Health is a guarantee for the good life. The vehicle for this healthy life has always been the body. And not just the literal body, as flesh and bone, but the body as metaphor, the body politic, the civic body, the divine body and the artful body.

Indeed, in going beyond medieval superstition, the body—in all its artistic, religious and medical depictions—found in the clinical a timeless universality. Shaped by constructed cultural narratives, the words we use to describe what we see build up the human body.

So did, too, the spaces built to contain it.

Since the eighteenth century, medical perception has dominated the observation and treatment of the human body. The rigour embedded in medical practice brought into light the truth about it, the things that afflicts it, the things that made it sick. Therefore the body, its treatment, was never questioned when framed through the medical gaze. The clinic, as the threshold between the two, embodied their encounter.

The project of modernity found in health as a universal value an enhanced interpretation of the good life by the assimilation of the clinical truth. As a consequence of the search for a sterile background that enabled an unaltered observation of diseases, an increasingly unadorned and austere vocabulary defined the interior space in which the history of illness could not escape medical examination. The aesthetics of the an-aesthetics granted modern architecture a language that was both rational and abstract. Rational and abstract enough in order to make speculations about illness, or its subjective reading, disappear.

Today, the privilege we still grant to the medical appears in the conception of a domestic space which, as in consonance with modern tradition, is an artificial device intended to prevent diseases. What is different now is that any reference to the medical is being disguised. Since hygienic qualities can now be found in any surface, new aesthetic qualities can be found inside of the contemporary hospital and clinic. This is due to the fact that
the distance between medical surveillance and bodies is being reduced, and this responsibility is increasingly transferred to the individual instead of the institution. Patient narratives have – even if the medical still do – a regained importance.

The clinical, reduced to be a collection of signs or signatures, etched onto things by time, act like all things rendered universal, like spectres. This notion introduces the idea that the clinic is defined by the allegories it evokes, manifested in the aesthetics associations it makes to the clinical.

Thus the clinic, no longer an actual defined space, is a symbolic presence that takes over other typologies only by borrowing their vocabulary to other uses. Their apparent collapse challenges certain assumptions regarding use and style.

As a revision on the notions of the body and the aesthetic associations manifested in the clinic, this project takes the form of 4 projective sections. The presented scenes are layered compositions permanently exposed as historical fragments that come together as an essay on the clinical aesthetics. Like a corpus built from historical circumstantial paradigms relative to the clinical aesthetics, it is not accidental for this project to seek to undermine the once traditional cartesian distinction between illness and space, architecture and abstraction.