an intimate knowledge of his patients and has a relationship with them built on trust. There is an inherent disparity between the knowledge of the physician and that of the less-educated common citizens. Thus, when something goes awry in the community, the doctor is called upon to solve the problem and, by so doing, fulfill his role as the doctor-hero, or even savior. By stripping Bennell of his status as a physician, the 1978 *Body Snatchers* rejects him as an authority figure with sage, life-saving wisdom and as the inevitably victorious doctor-hero. Because concerned citizens of Santa Mira come to Miles Bennell with their problems, he willingly takes the reins and becomes the main individual to fight the alien invasion in the 1956 version. However, in Kaufman's version, Matthew Bennell is a bystander who becomes entangled in the fight because the invasion comes across his path. He is no Romantic hero. His profession is not one of love, healing, and human interaction; rather, he invades others' places of business, scrutinizes them, and expects them to meet his standard of cleanliness. We are first introduced to Matthew when he appears through the peephole of restaurant kitchen door. The peephole distorts his face in a kind of grotesque

manner, and it is clear from this initial image that Matthew Bennell is not the Miles Bennell from 22 years ago. In the kitchen, he is noticeably critical and disapproving as he is watched by the kitchen staff. His criticism and skepticism proves fruitful when he finds an animal dropping in the food, and he relishes his victory as he displays his finding and announces, “Rat turd.” Later, when he is dropping off shirts at the dry cleaner, he tells the lady behind the counter, “Mrs. Tang, this one has a coffee stain on it.” As he shows her the stain, Mrs. Tang says, “That not coffee.” To this, he condescendingly replies, “That is coffee. I put it there myself.” After Mrs. Tang takes Bennell's shirts away, Mr. Tang calls to him, “You doctor, right?” He responds, “Me? No. Health department. Civil servant.” His profession may give him the title “civil servant,” but he is not a very civil individual. However, in the cynical, skeptical, uncivil, and (progressively) inhuman world of 1970s San Francisco, one might need to be as un-Romantic as Matthew Bennell. (In fact, when Kevin McCarthy makes his cameo he is immediately killed. There is no place for him in 1978 San Francisco.) There are only a few people in the film to whom Matthew shows genuine affection—Elizabeth, Jack and Nancy Bellicec, and perhaps initially, David Kibner. He limits his interaction with others, but it may be his distorted view of humanity that allows him to survive as long as he does. As Philip Kaufman says, “He knows that within each pod's soul there's a rat turd.” In the end, however, no one can escape the invasion, which is the ultimate warning for mankind.

The absence of a physician (and particularly a general practitioner) in Kaufman's *Invasion of the Body Snatchers*, in addition to allowing for characters who convey the temperament of the time, actually reflects changes in the medical profession that would have had a significant impact on the metropolitan area of San Francisco in 1978. During the 1950s, '60s, and '70s, the trend toward specialized medicine was ever increasing, while the number of family

practitioners was ever declining.<sup>3</sup> “The total number of physicians increased by 95 percent from 1931 to 1967. During this same period, the number of specialists in private practice increased by 469 percent” (Geyman 3). Specialization was changing the medical profession, but it is even more staggering when considering that the most significant push toward specializing didn't happen until the 1950s. “The discrediting of the general practitioner in the medical schools, together with the criticism leveled at the generalists by the interns, residents, and practicing paper certified specialists, finally decimated the ranks of the family physicians” (Cantafio 29). While the number of total general practitioners was decreasing, the number of generalists in cities was drastically falling because those who were still practicing family medicine followed those families as they moved to the suburbs. This caused a dilemma for city dwellers, who were used to visiting their family doctors for medical problems—once their generalists left the city, they were left without primary physicians and without a place to go for medical attention. “Suddenly the method of delivering medical services was thrown into chaos, and this was to be just the beginning of the betrayal by specialized medicine of the [principles] of the healing arts” (31). With the relocation of general practitioners to the suburbs, it is no surprise that there is not one in the San Francisco depicted in this film. With the difficulty and distrust among patients caused by shifting of available medical services, it is understandable that the Bennell character was changed from being a physician to being on the periphery of medicine.

In addition to the loss of general practitioners, other major changes had occurred in medicine by the time Kaufman was making his version of *Body Snatchers*. Importantly, many entities began vying for power in and over the health care industry, ultimately taking power away from doctors themselves and putting it in the hands of government, corporations, and administrative-types who were far removed from the patients themselves. More and more, profit

was becoming a key factor in health care, and the “art” of medicine was quickly becoming overshadowed by the business of medicine. The federal government had become more and more involved in medicine during the three decades leading up to this film. The government formed the Departments of Health Education and Welfare, the Federal Drug Administration, the Occupational Safety and Health Administration, and other federal medical programs. In fact, when John F. Kennedy was elected President in 1960, the AMA (American Medical Association) was so concerned that the federal government would intervene in medical care, that efforts were expended to counter the rising public support for a federal medical care program for the elderly. However, following Kennedy's assassination, Lyndon B. Johnson was able to amend the social security laws, and in 1965, Medicaid became a reality and was set up alongside Medicare to provide medical benefits to the elderly (Porter, “Greatest Benefit” 657). “With the implementation of Medicare, and The Supreme Court's decisions concerning abortion, the federal government became involved in the delivery and ethics of modern medicine” (Cantafio 29). Following the Vietnam War and the Watergate scandal, popular opinion of the federal government was already low, and there was even more skepticism and distrust once the government exercised their power to gain control in medical care. “Medicaid and Medicare – essentially government-subsidized medical insurance for social security recipients – proved inflationary because providers were reimbursed on the standard fee-for-service basis (Porter, “Greatest Benefit” 657-58). This helped to further push medicine away from its service-oriented beginnings toward a profit-driven profession.

Health became one of the major growth industries in America, encompassing the pharmaceutical industry, manufacturers of sophisticated and costly diagnostic apparatus, laboratory



instruments and therapeutic devices, quite aside from medical personnel, hospitals and their penumbra of corporate finance, insurers, lawyers, accountants and so forth. (658)

By 1978, medicine was clearly shifting away from its previous position as a service industry toward a business in which those who had the money—government, corporations, etc.—had the power. Health insurance companies also had a significant impact on the medical profession because they limited what kind of care individuals could receive, and those who wanted their health care covered by their insurance provider would adhere (begrudgingly at times) to the restrictions. The developing profit-driven nature of medicine drastically changed the face of medicine and was accompanied by much criticism. With the rising power of organizations in health care, medicine had changed for both patients and physicians.

Between 1956 and 1978, many advancements were made in medical technology, but this progress also brought new criticism and ethical dilemmas. This is, perhaps, most apparent in the advances in transplantation technology. As immunosuppressive drugs became increasingly effective, the possibility for major organ transplant came closer to a reality. Although the first kidney transplant had taken place before the first *Body Snatchers* film, it was still very new at that time. Successful kidney transplantation opened the door to explore transplantation of other organs. In 1963, both lung transplantation and liver transplantation were attempted, but the big question of heart transplantation still remained. In 1964, James Hardy, the pioneer of lung transplantation, was preparing for the first attempt at a human-to-human heart transplant, but the donor was still alive when the intended recipient's heart failed. Hardy transplanted a chimpanzee heart into the man, but it was too small to keep the man alive. Almost four years later on 3 December 1967, the first human-to-human transplant was attempted by Christiaan Barnard in

Cape Town, South Africa. The transplant was successful, but patient, Louis Washkansky died of pneumonia eighteen days later. However, this first successful heart transplant was followed by many more, yet the long-term survival rate was low:

In the following year [1968] more than a hundred [heart transplants] were performed around the world in eighteen different countries; two thirds of the patients were dead within three months. Criticism mounted of such rash human experimentation, especially in view of the lack of attention to tissue-typing (matching compatible tissues)” (Porter, “Greatest Benefit” 621).

Barnard's success turned into a media frenzy and made him a celebrity. Major organ transplantation changed medicine forever, but Barnard himself also had a significant influence on society. He appeared on the cover of *Time* magazine, and his status as surgeon-celebrity changed how doctors were (or, at least, could be perceived) by the public. Doctors were no longer simply humble service-providers, but they could have their pictures adorn magazine covers, could be major media icons, and could be idolized by the general public.

Successful major organ transplantation proved not only that great medical advances were possible, but that they were also accompanied by harsh criticism and major media coverage. Medicine was no longer restricted to the intimate patient-doctor level when television cameras were present to tell the story to the world. Following organ transplantation, in vitro fertilization (IVF) also became a major medical breakthrough, as well as a major media event. After fertilization was first achieved outside the human body in February 1969, it took nine years before the first child conceived by IVF was born. In July 1978, just months before *Invasion of the Body Snatchers* was released, Louise Brown—the first “test-tube” baby—was born. Like

with major organ transplantation, this was a huge media event, and it was also hugely controversial and incurred serious criticism:

Louise Brown's birth was condemned by voices as diverse as Nobel laureate James Watson, the Vatican, and some feminist philosophers, for the foetus's brief extra-uterine existence raised controversial moral questions: did every extra-uterine embryo have a right to be implanted? must surplus extra-uterine embryos be destroyed or stored and used for later research? if so, was ectogenesis (growth in an artificial environment) permissible? Together with artificial insemination by donor (AID), IVF also raised perplexing questions about the legitimacy of surrogate motherhood. (Porter, "Greatest Benefit" 624)

The ethical concerns raised with transplantation technology and IVF are as significant in their impact to the American social climate as the medical advances themselves. As medicine becomes more capable, traditional views of humanity, life and death, and health and disease are often questioned, and these questions are vital to society. Questions raised by organ transplantation and IVF include issues of organ trafficking and body rights—is it right to view the human body as property? Can it be bought and sold? Many ethical dilemmas were raised during this period of medical advancement. These concerns are reflected in film texts from the period, such as the 1970s sf film, *Coma* (1978), directed by Michael Crichton and based on the novel by Robin Cook. Because both Crichton and Cook are MDs, this story about organ trafficking seems to be more than just an entertaining thriller. Brian Clark's *Whose Life Is It Anyway?*, which was first televised in 1972 and later staged theatrically, deals very poignantly

with questions of individual right-to-life issues. Ethical and moral dilemmas influence public society as well as the medical profession, and they all intertwine and affect one another. This interdependent relationship is witnessed in Kaufman's *Body Snatchers* as the 1978 San Francisco reflects the paranoia of cult ideas, controlling entities, and the absence of medical figures.

Additionally, skepticism toward and distrust of medicine was engendered by the thalidomide disaster of the 1960s. Thalidomide was widely used in Europe as a sleep aide and to relieve morning sickness in pregnant women. It was marketed in 1959, and by 1961 obstetricians noticed that an unusually large number of babies were being born with undeveloped or deformed limbs. After two years of research, thalidomide taken during pregnancy was found to be the cause of the deformities. The drug had not been approved by the U.S. Food and Drug Administration, so it was not a serious problem in the United States. Regardless, the thalidomide disaster had a worldwide impact. “Nearly 500 babies were born with deformities in Britain alone; worldwide, there were many thousands” (Porter, “Cambridge History” 276). This disaster caused many around the world to question the competence of the medical profession and of medical practitioners.

Although it may not have been a conscious response to public skepticism and distrust, there was a trend in the '70s toward the demythologization of the doctor figure. This is seen in works written by physicians, such as Robin Cook's *The Year of the Intern* (1972) and Michael Crichton's *Five Patients*. Robin Cook begins *The Year of the Intern*:

Americans cling to their myths. Nowhere is this more evident than in the emotion-charged realm of medicine and medical care . . .

The basis for this adoration of the medical world lies deep in the psyche of the modern American. His romance with medicine is

demonstrated by the hours he spends transfixed in front of the television set watching the diagnostic and therapeutic triumphs of omniscient physicians. (3)

He then states that the purpose of his novel is “to strip the contemporary mythology and mystique from the year of internship and to convey it in all its hard reality” (4). The intern in the novel freely admits how inadequate and unprepared he feels, even after graduating from medical school. He tells many stories—most of which are based on real experiences of Robin Cook and other physicians—which illustrate the fallibility of doctors and the unglamorous reality of medicine. Considering this move to demythologize doctors and the harsh criticism that medicine and health care were receiving at the time, it is no wonder that the 1978 *Body Snatchers* removes the Bennell character from the medical profession and avoids concerning itself directly with medicine at all.

## Chapter 4

### Abel Ferrara's 1993 *Body Snatchers*

In the 15 years between Philip Kaufman's 1978 *Invasion of the Body Snatchers* and Abel Ferrara's 1993 *Body Snatchers*, many events transpired that helped to shape the latter film into a text that is quite distinct from the previous film adaptations of Jack Finney's novel. During the 1980s, although the advent of home video had a negative effect on theatrical film attendance, the science fiction and horror genres proved to be very popular genres. In writing about genres during the 1980s, Stephen Prince notes that “the extraordinary popularity of fantasy and science fiction was a function of the narrative approach exemplified in the Spielberg-Lucas films as well as the industry's innovations in the technology available to filmmakers” (290). Many of the decade's top sf blockbusters were both family-friendly (Spielberg) and effects-driven (Lucas) films including *E.T.: The Extra-Terrestrial* (1982) and two additions to the *Star Wars* franchise *The Empire Strikes Back* (1980) and *Return of the Jedi* (1983). While the sf genre was finding box-office success with films that incorporated advanced computer effects and sound technology, the horror genre was finding success (significantly, in home video rentals) with films that utilized advanced gore effects. With improved gore effects came an increase in graphic, bloody depictions of violence. “The 'slasher films' took over the genre as horror became synonymous with narratives about serial killers slaughtering promiscuous teenagers. The killings were rendered in lurid detail and with imaginative glee by an emerging new group of effects artists” (351). These films, particularly the *Nightmare on Elm Street* and *Friday the 13<sup>th</sup>* series, were very popular with teenage audiences. In addition to “slasher films,” there was also a trend in remaking classic sf and horror films in an attempt to update them with new technology and

effects and, often, with more explicit sexuality to appeal to the demands of this new teen audience. Among these remakes were John Carpenter's *The Thing* (1982), Paul Schrader's *Cat People* (1982), David Cronenberg's *The Fly* (1986), and Chuck Russell's *The Blob* (1988). Although the original versions of these films sometimes align themselves more with the sf genre than the horror genre, the remakes firmly position themselves as horror films. Trends of the 1980s—such as teen-targeted, gory horror films—prepared the way for films of the early 1990s, and Abel Ferrara's *Body Snatchers* is clearly a product of these trends. The 1993 version of *Invasion of the Body Snatchers* shapes Finney's original idea into a product intended to benefit from the trend, but it is particularly interesting to consider how Abel Ferrara's film compares to Siegel's and Kaufman's films in terms of its main character, its placement within the sf genre, and its representation of medical practitioners.

Certainly influenced by the decade preceding Ferrara's *Body Snatchers*, the main protagonist is an angst-ridden teenage girl who does not have a professional career (unlike Miles Bennell the small-town general medical practitioner, Matthew Bennell the big-city health inspector, and Carol Bennell the big-city psychiatrist). Replacing the adult, professional protagonist with an angst-ridden teenager reflects the trend of teen-targeted films of the 1980s and the early 1990s. During this period, many films (such as those written/directed by John Hughes) were centered around teenage protagonists, and this trend was even prevalent in sf films (like the *Back to the Future* trilogy—the third of which was released in 1990) and horror films (such as the *Friday the 13<sup>th</sup>* series—the ninth and “Final Friday” was released in 1993; the *Halloween* series—the fifth was released in 1989; and the *Nightmare on Elm Street* series—the sixth and “Final Nightmare” was released in 1991). These films intentionally targeted teens because of their “voracious moviegoing habits” (Prince 296). Thus, the change in character in

*Body Snatchers* was certainly decided upon, in part, as a business decision in order to appeal to this specific audience demographic. Also in keeping with the trend of horror films of the period—epitomized by Cronenberg's *The Fly* and *Dead Ringers* (1988)—there is a focus on and preoccupation with the body—specifically the teenage female body. Marti Malone, the central character played by Gabrielle Anwar, is a nubile young woman, and the film uses this as a point of appeal for audiences and as a point of terror in the narrative (which is reminiscent of *Psycho*). Because of its emphasis on the body, it may be described as body-horror, a term which refers to horror films that feature the body more sensationally in spectacular portrayals of violence and terror (Williams 729). Differing from the other versions, the pods in this *Body Snatchers* actually use dendritic extensions to invade their victims' bodies, drain them of life, and absorb their characteristics. The terror of invasion is heightened by the focus on Marti's body. The invasion is less threatening when those kept at a distance from Marti—including her stepmother—are duplicated, but the terror of the invasion provides both titillation and terror for the audience when Marti begins to be consumed by a pod while she is bathing. Targeting teenage audiences is not new to the sf genre (as one can see from the 1950s), but there was a definite and distinct trend in the 1980s and into the 1990s to target teens through more graphic material, titillating depictions of the body (and body-horror), and thrilling moments of terror. Ferrara's film fits this mold and shows how the original *Body Snatchers* was, once again, modified to reach the target-audience of the sf and horror genres of the time period.

However, in addition to changing the main character's age and gender, the 1993 *Body Snatchers* also illustrates a distinct change in the balance of sf and horror elements. Although Don Siegel's original version is accepted as part of the canon of 1950s sf films, it also contains elements of the horror film genre. Philip Kaufman's 1978 version also blends sf with horror in a



way that reflects the paranoia of the 1970s (which is evident in films such as *The Parallax View*, *The Conversation*, and *Klute*). Yet, even though these first two *Body Snatchers* films blend sf with horror, the first is ambiguously positioned between the two and the second resides more on the side of sf. This is not the case with the 1993 *Body Snatchers*. As the film begins, a car is seen (from a bird's-eye view) traveling alone along an isolated highway. This scene is reminiscent of Stanley Kubrick's *The Shining* (1980) in which the car transporting Jack Torrance and his family to the hotel is viewed from the sky as it heads toward the isolation and impending doom that awaits at the hotel. It is only fitting that *Body Snatchers* immediately conveys a similar sense of ominous dread and doom because Ferrara's film fits much more into the horror film genre than any of the other versions of the story. In every version of *Invasion of the Body Snatchers*, there are horrific elements and a blend of horror and science fiction; however, this version seems to exist more as a horror film along the sf-horror spectrum.

At the beginning of Ferrara's *Body Snatchers*, as the car travels along a deserted highway amidst a forest of dead trees, the narrator begins to recount her story through voiceover. Similar to Finney's novel and Siegel's 1956 film, our narrator is also the heroine of the story. With a wearied voice, she begins by rhetorically asking, "Where do I begin?" This question reveals to the audience that the events they are about to witness are the reminiscences of the narrator who first witnessed them. She is narrating from some point in the future when she can remember and reflect on these experiences. In answer to her question, she says, "I don't know. I guess [I begin] with the idea that sometimes things happen that we don't understand. Maybe we shouldn't try to understand those things." Marti experienced many things that she is trying to process and understand. In a way, she is much like the narrator in Mary Shelley's *Frankenstein* who tells his story in an attempt to warn others and to rationally process the events of his own life.

After her introductory philosophizing, Marti begins her tale:

My dad had been assigned to inspect the military southern sector of the EPA. My stepmother, my half-brother and I had to spend almost two months on the road with him. I can tell you, it's not easy being stuck in a car with a six-year-old and the woman who replaced your mom. But, then again, nobody asked me what I wanted to do that summer. I guess things do happen for a reason . . . even if you don't like what that reason is.

During the narration, Marti is shown riding in the back of the car wearing earphones and reading a book. Marti's self-imposed isolation from her family (at least in having to interact with them) is expected behavior from a teenager. Additionally, she is reading Ian McEwan's 1978 novel *The Cement Garden*, which tells the story of four siblings who, after their father and mother die, encase their dead mother's body in cement, hide it in their basement, and then live together parent-less without notifying anyone of their mother's death. (Interestingly, a film adaptation of the novel was released only two weeks after the release of *Body Snatchers* in early 1994.) Thus, through the course of the film, Marti must confront her parental issues (which are due, in part, to her real mother being “replaced” by an impostor) and her desires for isolation as she realizes the real consequences of a parent-less, emotionless society in which everyone has truly been replaced by alien pods. In the end, in narration, she says, “They had destroyed everyone I loved.” Yet, it took the invasion for her to realize that she did love her family.

Narratively, this introduction establishes Marti as a frustrated teen who will necessarily change when she is forced to fight against the invasion. In terms of genre, this introduction also outlines the common generic elements that this film employs. One key element is location, for it

is significant that this film takes place in a rural and isolated location—a military base in rural Alabama, which is presented as a closed, rural system. The closed system is often associated with the horror genre although many sf films have effectively employed a closed system (such as Ridley Scott's *Alien* (1979) which uses it to heighten the suspense of the alien threat. The rural location of the military base harkens back to Don Siegel's original 1956 version of *Invasion of the Body Snatchers*, which is located in a small rural California town (and which is often viewed as a horror film). Although there is the threat of the invasion spreading to other parts of the United States and then to the whole world, the initial threat is very localized. Philip Kaufman's 1978 version of *Body Snatchers* moved the action to urban San Francisco, which was significant in questioning the humanity of people living a busy impersonal lifestyle in a large metropolis. The invasion in Kaufman's film is more overtly global than in Siegel's film. Thus, returning the action to a rural location, Ferrara reemphasizes the horror in the *Body Snatchers* story.

In her seminal work *Screening Space: The American Science Fiction Film*, Vivian Sobchack seeks to distinguish the sf film genre from the horror film genre. She writes, “In the SF film . . . our fears are more confused and more complex than they are in the horror film, and—more often than not—we experience *anxiety rather than terror*” (39; emphasis added). From her introductory narration, it is clear that Marti is struggling with thoughts and feelings that are “confused” and “complex.” However, as the film plays out, Ferrara focuses more on the “terror” of the pod invasion—Marti's duplicate falling through the ceiling while she is bathing, the duplicate of Marti's half-brother trying to strangle her, and so on—rather than the “anxiety” of dehumanization and loss of individuality; thus, it leans more toward the horror genre than the sf genre. In this way, this version of the story differs quite dramatically from the others.

Marti's voiceover also introduces key professional figures/organizations that play important roles in the sf genre and that are significant in the film, namely the military and the federal government (as represented by the EPA). In the sf film genre, the military and the federal government are important organizations because they often represent either the cause or the solution to the problem. The shifting roles of these organizations is significant because it reflects differing perceptions of the power wielded by these organizations. It is particularly interesting to note that both the military and the federal government are represented in Ferrara's *Body Snatchers*. When Marti and her family stop at the gas station, her father, the EPA employee and governmental figure, confirms to the rural attendant that they are from Washington, D.C. Immediately following this, Marti is attacked in the bathroom by a military officer who holds a knife to her throat and looks at her face. He is relieved when she shows emotion, but he warns her: "They're out there. They're everywhere! They get you when you sleep." This encounter with the military officer positions the military as aggressive, paranoid, and unstable, while the government, Marti's father, shows paternal care, concern, and stability. Following this scene, Marti, again in voiceover, says, "I remember thinking he [the military officer] was crazy, but I also remember thinking we spend half our lives asleep." After this narration, the family arrives at the military base, and they enter the closed system, where they are observed and scrutinized by uniformed officers just like the one who attacked Marti, and in the house, Marti finds a dead lizard. All signs point to the military being the enemy and the base being a life-taking setting. This is contrasted with the seemingly noble efforts of Marti's father and the EPA—"Hippies saving the planet" as described by Marti's friend Jenn. However, the government is not as noble or innocent as at first presented when it is revealed that the chemicals in the water at the base may play a role in the creation of the pods. When Marti's father starts to investigate, he doesn't

get help from Washington, and he is ultimately powerless against the pods. When the plot of the alien pods is revealed, it is evident that the military is not the source, but it is the vehicle through which the pods are spreading; the military is as powerless as the government to stop the invasion. Although this is similar to the impotence that is portrayed in Kaufman's 1978 *Body Snatchers*, Ferrara's film provides hope in the younger generation through the resistance of Marti and Tim, the helicopter pilot with whom she falls in love, whereas Kaufman's film allowed absolutely no hope of escape. Marti and Tim have survived and demonstrate this by the "human reaction" of destroying the military trucks transporting the pods. Following this, Ferrara's film ends with seeming hopelessness as the ominous words spoken earlier in the film by Marti's pod-replaced stepmother are repeated: "Where you gonna go? Where you gonna run? Where you gonna hide? Nowhere. Because there's no one like you left." Although Marti's voiceover may indicate that she Marti survives to tell someone her story, it is not definite. She may be the only survivor, or she may be giving a posthumous narration (like in *Sunset Blvd.*). Ultimately, this last line seems intended for the viewer, so he leaves the film with this horrific thought resonating in his mind—everyone he knows may may be an impostor.

In contrast to previous versions of *Body Snatchers*, the 1993 version is particularly intriguing with its portrayal of the teenage female protagonist, the invasive nature of the invasion, and the ineffectiveness of the military, the government, and adults in general. However, it is also interesting to consider its representation of medicine and medical practitioners. In the film, the medical profession is represented by a single figure—Major Collins, played by Forest Whitaker, a black physician who is the "head of the base medical corps." Like all of the other adults in the film, Dr. Collins proves to be ineffective and powerless against the invading pods.

Major Collins is introduced when he approaches Marti's father, who is collecting water samples on the base. "I'm very interested in the kinds of effects exposure to these chemicals can have on people." Dr. Malone—a chemist, not a physician—responds by telling him that there are many toxic chemicals on the base that can have devastating physical effects. "I'm not talking about physically. I'm referring to psychological effects. . . . Can they affect the brain patterns? Can they interfere with chemo-neurological processes? Can they foster psychoses, paranoidias, narcophobias?" Collins speaks in a quiet, secretive manner. "Simply, can they alter a person's view of reality?" Decisively, he continues, "Let me be frank with you. I'm seeing people at the infirmary who are exhibiting extreme delusional fixations. People afraid to sleep. People afraid to deal with family members. Afraid of family members. Exhibiting," he looks over his shoulder at the four soldiers who are watching the conversation, "paranoia about others. About other people's identities. People afraid of themselves." During this entire exchange, the camera shoots Collins from a low angle that is not used to put him in a position of power but, rather, is used to emphasize the cloudy sky that is lowering over him—just as the four onlookers are watching him. Malone replies, "I don't know what you're seeing, doc, but I can tell you, it's not the PCBs. That phenomenon, it's just not part of the symptomology." Collins concludes, "I need you to keep me up-to-date on your research. I'm worried about these," he pauses before saying, "people." Dr. Collins is obviously paranoid himself, and one questions whether he has been questioning Dr. Malone for his patients or for himself. From this first introduction, the medical figure has no power. The camera may seem to give him power, but it is a false sense of power because Collins is actually trapped between soldiers, who are emotionless as if they have already been replaced by pods, and the overcast sky. He may be a physician, but he has no answers and no solution to the problem with which he is faced. He is impotent from the very beginning.

The next time that Dr. Collins is seen is when Marti's dad breaks into the infirmary. By this time, the invasion plot has been completely uncovered by Marti, and she is trying to escape with her dad and her half-brother, Andy. When Dr. Malone breaks into the infirmary, he finds Collins there suffering from a complete breakdown. He is chewing amphetamine pills by the mouthful to keep from falling asleep, and he pulls a gun on Malone, assuming that he has been replaced. After Malone convinces Collins that he is not a pod person, Collins tries to enlist him in his final battle against the invasion. "I gotta gun for you, too. We'll give 'em hell. We'll give 'em hell, Malone. We'll show 'em what the human race is really made of." Malone refuses to join the final showdown, and when he hears the door open, Collins tosses Malone the keys to his jeep. Collins stands with his gun pointed at the door. The General Platt duplicate walks in with several other pod people. When Collins threatens to shoot the "onion heads," Platt says, "You disappoint me, doctor. You're a man of medicine. You're supposed to preserve life, not take it." To this, Collins responds, "You call what you are 'life'?" As the pod people advance on Collins, the Platt pod informs him that they have traveled light years, that their numbers keep growing, and that conformity puts an end to conflict. As they close in, Collins tells them, "You're never gonna get my soul. Never." He then kills himself with a gunshot to his head. Interestingly, he is a medical practitioner who equates living with having a soul. Throughout the entire film, he is never actually shown trying to treat anyone, and in the end, he kills himself without shooting any pod people. In contrast to the medical figures in previous versions of *Body Snatchers*, Collins is completely passive and powerless.

The inclusion of Dr. Collins may simply be a narrative device to heighten suspense, but his ineffectiveness may also reflect a lack of confidence in doctors and the fall of physicians as heroic figures. It is interesting to consider what was happening in the health care system at the

time because the effects were being felt by both those within and without the medical profession. When Ferrara's *Body Snatchers* was released on 28 January 1994, Bill Clinton's "We Force the Spring" inaugural address and Michael Jackson's performance of "Heal the World" at Clinton's inaugural gala were only a year old, and health care reform was already a much-debated topic. There were many competing voices in the health care reform discussions. As discussed in the previous chapter, by 1978 medicine was moving away from being a service-oriented profession and was becoming more of a business venture. Over the 15 years between Kaufman's *Invasion of the Body Snatchers* and Ferrara's film, medicine continued to become increasingly industrialized, and both federal and state governments became crucial sources of financial support. Thus, in the health system reform debates of the early 1990s, there was much contention over whether health care should be public or private. Certainly, there is always concern when governmental powers seek to gain more control over the lives of individual citizens. This concern is accompanied by the fear of losing one's autonomy, and this fear is at the root of the *Body Snatchers* films. However, with industrialization of medicine, among those who were worried about losing their autonomy were physicians themselves. As the medical industry became more complex, physicians began to lose their importance and individuality:

Mergers, geographic expansion, new service development, aggressive capital expansion, and technology acquisition distracted managers from their relationship with physicians. Many senior managers removed themselves from day-to-day contact with physicians and believed that physicians would be far less important to the future health enterprise than in the past. Physicians correctly sensed both a loss of control over their institutions and a loss of



importance. As a result, many hospitals and medical communities actually 'dis-integrated' during the 1980s, sowing the seeds of mistrust and conflict in advance of a decade of reform.

(Goldsmith 161)

This disintegration affected the cultural attitude toward the medical profession, and physicians and patients generally lacked confidence in the future of medicine.

Although “mistrust and conflict” had arisen as a result of the industrialization of medicine, another issue influenced the health care reform discussions of the early '90s. The free-market approach to physician specialization had created an imbalance in the numbers of specialists and generalists. There was an oversupply of specialists in the United States.<sup>4</sup> As mentioned in previous chapters, for decades, medical students had been more attracted to specialized medicine than to generalized medicine, and the trend had left communities—on both local and national levels—with an excessive number of specialists. Numbers of specialized physicians did not increase in response to greater demand for these specialties, however. Thus, the resulting “imbalance between the prevalence of disease and the capacity to treat it means that we have very high rates of expensive, invasive procedures, which often result in only marginal improvements in health” (Schroeder 238). This increase in invasive procedures is especially interesting considering the increased invasiveness of the invasion in Ferrara's *Body Snatchers*.

Along with other films concerned with body-horror like *The Fly* and *Dead Ringers*, this film reflects the vulnerability of humanity. In 1993, AIDS was a major concern for both patients and physicians. Jonathan Demme's *Philadelphia* (1993), an important AIDS-related film, was released just a month prior to *Body Snatchers*. AIDS had become a major threat during the 1980s, and it continued to be a devastating, deadly illness into the '90s. The continually mutating

nature of the retro-virus makes it particularly threatening for patients who have AIDS and for physicians who are unable to cure it. At the time of the film, studies even showed that the fear of working with AIDS patients was a contributing factor in the imbalance of specialized physicians and general practitioners. Many medical students chose specialties to avoid working with AIDS patients, who would be seen by generalists working in internal medicine practices (Schroeder 239-40). As the military base physician, it is no wonder that Major Collins feels powerless against the invasion.

In addition to AIDS, Dr. Collins, who certainly dealt with some psychiatric patients as the base physician, could have also felt powerless against the threat of Capgras delusion—the belief that loved ones have been replaced by impostors—the condition with which both he and Marti would have been diagnosed in a real-world scenario. By 1993, additional cases of Capgras delusion had been reported. In 1989, a psychiatric patient in Missouri had decapitated his stepfather in an attempt to prove that he was a robot. Upon decapitation, the patient fully expected to find batteries and microfilm in his stepfather's head. Then, in 1993, a man with Cotard delusion, a delusion in which patients believe they are dead, stabbed himself to prove to his family that he was, indeed, dead. After being taken to the hospital, he also exhibited Capgras delusion when he believed that his visiting family members “had been replaced with perfect replicas sent by the police to spy on him” (Sergo 34). Thus, at the time, it was not ridiculous or fanciful to worry about those with Capgras delusion and concerns of impostors committing violent acts against family members. In addition to the horror genre becoming more graphic and gory, there were reports of those with Capgras delusion being more violent. Therefore, whether the invasion in *Body Snatchers* is real or a delusion, Marti does not act out of character in terms of genre or psychiatry.

Although statistics of physicians in the military are different from statistics among non-federal medical practitioners, it is still an interesting point to consider Major Collins' location and race. As discussed above, there were greater numbers of specialists and fewer number of generalists in the United States in the early '90s, but this impacted rural areas in addition to urban areas. Rural areas were becoming more and more under-served by medical practitioners, especially rural areas with large minority populations. To counteract this trend, many medical schools, with the assistance of state-funding, began to offer incentives for students to practice in these areas. In addition, medical schools sought to increase their numbers of enrolled students from minority groups (Kindig and Yan 177). Thus, it is interesting that Collins is a black physician serving on a rural military base. With this choice of character depiction, the film could be trying to encourage racial diversity and rural service. However, any progressive representation that this may offer is undermined when Collins proves impotent against the invasion and seals his failure by taking his own life. If nothing else, this representation helps to support the complexity of issues that faced the health profession in this period.

Given the difficult, complex nature of health care in 1993, it is clear that physicians themselves are as vulnerable as patients and those who are not medical practitioners. This is reflected in *Body Snatchers* by Dr. Collins, who is as vulnerable and susceptible to invasion as anyone else. The end of Kaufman's *Invasion of the Body Snatchers* in 1978 presents a similar fallibility of the medical figure when Matthew Bennell is revealed to have been replaced. However, prior to Kaufman's surprise—and depressing—ending, Bennell fights effectively and relentlessly against the invasion. In Ferrara's film, Collins is entirely powerless from the beginning. He tries to pass paranoia off as concern when talking with Dr. Malone, and then truly breaks down before taking his own life. Collins does nothing to try to prevent or stop the

invasion because he is overcome by his anxieties. This powerlessness may reflect a general burden of multiple, compounding anxieties of the time. American citizens and physicians themselves were divided over health care reform, which was being promoted by a new president who had yet to really prove which direction he would take the country. There were too many specialists and not enough patients, and there were too few generalists to meet the demand, especially in rural under-served areas. There were concerns about AIDS and Ebola virus. Overall, there were many concerns and no clear solution. This was reflected in Collins' character, who felt completely powerless and chose the path of least resistance—suicide—as his only recourse.

Ferrara's version of *Body Snatchers* from 1993 is interesting in how it reflects the period of the early 1990s in America. The film industry was targeting teens with more graphic horror-themed films, which is demonstrated in Ferrara's film with the focus on Marti's body. The film's ending is somewhat ambiguous in whether it is hopeful or hopeless, especially in regard to the survival of the human race. The ending is distinct from the two previous versions of *Body Snatchers* in that the main character survives along with her love interest. In both the 1956 and 1978 versions, the central protagonist's love interest is replaced by the pods. However, the 1993 version allows Marti and Tim to fall in love and to resist the invasion together. This positive note most likely is a reflection of how the film was appealing to a teenage audience. The young lovers are justified in their distrust of authority figures and are victorious through force and firepower. Because of this approach, this film is almost an anomaly among *Body Snatchers* films, but just like the other versions, it provides interesting insight into the society and time period that produced it.

While the first two versions of *Invasion of the Body Snatchers* have been connected with clear analogs in American social history—Red Scare and new-age thinking—Ferrara's version lacks a distinct metaphorical connection. One could argue that the invasion in the 1993 *Body Snatchers* is analogous to the AIDS epidemic of the previous decade. However, given the complete destruction of a U.S. Army base at the end of the film, one could easily argue that the film is anti-war in response to the recent conflict in the Persian Gulf. The many issues of the time period—AIDS, health care reform, the Gulf War, etc.—and the focus of the film on action and horror—with some teen-angst and family drama thrown in—make it difficult to claim that the film is clearly reflecting a single fear. Rather, it seems to be an amalgamation of several issues and concerns mirroring a complex period in the history of a post-Reagan, recently post-Bush (the Elder), and proto-Clinton America.

## Chapter 5

### Oliver Hirschbiegel's 2007 *The Invasion*

Although Abel Ferrara's 1993 *Body Snatchers* and Oliver Hirschbiegel's 2007 *The Invasion* find common ground in their source material, they are radically different. Both films adapt Finney's novel in a way that reflects their distinct time periods. During the 14 years that separate these two films, there were many events that altered the socio-political environment in America—of particular note are the attack on the World Trade Center towers in New York (September 11, 2001) and the fighting in Afghanistan and Iraq which followed. Additionally, genre films also changed significantly during the 14 years between these two versions of *Body Snatchers*. While horror films still target teenage audiences, the genre has seen a further dividing of itself along the lines of sf influence and body-horror. While Ferrara's film was titillating, body-centered horror with elements of sf, more recent horror films seem to focus on either sf or body-horror. For the most part, when sf finds its way into horror films, they are marketed as being appropriate for younger audiences, such as the PG-13 rated films *The Ring* and *The Grudge*—both based on original Japanese films—and their sequels. On the other hand, body-horror seems to have left sf behind to focus on grisly, graphic depictions of bodily mutilation, such as the *Saw* and *Hostel* series. Meanwhile, sf has lent itself to becoming more family-friendly fare—appealing to and marketed for children, teens, and adults—tending to focus on big action sequences and computer-generated effects. This is evidenced by such films as *Jurassic Park* (1993), *Independence Day* (1996), *Men in Black* (1997) and its sequel (2002), *Armageddon* (1998), *Minority Report* (2002), and *War of the Worlds* (2005)—all of which received a family-appropriate MPAA rating of PG-13. Stan Winston and the effects crew of *Jurassic Park* were

among the pioneers of CG effects in the early '90s, and in *Jurassic Park*, they revolutionized the sf genre with their realistic dinosaurs which they created by combining CGI with animatronics. However, as the decade continued, CGI became a key factor in the progress (meaning, the *selling*) of the sf genre. Christine Cornea remarks:

As CGI increasingly became a practical alternative to more traditional methods of creating both naturalistic and non-naturalistic effects, its use was not only a distinguished element within the narrative world of the film, but was proudly announced in pre-publicity, 'the making of . . .' documentaries and later 'special features' additions to the DVD releases of effects-driven films. (258)

Prior to the year 2000, the sf genre had long been characterized by special effects and depictions of disaster—supporting Susan Sontag's well-argued thesis in “The Imagination of Disaster” that sf films are about watching “the aesthetics of destruction” (215-16). As the genre transitioned into the 21<sup>st</sup> century, the generic formula was continuing to prove its vitality with successful CG effects-laden disaster blockbusters. The genre's success was aided by the DVD distribution market, as mentioned by Cornea above, which provided high-quality home viewing experiences and a wealth of special features in which the filmmakers could explain how they created the film's effects. CGI brought new life to the sf genre and allowed for large-scale spectacle that, in many ways, harkens back to sf films of the '50s. The new possibilities afforded by computer effects has inspired many filmmakers to revisit past sf films in order to update them using contemporary technology including *Godzilla* (1998), *Planet of the Apes* (2001), *The Time*

*Machine* (2002), *War of the Worlds* (2005), *The Day the Earth Stood Still* (2008), and of course, *The Invasion* (2007).

However, technology is not the only reason that films from the past are being revisited. Christine Cornea makes the direct connection between the 9/11 attack on the World Trade Center and remakes of classic sf films. “Immediately following 9/11, although the news media repeatedly replayed the falling of the Twin Towers, in an act of conscious forgetting, fiction film stayed well away from any image that might be directly linked with 9/11” (265). Instead, there was a resurgence of war pictures and historical epics—for example, *Black Hawk Down* (2001), *We Were Soldiers* (2002), *Alexander* (2004), and *Kingdom of Heaven* (2005). In these films, portrayals of destruction and conflict were set in the past rather than in the present. The sf genre also revisited the past through “pious remakes” of films like *The Time Machine* and *War of the Worlds*. These films abandoned “the irreverent irony of a film like *ID4* [*Independence Day*] and “returned us to a cinematic past even as they featured futuristic events” (265). Further, Cornea writes, “In an act of remembrance, Hollywood cinema appeared to be returning to the past both stylistically and politically. Perhaps all of these films were intended to heal the rift in reality caused by the traumatic events of 9/11 by reminding viewers of the response to past traumas, at least as represented in cinematic memory” (265-66). The changes in the sf genre—due to technological advances in computer imaging and devastating tragedy on U.S. soil—influenced the direction taken in Hirschbiegel's *The Invasion*. This most recent version of *Invasion of the Body Snatchers* distances itself from body-horror and titillation, like that seen in Ferrara's 1993 *Body Snatchers*, and seeks to appeal to a broad audience by providing a film that is visually spectacular yet ultimately reassuring.



From the beginning of the film, Hirschbiegel's version of *Body Snatchers* is vastly different from Ferrara's. The sequence that precedes the opening titles shows a haggard woman, played by Nicole Kidman, frantically searching the shelves of a pharmacy looking for medication. The voiceover overlaying this action is presumably her own thoughts telling herself, "Oh, I can't. I can't stay awake. Stay awake, stay awake." This woman is clearly in a state of panic. As she looks through bottles of medications, she says to herself, "Adderall, gone. Ritalin, gone . . . Clonazepam. Clonazepam, good. That's right. Yes. Good." She tips several bottles of medication into her palm, filling it with pills, and then she searches a beverage cooler thinking, "Oh, sugar, sugar. Fructose. Mountain Dew, Mountain Dew." After she chases a mouthful of pills with a swig of Mountain Dew, a locked door rattles, and voices behind the door yell, "Let us out! Please!" Her response to this request is to ask herself, "Who are those people? Who are they? What are they trying to do to us? No one's ever gonna hurt my son." The quick editing of the scene and the woman's rapid self-dialogue through voiceover combine to convey to the audience the sense of urgency and panic that the character herself is feeling. As the people trapped behind the locked door keep trying to get out, the frantic woman swallows more pills and drinks more Mountain Dew. Then, she stares directly into the camera, simultaneously looking at the locked door and at the audience who is watching her in the movie theater. Her expression is a mixture of exhaustion, medicated detachment, fear, and distrust—for whoever is behind the door and for everyone watching her. This shot goes out of focus, and then the title card is displayed: "The Invasion." In flashback style, what follows is the story that leads to the frightened, frantic woman downing bottles of pills.

This introduction to Hirschbiegel's film is drastically different from the way Siegel, Kaufman, and Ferrara introduce their films. Gone is the single shot of a threatening sky, the

observation of spores traveling from a desolate, barren world to the vibrant, blue Earth, and the ominous foreboding of a single car traveling toward an unknown destination while the narrator begins to tell her story. Instead Hirschbiegel introduces his main character as a crazed woman gulping down handfuls of CNS (central nervous system) stimulants and anti-anxiety pills washed down with a caffeinated beverage. While Ferrara puts the audience of his film on a journey toward certain terror, Hirschbiegel immediately throws his audience into a state of highly anxious panic. However, it is definitely a state of anxiety and not one of terror. Thus, in light of the quote from Vivian Sobchack in the previous chapter, Hirschbiegel's focus on anxiety, even in this first scene, places his film on the side of sf rather than horror. Additionally, the 2007 *Body Snatchers* further distinguishes itself as a sf genre film rather than a horror genre film like the 1993 version by setting the action in an open system. In Ferrara's film, the closed system of a rural military base allowed for the terrorizing of a limited group of individuals. However, Hirschbiegel's film is such an open system that the invasion has implications for the citizens of Washington, D.C. (over half a million people), those who commute to the city for work, those who live in the areas surrounding the city, and even astronauts traveling in space. With the threat extending into space, it is clear that the entire world (and more) is in danger. This global threat is another factor that puts the film more in the territory of sf than horror on the sf-horror spectrum.

The frame structure of the story—starting with this opening scene and then showing the events that lead up to that point—is similar to the 1956 *Body Snatchers*, which starts with Miles Bennell talking to a psychiatrist and then goes into a flashback when he tells his story about the pods. However, it is significant that the frame of Siegel's version involves Miles talking with professional psychiatrists who, if he can convince them that he is telling the truth, have the power to alert others and, thus, possibly stop the invasion. In contrast to this, the frame in

Hirschbiegel's version puts the main protagonist—Carol Bennell—alone trying to keep herself awake with a group of hostile individuals trying to escape through the locked door. While the frame-story used in 1956 is a narrative device to provide an access point to Miles' story of pods and invasion, the pre-title sequence in 2007 is simply a hook to quickly engage the viewer into a “high-octane” thrill ride. This is certainly a reflection of big-budget Hollywood cinema of the last few years, which, while intending to “update” classic sf films, tends to rely more heavily on hooks and gimmicks than on story. This thrill-ride mentality is apparent in Steven Spielberg's 2005 version of *War of the Worlds*, which seems to focus on the sound mixing, destruction, and special effects rather than the development of story and character. In line with this focus on big action, Hirschbiegel's film immediately follows the title card with the destruction of a space shuttle that crashes to the earth leaving a path of debris “from Dallas to Washington.” This focus on big action and effects is a reflection of the trend of sf in the 2000s and is a distinct shift from Ferrara's 1993 film in which the story of horror was slowly developed to maximize the impending doom and terror. It is interesting to see how the same source material has been used to create completely different films that each reflect completely different time periods.

In addition to the changes in the level and frequency of action and effects sequences, Hirschbiegel's version of *Body Snatchers* differs drastically from Ferrara's version in its main protagonist. Both films utilize a female character that has a noticeable maternal concern for a young boy, but that is where the similarity ends. Marti Malone from the 1993 film is a teenage girl, whose body is often a focus of attention for the intended audience of primarily male teenagers. Although she has a concern for her younger half-brother, he is Marti's only access point into her family, since she has serious issues with her stepmother and her father. In sharp contrast to this character, Carol Bennell from the 2007 film is a professional career woman,

whose body is not objectified. Her maternal role tends to be the focus of her character rather than her sexuality, which also reflects the trend in sf of the period. The targeted demographic for Hirschbiegel's PG-13 rated film is definitely different than that of Ferrara's R-rated film and is the same audience targeted by Spielberg's *War of the Worlds*, in which Tom Cruise plays a father figure whose paternal role is also (ostensibly) the focus, rather than his sexuality. Both of these sf films—*The Invasion* (2007) and *War of the Worlds* (2005)—are intended to be more acceptable for family viewing, and they also reflect concerns about parental roles. This is a distinct shift from the teen-focused horror films of the early 1990s, which leaves parents powerless and expendable. It is interesting to note that these more family-centered films of the last decade have come in a time that is witnessing significant political and social discussions about the definition of family. In addition to being a mother, Carol Bennell is a professional psychiatrist who has a solid understanding of science and medicine. In the pre-title sequence, the dialogue that she has with herself indicates that she has a knowledge of medication. Although she is initially shown as frantic, in the flashback her knowledge and association with science help to establish Dr. Bennell as a reassuring sf film genre character; whereas Marti's vulnerability helped to make her a victimized horror film genre character. To meet the demands of a post-9/11 audience, Carol Bennell is stable and has power within her world as she embodies a medical professional, a mother, and a hero. Interestingly, this return to a sf classic also brings the return of the doctor-hero, like Miles Bennell in the original *Body Snatchers*. She represents a stability in the health profession and proves that women (and mothers) are acceptable and effective medical practitioners. She is competent and can, as Cornea writes in the above quote, “heal the rift in reality caused by the traumatic events of 9/11.” Focusing on an intelligent, capable maternal character who is placed into situations of anxiety facing global threat—rather than the

terror of a teenage girl in a closed system—helps to put the latest version of *Body Snatchers* firmly into the current sf genre.

In addition to character and location, it is interesting to consider the portrayals of military and federal government in Hirschbiegel's film. First of all, it is significant that this film is set in Washington, D.C., the center of the United States power and influence. Any of the subtle commentary about government that exists in other sf films is brought to the surface of this film by this change in location. After the space shuttle crash, the film shows a flurry of activity from federal agencies. Although the destruction of the space shuttle is a concern, there is also another threat indicated by this federal activity. The CDC, represented by Tucker Kaufman, arrives at the shuttle crash site indicating that the threat is biological. The CDC is quick to determine that the organism is alien in origin, so the alien invasion is no longer from pods but from a biological spore. Because he is one of the President's trusted, "closest advisers," Kaufman is supposed to meet with the President of the United States to discuss the space shuttle disaster and its ramifications. In these early scenes, the federal government is portrayed as the organization (or group of organizations) that is spearheading the effort to contain the possible threat. Kaufman is infected by the spore and is one of the first to be transformed. Kaufman is also Carol's ex-husband, so his being "invaded" by the alien spore works narratively because of his connection to Carol. However, this also shows the perniciousness of a biological threat—it can attack citizens through the federal government. A vulnerable government has the capability of allowing the invasion of an entire nation. In reference to Kaufman, Carol even says, "I know him, and I don't trust him." Carol's apprehension toward Kaufman, his susceptibility to alien invasion, and his position in the federal government demonstrate the magnitude of the threat. Further, the federal government is depicted as trying to cover up the real danger of the biological emergency

by describing it as a new flu virus and assuming that the general population is gullible and trusting enough to believe the lie. If federal officials and the government itself cannot be trusted, then the nation is vulnerable to any insidious, invasive threat.

Surprisingly, even though there are plenty of government officials and federal agencies represented in Hirschbiegel's *Body Snatchers*, there is very little military representation. In fact, there are only a few scenes in which military personnel are actually present. First, immediately following the shuttle crash when federal agencies are trying to contain the crash and study the alien organism, the military is present merely as a barrier between the general populace and the federal agencies. Next, after the invasion is in full force and Carol is trying to escape with her son, Oliver, the military arrives to seal off the city. Lastly, there is a single uniformed soldier in the helicopter with Dr. Galeano, the biochemist who discovers how to defeat the alien virus, when Carol and Oliver are picked up by the helicopter and taken to safety. The role of the military in this film is fairly ambiguous—it is neither villainous nor heroic. The absence of a military presence in this film is somewhat contradictory to the sf film genre. It may be an oversight, but it may reflect the attitude of the time period in America. The allusions to the war in Iraq are both implicit and explicit in this film, and the film's portrayals of government and military seem to echo the general reactions about the war. Critical commentary about the government's involvement and response are freely allowed while only praise seems to be allowed for the military and the soldiers themselves, who are operating under orders. In Ferrara's film, the post-Gulf War military seems to act as both villain and hero. The military in Hirschbiegel's film is present yet not very essential, which may reflect contemporary concerns about war and the role of the military.

Hirschbiegel's version of *Body Snatchers* also takes a decidedly sf stance in its focus on science. The main characters are all scientific folk—Dr. Carol Bennell the psychiatrist, Dr. Ben Driscoll the physician, Dr. Tucker Kaufman of the CDC, and Dr. Stephen Galeano the biochemist. The approach to the alien invasion is also very scientific—the invader is an alien virus that alters human DNA. The effect of the alien virus on the human body is scientifically explained in the film by Galeano, who is the key figure in discovering how to save the human race. In fact, when Galeano is talking about the scientific effort to defeat the virus, he even states, “Somebody finally realized there's a war going on, and the only way we're gonna win it is in a lab.” Galeano is able to create a vaccine for the alien virus, which allows people to become human again. The only remaining effect is a loss of memory during the time the virus had control of one's body. In this way, the ultimate effect of the virus is very benign—a relatively few number of people actually died, which helps the more family-friendly nature of the film. This will be discussed in more detail later, but here it is sufficient to note that this significant scientific focus of the film helps solidify the 2007 *Body Snatchers* in the sf genre.

In addition to its position in the sf genre, Hirschbiegel's film differs from the other versions of *Body Snatchers* in relation to its portrayal of the medical profession. Each film reflects societal attitudes toward medicine and its practitioners. In 1956, Siegel's film presents a male doctor-hero who holds a special position in society that allows him to save humanity—reflecting the positive view of general practitioners and medical science, for at the time, penicillin was a miracle drug that appeared to have the power to save the world. Kaufman's 1978 film excludes medical practitioners in response to general distrust of powerful people and organizations and a particular distrust of medicine—the thalidomide disaster was still in society's collective memory. In 1993, the physician is impotent, reflecting concern about the newly

proposed health care reforms and the inability of medicine to successfully combat AIDS. Then, in 2007, the medical practitioner reemerges as a hero with power to defeat the invasion. However, in this version, the doctor-hero is a female psychiatrist who is also a single mother. She is not overly sexualized, nor is she melodramatically trying to prove herself in a man's world. The fact that she runs her own private psychiatric practice is accepted by her patients, her colleagues, and her family. This representation of women in medicine reflects the general acceptance of women in medicine.<sup>5</sup> The shift away from generalized medicine toward specialization mentioned in previous chapters has continued, and it is no surprise that in 2007 Dr. Bennell is a specialized physician in a metropolitan setting.<sup>6</sup> Her role as a physician seems to hold no particularly special position in society, which reflects the acceptance of medical professionals as common members of the community. In contrast to 1956, medical practitioners are much more commonplace in 2007. Also, Carol Bennell seems to be less concerned about saving humanity and more concerned about saving her son. This shift in the physician's concern supports the social transition of the doctor from an elite to an average member of society.

Perhaps more interesting than the role of the physician is the depiction of the invasion itself. Significantly, as mentioned above, the invasion in Hirschbiegel's film is not from alien pods which replicate the physical identity of human beings. Instead, an alien virus invades the victim's body and integrates itself into his DNA and, thus, changes him at the molecular level. The threat is no longer a pod that can be crushed or burned but is now a virus that must be understood scientifically and attacked through intellect rather than brute force, which is reminiscent of George A. Romero's *The Crazies* (1973). This new threat of viral invasion reflects society's fear of disease. Although medical practitioners may now be perceived in a positive yet common light, they are also as susceptible to the plague apocalypse as everyone else.



Plague apocalypse refers to various biological contagions—viruses, bacteria, microbes, etc.—that spread in an ever-widening pandemic that threatens the existence of mankind. Biological cataclysm is not new to apocalyptic sf and has been an essential subject in sf literature. Mary Shelley, whose Gothic horror writings like *Frankenstein* gave rise to the sf literary genre, wrote an apocalyptic novel called *The Last Man* (1826), which is the first-person account of a man living in the plague-ravaged late 21<sup>st</sup> century. Although more optimistic, biological factors play a significant role in stopping the Martian invasion in H.G. Wells' 1898 *The War of the Worlds*—the Martians have no immunity to diseases native to mankind on Earth and die. In Richard Matheson's *I Am Legend* (1954), there is a biological cause for vampirism—the “vampire germ”—which is turning everyone into zombie-like vampires. The plague apocalypse has its roots in sf literature, and it has also become a staple in the apocalyptic sf film genre. There have been many plague apocalypse films made over the decades including *The Last Man on Earth* (1964) and *The Omega Man* (1971) (both adaptations of Matheson's *I Am Legend*), *The Andromeda Strain* (1971), based on Michael Crichton's novel, *The Crazies* (1973), *12 Monkeys* (1995), and *Outbreak* (1995). However, even though the genre has been around for a long time, the market has been flooded in recent years with plague apocalypse films like *28 Days Later* (2002) and *28 Weeks Later* (2007), *Resident Evil* (2002), *The Invasion* (2007), *I Am Legend* (2007), *Day of the Dead* (2008), a remake of George A. Romero's 1985 original, *Quarantine* (2008), *Doomsday* (2008), *The Last Man* (2008), based on Mary Shelley's novel, *The Crazies* (2009), another remake, *Zombieland* (2009), and *Silent Night, Zombie Night* (2009). With such an inundation of plague apocalypse films, there is certainly a fear of biological cataclysm in the public consciousness that is not only perpetuating the genre but also making it so prominent at this time.

In regard to the mode of invasion, Hirschbiegel's version of the *Body Snatchers* story differs significantly from all of the other versions—the main symbol of the invasion, the pod, is completely removed. Instead of an alien pod invasion, humans are being invaded by virus-like alien beings that reprogram human DNA, turning those infected into unfeeling, emotionless beings. Prior to this latest version of *Body Snatchers*, the story had dealt strictly with alien pods duplicating human beings, so the threat was entirely outside of the human body itself. With the change from alien pods to alien viruses, Hirschbiegel's film puts the threat inside the human body. An important element in plague-induced apocalyptic films is the biological organism itself—its method of creation and its mode of dissemination. The virus in *The Invasion* is completely alien in nature—its origin is unknown, and, according to Dr. Galeano, the microbiologist character in the film, the virus itself is “a complete, intelligent entity, the dimensions of a few cells.” The alien virus arrives on Earth in a different fashion than the pods do in other versions of *Body Snatchers*. In previous films, the pod invasion was subtle and lacked spectacle, but in the latest film, the arrival of the virus is heralded by the explosion of the space shuttle *Patriot*. After the pre-title sequence involving a paranoid Carol Bennell, the film's title is shown over a black background, which becomes the dark expanse of outer space. Suddenly, the space shuttle *Patriot* flies rapidly toward the spectator with its engines firing, and as the shuttle flies out of frame at the top of the screen, the reverse shot shows that the shuttle is heading directly towards Earth. When the shuttle begins to re-enter the atmosphere, an explosion destroys the rear half of the shuttle, and it begins to spin out of control, plummeting toward Earth followed by a trail of fire. While traveling through the atmosphere, further explosions completely destroy the shuttle, and the debris falls to the earth, leaving fire and vapor trails that streak across the sky reminiscent of the space shuttle *Columbia* disaster that occurred in 2003.

The alien virus falls to the earth with the debris from the shuttle, similar to *The Andromeda Strain*, in which the alien virus accompanies a satellite back to Earth.

Like *The Andromeda Strain*, *The Invasion* depicts a virus that is alien in nature that man has no part in creating. However, man is (perhaps, indirectly) responsible for bringing the virus back home to Earth where it wreaks havoc upon mankind. There is danger in exploring the unknown reaches of space, and the astronauts and explorers themselves are not the only ones at risk. In the plague apocalypse, all of the world's inhabitants are at risk, for virulent biological contagions may surreptitiously stow away on the vessels that are exploring the unknown. However, man cannot avoid all responsibility because he is the one who wants to discover the unknown. Man places himself in a position to be susceptible to alien invasion, and his curiosity may end up being his downfall if it leads to the spread of the apocalyptic plague. In *The Invasion*, television news reports show the space shuttle's destruction and report that it left "a trail of destruction and debris from Dallas to Washington." Several witnesses are interviewed, and these interviews reveal the danger of human curiosity and foreshadow the impending disaster. One man, while talking about the shuttle debris, says that he is "watching it" to "make sure nobody touches it, nobody runs off with it." In response to this, the interviewer asks, "Why is it important for people not to touch it?" The man replies, "It's contaminated. Could be contaminated." This statement is immediately followed by an elderly lady saying, "Of course, we all got out, and we touched it, some of us did." Although one man (who might have learned a lesson from watching *The Andromeda Strain*) warns against the possibility of contamination, the curiosity of the elderly woman demonstrates the inquisitive nature of human beings, and in this juxtaposition of statements—one a warning and the other a confession—the real fear of the plague apocalypse is revealed—a completely innocent, benign act of touching out of curiosity

could infect someone with an alien organism that will ultimately destroy humanity. Fear does not only exist in regard to conscious, deliberate, malignant acts, but fear (perhaps, even greater fear) also exists toward unintentional, seemingly benign acts that could have disastrous consequences. Man may not create the plague, but he has the power to disseminate the biological threat. Once this is understood, the plague apocalypse instills fear in man that extends beyond the fear of the alien organism, and mankind begins to fear one another. A distrust of friends, neighbors, and family members grows within everyone when anyone else could unwittingly destroy him. Throughout the film, this fear is realized as the alien virus is passed from person to person, and the alien invasion becomes a pandemic of dehumanization. The virus is spread when one infected (invaded) individual spits into the face of another. Then, the virus remains dormant until hormones produced during REM sleep activate it, and the alien takes control. This method of spreading the virus is particularly interesting in that it involves the transmission of bodily fluids. In previous versions of *Body Snatchers*, when pods are placed in a house, they replicate those who live in the house. It is generally a covert process that does not involve face-to-face interaction. However, in *The Invasion*, the spread of the plague is overt and necessitates confrontation. While previous versions reflected a fear of unknowingly being replaced overnight and surreptitiously becoming homogeneous through a stealthy invasion, this latest version reflects a fear of ingesting another person's bodily fluids and knowing that one is helpless against the alien virus once it is inside the body. This time, the disaster that humanity experiences is not replacement by outwardly identical duplicates but is mutation at the genetic level.

In Don Siegel's 1956 *Body Snatchers* film, the main character Miles Bennell is a Dr. Kildare-like doctor-hero. However, his hero status is not secured by his medical knowledge but

by his understanding of what truly makes us human beyond physical characteristics. No one is directly associated with medicine in Philip Kaufman's 1978 version (except, perhaps, the David Kibner character, but he represents a pop-psychology guru rather than a true medical practitioner), which reflects a general anti-Establishment attitude as well as paranoia toward and skepticism of the medical profession. Abel Ferrara's *Body Snatchers* (1993) does portray a doctor—the military base physician; however, he is completely powerless to confront the pod invasion, and his utter impotence is witnessed when he is surrounded by pod people and decides to commit suicide instead of fight. In contrast to these versions, there is a significant medical presence in Hirschbiegel's film, and, ultimately, medicine conquers the alien invasion. There are several key figures in the film who perform various functions within the medical community. Carol Bennell, the protagonist, is a psychiatrist and has her own private practice; Ben Driscoll is a physician who works within the hospital system; Stephen Galeano is a microbiologist; and Tucker Kaufman works for the CDC. Of these four key characters, only two are actually infected by the alien virus—Tucker and Ben. As mentioned above, Tucker, the government employee and Carol's ex-husband, is one of the first to be infected, and he poses a threat to the others throughout the film. Ben, Carol's love-interest, on the other hand, is one of the last to be infected, and prior to his change he risks his own safety to protect Carol and her son, Oliver. His transformation at the end of the movie is not so much sinister (like that of Matthew Bennell in the 1978 version) as it is heroic. Carol and Stephen do not succumb to the invasion at all, and, in the end, they are the ones who are instrumental in saving the world. As a psychiatrist, Carol recognizes that people are changing and acting less “human.” Through her occupation, she has connections to other doctors (namely, Dr. Driscoll and Dr. Galeano) who can begin the process of finding a cure to the virus. More important than her role as a physician, though, is her role as a

mother. Her main task is to protect her son, Oliver, who is, serendipitously, immune to the alien virus. Thus, Oliver is a savior figure, and it is requisite that Carol, the savior's mother, protect him, which she does. By studying the alien virus (because he has the knowledge and access to laboratory equipment) and those who are immune, Stephen, the microbiologist, is able to create a vaccine for the virus, which prevents people from being infected and cures those who are. Towards the end of the film, while Carol and Oliver are being chased by a group of infected people, they run to the roof of a building with nowhere else to run. Then, before they can be caught, a military helicopter, taking its orders from Stephen Galeano, swoops in to save them. Overall, the medical response to the plague invasion is optimistic, and medicine has the power to stop the plague apocalypse. It cannot be overlooked, however, that medicine—represented by Stephen with his helicopter and cure—acts as a *deus ex machina*. This melodramatic salvation may actually reveal the exact opposite of what it intends—an underlying fear that medicine is as powerless as the government and everything else.<sup>7</sup> The hope that a miracle can save mankind from destruction may be the only thing left keeping mankind looking optimistically toward the future.

The fear of unknown diseases to which mankind has no resistance continues to exist in the public consciousness. *The Invasion* presents the threat of an alien virus that comes to Earth, but foreign pathogens have threatened and continue to threaten populations around the world. Travelers to foreign lands put themselves at risk to contract diseases that their native lands do not possess, and those who are infected by foreign pathogens carry the threat back to those who have no immunity to it. “The reemergence of old-world diseases in the West is striking. Malaria currently slays hundreds of thousands of people in Africa each year by clogging their brains' blood vessels, yet 1,000 to 2,000 people annually are diagnosed with it in the United States”

(Levy and Fischetti 89). Shockingly, from 1998 to 2000, there were as many deaths worldwide caused by malaria as were caused by AIDS. In addition to malaria, other foreign contagions—such the Ebola virus, West Nile Virus, SARS, avian flu, and swine flu—have been the cause of concern for epidemiologists and have been the focus of media attention. Although the media is partly to blame for instilling the fear of foreign biological threats into the general public, they are also helping to fight two key factors in the spread of these diseases—ignorance and lack of communication. One thing that malaria, West Nile Virus, and the anthrax scares have proven is the need to improve the method of discovering pathogens and alerting others about them, being able to supply correct information and proper safety precautions. Levy and Fischetti reported the following in 2003:

According to state health-code law, doctors in New York are supposed to report to their local or state health department any time they find one of dozens of dangerous diseases—from anthrax and botulism to malaria and yellow fever. The same code also states that, more generally, a physician should report any unusual manifestation or cluster of illnesses. But one of the worst problems with our disease-detection system is that many doctors never report cases of strange symptoms, either because they are unsure of the disease they are facing, they're ignorant of the reporting requirement, or they simply never get around to it. This lone lapse in a doctor's duty can let loose an outbreak. (90)

With reports like this, it is no wonder that the fear of alien viruses perpetuates. If doctors cannot be trusted to defend against disease, then no one can. Unfortunately, the medical community is

often as susceptible (and perhaps even more susceptible) to being stricken by a foreign biological threat as the general public. This became a concern in Southeast Asia during the SARS outbreak in 2003. “So many doctors and nurses were sick in certain hospitals in Hong Kong, Singapore, and China that the staff’s ability to care for patients was compromised” (17). The recent plagues that have attacked the world have shown that medical practitioners are just as human as everyone else and do not have greater immunity by virtue of their profession. The demythologizing of our heroes deepens the fears that already exist in society.

In addition to foreign pathogens and lack of adequate governmental and medical response, the plague apocalypse seems to be of greater concern now because of other factors that are affected, such as economics and privacy. The recent diseases that have threatened the world have not only caused illness and death, but they have also been economically disastrous. During the SARS epidemic, the Southeast Asian workforce was drastically reduced due to illness, which caused a decrease in product output. Revenue significantly declined in Chinatown restaurants and shops in cities like San Francisco and New York. Airlines reduced their numbers of flights from the U.S. to Asia. “Some economists even suggested that the SARS disruption could be the last straw that pushed the world into a global recession” (18). If the threat affects the economy—both locally and globally—it may induce a recession, which can mean loss of employment, loss of income, loss of quality of living, etc. The financial threat is more frightening to some than the disease itself. Additionally, one’s personal privacy may also be threatened by a biological epidemic because, to effectively stop an epidemic from spreading, measures must be taken which necessarily invade personal freedom and privacy. This proved to be a difficulty surrounding the AIDS epidemic of the 1980s when many sought for the quarantine of gay men. This proved to cause a distrust of the health care profession among male homosexual communities, and many of



them resisted getting testing for AIDS. This reaction to the threat of privacy invasion is illustrative of the potential problems arising from trying to quarantine a spreading biological epidemic. Thus, plague has a greater impact on the general public than just the spread of virulent disease. It can have destructive economic effects, and it requires individuals to surrender certain freedoms. Because these secondary threats are just as frightening as the primary threat of infection (and, perhaps, moreso for some people), the fear of biological apocalypse has increased in recent years, making a significant impact on the apocalyptic sf genre.

In addition to foreign diseases, some medical threats that once were considered to be conquered have reemerged in more virulent forms, such as tuberculosis. Disease has become an increasing threat in the public consciousness in the past decade or so, and the films of the plague apocalypse reflect this. Many feel greater anxiety toward these diseases not just because of the threat they pose but also because of the inadequacy of government leaders and medical practitioners in defending people from them. Economy and personal freedom are also threatened, and these fears are being assimilated by society and reflected in the films that are being produced. The threat can be a foreign, alien virus or a naturally occurring virus that has mutated into a new, more virulent form. Medicine may be powerless to stop the apocalypse, but there can still be hope, even if it is the hope for a miracle. Edgar Allan Poe evokes the dread and fear of the plague apocalypse in his 1842 story *The Masque of the Red Death*:

And now was acknowledged the presence of the Red Death. He had come like a thief in the night. And one by one dropped the revellers in the blood-bedewed halls of their revel, and died each in the despairing posture of his fall. And the life of the ebony clock went out with that of the last of the gay. And the flames of the

tripods expired. And Darkness and Decay and the Red Death held  
illimitable dominion over all (744).

The fear of darkness, decay, and death having “illimitable dominion” still resides in mankind, as is witnessed in the recent swine flu paranoia. As long as the threat of plague apocalypse is still a part of the public consciousness, sf films will continue to reflect the anxiety and fear of widespread biological annihilation.

In its depiction of health professionals and the threat of viral invasion, Hirschbiegel's version of *Body Snatchers* situates Finney's story such that it mirrors contemporary audience demands for the sf genre as well perceptions of and attitudes toward medical practitioners and the fear of disease. In many ways doctors have become normal members of society, but in so doing, they have also become susceptible to the viruses, bacteria, and plagues which threaten the world. However, hope has been rekindled that these men and women of medicine can “heal” the post-9/11 world.

## Chapter 6

### Conclusions

Genres are essential to the business of film. As Thomas Schatz writes, the nature of any film genre “is continually evolving” (691). This evolution occurs as filmmakers and filmgoers co-exist in an interesting kind of symbiosis. Genres are necessarily formulaic—when a certain combination of elements meets audience demands, like any successful business venture, the formula is exploited. When audience demands change, filmmakers seek to refine the formula, so their supplied product can again meet consumer demands. Audience demands change for a variety of reasons—changes in societal permissiveness, significant historical events, etc. However, filmmakers themselves—through exhausting a formula, introducing new elements that connect with audiences, etc.—can cause a change in demand. Thus, there is a co-evolution of both supply and demand that continually refines and redefines the formula. Thus genres, because they categorize and formularize films, continue to evolve. This presents a problem for genre criticism when trying to solidify a fluid entity. Schatz recognizes this:

There is a sense, then, in which a film genre is both a *static* and a *dynamic* system. On the one hand, it is a familiar formula of interrelated narrative and cinematic components that serves to continually reexamine some basic cultural conflict . . . On the other hand, changes in cultural attitudes, new influential genre films, the economics of the industry, and so forth, continually refine any film genre. (691)

Recognizing this difficulty inherent in film genres is important when considering a genre film such as *Invasion of the Body Snatchers*, since it exists within a continually evolving genre.

Additionally, in a study of *Body Snatchers* it is important to acknowledge and reconcile the claims that both the sf genre and the horror genre have on this text. To allow for a study of *Body Snatchers*, which repositions the text with every film adaptation in the ever-evolving sf genre, it is appropriate and beneficial to accept Vivian Sobchack's idea of the sf-horror spectrum. With each incarnation of the story, it is situated anew along that spectrum. This approach allows each film to be considered for its generic conventions without being overly strained by the problems presented by generic evolution. Bruce Kawin's ideas of space—closed/open and rural/urban—and roles of military and science are also helpful in building comparisons between the films within a common critical framework. To consider each film's unique message and source of anxiety, Rick Altman's semantic/syntactic approach to genre is used to, again, allow each film its individuality although it is inseparably connected with the others. In each film, the common semantic elements can reveal a new (or modified) meaning by being situated in a unique syntax despite the potentially problematic static/dynamic evolving genre. Using this approach, each *Body Snatchers* film is an important statement about the field of medicine, medical practitioners, and disease.

Don Siegel's 1956 *Invasion of the Body Snatchers* situates itself in the center of the sf-horror spectrum. Since it focuses on the fairly closed system of the rural small town Santa Mira, it leans toward horror; however, in line with the sf genre, there is also a concern that the invasion threatens the entire world. Ambiguity exists in terms of the scope of the space—it is simultaneously closed and open. Additionally, the story centers around the main characters, Miles and Becky, but as the alien pods replace more people and spread their influence, it is clear

that the threat seeks to be worldwide. Again, there is at once both limited, focused danger and global, universal danger. Interestingly, there is a lack of military and government involvement, leaving Dr. Bennell, the general practitioner, to serve as the heroic figure. The film does not distinctly reside in either the sf genre or the horror genre but instead exists as both in the middle of the spectrum.

Bennell, the intelligent, caring, altruistic physician, follows in the tradition of positive doctor characters like Dr. Kildare. Bennell serves as a doctor-hero that retains the power and elevated status of a 1950s physician. This reflects the positive attitude that society felt toward the medical field at the time. This is no surprise considering the advances that had taken place in recent years, such as the discovery of the miracle drug penicillin. Although opinions in the medical community were beginning to lean in favor of specialized medicine, Bennell's choice to return to his small hometown was not uncommon and adds to the doctor-hero mystique of the time. He possesses influence and knowledge as a doctor (particularly about the nature of humanity), which grants him greater ability within his community and allows him to be victorious against the invasion. Medicine of the time was respected and powerful.

In contrast with this first film, Philip Kaufman's 1978 *Invasion of the Body Snatchers* presents a very different vision of genre and medicine. Most apparent is the relocating of the story from a small, rural town to the major metropolis of San Francisco. Even though Matthew Bennell is the main character, it is clear from the very beginning—when alien spores are seen floating toward Earth—that the threat will be global, not localized in San Francisco. Bennell serves as a narrative point of access; however, he proves to be just as vulnerable as everyone else. Due to its open system and wide scope of threat, this film shifts the *Body Snatchers* story more toward the sf end of the spectrum. The military is again absent, but this seems to be a

product of an anti-war, anti-government sentiment of the time. The absence of military in Siegel's film seems reasonable, but in Kaufman's film it feels like an intentional omission. This serious sf film is a reflection of the general skepticism and disenchantment felt toward authority figures and organizations in the 1970s in the wake of events like the Vietnam War and the Watergate scandal.

This skepticism and disenchantment also extends toward the medical profession. There are no characters directly connected with medicine—Matthew Bennell is a health inspector and David Kibner is a pop-psychologist. General practitioners had moved away from the big city, and more importantly, medical science had lost its prominent social status. The use of thalidomide, originally hailed as a wonder drug, proved to be an egregious error when it was discovered to cause severe birth defects when used by pregnant women. Advances in transplantation technology and infertility treatment raised questions about the sanctity of the human body and the rights of doctors to act as god-like figures. Medicine had fallen from its elite position, and physicians were no longer capable or trusted to fight the threatening invasion because they were a potential threat themselves.

Abel Ferrara's 1993 *Body Snatchers* is an entirely different take on the story as it shifts the focus entirely from professional adult characters to a teenage girl. Marti Malone is the main character who is struggling with the angst of adolescence and developing in her sexual maturity. The film is set on a rural military base within which the action is entirely contained, and the threat is not just about replacing humans with impostors but is also about witnessing the horror of a bodily invasion. This film fits very much on the horror end of the spectrum, and it reflects the trend in teen-targeted horror films and body-horror of the period. Since the setting is a military base, the military is a constant presence; however, the military is a vulnerable, initial

point of attack. Victory over the invasion comes through a teenage girl and her love interest, who is a military helicopter pilot. It is pro-action without being pro-military, reflecting some mixed feelings about the recent Gulf War.

These mixed feelings are also reflected through the physician character Dr. Collins, who is the doctor for the military base. He is present and shows concern about the invasion, yet he is paranoid and ultimately proves to be ineffective and impotent against the pod people. Society had certainly recovered from being overly antagonistic against medicine, but there were still concerns about the actual power that physicians held at their disposal. This expresses the apprehension that many felt about AIDS and the inability that doctors had to cure it. Also, proposed health care reform legislation was a cause of anxiety both within and without the medical profession. Health insurance companies and HMOs had already changed the nature of health care, and the Miles Bennell-type general practitioner was a dying breed. Ferrara's film reflects the unsteady yet not-altogether-negative position of medicine.

The latest *Body Snatchers* film, Oliver Hirschbiegel's 2007 *The Invasion*, shifted the story back to the sf end of the spectrum as it portrayed an invasion from a alien virus that threatened the entire world. Of all four versions, this film is shifted the furthest toward the sf genre. The threat is explicitly widespread, which contrasts with the other films which hint at the global nature of the invasion. Hirschbiegel's film is set again in a major metropolitan area Washington, D.C. This urban space is used as an open space in terms of genre, but it is also open narratively as the location is one with a diverse population—families, government officials, world dignitaries, etc.—which allows the virus to spread quickly and globally. Interestingly, the government and military are both represented and both seek to contain the invasion. Although the government, mostly represented by the CDC, is vulnerable to infection, the military is

respectfully kept at a distance obeying orders. This reflects the strained attitude toward the Iraq War. Generally, this conflict has caused many to separate those who chose to get involved from those who are assigned to fight. While many disapprove of the conflict itself, there is, in general, respect for the soldiers.

In addition to reflecting attitudes for government and military, there is certainly a reflection of the regained acceptance of medical figures. The main character, Dr. Carol Bennell, is a psychiatrist with a private practice and a single mother. She, with the help of her friends Dr. Driscoll and Dr. Galeano, is able to save her son and find a cure for the alien virus. The pandemic threat of the virus reflects the fear of widespread disease—like swine flu, avian flu, West Nile virus, etc.—yet also demonstrates the optimism toward medicine and cure of disease that is once again prevalent in society. However, the doctor characters are not general practitioners—specialization has almost entirely displaced generalized medicine. Significantly, these doctors are accepted as common members of society. They are not revered for their elite status in the community as doctors, but instead, they are average people trying to survive.

Each of these films demonstrates how the same text is modified by the attitudes of different time periods. They are mirrors on societies whose fears, anxieties, and views of medicine have evolved. Along with these changing attitudes, the sf genre itself has also evolved, and *Body Snatchers* is a representative text of this evolution. However, this study is only one way to approach these topics. There is still much more to explore in the realm of medical representation in film. Particularly in sf film, medical care seems to reflect the humanity of society. Films in which medicine is completely computerized and robotic (such as *THX 1138*) appear to depict worlds that are dystopic and inhuman. Further study in this area could prove to be fruitful. Additionally, *Invasion of the Body Snatchers* itself is a text that continues to be vital



in cinema, and it would be worthwhile to further explore its significance. A close analysis of the structure of each film (such as the use of flashbacks and narration) could be enlightening.

Notably, each version of the film can be associated with a major American conflict—WWII and Siegel's film, the Vietnam War and Kaufman's version, the Gulf War and Ferrara's version, and the Iraq War and Hirschbiegel's latest adaptation. It would be interesting and possibly instructive to explore why this relationship exists—how *Body Snatchers* relates to war and so on. There are still many avenues to explore. As recent history has proven with *The Invasion*, with plague-apocalypse films (and other sf films), and with a continuing trend of medicine-related media (particularly television dramas); *Body Snatchers*, the sf genre, and medicine are indispensable.

## Notes

1. According to Eliza Lo Chin in her overview “Historical Perspective” from *This Side of Doctoring: Reflections from Women in Medicine*, only 5.5% of students entering medical school in 1949 were women, and the percentage did not exceed 10% until the 1970s (5).

2. The AMA reported in 1959 that the over 160,000 physicians working in private practice “were about equally divided between general practice . . . and specialization” (3). Although the numbers are about equal, there were still more general practitioners than specialists in 1959. Data collected in this report show that there were 82,237 generalists and 79,056 specialists (7).

3. In 1977, the AMA reported that there were 146,922 general practitioners (including those working in family practice, dermatology, internal medicine, and pediatrics) and 216,697 specialists (including those in surgical and other specialties) (17). Thus, only about 40.4% of physicians were practicing in general medicine. It is important to note that during the 1970s there was a significant increase in students entering family practice residencies. The number “increased from 15,676 in 1971 to 28,053 in 1976, an increase of 79 percent” (18). This change was due, in part, to efforts trying to correct the generalist/specialist imbalance. Although there was an increase in family practitioners, many did not serve in urban areas (like San Francisco). Most physicians in urban areas were specialists.

4. In 1993, there was still an imbalance between general practice physicians and specialized physicians. The AMA reported that primary care (general) physicians comprised 40.2% of total number of physicians (Randolph 7). Although similar to the percentage in 1977, it reveals that not much changed in spite of efforts to significantly increase the numbers of generalists.

5. Comparing the numbers of physicians of each gender, the AMA reported that in 2006, 27.8% of all physicians are female. This is quite a dramatic increase from 16.9% in 1990 and 11.6% in 1980.

6. Although efforts have continued trying to increase the numbers of general practitioners, the AAMC reported in its 2008 Physician Specialty Data study that of the 623,477 physicians in patient care, only 237,909 (38.2%) serve as primary care physicians (including general practice, family medicine, internal medicine, and pediatrics) (9).

7. The need for salvation through a deus ex machina, even for the medical profession is even more significant considering that the AAMC predicts a shortage of physicians in the near future. In the AAMC Statement on the Physician Workforce of June 2006, it states, “In the 1980s and 1990s, workforce analysts and public policymakers, with few exceptions, predicted the United States would experience a substantial excess of physicians by the beginning of the 21<sup>st</sup> century” (1). However, the report continues, “It is now evident that those predictions were in error . . . Mounting analytical work, as well as anecdotal evidence, suggests that current trends will culminate in a shortage of physicians within the next few decades” (1).

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