

With thanks to Mum for her patience whilst I turned the whole house into a cyanotype studio. To my daughter Lou, for developing amazing painting skills. To Katy for her unending support, understanding, time and acceptance of the mess; you've kept me going though the dark nights alone with nothing but Smurf's.

To Doctor Easton and all of the staff at the Encephalitis society including Pippa & Andrew, for their constant support and life affirming opportunities. Finally to all of the contributors of MRI images to this project; it simply could not have happened without you, I truly hope we make a difference.

Dedicated to Andrew 1992 - 2019

Introduction

This project came to me in a very roundabout way; I began by looking into neurons, the building blocks of the brain, in my opinion the processor for everything I have learnt during my years in creative studies and representations. I started by comparing how visually similar they can appear compared to other items found in nature; trees, road maps and even jellyfish.

As I trawled the available knowledge one thing became clear, currently there isn't enough images of actual neurons to make accurate comparisons, the strongest MRI machines were few and far between, restricting access to source material.

So, I took a step back and in doing so, discovered something quite profound; rather than look for similarities between our inner workings and nature, why not investigate the similarities between each other.

As a 'self-proclaimed ambassador for the mildly brain damaged' after suffering encephalitis myself, I felt it important to show you, the viewer that we are both the same, yet equally, explain to you why at times I may act a little differently.

After experimenting with copies of my own MRI's, I realised that the project could raise awareness of the condition if it contained more than just my own images whilst still holding a self biographical notion; with a little bit of work and an awful lot of help I became inundated with scans from across the world; with all of this information in front of me, the projects message became clear.

Encephalitis does not discriminate.

In front of me were images of individuals who should have been in the prime of their lives, of parents, grandparents and, even sadder, images of babies.

They came from across the world; from the well off, to the poorest of countries, different ages and sexual orientations were affected. I heard stories of recovery and heartbreak, of loss and triumph but more importantly I made connections, much like the brain, my network spanned outward, left and right, up and down across both large and surprisingly small distances.

The network continued as it spun past sufferers and onto to families, medical practitioners and charity staff working tirelessly day after day to maintain and improve this worldwide neural network or survivors.

500,000 people are affected by encephalitis globally each year, yet 78% of the world's population do not know it exists; now you are in the 22% that are aware of this life threatening, life destroying condition.

Welcome to our network and thank you for helping us raise awareness.

Paul Wicks. 2019

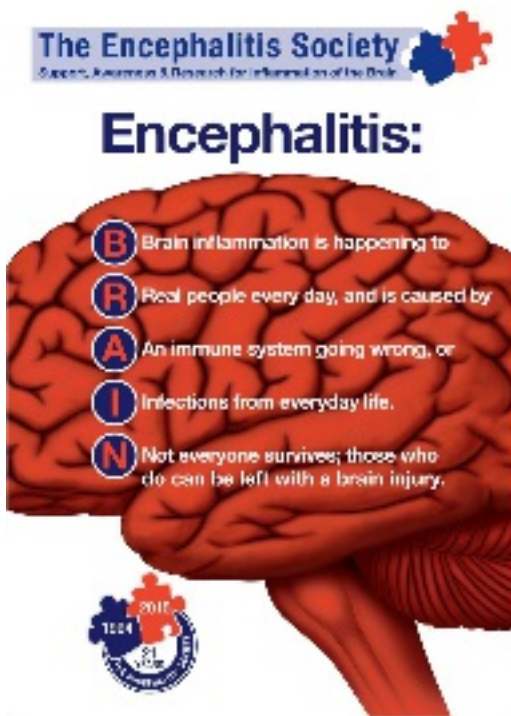
Memory Resonance Images

Paul Wicks 2019

Encephalitis is an inflammation of the brain. It is caused either by an infection invading the brain (infectious encephalitis) or through the immune system attacking the brain in error (post-infectious or autoimmune encephalitis).

Anyone at any age can get encephalitis. There are up to 6,000 cases in the UK each year and potentially hundreds of thousands worldwide. In the USA there were approximately 250,000 patients admitted to hospital with a diagnosis of encephalitis in the last decade.

Nerve cells (neurons) may be damaged or destroyed and this damage is termed acquired brain injury (ABI). No two people affected will have the same outcome. Effects of encephalitis can be long-term.



In children, injury to the parts of the brain that are not developed at the time of the illness can manifest later in life, well after the illness with encephalitis.

Tiredness, recurring headaches, difficulties with memory, concentration, balance, mood swings, aggression, clumsiness, epilepsy, physical problems (weakness down one side of the body, loss of sensations and of control of bodily functions and movement), speech and language problems, reduced speed of thought and reaction, changes in personality and in the ability to function day-to-day, problems with senses and hormones are reported.

The potential impact on social relationships should not be underestimated. Returning to work and school can be difficult, in some cases impossible.

Sufferers of brain damage caused by Encephalitis and similar conditions can find it incredibly difficult to find a space for themselves both socially and within their own 'changed' selves; often feeling isolated and alone, a sense of conflict manifests within daily life and internal thought processes.

For the first time, form and function is used to illustrate hidden disabilities as the viewer sees the reasoning for a sufferer's issues and problems by looking literally into the physiology of a patient affected by brain damage.

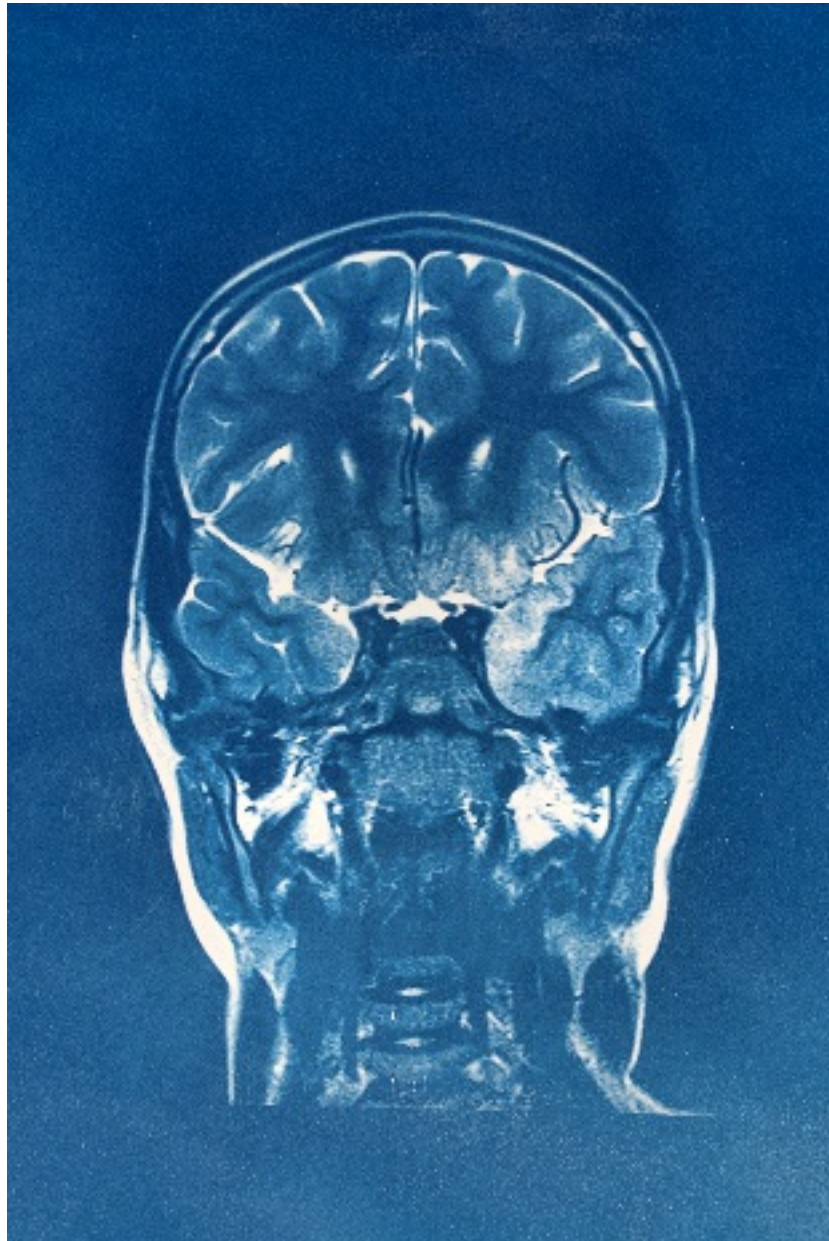
By utilising a scientific process which found a home within creative fields such as cyanotype, to display Magnetic Resonance Images, a direct representation of two scenarios competing for dominance is represented. As the 'old' is used to display the 'new', the process of viewing the collected images becomes similar to a patient before and after illness, creating a juxtaposition as they attempt to find a space within existence.

Further conflict is represented as the schools of science and art parted ways in the 1800's amid fierce and sometimes strong debate, the two forms of image making contained within this project drawing historical representation as, like a sufferer of brain damage, the two ideals have slowly healed, in part, over time.

Following a worldwide appeal supported by major charities, businesses and influencers, this collection of real MRI scans has been supplied by encephalitis survivors and families from across the world, illustrating that encephalitis does not respect borders whether they be gender, sexual orientation, geographical or age. They represent real people; some have made good recoveries, many struggle to this day and, some have sadly passed away; leaving sufferers and families within a void of conflict and grief.

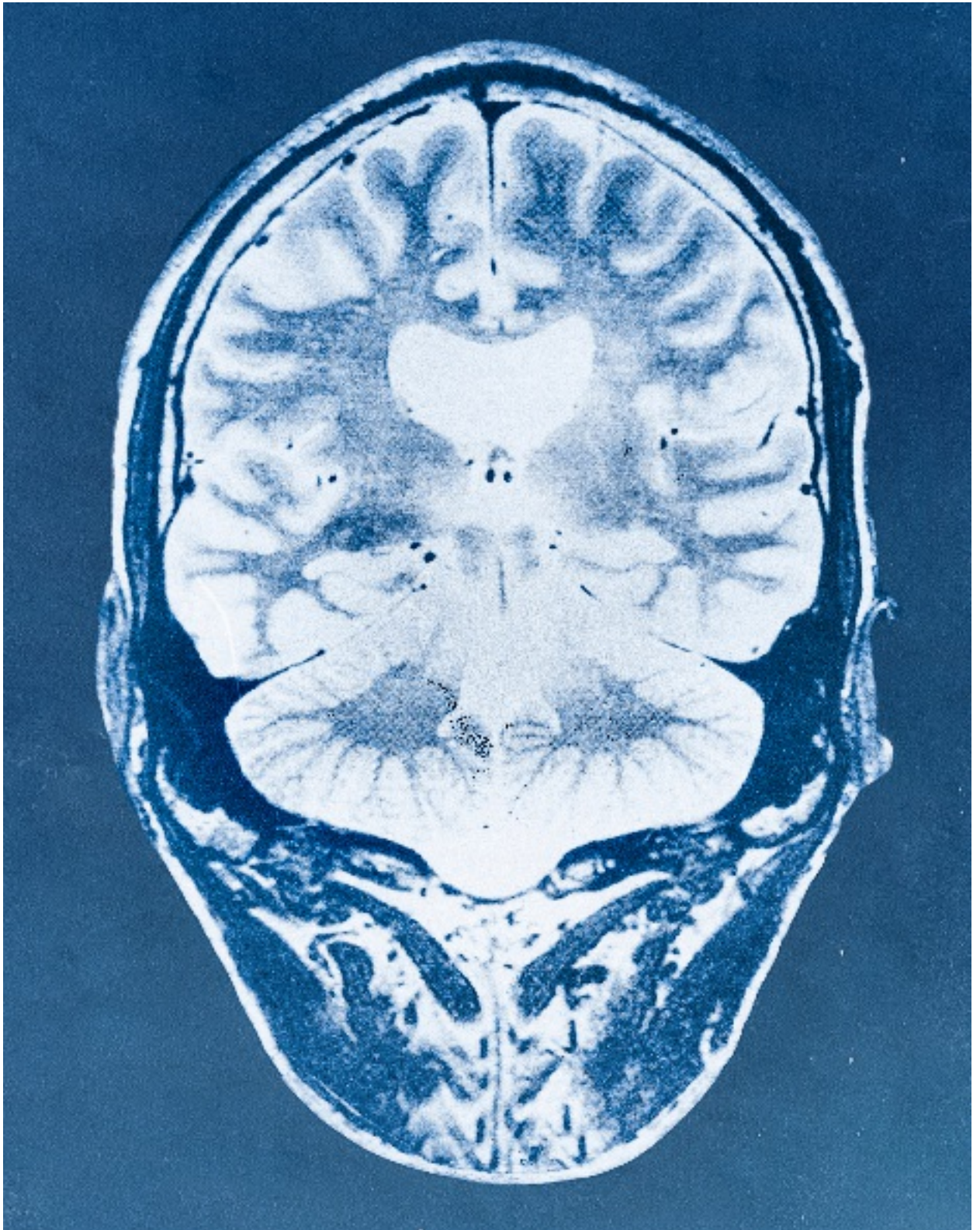
Paul

b.1972 – Diagnosed in 2003 aged 30.
Meningeal Encephalitis.
United Kingdom.

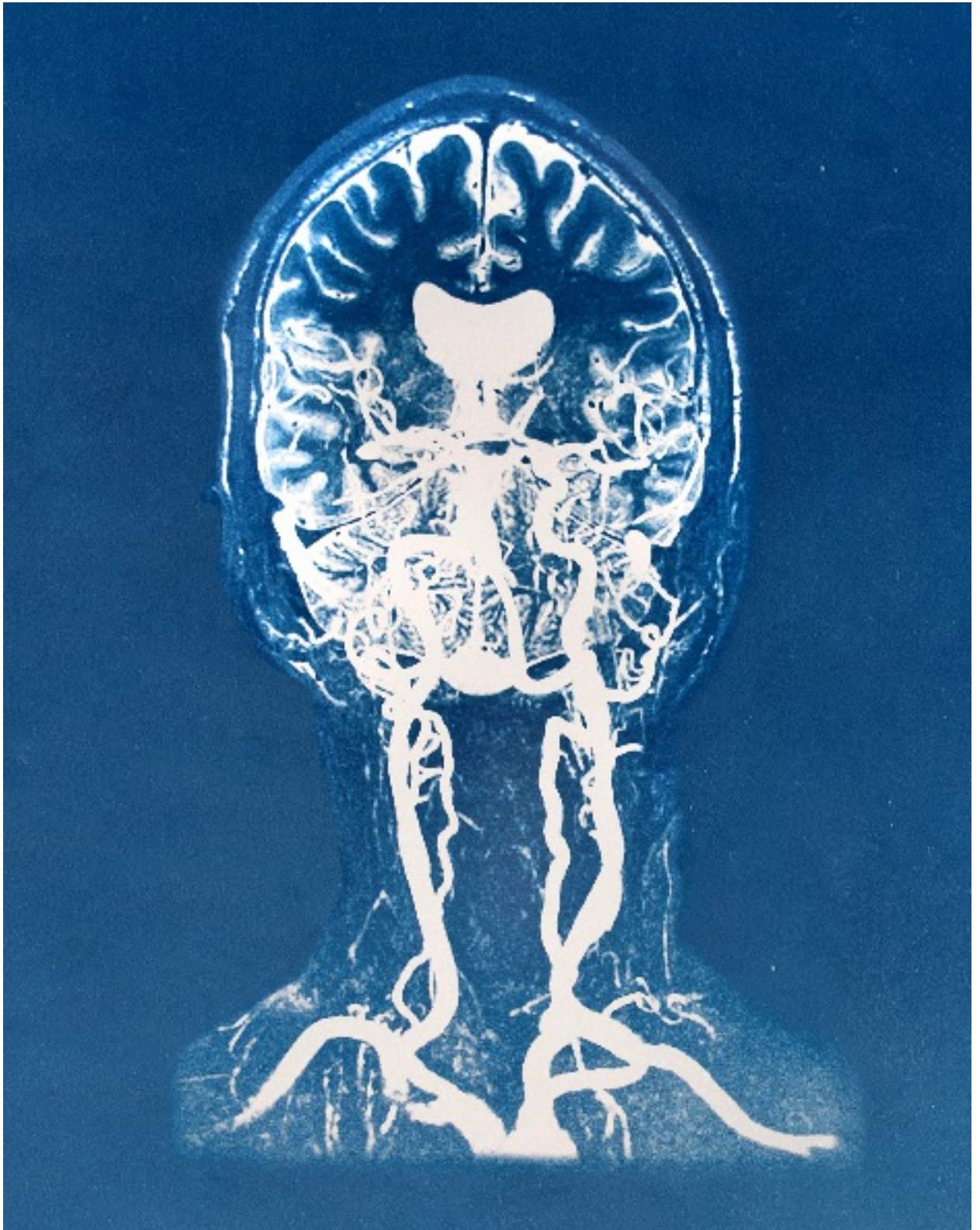


A Mezosi

b. 1992 – Diagnosed 2009 aged 17.
HSV 1 Encephalitis.
Hungary.



D
b. 1990 – Diagnosed 2011 aged 21.
HSV 1 Encephalitis.
USA.
With kind thanks to Cobalt Health



'The patient typically has a fever, headache, and photophobia (excessive sensitivity to light). There may also be general weakness and seizures.

The individual may also experience nuchal rigidity (neck stiffness), which can lead to a misdiagnosis of meningitis. There may be stiffness of the limbs, slow movements, and clumsiness. The patient may also be drowsy and have a cough.

In more serious cases, the person may experience very severe headaches, nausea, vomiting, confusion, disorientation, memory loss, speech problems, hearing problems, hallucinations, as well as seizures and possibly coma. In some cases, the patient can become aggressive.'

Christian Nordqvist
University of Illinois-Chicago, School of Medicine (2017)

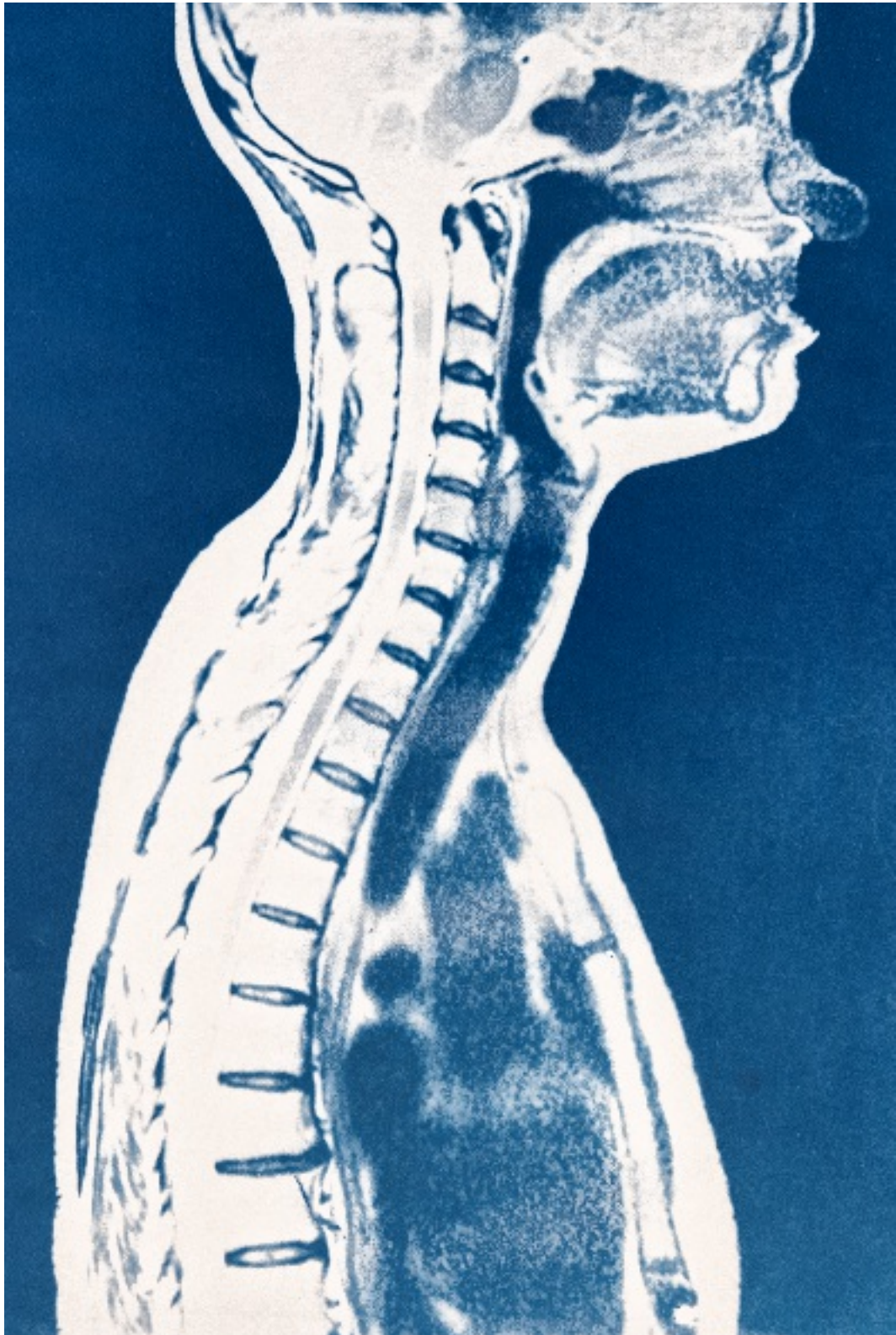
K

b. 1996 – Diagnosed 2011 aged 15.
Viral Encephalitis.
India.



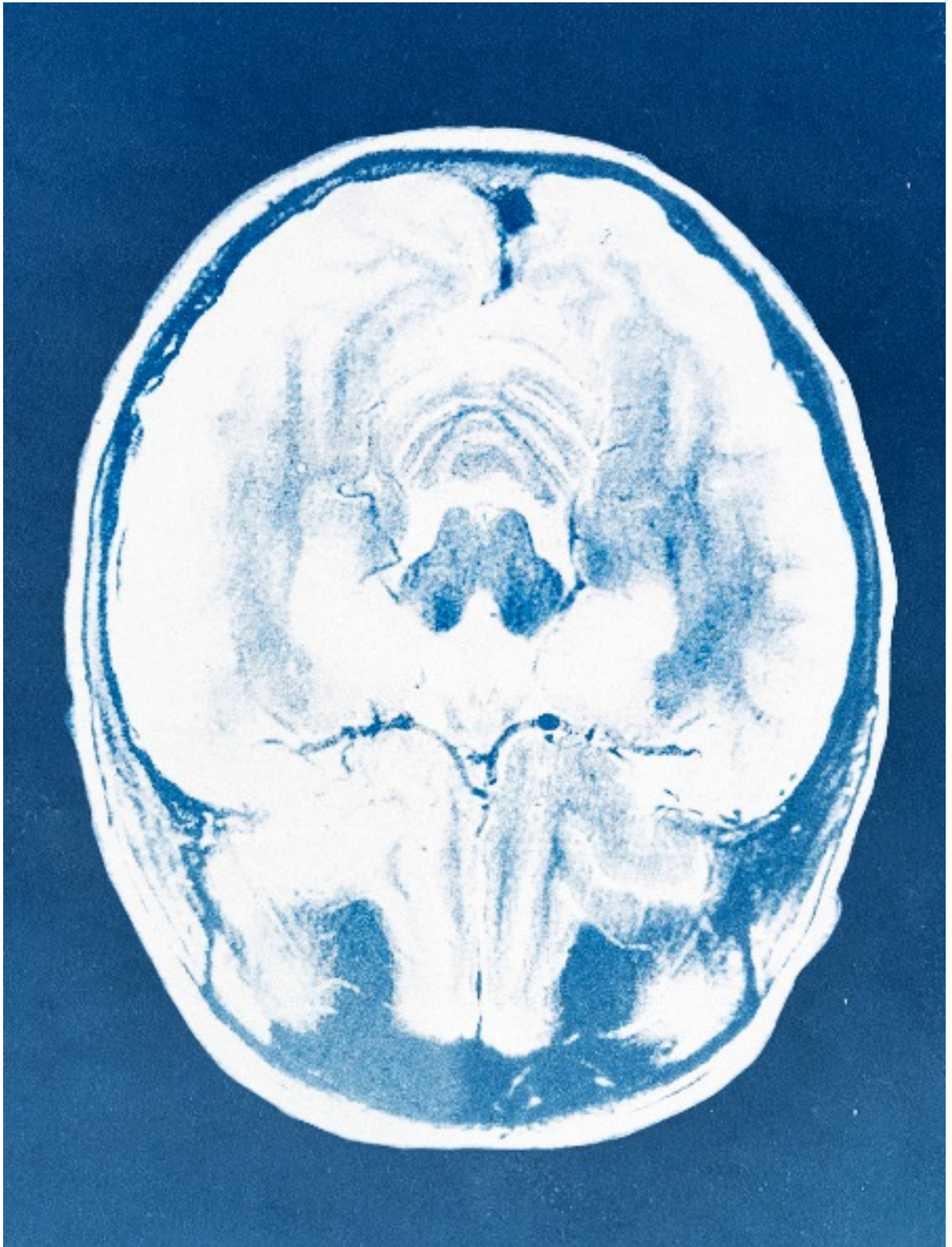
Alessia

b. 1971 – Diagnosed 1999 aged 28.
Japanese Encephalitis.
Italy.



M Kehr

b. 1996 – Diagnosed 2016 aged 20.
Viral Encephalitis.
USA.

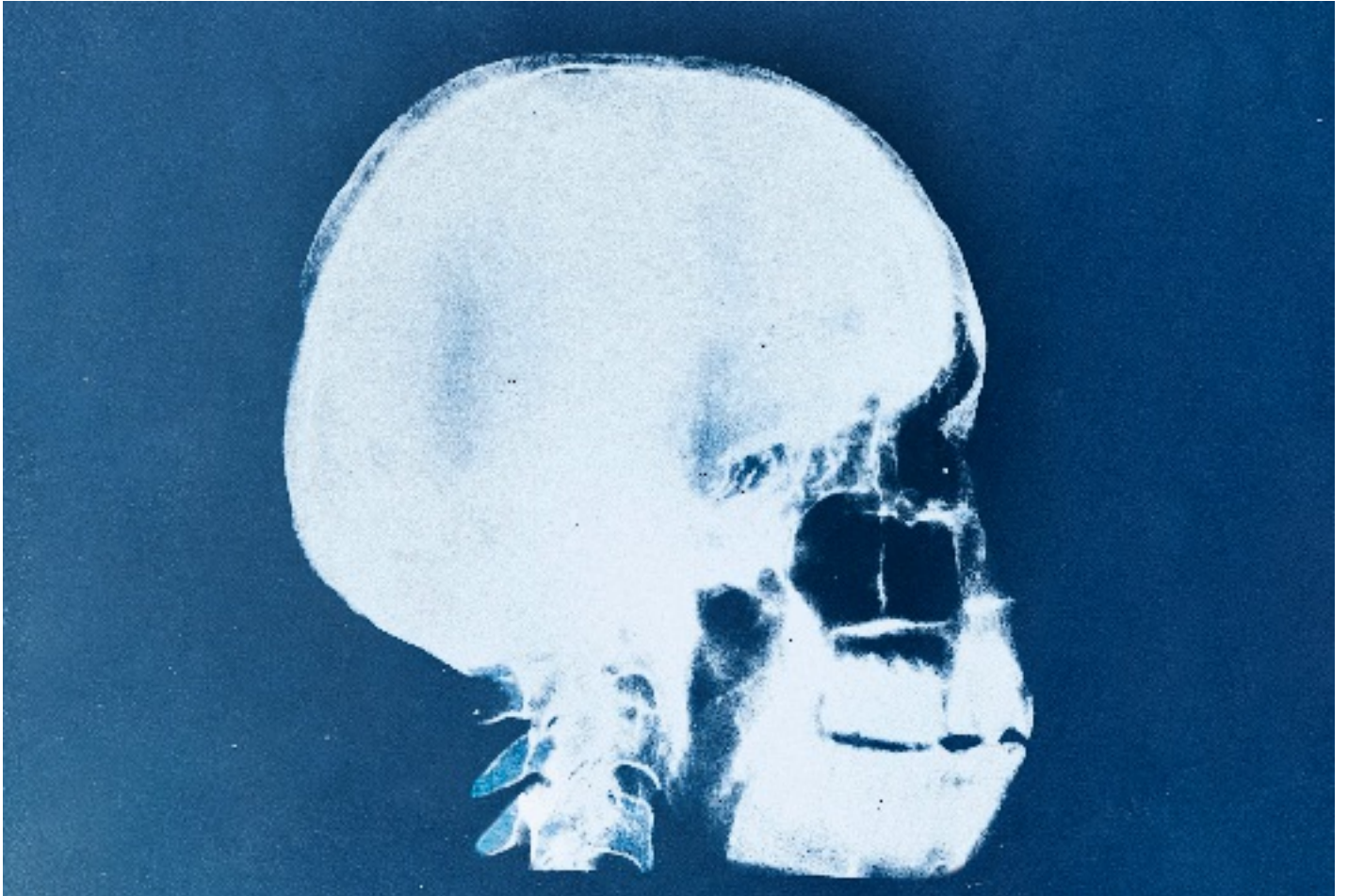


'People with severe encephalitis -- inflammation of the brain -- are much more likely to die if they develop severe swelling in the brain, intractable seizures or low blood platelet counts, regardless of the cause of their illness, according to new Johns Hopkins research'

K. T. Thakur. **Predictors of outcome in acute encephalitis.** *Neurology*, 2013

Mikhail

b. 1969 – Diagnosed 2002 aged 33.
Viral Encephalitis.
Russia.



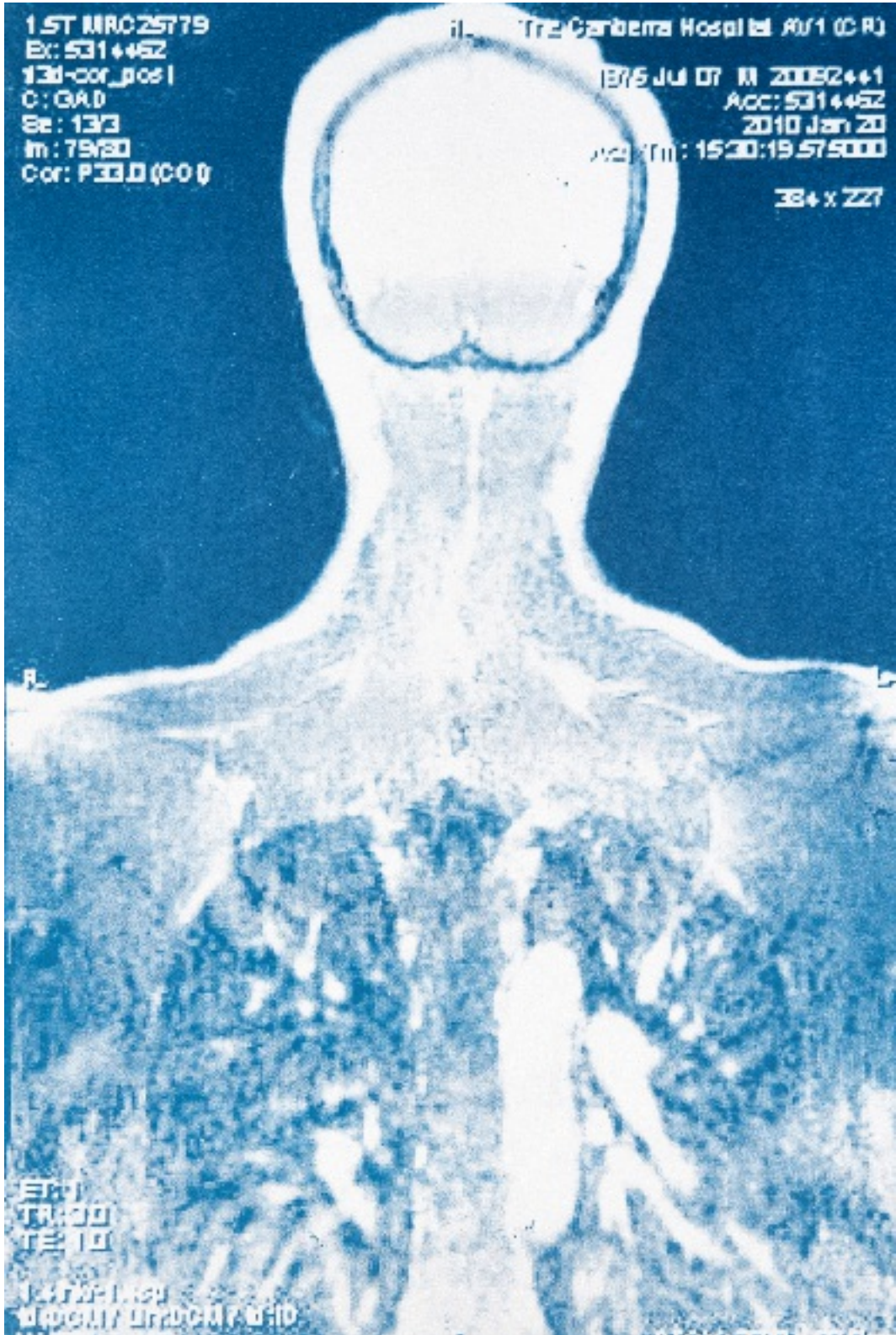
Sota

b. 2008 – Diagnosed 2018 aged 10.
Japanese encephalitis,
Japan



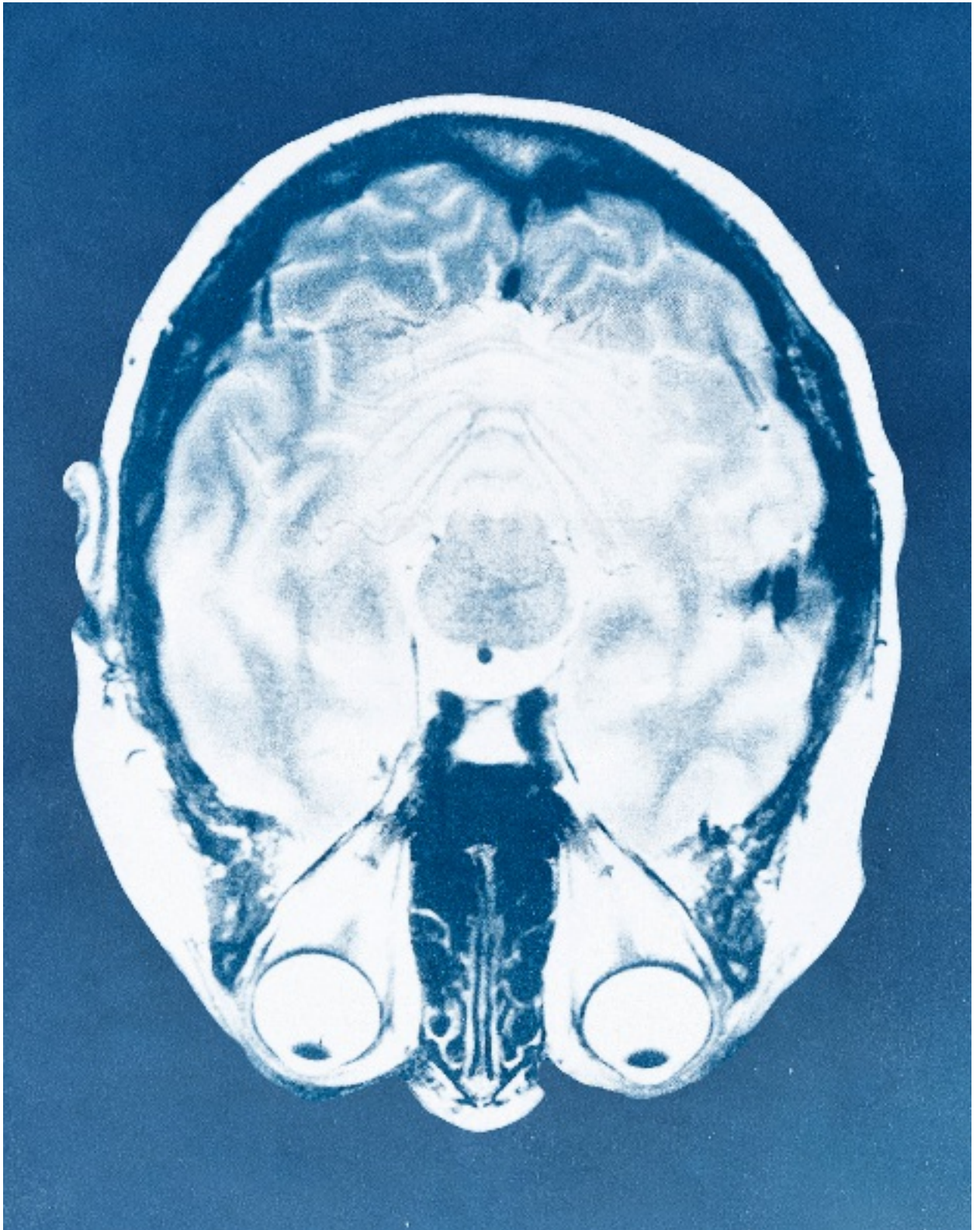
Mat

b. 1975 – Diagnosed 2010 aged 35.
HSV 1 Encephalitis, complicated with expressive
dysphasia.
United Kingdom.



Alejandra

b. 1978 – Diagnosed 2005 aged 27.
Viral Encephalitis.
Spain.



'Recovery from encephalitis may take time. Initial recovery may be rapid but usually falls short of complete. Further recovery takes place more slowly over a period of months, even years.

People are different. No two cases of encephalitis will have an identical outcome and people recover at different paces.'

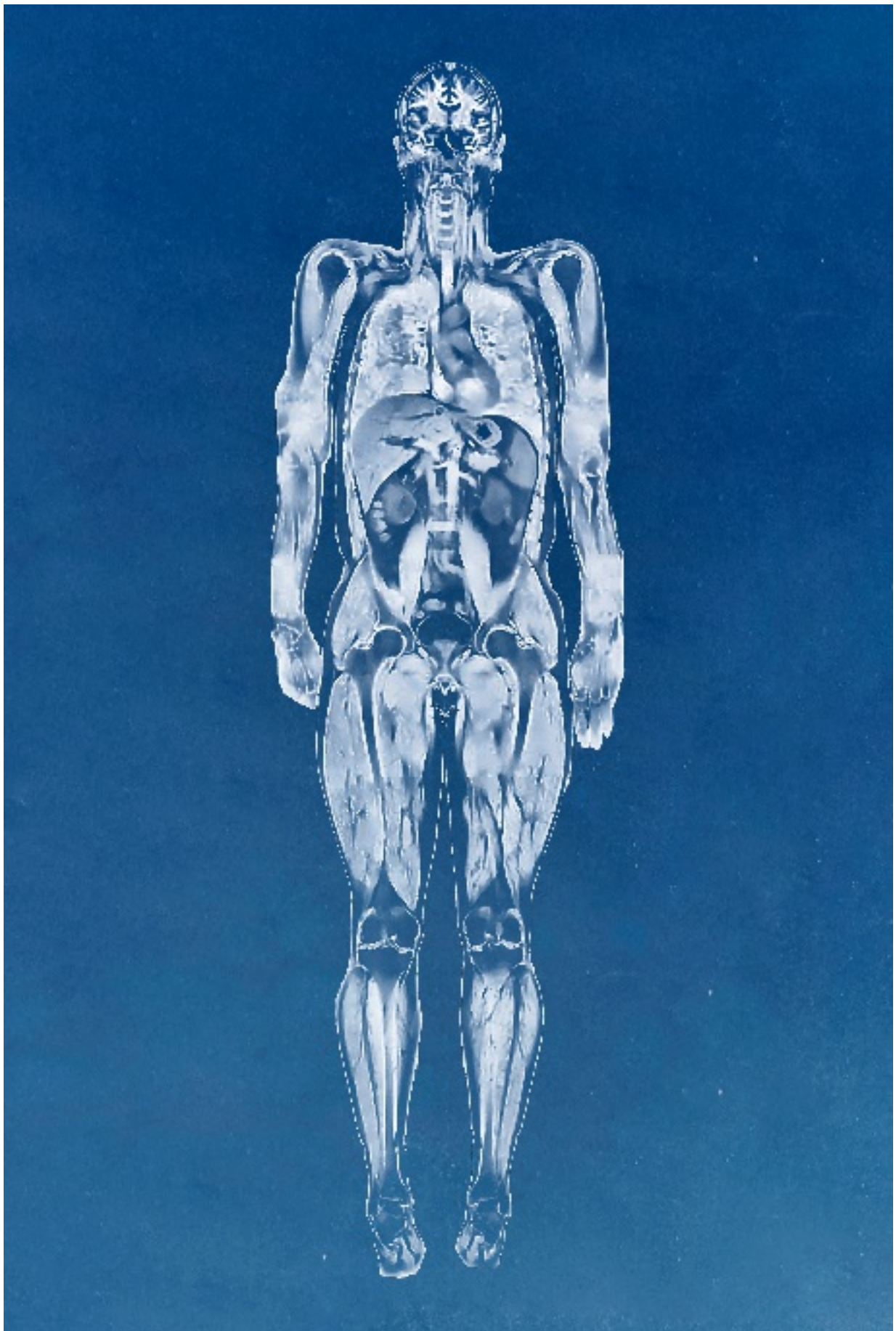
Dr Ava Easton, Encephalitis Society (1998)

Gemma

b.2002 – diagnosed in 2015 aged 13.
Meningeal Encephalitis.

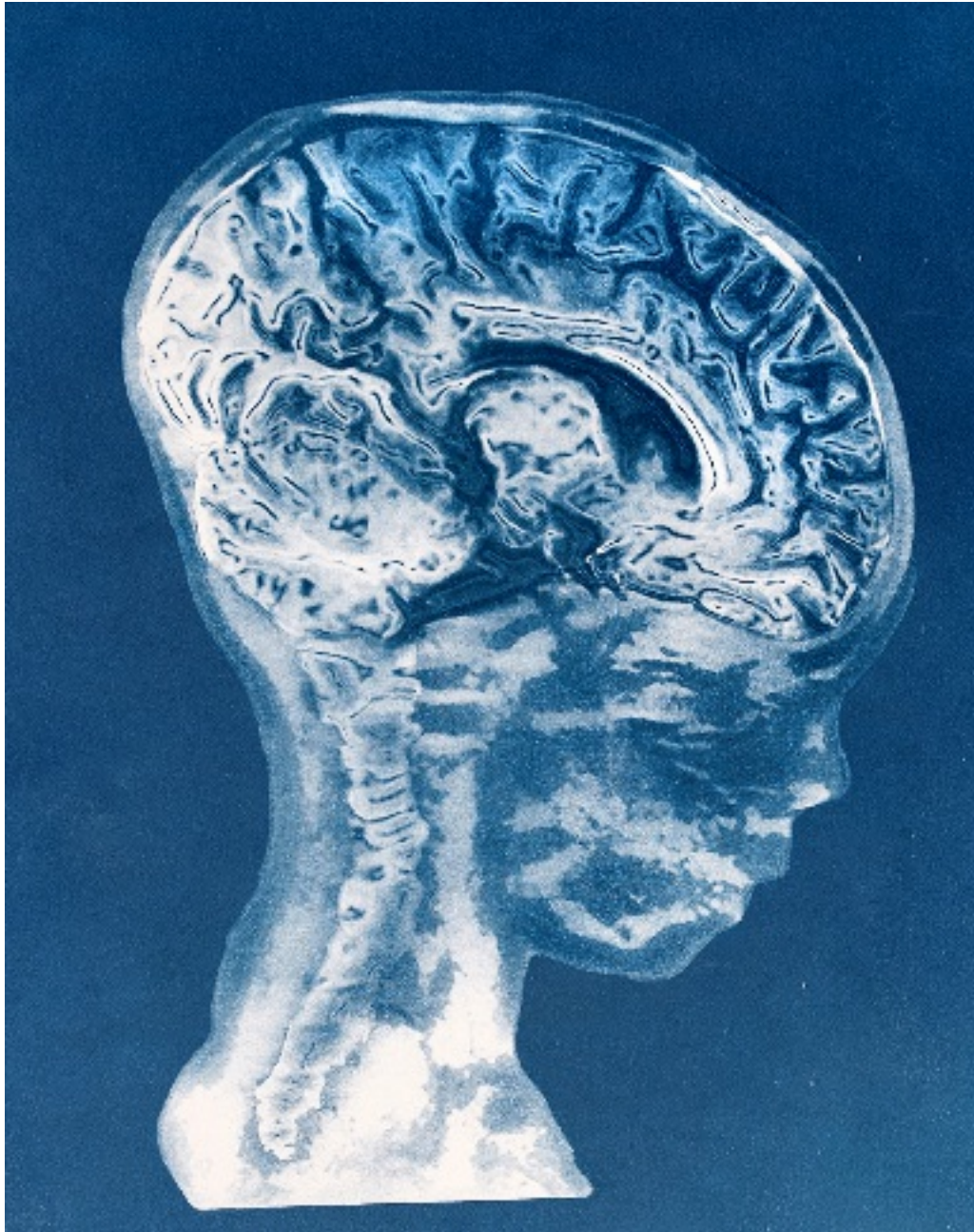
Canada.

With kind thanks to Cobalt Health

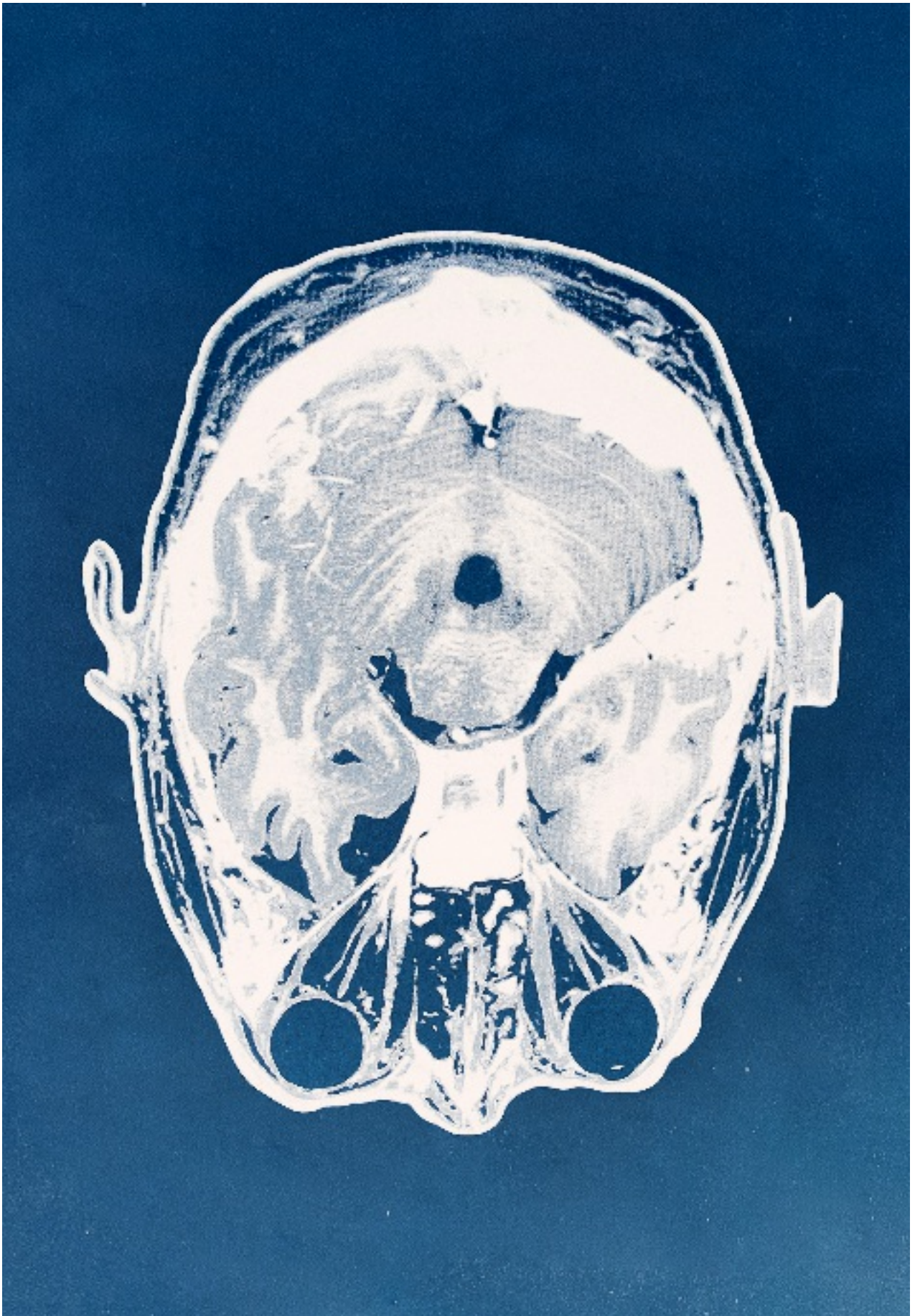


Olivia

b.2010 – Diagnosed 2010 aged 3 months.
Viral Encephalitis.
United Kingdom.



Andrew
b.1992 – Passed away 2019 aged 27.
Rhombencephalitis.
United Kingdom.



Support Groups and Information



The Encephalitis Society

An organisation helping to make the world aware of encephalitis, its consequences and the support available.

It's aim is to improve the quality of life of all people affected directly and indirectly by encephalitis, by providing support and information, raising awareness and promoting and collaborating on research.

www.encephalitis.info



A.N.E. International

A non profit organization focused on raising awareness of Acute Necrotising Encephalopathy.

www.aneinternational.org



Headway UK

To promote understanding of all aspects of brain injury and provide information, support and services to survivors, their families and carers. In addition, Headway will campaign to reduce the incidence of brain injury.

www.headway.org.uk/

Special thanks to Charlotte and the team at Cobalt Health Imaging

