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Face Value: The Rhetoric of Facial Disfigurement in American Film and Popular Culture, 1917-27.

Speaking in October 1919 to the American Association of Military Surgeons, eminent maxillofacial surgeon, Vilray Papin Blair, estimated that 2300 cases of serious face and jaw injury had been inflicted upon still living American soldiers. Of these, 1700 had been cured before returning to the States and the remaining 600 were recovering in centres spread across the country ('Naval Surgeon,' 1919: 17). Strikingly, however, while American plastic surgery developed far more rapidly than in Europe or the rest of the world during the 1920s (Haiken, 2000: 94), First World War patients of plastic surgeons such as Blair remained remarkably silent throughout this period. Indeed, quite unlike the situation in France, where the *gueules cassées* had developed a prominent public status by the mid-twenties, and unlike Germany, where there was a relatively widespread dissemination of images of facial disfigurement, the American media of the period is notable for the absence of these men and their images. In part, of course, this can be explained by the relatively low numbers of such men per capita in the US, but one might also detect an American variant of a "culture of aversion" at work here, a phenomenon which Suzannah Biernoff has described at work in Britain, incorporating the isolation of men with facial injuries from the general public and the "unofficial censorship" of images of their faces (2011: 668).

In the US, this type of prohibition amounted to nothing less than a form of 'visual quarantine' for injured faces, which extended from the patient's arrival at the hospital, through months or years of treatments, to the collection and dissemination of representations of his face. For example, when the Army General Hospital No. 40 maxillofacial unit in St Louis admitted its first group of injured veterans on 7 April 1919, shortly before the arrival of Blair as head surgeon, it promised new standards of seclusion to its patients ('First Patients', 1919: 1; '19 soldiers', 1919: 10). Taking the most serious facial cases from military hospitals across the US, with many transferring from the specialist Hospital of Oral Plastic Surgery at Cape May, New Jersey, the plastic surgery centre at St Louis had been converted from the old Isolation Hospital building. Within it, a series of additional ramps had been constructed within enclosed passages, which served the doubled purpose of preventing patients from falling and also of permitting them to avoid "the embarrassment of appearing before the eyes of the curious by being taken from [their] ward to the operating room in which each stage of the reconstruction work is being accomplished" ('Advanced Surgery' 1919: 3). Though the Army withdrew its support for the hospital only two months after it had opened, the facial patients remained at the Jefferson Barracks on this site, with barely any publicity until they were ready to leave, in some cases, several years later. Meanwhile, the photographs and masks created of each man at the hospital in the course of multiple treatments were duly sent to the Surgeon General's Office in Washington, where they formed part of the private consultation collection at the Army Medical Museum located on the National Mall, Washington DC.

Established in 1862, the Museum had initially served as a public repository for thousands of medical photographs and specimens from the Civil War, including William H. Bell's remarkable 'before and after' portraits of wounded Civil War veterans, many of them amputees or recipients of facial surgery (Rhode, 2006: 78-97; Sheehan, 2011: 59-68). However, by 1919 the Museum had effectively segregated its public displays from the professional medical instruction available to medical men and senior students from Washington's medical schools (Linker 2011b: 324). The *New York Times*

explained that medical “monstrosities” and “human parts” were kept here, but these were not the only artefacts kept from the public:

“There is a section of the building to which the general public is never admitted. There are preserved numerous photographs and models showing the advance in plastic surgery, that process of rebuilding a man’s features that have been shot away. Photographs showing the faces of patients are kept from the public.” (‘Army Museum’, 1926: 5)

Derived from all medical centres that had specialised in facial reconstruction, materials that laid bare the identity of the patients, or that documented the complex surgical processes of rebuilding these identities following facial injury, were debarred from public view. Similarly, the Army Surgeon General’s rehabilitation journal, *Carry On: A Magazine on the Reconstruction of Disabled Soldiers and Sailors*, whose team of photographers had been provided by the Museum, did not include images of facial injury, tending instead to privilege amputees, often depicted undertaking vocational training or sporting activities (Linker, 2011a: 322). As a survey of the full run from June 1918 to July 1919 reveals, even within the text of the articles references to facial disfigurement were kept to a minimum, and usually referred only to the soldier’s achievements on the battlefield, to their newly acquired vocational skills, or to their hopes of returning home (Slack, 1918: 8; Franklin, 1918: 5-6; ‘Getting Down to Cases’, 1918: 28). This situation was quite unlike that in France, where by 1917 the Val-de-Grâce war museum was already proudly displaying the plaster casts and photographs documenting each phase of facial reconstruction, from the young men brought in “with faces mutilated, plowed open, ravaged,” to the moment when “the wounded man now can return to a useful place in society” (Charles, 1917: 513).

However, the US variant of the culture of aversion played rather differently than in Britain across the 1920s, partly because of the relative visibility of public discourses concerning facial rehabilitation which came from publicity-minded plastic surgeons such as Blair, and partly because of the emergence of less positive accounts of the experiences of disfigured veterans in newspapers, popular stories, and elsewhere. In particular, I will argue, these discourses, comprised of a number of archetypal medical, personal, and social narratives, proved fertile territory for the American film industry, giving rise to more democratic forms for visual representation of wartime injury than the photographs and other artefacts secreted away in hospitals and medical archives, albeit in terms that were often complicit with post-war tropes of miraculous facial reconstruction and rehabilitation. Moreover, since the face had always been a privileged object in cinema, even in its first years (Kember, 2009: 159-68) appearing to guarantee an apparently unmediated access to character via expression, especially in close-up, the representation of facial disfigurement onscreen raised troubling questions that were as much formal as social. As Mary Ann Doane has noted, in silent films “it is the face that speaks...and speaks to us (rather than to other characters) so much more eloquently when mute” (2003: 97); but what were the consequences for silent film form, for patterns of character projection and audience identification when the face of the hero could not emote in this way? When such faces could not ‘speak’ so eloquently, or could not enter so easily into the fluid exchange of reciprocating glances that characterised silent American narrative films, how far did they become implicated in an objectifying aesthetics of monstrosity, and how far did they reflect instead upon monstrous modes of vision, offering social commentary on the isolation of face-wounded veterans more generally? This article will address a series of overlooked American commercial films alluding to wartime facial disfigurement, showing that, on occasion, Hollywood

pursued a less hysterical response to these issues than film scholars have suggested. Outside of the horror genre, where star performers such as Lon Chaney specialised in monstrous, enfreaked, disfigured characters (none of whom, however, were openly linked to the War) (Norden, 1994: 84-120; Randell, 2003: 216-221; Randell, 2012: 69-81), several variants of the social problem film probed into the medical, social and sexual ramifications of disfigurement, joining a cycle of veteran films which, according to Michael Hammond, “orbited around a theme of sacrifice, at times incorporating ‘traditional’ reverence, and ‘civilian debt’” (Hammond, 2013: 284). Though none of these were as direct or controversial as Abel Gance’s 1938 remake of his 1919 anti-war film, *J’Accuse*, which famously inserted harrowing images of real disfigured veterans, Hollywood did show a consistent interest in mining popular narratives of wartime disfigurement for emotional triggers of sympathy as well as fear. Moreover, it also responded to a substantial shift in these narratives occasioned between 1924 and 1927, when the *gueules cassées*, led by Colonel Yves Picot, began to generate widespread interest in the US press, confirming that the results of facial reconstruction had not always been miraculous for French or American soldiers. In Robert Florey’s 1927 film, *Face Value*, the *gueules cassées* themselves enter the narrative, where they create a remarkably direct depiction of World War I facial injury and of the attendant social traumas experienced by veterans upon their return home. Though politically active in France rather than the US, the *gueules cassées* nonetheless contributed to a brief, but significant, interval during the mid-twenties when American responses to facial disfigurement were allied with both progressive and critical agendas, both of which were encapsulated by the plot and *mise-en-scène* of Florey’s film.

“Wonders of War Surgery” in the US Press and Commercial Film, 1917-26

Though their faces were visually quarantined under medical authority, disfigured men still found themselves the subjects of very public narratives of miraculous physical transformation. These proved irresistible: for Blair and other plastic surgeons and for the popular press in general, the absence of unsettling facial images enabled an optimistic account of rehabilitation to emerge, leading the veteran from his wounding in the trenches up to the cathartic moment in which “when he appears in public it is with a knowledge and sense of security that his face is not unlike that of others in appearance” (‘Advanced Surgery’, 1919: 3). Indeed, even prior to the establishment of the first reconstruction clinic on home soil, the American popular press was already emphasising the innovations taking place in French and Italian military hospitals during the War (Richards, 1916: 180; ‘Plastic Surgery Cures’, 1919: 9), though the *New York Times*’ magazine, *Current History*, devoted most attention to the “Wonders of War Surgery” undertaken by Gillies and his colleagues in Sidcup, sometimes reprinting items from British newspapers (‘Wonders’, 1917: 905-7; Charles, 1917: 512-15; ‘war Surgery, 1918: 119-25; Begbie, 1918: 125-6). Working in tandem with the broader rehabilitation propaganda explored in detail by Beth Linker (2011b), these articles openly confessed the horror of modern warfare, which could turn a “boy’s face...to a caricature so inconceivably laughable that you gasp and shudder,” but emphasised that upon return “[t]hese new faces are as real as your face, veritable faces, unscarred, lovable, beautiful” (Begbie, 1918: 126).

In the final months of the War and immediate post-War period, other articles focused on the work of Boston sculptress, Anna Coleman Ladd, whose “Masks for the Maimed”, it was claimed, proved so accurate that they were approved as “lifelike” by some of the relatives of the ten American and seventy French soldiers she had reportedly treated in France (‘Masks’, 1918: 3). Perhaps because Ladd’s innovations with facial masks so effectively concealed disfigurements, at least in still images, newspapers tended to provide copious illustrations of her at work with the American Red Cross,

playing up her role in returning the men to their original appearance ('Mending the Men', 1918: 5; 'She patched up', 1919: 2). The remarkable surviving American Red Cross film of Ladd at work makes for more difficult viewing: it presents the men putting on and taking off their masks, laying bare the post-operative deformities they endured and inevitably giving some indication of the awkwardness of everyday prosthetic use; but this film was not distributed for public consumption in American cinemas. Ladd returned to the US in early 1919 to popular acclaim. Meanwhile, the Director of New Jersey's Cape May Hospital of Oral Plastic Surgery, Captain Lee Cohen, outlined several of the modern methods of plastic surgery applied to war veterans under his care to *The Baltimore Sun*. Though he admitted that many of the worst injuries, which could not be treated with surgery, were passed along to the prosthetics department, the field in which Ladd had specialised, the article emphasised that "hundreds of men, disfigured beyond recognition, are being returned to their old lives, cured of unsightly scars as a result of the skill and devotion of Captain Cohen and the surgeons who work with him" ('Their Faces', 1919: 4). Vilray Blair's contributions to this type of discourse would begin a few months later, upon his arrival at St Louis (Blair, 1941: 697-704; RHI, 1953: 224-7; Stelnicki *et al*, 1999: 1990-2009). Unlike conditions in Britain and France, Blair argued, "where we frequently found men hideously disfigured from facial wounds that had not been cured even after two years" American plastic surgery would provide new faces for all: "We have not had any face or jaw injuries among the American forces that cannot ultimately be completely repaired" ('Naval Surgeon,' 1919: 17). By April 1922, according to the *St Louis Post-Dispatch*, Blair appeared to have been true to his word: of the 163 maxillofacial military cases that had been admitted to St Louis by June 1919, all but six had "gone out, with remade faces, to work and to vocational training schools," though, it was tellingly admitted, "some of them became discouraged at the long hard grind and gave up before medical science could complete its work" ('Strangely Cheerful Colony', 1922: 3). The article is remarkable for giving the names of the final six men on the ward, who had largely been protected from such intrusions until now, and also for its verbal portraits of this "strangely cheerful colony," whose "indomitable spirit" and desire to return to working life were the subject of strong praise.

Blair would remain a vocal proponent of American plastic surgery for decades to come and, along with a number of other military surgeons, would be instrumental in legitimising the specialty during the 1920s (Haiken, 1997: 55-9). However, popular cultural variants of this type of plastic surgery miracle trope were already well known to the US public in 1919. Perhaps best known among these was the story of Guy Arthur Empey, an American soldier who had joined the Royal Fusiliers in Europe during May 1915, immediately following the sinking of the *Lusitania*, but whose injuries in July 1916 led to his medical discharge and return home, where he would become a significant component of the US propaganda effort during 1917 and 1918. His wounds included a bullet to the face, which had crushed the bones of his left cheek, the treatment for which he outlined in the final chapters of his 1917 account of life with the British in the trenches, *Over the Top*. The book presented an American view of the medical treatments available to British soldiers, from a fascinating account of the field hospital in which "nearly all had a grin on their faces, except those who didn't have enough face left to grin with" (264), to his transfer to surgical units in Britain. Arriving initially at the American Women's War Hospital in Paignton, Empey emphasised the easy camaraderie that existed among the men and their adventures attempting to meet local girls, though after treatment for bullet wounds in other parts of his body, his facial injury would keep him in Britain for the next four months:

“The wound in my face had almost healed and I was a horrible-looking sight—the left cheek twisted into a knot, the eye pulled down, and my mouth pointing in a north by northwest direction. I was very down-hearted and could imagine myself during the rest of my life being shunned by all on account of the repulsive scar.” (277)

Following the recommendation of a fellow American, Harold M. Frost, the chief surgeon at Paignton, Empey was transferred to the Cambridge Military Hospital at Aldershot, for treatment by Gillies’ team to “make the scar presentable” (277). However, perhaps because the injuries he received appear to have been relatively minor (**Figure 1**), at least compared to many of the other cases dealt with at Aldershot, Empey reported that “the face specialist did nothing for me except to look at the wound” (277), and he chose to transfer himself back to Paignton, where Frost operated on the scar with great success. As soon as he was able, Empey returned home, where he set about reinforcing the American war effort on the home front.

Empey’s book quickly became a bestseller in the US and was serialised by several newspapers, lending support to its highly sympathetic account of British soldiers and the “fun and comradeship of the trenches” (280) and playing a direct role in preparing the public for the recruitment effort. Exploiting the book’s success, Empey also conducted a successful lecture tour (‘Empey Thrills’, 1917: 6), where he was able to present the jagged red scar on his cheek directly to American audiences, while confirming, as the *Louisville Courier Journal* put it, that “one thinks of it far less as a disfigurement than as evidence of some wonderful surgery” (“Don’ts”, from the Author’, 1917: 1), an especially significant insight, since a proportion of the tour’s profits were donated to the Red Cross. He also wrote and starred in the 1918 adaptation of *Over the Top* (Wilfrid North) for Vitagraph Pictures. Although he played a character called James Owen, the film initially followed Empey’s own story closely, depicting Owen’s recruitment to the British fighting forces, his wounding, and even his return to the US to boost the recruitment effort (‘Sergt. Empey’, 1918: 7). However, the film was “devoid of the horrors which have sickened the hearts of all civilized beings,” and its second half was more concerned with a wholly fictional espionage plot, in which Owen was called upon to rescue a wealthy society girl from the clutches of a German spy working undercover at the Washington Insurance Company (‘Sergeant Guy Empey’, 1918: 14). Effectively playing on fears of the ‘menace at home’, and downplaying the significance of Empey/Owen’s injury, even the film’s publicity described it as “splendid war propaganda”, with some theatres opening recruiting offices in their lobbies, and Empey subsequently establishing the Guy Empey Pictures Corporation in 1919 to produce more of his own patriotically-themed movies (‘Over the Top with Empey’, 1918: 3179). Significantly, within his publicity shots during the period, signs of facial scarring are barely visible or altogether missing (**Figure 2**), with one report from 1923 confirming that he had continued to receive plastic surgery to conceal his wound more effectively (Schallert, 1923: 11).

The connection between Hollywood stars and plastic surgery would persist in fan magazines and newspapers throughout the 1920s and beyond, emerging as a significant theme within the movies, too. But Empey’s story is certainly unique in charting a direct progression from an actual facial injury received during heroic military action to a period of stardom which lasted through the early 1920s; one journalist even declared that he had “a smile almost as contagious as that of “Doug” Fairbanks’ (‘Guy Empey Picture’, 1920: 19). More often, such narratives of miraculous post-war transformation were enacted by male leads who already possessed the classical good looks Hollywood tended to prefer. For example, “feminine admirers” of 1920s leading man, Milton Sills, were advised by the

Detroit Free Press that they “have a shock in store for them in the early scenes in his latest picture, *Skin Deep*,” for the actor’s face had been made “as repulsive as lies within the power of movie make up” (Marcotte, 1922: 19).¹ Reportedly based on the life of New York gangster, ‘Monk’ Eastman (*Skin Deep Discovers*, 1922: 7), the movie presented the novel story of Bud Doyle, a crook whose face was so marked by his crimes that, even though he had been morally transformed by his gallant service during the War, he still found himself unable to return to a law-abiding civilian life. Following a dramatic fall from a plane however, in which his already ugly face is horribly disfigured, Doyle is taken to the private hospital of philanthropist-surgeon, Dr Langdon, where a new and beautiful face – Sills’ own, of course – is created for the veteran by the “miracle of plastic surgery,” permitting an extraordinary “rehabilitation of this uncouth hero, face, heart and destiny” (Rankin, 1922: 7). Drawing upon still-current aspects of Lombroso’s criminology, which suggested that criminals could be identified by regressive physical attributes, especially of the face, the film confirmed that facial appearance and character were directly connected, but postulated that since this was the case, plastic surgery might provide a medical cure for monstrous morality, too.

Alongside this ethical transformation, however, *Skin Deep* (Lambert Hillyer, 1922) also addressed serious moral and political issues that had occupied rehabilitation authorities since the War, even though it did not deal directly with injuries inflicted during battle. Such issues were typified by the difficulties facially injured veterans experienced in securing jobs upon their return home. A few months before *Skin Deep* opened, for example, the Veteran’s Bureau had launched its employment agency on the behalf of disabled men who had completed their vocational training, but advised potential employers that they had trained the right men for the right jobs: “[a] man who was so badly injured about the face that he is at a disadvantage in meeting people is not trained to be a travelling salesman” (*Trained Men*, 1922: 4). A year later, the *Chicago Daily Tribune* told the pathetic story of John J Mikos, whose face had been mutilated by both bullets and shrapnel, but for whom plastic surgery had “failed.” (*Chicago Honors Flag*, 1923: 5). Following several years of training as an accountant with the Veteran’s Bureau, John found that “[m]en with one arm, one leg and all sorts of wounds except disfigured faces were selected before him,” and that even once he had secured jobs by letter, excuses were made upon his appearance at the office. Bud Doyle’s plight in *Skin Deep* echoed such hard luck stories, because it showed that the connection between ugliness and criminal activity was the consequence of social prejudice as well as biology, and that veterans required public support – or miraculous surgery – in order to make good after the war. Recognising this message, several theatres opted to show the film on Armistice Day sometimes in order to bolster fundraising efforts, where it was intended to highlight “the ingratitude of the nation” towards its disabled heroes, a tie-in legitimised by the endorsement of the American Legion (*Strand Offers*, 1922: 8). Fascinatingly, the Mary Anderson Theatre in St Louis also put on a special screening of the film as part of its Armistice week programme, inviting former servicemen of Jefferson Post, where Vilray Blair’s colony of facial patients was based, as honour guests. I have not been able to find an account of this screening, but the Post Commander, Blakey Helm, was clear about the film’s significance: “*Skin Deep* shows clearly,” he announced, “the problems confronting the former soldier in attempting to adjust himself to civil life after serving in the war” (*Clothing to Aid*, 1922: 5).

¹ For an account of the painstaking application of make-up in this picture, see ‘Movie Facts and Fancies,’ *Boston Daily Globe* (25 Nov 1922), p. 12.

The complete remodelling of the human face which plastic surgery appeared to promise during the 1920s proved a compelling trope in Hollywood, with the success of *Skin Deep* inaugurating a series of similarly themed, altered-identity films, though these were rarely tied so directly to bodies such as American Legion, nor to fundraising efforts on their behalf.² Among these, more conventional variants of the social problem film tended to emphasise the consequences of wartime facial trauma upon personal identity, family and sexual relationships rather than economic independence, though these issues were inevitably intertwined by Hollywood romance narratives. In both *Back to Life* (Whitman Bennett, 1925) and *Gigolo* (William K. Howard, 1926), plastic surgery creates faces that are not only cosmetically perfect, but completely different from those that had been dispatched to Europe, with dramatic consequences for the sweethearts left behind. Such films reflected upon surgical wonders which promised to “give back to a man a human face, even if it is no longer his face,” and upon the anxieties reportedly voiced by disfigured soldiers upon their return home: “‘What will she do when she sees me? Will she recognise me?’... ‘Am I going to lose her? Will my face make a difference?’” (Julian, 1919: 7). However, the restoration of perfect facial symmetry in these films – which so many real veterans did not experience – ultimately occasions the restoration of the domestic order too. Based on the 1920 novel, *Back from the Dead* by Andrew Soutar, the unlikely action of *Back to Life* begins in a German prison camp, in which disfigured American soldier, John Lothbury, presumed dead in France, is given a brand new face. His return home sets in motion a more conventional plot, in which John must win back his wife, though she does not recognise him and has since married a wealthy, but dissipated admirer. Press notices for the film reassured exhibitors that the “remodelling of a human face” had been made “wholly plausible” by a number of similar cases that had been reported and that “the modern vogue of plastic surgery lends itself to free newspaper publicity,” clarifying that its appeal to the public rested primarily on this novelty (*‘Back to Life a Pleasing Picture’*, 1925: 38).

Films such as this capitalised upon a nexus of narratives centred upon notions of identity, masking, and disguise with an ancient western lineage, but the permanent transformations implied by modern plastic surgery added a new fillip: far from seeking to deceive others or escape from a former identity, the chief task of the reconstructed veteran was to reconstruct his previous life, in spite of the obstacles presented by his new, alien mask-face. Put differently, the question here was not one of stigma, or spoiled identity, but of successfully re-inhabiting a previously held and authentic model of personal identity. In *Gigolo*, a film based on Edna Ferber’s sensational 1922 novel, this type of recuperation from false identities assumed in Europe also became part of a reassertion of authentic national identity, and especially of the type of muscular, male American identity also championed by Empey, Fairbanks, and other stars (Addison, 2003: 103-7). Covering an eventful ten year period of the hero Gideon Gory’s young life, the film opens in small town America with Gory pursuing his sweetheart, but his European-complexed mother remarries a corrupt English doctor and the family resettle in Paris, where her money is frittered away. Meanwhile, Gory joins the French flying corps, where, following a crash, his face is rebuilt so effectively that he is able to begin a life of unproductive Parisian decadence as a night club gigolo. Publicity for the film emphasised the “grease paint surgery” that Rod La Rocque had displayed during the second half of the film, which did little to harm his good looks though it openly signalled the character’s new, lounge-lizard persona (**Figure 3**); reviews emphasised the quality of the character study following the surgery, in

² The American Film Institute Catalogue lists a series of sixteen movies with plastic surgery themes between 1922 and 1930.

which Gideon's "manhood is submerged almost completely" ('Film Reviews', 1926: 21). But the character's real transformation and 'rescue' can only occur following a chance meeting in a Parisian café with his long-lost American sweetheart, which "results in the assertion of Gory's inherent manhood" and a triumphant return to his hometown to work in his family's steel mill, a remade masculine model of economic productivity and sexual normativity ('Film Reviews', 1926: 21).

Though it shared with films such as *Skin Deep* and *Back to Life* the recurrent concern with questions of lost and regained social and sexual identity, *Gigolo* also differed from them in its equation of American life with a specifically American-made face, and carried interesting implications for men who had been remade, physically and psychologically, in France. The predominant question here was not 'Will she know me?' but 'How shall I be known?' suggesting that disfigured war veterans, with the help of their family and loved ones, needed to take primary responsibility for remaking themselves in an American mould. That question was sharpened, of course, when the remade face failed to live up to the miracles that plastic surgery had promised.

The "Port of Missing Men": Robert Florey and the *Gueules Cassées* in America, 1924-27

The principle of personal responsibility in the national interest, which *Gigolo* so strongly reinforced, was fully complicit with the rehabilitation propaganda circulated by the Army Medical Department and Veterans' Bureau from the beginning, and had been dominant since at least the time of Empey's wartime appeal to the nation (Linker, 2011b). However, this type of narrative became increasingly problematic during the 1920s when hard luck stories like that of John J Mikos began to emerge, and especially whenever the visual quarantine on facial injuries and facially disfigured men was compromised, as indeed it was whenever such men sought to re-enter public life. Occasional notices in the press explored the darker consequences of these encounters, especially when wives and families confronted the returning men for the first time. Such highly personal and mundane incidents are difficult to trace, but some indication of their potential uneasiness is given by occasional notices of the court proceedings that followed more extreme reactions. *The Atlanta Constitution* recounted the story of E.M.Nash, who returned to civilian life with a disfigured face in July 1919, but whose wife left him after several days, stating that "he was too ugly to look at" ('Disfigured in War', 1920: 3). In Nebraska, a similar case was reported of Roy Yates, whose wife Frances remarried while he was in Europe, believing he was dead; upon Roy's return, "much alive, although disfigured," Frances moved away and left him a note: "Roy, the war ruined your looks" ('Two Husbands Deserted', 1921: 1). In March 1923, Samuel Levin, who was shell-shocked, had lost an eye and whose face was "sadly disfigured" during the War had his own brother, Louis, arrested for "mocking the veteran and threatening him because of his disfigurements" ('Accused of Mocking', 1923: 1). Such sad stories are indicative of the everyday personal and social problems encountered by those with irreparable facial disfigurements.

However, more prominent than stories of this type were reported incidents in which the disfigured husband had simply disappeared, either in Europe or following a traumatic return home. Sometimes these stories appeared in personal or family columns, such as the 'Love Letters' section of the *Chicago Daily Tribune*, which in January 1922 published a letter from an abandoned woman, whose fiancé had refused to hold her to their engagement due to his serious disfigurement ('Olivette', 1922: 3). More regular and prominent than such stories, however, were the 'Port of Missing Men' lists issued occasionally by the American Legion from 1919, which included the names and physical descriptions of lost veterans, including their prominent scars, and which were republished widely in

US newspapers ('The Port', 1924: 3). These became more conspicuous following the introduction of the World War Adjusted Compensation Act in May 1924, when families wishing to claim for missing, rather than dead or wounded, husbands found themselves unable to do so, since, as *The Austin Statesman* candidly put it, "broken and crushed spirits are not compensative":

Take just one case that comes to mind. In the bellicose days of 1917 a young girl said goodbye and gave a promise of faithfulness to a handsome boy. The ensuing events were not uncommon: France, St Mihiel, a piece of whining shrapnel, a mangled clot of blood and tissue; then the return home with all that was left of the pleasing features smashed and horrible and not less horrible when pieced together by the clumsy hands of man. The girl had been faithful. Then the meeting, and the soldier's twisted visage that contorted into a hideous leering grimace when it had meant to smile the tenderness in the boy's heart; then the girl's involuntary revulsion from that loathsome thing. The man noted the horror reflected in the girl's eyes—and the averted face. He hastily mumbled goodbye as he stumbled through the garden. The boy has never returned ('Thousands of Hidden', 1924: 6).

Such traumatic experiences of confronting family and sweethearts for the first time following facial injury closely resembles the scenes played out in French hospitals, as described so movingly by Sophie Delaporte (1996: 153-8), and also Biernoff's discussion of similar stories in the British press (2014: 42). In such cases, the trope of 'missing men' tended to play against stories of miraculous rehabilitation: the returning men were unrecognisable not because their faces had been remade, but because they had been irrevocably unmade; their wives' and families' patriotic responsibilities lay not only in the moral recuperation of loved ones, as in *Gigolo*, but also in responding appropriately, without obvious revulsion, to them, then recommencing with conventional social and sexual relationships.

French emigré filmmaker Robert Florey's 1927 film, *Face Value*, is unique in bringing such harrowing scenes of recognition directly to the American screen (Taves, 1987: 78-9; Taves, 1995: 106-8). In the film, minor leading man, Gene Gowing, plays Howard Crandall, a wealthy, facially-disfigured American veteran, who, several years after the War, reluctantly returns home from Paris, where he has for some time supported a group of his comrades in the *Gueules Cassées*. Upon arrival, he must confront his father and his fiancée, Muriel, who have not been told of his injury. Though she has been faithful, he decides to release her from the engagement, convincing her that he has a new girl in France and fleeing back to Paris and the companionship of his disfigured friends, thus becoming one of America's missing men. Once there, though, he is surprised by Muriel, who has learned of his self-sacrifice, and follows him, renewing their engagement and remaining the model of a good and loyal American woman. The film's traumatic scene of recognition takes place upon Crandall's return to the family home, where his father and fiancée are eagerly waiting, but in both cases the moment is deftly delayed across a series of shots. The father's vision is clouded by tears of joy before he sees the extent of his son's injuries, an effect accomplished by gradually bringing the camera into sharp focus (**Figures 4 and 5**). Muriel's eyes are closed in expectant ecstasy, and when she opens them the ensuing point of view shots survey Crandall's face in extreme close up, tracking slowly down from the relatively unscarred forehead and eyes to the disfigured area around the jaw, at which point she involuntarily gasps in revulsion. The audience has already seen Crandall's face in repeated close-ups, so Florey is not here presenting to us a sensationalised 'reveal' of the kind that Lon Chaney had

employed in *Phantom of the Opera* (Rupert Julian, 1925) and other horror films. Rather, the spectacle at work displays the agonised scene of recognition in itself, in which it is the reactions of the father and sweetheart that are prominently on display and we, as viewers, are obliged to experience the moment of unveiling with them, through the camera's point of view.

This strategy of examining reactions to Crandall's face rather than provoking affective audience responses to mutilation also depended, to some extent, on the relatively inconspicuous nature of the facial scar that had been created by the make-up department. As in the real case of Guy Empey, it is significant that Crandall's face, and those of the *gueules cassées* that the film also presents us with, do not seem badly scarred and some do not appear to be damaged at all. However, in its unflinching visual depiction of a traumatic recognition scene like those the popular press had been recounting in the US and across Europe for a full decade, *Face Value* compellingly reiterated discourses concerning American families split apart by disfigurements inflicted in France, ultimately placing emphasis upon the need for social acceptance. This message could easily be mapped onto the progressive agenda of national bodies such as the American Legion, which had already been a strong feature of the publicity of films such as *Skin Deep*; however, *Face Value's* principal frame of reference drew still more extensively upon a different form of French incursion.

From 1924, the American press had begun reporting on the activities of the *gueules cassées* in France – though the French term was translated with varying degrees of accuracy and sympathy across different publications as 'broken faces', 'smashed faces', 'broken jaws', 'broken jowls', 'cracked faces', 'broken mugs', 'smashed mugs', or 'twisted mugs'. Arguably, this public interest in the US was generated by a fascination with such a large group of disfigured men (the *New York Times* cited the official figure of 8,588 French men with disfigured faces ['700,000 World War Disabled', 1927: 21]) who, far from hiding themselves away, "are possibly the only men in the world who take pride in their ugliness, the only men to whom ugliness is a mark of the greater respect" ('War Shattered Faces', 1924: 2). During 1926 and 1927, though, they became especially prominent, partly because of the controversy over the 1926 Mellon-Bérenger debt agreement for settlement with the United States, which occasioned a 12,000 strong anti-American march of French ex-servicemen prominently featuring the *gueules cassées*, an incident that prompted a diplomatic exchange led by their President, Colonel Yves Picot ('French Display,' 1926: 9; 'Will Reassure Legionnaires', 1926: 5; 'To Put Palm on Tomb', 1926: 18). But still more conspicuously reported was the 1926 Thanksgiving gift of 500,000 francs by Mrs Henry Alvah Strong of Rochester, New York, which shortly followed Picot's visit: a donation to the *gueules cassées* that made possible the purchase of a chateau near Moussy-le-Vieux intended for those of the French facially wounded who had no possible means of support ('Gives Thanks', 1926: 3; 'Gueules Cassees [*sic*] Find', 1926: 20; 'Honors Aid', 1927: 3). Arguably, then, it was the increased public consciousness of the French context for facial injury, rather than domestic discourses dominated by themes of rehabilitation, which led to the film's more direct representation of the *gueules cassées*, and also to its central premise: that Crandall should leave his French colleagues and return to America, where his family, fiancée and country also need him. Florey, as a Frenchman who had been working on American war films such as *The Big Parade* (King Vidor, 1925), would certainly have been aware of these ideas, as would the film's screenwriter Frances Guihan, who had married a war veteran in 1919 ('Author to Wed', 1919: 1).

The film's action opens in Paris, where Crandall is hosting a dinner for his disfigured comrades. Adopting a bold, presentational format, the camera tracks laterally along the dining table, depicting close-ups of a series of faces, most of which are disfigured in some way. However, even these stark portraits circumvent the exhibitionist dynamic of horror cinema, with its borrowings from the culture of freak show; rather, what comes across most strongly is the carefully crafted sense of the community formed by these men. Their faces around the table are depicted in close up, but always in action, talking, laughing, and drinking, strongly playing up the communicative and social functions that these – relatively whole – faces are still capable of carrying. Meanwhile, this inner community of disfigured men is tied to a bigger one: the diners are alerted by the rhythmic beat of a martial drum to a march of *gueules cassées* taking place on the street outside. Snippets of stock footage showing disabled veterans marching in Paris, combined with staged scenes depicting just a few men bearing facial scars and a “Société des Gueules Cassées” banner are cross-cut with shots of the men inside listening, weeping, then raising their glasses “[t]o the Broken Faces – may their spirit be unbreakable!”

This opening scene seems to reinforce some aspects of progressive discourses on rehabilitation, in spite of the fact that the action takes place in France: after all, the men are part of a functioning and extensive community, rather like that sometimes described in the facial injury wards at St Louis and across Europe. It also actively cites the marches that had recently taken place, a prime example of the *gueules cassées* coming to global visibility. Moreover, these faces are not obliged to hide within the terms of the film: it begins with a matter of fact presentation of some examples of war-inflicted facial injury, so there is no need to enact a hysterical reading of the war-disfigured male body, as in Lon Chaney's films. Rather, the danger from these bodies emerges not from monstrosity but from the exclusivity of the community they form, which, in this case is coded not only in terms of disfigurement, but also as being male, French and resolutely martial. Rather like Gideon Gory in *Gigolo*, Howard Crandall's chief task is to escape from this troubled French community back into the inclusive peacetime civilian world of the US, an escape most efficiently figured within both films by the protagonists' eventual acceptance of their American fiancées' redemptive love, and of productive domestic roles back at home.

However, while these films' narratives present themes of domestic and moral regeneration, Crandall's failed physical regeneration, in contrast to Gory's miraculous 'cure', retains a power to unsettle this apparently easy transition from the passive, homosocial community of Parisian veterans to the active sexual and social roles Crandall must adopt in America. In part, this is simply because Gowing's face, whose lower half is deeply buried in make-up, cannot enter so easily into the fluid exchanges of facial expression usually requisite for romantic leads in late silent cinema (Aumont, 2003: 127-48). The eyes, purposefully left undamaged and unscarred, maintain Gowing's capacity to cast meaningful glances, but Crandall's disfigurements are enough to justify Muriel's initial, traumatic reaction, and they maintain an immanent critique of the romance narrative throughout, albeit one primarily conducted within performance and *mise-en-scène* rather than plot. Moreover, Florey makes a point of showing disfigured faces to audiences not just once or twice, but repeatedly, in a long series of close-ups, making it clear that it is these faces' visibility, rather than their invisibility, which triggers our emotional investment in the film. In particular, Crandall's understandable obsession with his own appearance is interrogated in some detail by a dense symbol system involving flashbacks, photographic portraits and mirrors, each of which shed light on his changing relationship with Muriel. The flashbacks render Crandall's recollections of happier times in

the most conventional manner (the couple courting, at leisure, by a lake). By contrast, both Crandall and Muriel possess Hollywood-perfect photographs of each other, but these tend to serve as cruel reminders of what has been lost: Muriel is depicted gazing, misty-eyed at his portrait only moments before his return home, his face sadly changed. Crandall's photograph of Muriel looms large throughout the film, first appearing in the background of the opening scene behind the animated faces of the *gueules cassées*, a blurred, phantom-like presence, calling him back home. Later, it emerges as part of an unbalanced triangular relationship that structures the film between Crandall, Muriel, and a mirror that reappears in several scenes in both France and America.

Mirrors, of course, were often removed from facial wards in the US and Europe, precisely to avoid the type of morbid contemplation in which Crandall indulges throughout. In the first of these scenes, in Paris, Crandall approaches the mirror and gazes dispiritedly at his face, before turning instead to the portrait sitting next to it (**Figure 6**). A close-up of the picture reveals Muriel's face in detail, for the first time, her face unsmiling, levelling a surprisingly sharp, interrogative gaze back out of the frame. This sequence of gazes is carefully reinstated by Crandall, back in the US, where he sets the portrait down next to the mirror in his old bedroom, and again back in France, where he clutches it to his breast while gazing again at his reflection. The film's final shots, though, resolve the mirror/portrait dynamic decisively, and in Muriel's favour, when she comes to Paris to retrieve him. Crandall is once again surveying his face, but now, instead of glancing at her photograph, he is surprised to find that Muriel, herself, has entered the reflection, the camera racking focus to show us her face rather than his (**Figure 7**). Muriel's arrival disrupts Crandall's lonely reverie with mirror and photograph, finally allowing her to become an active participant in his painful scenes of recognition in the mirror, at once joining him in his own perception of his face and claiming him back for family, home, and peace-time America.

Yet, while this ending is decisive, the presence of facial disfigurement in *Face Value* has a destabilising effect on even this all too neat conclusion. Following a longed-for kiss, Crandall notes, "Now I'm happy – and I can't even smile!", his grimace-like attempt to do so in the following seconds creating a jarring, dissonant note that is not compensated by Muriel's trite response: "Never mind, dear – I'll teach you how to smile!" The insufficiency of this response to physical facial damage lays bare the intrinsic difficulty inherent in rehabilitation narratives when confronted, visually, with injuries that could not be healed. Such moments thus expose a critique of rehabilitation rhetoric that had perhaps been inherent all along: facial disfigurements struck not only at cherished constructions of self-identity, but also at possibilities for easy communication, unstilted friendship, and open forms of community, features that moving images, rather than photography, were ideally suited to analysing. *Face Value* uniquely depicts this failure of communication by isolating Howard Crandall for the majority of the film with the lifeless portrait of Muriel and the mirror image of his own face. By contrast with the open camaraderie he experiences with the *gueules cassées*, his conversations at home in America are stilted and awkward, his face too central to every scene to permit an even exchange of dialogue with Muriel and his father, and even his reconciliation with her is troubled by his uncompliant, unsmiling face.

The film's most striking scene is representatively ambivalent, foreshadowing Muriel's intervention at the end. Taking place in front of yet another mirror in his father's house, following his initial, failed reunion with Muriel, Crandall hallucinates the figures of his French comrades in arms (**Figure 8**). The faces, easily recognisable from their close-ups in the opening scene, might well be interpreted as

grotesques – phantoms calling Crandall back to Paris, but their postures indicate otherwise. The men are familiar, friendly even, with hands embracing or entreating, and in the mirror image they surround Crandall on all sides, promising the genuine form of community that he seems unable to form on home soil, even with those he loves. The strongly visual intervention posed by the *gueules cassées* in this film and in American culture more generally in this period are of precisely this order: a painful reminder, in spite of the dominance of progressivist rehabilitation rhetorics, of the difficulty of reinserting facially-injured men back into their former everyday lives and relationships, and an acknowledgment that the US had no equivalent to this forthright, open community of facially disfigured veterans. Not, at least, once the strangely cheerful colonies of men in American maxillofacial wards had finally emptied into American streets and homes.

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