

# ART INSPIRED BY ILLNESS

A YOUNG ALUMNA USES  
HER PERSONAL EXPERIENCE  
TO CREATE ABSTRACT ART  
THAT HAS PEOPLE  
CONSIDERING THE INNER  
WORKINGS OF THEIR BODIES.

By Ellen N. Woods



At first glance, the 48"x48" acrylic painting by Ann Lipscombe, B.A. 2016, has a Georgia O'Keeffe-esque look to it. But the title, "Bronchoscopy Painting," is a clue to viewers that the fluid strokes of blended color on this canvas are anything but flower petals.

The pink and red streaks that show the painter's brushstrokes represent inflamed flesh. Swirls of yellow highlight the dark hole at the center of the painting — a human airway. The depth created by the artist gives a sense of downward passage into the unknown.

The abstract painting is one of 15 pieces in Ann's *Clinical Context* collection, which also includes some works in colored pencil and others in graphite. Each of the abstract works is based on a medical image of diseased lungs from one patient, a teenage girl with cystic fibrosis (CF).

The images were taken by a bronchoscope, a tiny, flexible fiber-optic device inserted into the airway of a patient who is under anesthesia. While the device siphons mucus from the lungs, it also takes pictures.

Ann's artistic interpretations — or "exaggerations," as she sometimes calls them — of these images show polyps, inflammation, mucus plugs, and bacterial and fungal lung infections.

While the actual medical images might elicit a response of "yuck," the beauty of the renderings leads to something closer to "wow!"

## A BREATH OF FRESH ART

The *Clinical Context* series, Ann's senior thesis project for her major in studio art, received the award for outstanding senior project given by the art department's faculty. She showed selections from the series in the

annual senior exhibit in Salve Regina Gallery. The day after she graduated in May, she was at the Maryland Science Center showing other pieces from the collection at a special event titled "Art of Science" that featured Baltimore-area artists who presented their work in an interactive exhibit. Ann gave talks about her collection and was on hand to discuss with visitors the inner workings of the lungs. Guests were invited to decorate their own small tiles that would become part of a large mosaic depicting the human lungs.

"I enjoyed explaining my work to visitors, especially children," says Ann. "But the best part of the exhibit for me had to be talking with the medical professionals who visited. They had a unique understanding of what they were looking at. That was the most fulfilling experience ever."

"Even in their abstract forms, Ann's paintings were a springboard to educate guests on how air travels through a series of tubes, branching smaller and smaller, inside their lungs," says Katrina Gorga, SciLab manager at the Maryland Science Center. "Her paintings succeed in providing a vantage point of the body that most people, including myself, have not considered before."

Ann also had pieces from *Clinical Context* accepted in an exhibit at Johns Hopkins University in June. "It wasn't a medical exhibit,

but the audience was largely medical personnel. A lot of people from the Cystic Fibrosis Center stopped by to see my work. It was exciting to have their stamp of approval," she says.

*Clinical Context* "explores our inhibited ability to identify with our own bodies and the negative connotations attached to images of a diseased body," Ann explains.

"Images of the inside of our bodies are seen almost exclusively by medical professionals, medical students, and those suffering from illness," she says. "When viewed in this way, as distinct objects to be studied, these vital parts of our bodies lose their connection with humanity."

For Ann, 22, that connection is vital. Viewing bronchoscopy images is not only familiar to her, it's highly personal.

During her four years as a Catholic University student, she would often make the quick trip from campus to Children's National Medical Center during her sister Therese's hospitalizations for infections and complications related to cystic fibrosis. She would wait with her mother Kathy while her sister woke from anesthesia. And she would be with her mom when the doctor shared the results of the procedure. Ann can quickly identify if she is looking at aspergillus, a fungal infection, or pseudomonas, a bacterial infection.

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**A FAMILY THRIVES DESPITE ILLNESS**

Therese, 18, was diagnosed with cystic fibrosis — a progressive disease that causes chronic lung infections and compromises a patient's ability to breathe — when she was two-and-a-half months old. Her illness, says Ann, is "part of the fabric of our family life. We all know what our roles are when Therese is sick. I think it's made us all more sensitive to the needs of others." The family also includes Mary, 24, Clare, 19, and Peter, 12.

Mary, a newlywed, earned a theology degree from Franciscan University of Steubenville in 2013, and is a youth minister at St. Mary's Catholic Church in Annapolis, Md. Clare is a sophomore at the University of Delaware, where she is on a premed track. "I'd like to be a pulmonologist. Growing up around Therese and seeing what she's been through, I see the patient's side and the family's side. I think I could be a compassionate doctor."

Therese, who graduated from high school in May, is studying American history at a nearby community college. Peter wants to be a baseball player. Their grandfather, who lives across the street, takes Peter to practice when his sister is in the hospital.

Parents Trevor and Kathy met in New York City while volunteering at Covenant House, helping young people who are homeless turn their lives around. Trevor, a physicist, is director of The Catholic University of America Press. Previously he was with scholarly publishing houses at Johns Hopkins University and Princeton University. Kathy

is an accountant who shares her love of art with her five children.

Trevor remembers receiving their fourth daughter's diagnosis of cystic fibrosis when she was just a baby. "We took her home and she wasn't doing well that weekend. The hospital called us every hour, giving us instructions — 'Use the nebulizer again' and so forth. By Monday, we admitted her to the hospital. We needed that weekend to accept it, and the doctors knew that."

From that day on, the Lipscombes have moved forward, seeking the best medical treatments available, becoming advocates for their daughter and others with the disease, and praying for strength.

"Day to day, we are a normal family, says Trevor. "You tend to put the illness in the back of your mind and all of a sudden Therese gets sick and life becomes all about her because it has to be. We have sort of a well family life and then survival mode."

The Lipscombe family is open about Therese's illness. She is frequently on the prayer list at their parish, and she's inspired her school to hold fundraisers for the Cystic Fibrosis Foundation. Her classmates Skype with her when she is hospitalized. In fact, it was while chatting on Skype that she learned she was a member of the homecoming court. "We all contribute in different ways," says Clare. "My parents and Therese are amazing. They handle everything with more grace than you could ever expect anyone to have in some really difficult situations. My parents have always made sure all of us feel loved and are able to do everything we've wanted to do."

Peter, the youngest, says "even when Therese is sick, we make it fun. We bring games to the hospital and sometimes we even make up our own, like hospital basketball. We take ketchup packets from the food tray and put the basin in different parts of the room. And we throw the ketchup to see who can get the most points."

Keeping things fun and normal for her children is a constant goal for Kathy. Her own outlet, she says, is prayer. "Spending time in front of the Blessed Sacrament helps calm me down when I am anxious and nervous."

As the parent of a child with a chronic, progressive illness, Kathy says she has learned to be an advocate, asking for second opinions



when needed. She moved her daughter's base of care to Children's National Medical Center a few years ago. Even though the facility was less convenient, she found a physician there who spent more time with Therese and oversaw her care more closely.

When the family lived in Princeton, Kathy successfully lobbied the state of New Jersey to include testing for CF as part of routine newborn screenings.

Kathy says her daughter's courage is at the core of the family's ability to navigate through the unique ups and downs of their life.

"When Therese was in sixth grade, she was very, very ill. She developed a very dangerous fungal infection. In the course of about four months, her lung capacity went from 85 percent to 40 percent," recalls Kathy. "It was so hard. I remember telling Therese, 'I wish I could take this on for you' and she said, 'Oh no, Mommy, I couldn't bear to see you go through this.'"

"A lot of times we take our cue from her strength of spirit."

**AN EMERGING ARTIST FINDS HER INSPIRATION**

Ann and Therese are close. They like to tease their little brother when he doesn't win during their family's intensely competitive card games. And they like to egg each other on with impersonations of their mom's Long Island accent.

At the beginning of Ann's senior year, Therese and her family made the decision to enter a clinical trial. They knew it was a long shot, but a new drug being tested might mean a cure. Though the trial ultimately was not effective, Ann says, "Just the idea of a cure had me wondering how my sister's identity would change if she didn't have cystic fibrosis; how would all of our identities change without this illness in our lives? As I thought about how the medical jargon, the



daily treatments, and all the ups and downs of the illness are part of everyday life for us, that's when I got the idea to show Therese's bronchoscopy images in a way that was beautiful and approachable."

When Ann told her sister she wanted to use these images as the basis for her senior thesis, Therese says she was "cool with it."

"I liked the idea that my experience inspired Ann's artwork, and that she was able to turn my medical images into really interesting pieces of art. I was proud of her," says Therese.

Ann came to Catholic University as a student in the Department of Art to pursue a career as a medical illustrator. She knew the program was small, but her reasons for choosing the University's art department were clear.

"As an art student, I wanted to be in D.C. There are so many amazing museums and galleries. The program at Catholic is small, but the faculty are all hot shots in their respective areas of art and they have great connections in the city for internships and classes. The department even offers a course at the National Gallery of Art," says Ann.

"There is a lot of individual attention from faculty, and that's true beyond the art department. I really like the community of humanities here. English and philosophy — all of those kinds of courses contributed to my art education," she adds. Ann served as layout editor and graphic designer on the team that launched the student-run undergraduate research journal *Inventio*.

She honed her digital art skills during her first two years at the University. "The University has incredible digital art offerings, especially in 3D modeling. The courses are taught by [faculty member] Jonathan



Monaghan, who is nationally known. He had a major 3D work at Sundance last year, and another piece in the permanent collection of Crystal Bridges [museum]. He's been an amazing advisor," says Ann.

After two years of digital art and anatomical drawing courses, Ann realized that medical illustration was not her true calling. She wanted to be a studio artist. "The professors in the art department do not baby their students. If they thought I didn't have what it takes, they would have told me. But I had their support, and their help."

Inspired in part by a course on Judaism that she took while at Catholic University, Ann's junior-year project was a large-scale drawing of a Holocaust scene in which all of the people were depicted as large noses. Titled *What We Talk about When We Talk about the Jewish Nose*, the abstract cartoon-style work, says Ann, explored the stereotypes that played into Nazi propaganda.

The piece was accepted into an exhibit on the Holocaust at a New York City gallery. "As the only student artist, I felt like a fish out of water at first. But my work was well received by the public as well as the other working artists in the exhibit," says Ann.

In an article published in *Jewish Seattle* magazine titled "Art after Auschwitz," the writer noted Ann's "surreal drawing ... stopped me in my tracks."

Later in her junior year, Ann had another one of her abstract works accepted into an exhibit in Chicago. By the start of her senior

year, she was ready to undertake a whole collection of work for her thesis. "I was working on those pieces every chance I got. They came home with me for Thanksgiving and Christmas," she says.

Monaghan, who served as Ann's advisor on the project, called the art "very strong both conceptually and visually. The deep personal relationship to the drawings and paintings made them all the more impactful. Undergraduate art projects, even a thesis, are rarely both exceptionally thought-provoking and exceptionally well executed."

The 15 pieces in *Clinical Context* are now carefully housed in the basement of the Lipscombe home in Catonsville, Md., as Ann is ever on the lookout for another suitable exhibit for them. "My mom loved to drag them up the stairs whenever we have visitors, until I finally told her 'They are five feet high. Just take pictures and show them on your phone.'"

At home, Ann continues to make art and consider M.F.A. programs. She has a coveted postgraduate internship at the Phillips Collection in Washington, D.C., which she attained in part with the help of faculty connections and recommendations, in addition to her college accomplishments.

"I'm not sure where my art will take me, but right now I'm happy to be back home," says Ann. "I'm lucky. We are all very close and just simply really like each other. In our house if you are home, you're hanging out. No one is in their room." **CUA**