One of the key questions facing Gothic Studies today is that of its migration into and out of its once familiar generic or symbolic modes of representation. The BBC series *In the Flesh* addresses these concerns against the background of a neoliberal medical culture in which pharmaceutical treatments have become powerful tools of socio-economic normalization, either through inducing passivity or in heightening productivity, generating chemically adapted biomachines tuned to think and produce. But the *pharmakon* has always been a risky form of normalization, its poisonous mechanisms threatening to undo its helpful patterns by stealth. This essay discusses the pharmacological and medical contexts of the series in which zombies are subjected to medical management and normalized as “PDS sufferers,” thereby locating *In the Flesh* in terms of an already gothicized neoliberal pharmacology of everyday life. It also enquires how the proximity of the symbolic pharmacology of the series to neoliberal medical discourses and practices actually challenges traditional representational patterns of the Gothic and whether the Gothic can still have a role as an alternative cure to society’s ills.
The Gothic seems to be a strong currency in the neoliberal era. Since the mid-1990s, and certainly with the success of series like *The Walking Dead*, *Twilight*, *American Horror Story*, or the more art-house *Les Revenants* and *In the Flesh*—for all their differences—there has been a recognizable surge in narratives about monstrous figures and spectral apparitions in film, TV, graphic novels, literature, and music (Spooner 21–25). In a series of articles and in a forthcoming volume, *International Gothic in the Neoliberal Age*, British critic Linnie Blake has linked the current wave of Gothic productivity to the series of “dislocations that free market economics have inflicted in our own, global-imperial age” and the “trauma wrought to global ecology, society, and selves by the vicissitudes of post-1970s global capitalism” (“Neoliberal Adventures” 167; see also “Burton and Swinburne”; Blake and Soltyzik Monnet, forthcoming). According to her powerful reading, if Gothic *matters* today, it is because it is preoccupied with *matters* of direct political economic relevance to contemporary audiences. In short, the Gothic is omnipresent because it articulates “collective anxieties over resisting and embracing change in the twenty-first century” (Levina and Bui 2).

It is perhaps unsurprising that zombies, vampires, monsters, and ghosts seem to be everywhere in the cultural production of the present day; neoliberal technologies of everyday life appear to be monstrous, Gothic formations in and of themselves, with biotechnology and organ transplant technologies generating new and confusing states and definitions of living and dying, new vampiric economies of organ and biological trade, and new categories of prosthetic and surgical monstrosity/normality (Murnane, *passim*). This is suggestive on the one hand of a link between fictions in the Gothic mode and the material reality from which these texts emerge and are anchored, but it also asks serious questions about the status of the Gothic and Gothic Studies itself today, as there appears to be a migration into and out of Gothic’s once familiar generic and symbolic modes of representation: neoliberal biopolitics and political economy seemingly emerge through uncanny narratives of their own. This is suggestive of a proximity between neoliberal reality and Gothic’s fictional representations which challenges traditional understandings of the Gothic as a mode of cultural representation.

*Gothic Matters*—as the *matters* of the Gothic—implies what critics have understood to be the relationship between fiction and reality; these matters include a range of issues, the programmatic core of which has comprised—at least according to the discipline of Gothic Studies that has developed since the early 1980s—a critical, and indeed subversive, depiction and radical interrogation of the rationally-based assumptions, envisioned goals and normative dimensions of the twin projects of enlightenment and modernity (on subversion, see Jackson; on Gothic as abject negotiation...
of bourgeois identities in modernity, see Hogle 296–98, and Punter). The fantastic and grotesque scenarios of Gothic fictions have been construed as mattering because their poisonous mechanisms generate social health by undoing dominant cultural and political narratives as a sly form of cultural therapeutics (Baldick and Mighall 210). Almost from the outset, how Gothic relates to its social environment has been discussed in material terms, concrete matters, and one notable medium in this regard has been pharmacological discourse (see e.g., Davison). On a thematic level, pharmaceuticals and poisons are a central concern within the Gothic around 1800; narratives such as Matthew Lewis’s *The Monk* or Ann Radcliffe’s novels (see Miles 131–33) deploy medicines, drugs, poisoning, and intoxication as some of their most powerful plot devices. While a larger project on Gothic pharmacologies would be an interesting topic for future study—and would proceed, for example, through the nineteenth century and De Quincey’s *Confessions of an English Opium-Eater* and Stevenson’s *Strange Case of Dr Jekyll and Mr Hyde*, continuing on to look at the psychotic worlds in Burroughs’s *Naked Lunch* or Easton Ellis’s *American Psycho* in the twentieth century—it is notable that several recently successful Gothic graphic novels, films, and television series likewise focus on pharmaceutics as the core of their engagement with contemporary culture. The first film in the *Resident Evil* series starts with an infective agent produced by the shady pharmaceutical concern, the Umbrella Corporation; Channel 4’s *Utopia* is based around a pharmaceutical conspiracy involving not only a pseudo-inoculation which actually racially controls the population by inducing infertility, but also a form of medication for a nervous disorder known as Deel’s Syndrome called Thoraxin which is later revealed to be an opiate causing the symptoms it is purported to control. Finally, Dominick Mitchell’s *In the Flesh* features a form of medication, Neurotriptyline, which reintroduces a state of consciousness into the zombified living dead, returning them to a state of quasi-normality. What these very different Gothic medications and stories have in common is their position within a network of complex biopolitical, economic, psychological, and biomedical issues which are located within a framework of capitalism, with their narratives focusing on the infiltration of political regimes of health by damaging practices of neoliberal privatization and profiteering. They are instances of what Glennis Byron has observed in relation to contemporary discourses of globalization, namely that the processes of expansion and ultimately globalization of neoliberal ideology are “facilitating . . . cultural exchanges that [are] producing new forms of gothic” (2–3). The remainder of this article will trace such Gothic cultural exchanges through the lens of pharmacology as a key part of the architecture of neoliberalism.
As the defining political and economic paradigm in the West since the mid-1970s, neoliberalism describes a series of processes whereby free market policies, privatization, financial deregulation and speculation, and corporate enterprise over government-led decision making seem apparently without alternative. Emerging from the Chicago School of economics, first tested in the business- and military-dominated Pinochet regime in 1970s’ Chile, and associated primarily in the USA and the UK with Reagan and Thatcher, neoliberalism holds that if the economy is deregulated, competitive, rational, efficient and fair, then it will produce largesse for all. One key precondition must be met: a supposedly incompetent and bureaucratic government must dismantle all elements of public life that could interfere with corporate practices, including taxation, social welfare, public education, and public health; matters such as resources, production, distribution and social organization will be most effectively determined by market forces if the government would only limit itself to providing legal protection for private property and contracts—all of which of course has actually better serviced the drive for personal profit and the concentration of wealth over any benevolent social programmes (see Chomsky or Harvey). Promising trickle-down benefits for all through a supposedly efficient free market (Quiggan 137–39) while actually rendering a vast proportion of normal mortals into human waste of Dickensian proportions—debtors, exploited workers, medically pacified hordes of clinically depressed and hyperactive consumers, damaged bodies, and damaged youth (Giroux, Zombie Politics 44–51; Stiegler, Taking Care 12–16)—the excesses of corporate expansionism negate the cynical promise of a benevolent invisible hand while handing out little more than debt and mortgages, resulting in “the pulling apart of social cohesion, and the vanishing of equal opportunities for all” (Wyatt).

The manifest workings of this political economy that ultimately led to the Global Financial Crisis of 2007/2008 are now being re-animated by regimes of austerity for those who profited least and suffered most, an uncanny and horrifying return to/of the policies of supposed market efficiency, privatization, and austerity started by Reagan, Thatcher and co. in the 1980s—a worryingly familiar sort of estranging submission to a disempowering economic logic. This is what Mark Fisher diagnoses as “Capitalist Realism”: “the widespread sense that not only is [neoliberal] capitalism the only viable political and economic system but that it is now impossible even to imagine a coherent alternative to it” (2). The repeat behaviour of IMF and ECB austerity measures while demanding privatization of the public sector is what political economists like John Quiggan and social geographers like Jamie Peck have called “zombie” and “undead”
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economics, an uncanny and unconscious reflex-response in the service of neoliberal boom and bust economics, “dead ideas still walking among us” (Quiggan title page; Peck). As both Byron and Blake have suggested, neoliberalism and its discourses do not simply lend themselves to Gothic representations, rather they “repeatedly turn to Gothic tropes in articulating the social, cultural and economic impacts of a new world order” themselves (Byron 3) and this capitalist realism is beginning to produce Gothic themes, tropes, and figurations of its own. The already spectral logic of derivative markets is making its unwelcome return; austerity measures like the bedroom tax in the UK push the unwaged and benefit recipients ever further into the regions which themselves have had their infrastructure increasingly “rationalized” away, while in a truly Gothic moment the UK’s Department of Work and Pensions was recently forced to admit that it had invented “people” as “case studies” who were actually supportive of the DWP’s regime of cuts to sickness benefits and its effects on them (Rawlinson and Perraudin).

The French cultural theorist Bernard Stiegler describes the “capitalist realism” visible in these accounts as the “fabrication of beliefs” in “autorealist prophesies within the financial world” (Taking Care 182), visible in the attempts to maintain and regenerate belief in the myth of an efficient free market economy. Stiegler is interested in the tools and mechanisms of socio-economic normalization and how neoliberalism has managed, despite its constant states of debt and exceptionality, to constantly reproduce itself. This process can work because of powerful “consciousness industries . . . for the control of collective behavior” (Taking Care 34), leading to a toxic, pharmacological state of “behavioral control which is ‘narcotic,’ that is, which is anaesthetizing and which produces addiction” (Stiegler, New Critique 101). The meaning of pharmacology here is “not limited to chemico-therapies but actually concerns all techniques” (Taking Care 98–99) such as, for example, “psychotechnologies constituting the media infrastructure” (New Critique 101), which are “technologies of stupidity” (Taking Care 34); “[s]ymbolic media,” he suggests, “are a network of pharmaka that have become extremely toxic,” leading to phenomena like attention deficit disorders turning the youth into mindless, uncritical consumers (Taking Care 85). In short, he is describing the precession of mindless consumption and casualties of capital, the locking into a system in which people are complicit in their own exploitation, disposability, and mental bludgeoning that ever since George Romero’s Dawn of the Dead has been associated with the figure of the zombie (see Shaviro).

For Stiegler, the zombification of humans is a pharmacological process and although pharmacology here has a largely figurative sense, the
problem he describes does indeed have a more literal context in actual techniques of political economy which are pharmaceutical and chemical-based. Given the prominence of pharmaceutical narratives in contemporary Gothic texts, it is notable that the genesis of neoliberalism in the adoption of the Chicago School’s economic programme in the late 1970s correlates not only with the birth of Big Pharma, biotech, and experimental medicine, the early structural reforms in the medical and pharmaceutical sciences and industry were actually co-developed from the very beginning by Chicago economists working as consultants in a working paper entitled *Regulating New Drugs* from 1972 and popularized by Milton Friedman in his *Newsweek* column (Hogarth 6–8). Melinda Cooper (51–73) and John Abraham in particular have traced these homologies and systematic links since the 1980s. Neurochemical enhancement, adaptation, or regulation creates “new pathways of capital accumulation,” meaning good-as-dead bodies emerge as significant actors in social and commercial life, and “life and death become units of productivity in the form of ‘enterprized-up’ individuals” (Franklin and Lock 13). In *The Selfish Capitalist*, Oliver James traces a correlation between rising levels of mental health issues and the neoliberal mode of capitalism (60), mirrored in the fact that “depression is the condition in the UK that is most treated by the NHS” (Fisher 19). Meanwhile, depression, like anxiety disorders and attention disorders, has been redefined as chemical imbalances, seemingly depoliticizing and “naturalizing” a social and culturally codified condition while providing a lucrative market for multinational pharmaceutical companies to peddle their wares (Blackman 1–4). That there is a political economic construct behind such “naturalized” illnesses can be determined from the financial incentives offered to schools in the USA to classify “unruly” students as ADHD-disabled and medicate with Ritalin (Rose 211). While Rose has deployed a Gothic rhetoric by referring to these “re-made” conceptions of selfhood and the human in these networks as “monstrous” (250), other commentators have traced real life phenomena of Gothic proportions such as the corporeal changes generated by the HIV-medication AZT in Australia (Persson) or the wholesale outsourcing of clinical testing of new medications to poor communities in Africa and Asia in order to avoid the quality and safety regulations in the global north (Crane). There is a real (Gothic) pharmacology of everyday life, it seems.

Such scenarios are also the backdrop to Dominick Mitchell’s post-zombie apocalypse drama *In the Flesh*. Set in the Lancashire village of Roarton, the series depicts life after “The Pale Wars” when armed militias of the living—the so-called “Human Volunteer Force”—waged war with
thousands of deceased who had risen from the grave and were reanimated as rabid zombies in “The Rising.” The story is picked up when Kieren Walker, a teenager who had committed suicide after his friend, and probably lover, Rick Macy, was shipped off to serve in Afghanistan, returns back to Roarton. He, like others among the undead who weren’t killed by the HVF, ended up being treated with a new medication called Neurotriptyline in a private institution in Norfolk. Neurotriptyline kick-starts neurochemical production and hence begins to artificially regenerate the ability of the undead to think rationally and control their murderous urges. Having regained consciousness, been categorized as PDS sufferers (“Partially Deceased Syndrome”), and been provided with daily doses of medication to suppress their thirst for brains, Kieren and the other undead are placed back in their communities to re-integrate.

Given their medical normalization with Neurotriptyline, In the Flesh seems to focus less on the shock and horror of the zombies and more on the social, cultural, and political narratives being told around them. The problem seems to be that Kieren and the others are no longer human but also no longer fully other due to their pharmaceutical normalization. While PDS sufferers are haunted by memories of their atrocities, the simple auto-immune response of the community who are forced to adapt to the presence of people who (being dead) should not actually be there anymore, is to declare them “Rotters” and debar them from ordinary community life, treating them as outcasts and scapegoats. But this is a biopolitical distinction which is difficult to uphold, since death has become a matter of pharmaceutical management and hence is clearly a matter of political and economic negotiation.

Whether in the flashbacks to “The Pale Wars” or in the present tense of Roarton five years on, it becomes clear that these stories are inseparable from contemporary British social politics and political economy. From the HVF that seems to have taken the place of an absent national military response to the Rising to the corporation that develops Neurotriptyline in a clinical testing station that also doubles as a prison detention centre; from the chronically understaffed NHS in Roarton that seems to function as a privatized health and detention centre for rabid PDS-patients rounded up by the rechristened vigilante group, “The Roarton Protection Service,” to the hordes of PDS-sufferers forced to wear yellow bibs and “pay their debt” to the community on privately administered working schemes—Mitchell’s narrative is clearly set against the background of the UK coalition government’s misadventures in austerity politics. Seemingly abandoned by mainstream politics, Roarton is a region lacking in any clear form of social cohesion and common welfare and is left to its own devices.
to cope with problems of real public health interest, while the government focuses solely on the business of pharmaceutical provision. Indeed, Neurotriptyline and the accompanying health and education programme have all the appearances of a Public Private Partnership: Halperin & Weston produces, markets, and educates patients and carers alike on behalf of the National Health System (the local health centre and the inadequacies of the NHS’s Care in the Community programme feature prominently in multiple episodes of the series).

This political narrative is developed in central themes of social violence and power: in opposition to a PDS-tolerant government, a Pro-Living party “Victus” is set up which believes that the immortal undead are unnatural, inhuman, and second-class; PDS sufferers, it claims, are only “one missed dose away” from tearing your head apart. Meanwhile, in response to this increasing prejudice, the PDS sufferers develop an extremist Undead Liberation Army that communicates through the internet and opens up communes preaching the need to embrace their undead status and to reject society’s pharmaceutical control and biopolitical normalization. In fact, the ULA distributes its own drug “Blue Oblivion” to the PDS community which temporarily blocks Neurotriptyline and the pharmaceutically-regenerated consciousness, turning them temporarily back into rabid zombies and hence enabling the undead to embrace their true nature. Pharmaceutical control reveals itself as an ambivalent power then: the 

pharmakon is both medicine and poison, opening up debates on the ambivalent position of pharmaceutics in contemporary medicine.

In direct contradiction to its mythologized status as the site of the First Rising, Roarton was and is a place on the margins, left behind in the supposed trickle-down redistribution of wealth of the neoliberal political economy in a Southern England that is mentioned only as a distant, disconnected, and detested political centre. Roarton appears as a grotesque mirror image of David Cameron’s “broken society” that simply does not seem able to get back working again (Cameron). A key part of the Victus rhetoric is their demand that PDS sufferers repay their debt to society given that the living are footing the bill for Neurotriptyline, and they instigate “volunteering” schemes curiously reminiscent of community service for ASBO\(^1\)-holders or the coalition government’s apprenticeship schemes to get youth unemployment figures down, albeit cast in the mode of a concentration camp rather than benevolent British retail stores. The irony is that nobody seems able to pay their debt to society here and hence there seems to be very little difference between the living and the undead at all.

\(^1\) Anti-Social Behaviour Orders.
Both groups are victims of a political economy that renders them equally as outsiders; both appear “disposable—nothing more than human waste left to stew in their own misfortune” (Giroux, *Zombie Politics* 2). As dead labour themselves, the living-rendered-metaphorical-zombies of which Henry Giroux has powerfully written appear to be uncanny mirror images of the undead PDS sufferers.

Viewed in this manner, *In the Flesh* provides a disturbing alternative to a recent offering from the field of economics itself and it is in this regard that I would stake a claim for why Gothic matters in contemporary society and for why it develops the Gothic matters that it does. In their *Economics of the Undead* (2014), Glen Whitman and James Dow discuss the political economy of Gothic popular culture such as *Buffy, Resident Evil*, and various other vampire and zombie franchises from the perspective of economic science. The result of this project is “one of the more optimistic perspectives you’ll find on the undead threat” (x), safe in the belief that their readings show the “vast capacity [of economics] to cope with adversity and somehow make the world a better place” (xi). “[S]ome people may oppose trade with the undead not because of their concern for the humans,” Deyo and Mitchell suggest in their contribution to the volume, “but because of their concern for the undead. They might contend that . . . especially zombies are exploited by trade” (120). Invoking neoliberalism’s disingenuous free trade optimism, they argue “we wouldn’t expect people (including the undead) to . . . trade if it didn’t make them better off” (121). “Trading with the undead will involve some element of danger, but it also promises substantial benefits. It’s so beneficial that we should jump at the chance to do it” (122). But of course neoliberalism does already trade with and in the undead, an instance of what, following Achille Mbeme, we might term “necropolitical economy,” the “generalized instrumentalization of human existence” (14), which is manifested in “the power and capacity to dictate who may live and who must die” (11). The increasingly Gothic nature of medicine and science discussed at the outset of this article is a very real instantiation of such necropolitical economic themes and tropes. Medicine has gone about redefining corporeality as a commodity form for which medical anthropology has developed the concepts of “biocapital” (Rose 6, 133) and “bioeconomics” (Cooper 45–49), redefining selfhood and consciousness as something solely somatic and protein based, located in the chemistry of the brain (see Lock 167), and thus enabling redefinitions of death (as brain-death registered by ECG waves) so that living flesh can be converted into circulating commodities as “biovalue” (Rose 32). In the medical practices of the neoliberal era “trading with the undead” can be considered in literal terms: people become materials to be
upcycled or recycled as tissue “donors,” and organ-containers to be harvested for those who can afford to pay for transplant medicine. This has generated a necropolitical selfhood with subjects “kept alive but in a state of injury, in a phantom-like world of horrors and intense cruelty and pro-
fanity” (Mbeme 21), a real neoliberal version of uncanny medicine.

One of the key manoeuvres in being able to redefine death as brain death is to rethink identity, subjectivity, and selfhood as a somatic process that is situated in the nerves and cells of the brainstem. According to the authors of the “Report of the Ad Hoc Committee of the Harvard Medical School” (1968), the formative moment in transplant medicine, once the brainstem stops functioning, the “person” ceases to reside in the body and hence the patient can be both dead (i.e. brain-death) and organically alive (i.e. a living heart cadaver suitable for organ harvesting, thing of “biovalue”). In effect, this is a definition of identity that is based solely on a somatic theory of consciousness: the brainstem’s function as the physiological site of consciousness is deployed to distinguish life from death. Given that *In the Flesh* is a zombie narrative, it is telling that the presence/absence of higher consciousness has traditionally been taken as the defining characteristic of the zombie too (Kirk 3–4), meaning that these negotiations of death are unavoidably, if unwittingly, linked with the figure of the zombie. A related field in which the broader necropolitical medical redefinitions of consciousness, the somatization of personality, and ultimately life and death, have gained a pharmacological basis has been regenerative medicine and pharmacology. The treatment of diseases such as early-onset dementia deploys neurochemical adjustment to stimulate cellular activity and literally produce new neuronal “life” in patients. Indeed, as Åsberg and Lum have shown, advertising for such pharmaceutical therapies has developed a fetishization of regeneration which segues into an imaginary of vitality and the “life” of the patient. Pitts-Taylor has coined the term “brain plasticity” (636) to describe the socio-medical contexts of neurogenesis and synaptogenesis in this regard, and in July 2015 Eli Lilly published findings on the successes of such drugs in treating Alzheimer’s (Knapton).

*In the Flesh* develops the ambiguities and difficulties which such re-
definitions of life and death can cause in modern medicine’s necropolitical regime. Neurotriptyline offers a pharmacological preparation through which this story of contemporary medicine can be told. It reverses the process of dying in a manner reminiscent of the practices of regenerative medicine. As an educational film called “Understanding PDS” distributed by Halperin & Weston tells us, Neurotriptyline re-balances and kick-starts the neurochemical functioning of the brainstem amongst the undead, generating new brain cells and brain activity, thereby re-creating consciousness.
While Neurotriptyline itself is not responsible for the original rising, it does enable re-animation, and becomes the medium through which the unsettling, slippery slope from life to death in neoliberal medical practice and political economy is represented; a tool of biopolitical normalization; and the medium through which the ambiguities of neoliberal medical science's pharmacologies of death are played out to question the monstrosity of the living, but, more importantly, the politics of the living that produces the socially sanctioned necropolitical violence that is the Victus party.

It is no accident that medicine and pharmaceutics play such an important role in *In the Flesh*. One of the key testing grounds for neoliberal medical science in the USA and the UK was the development and marketing of psychotropic and psychopharmaceutical medications like Prozac, SSRIs, and Ritalin, offering actual neurochemical tools of control and normalization that heighten productivity or induce passivity, generating chemically adapted biomachines tuned to think and produce in certain ways, Melinda Cooper argues (22–23). As Nikolas Rose has discussed in this respect, what is at stake with drugs such as Ritalin is parents and society desiring to let their children’s true selves appear through increasing the levels of dopamine and norepinephrine, thereby heightening alertness, memory, and concentration (98–99). Tellingly, Ritalin is deployed illegally to improve concentration and productivity among students, a marker of its importance in neoliberal pharmacy’s programme of “enterprising up” individuals, while naturalizing and depoliticizing mental health as a somatic condition (Healy, “Psychopharmacological Era”). This has occurred much to the pleasure of the pharmaceutical industry who urge us to deal with our problems by taking drugs that will increase their profit margins, while creating “lifelong patients and repeat customers” (Pringle). Over the last 40 years depression and newly created conditions such as stress related disorders, social anxiety, and OCD have all been redefined along these lines (Healy, “Good Science”). Where such pharmacological treatments become immediately Gothic is in the consequences it has for subjectivity and identity: when the body and consciousness become realigned in this technical manner, “biotech . . . does not alienate one’s labour from one’s person” (as in old fashioned Marxist reading of political economy) “so much as alienate one’s body from one’s person” (Franklin and Lock 8), turning the body into a site of pharmacological experiment, processing, and “enterprising up,” turning even the communication of proteins and chemicals into a site of political economy, the marker of which is how the body itself becomes the sites of investment, speculation, and profitability of Big Pharma.

This sense of disturbing self-estrangement is at the heart of the ambiguities of consciousness, feeling, subjectivity, and ontology throughout
In the Flesh. These are the concerns that come into view in the strange moments where the normalization and anaesthetization of the undead through Neurotriptyline flip-flop into a genuine “enterprising up” of Amy and Kieren into fully re-animated humans in two key scenes that conflate Neurotriptyline and the ULA’s Blue Oblivion. In the final episode of series two, Kieren is forcibly injected with Blue Oblivion by the leader of the vigilante RPS who hopes to consolidate his political violence by using Kieren as the scapegoat proof of the undead’s underlying violence. Although this should return Kieren to an unconscious state, and hence make him a rabid zombie rather than a PDS-sufferer, the camera point of view changes to show us Kieren maintaining, albeit with difficulty, his powers of conscious cognition and choice. Shortly afterwards he, like his friend Amy before him in a similar scene in the previous episode, appears to be regaining full animation. Where her heart had started beating and her senses returned to her, the final images of the series show Kieren beginning to repeat this process, flexing his hands as the sense of touch seemingly returns. If death is defined around consciousness, and consciousness is defined as being enabled through the correct functioning of neurochemicals, then death becomes a question of the correct pharmacology—no longer a biological given, but the subject of biopolitical and bioeconomic negotiations, and, of course, corporate speculation and profiteering. It is worth noting that there is actually a tricyclic antidepressant called “Nortriptyline” which is also used to treat various depressive and anxiety disorders, neuropathology, and increasingly also ADHD patients (Martindale, Prince et al.).

These issues are likewise important where Blue Oblivion fails to restate the undead Kieren’s zombie nature (i.e. somatic, unconscious drives for flesh) in the episodes discussed previously, leading instead to a heightened sense of consciousness, control, and, indeed, conscience. If the dead can become re-animated in such a way, then the differences to the living at the core of the necropolitical economy of Victus, the HVF, and the RPS become ever more questionable. For the ULA, as for Kieren’s parents, what is at stake in the pharmacological regulation of zombification is the relevant parties’ respective definition of what is the “normal” identity of PDS-sufferers such as Kieren: where for Kieren’s parents Neurotriptyline very much returns him to the world and enables him to take responsibility for his own life, for the ULA it is the reduction of consciousness and responsibility which in fact defines his new “true” nature. As Kieren and Amy seem to become properly conscious, it is almost as though the enterprised-up pharmacology of In the Flesh affects Kieren in the same manner as Ritalin and the other psychopharmacological substances discussed above. Of course, the truly disturbing moment here must be on the part of
the living: if it wasn’t bad enough that they are themselves already emerging as dead labour, the human waste of austerity programmes, Kieren and Amy’s stories suggest something far more threatening for them. If the dead can become alive by these pharmacological means, then there is no stable difference between the living and PDS-sufferers: the fully humans of Roarton could be, or become, “Rotters” themselves. This is a Gothic pharmacology in the true dual sense of the pharmakon as the admixture of poison and cure, the epitome of an order of ambivalent différence in which life and death have been subsumed by neoliberal policies. Roarton’s zombies are the people of Roarton themselves in more ways than one.

Locating In the Flesh in this manner almost by necessity requires us to think more clearly about the status and patterns of representation in contemporary Gothic cultural production. When critics, such as Levina and Bui in their Monster Culture in the 21st Century, frame their discussions of narratives like In the Flesh by pointing out “how monstrosity has been used to manage terror threats, global capitalism crises, new forms of warfare . . . biotechnologies” etc. (2), then Gothic cultural artefacts seem to become identified as an increasingly questionable form of engaging with social reality. The description of the Gothic’s present currency as “management” has a worryingly neoliberal ring of its own, making it part of our everyday world where the privatization of public life seems to produce new and more complex layers of management and bureaucracy while purporting to do the opposite. Perhaps the Gothic itself has become part of the “disimagination machine” of neoliberalism of which Giroux speaks and which extends from schools to mainstream media (“Politics of Disimagination”)? Viewed against the background of an already Gothic biomedical reality and medical anthropology, Gothic may be taking on the status of a mimetic literary and artistic mode that operates increasingly at the level of metonymy rather than the more distancing metaphorical, fantastic manner in which, say, Stoker’s vampire or even Romero’s zombies once referred to reality.

Following Mark Fisher’s diagnosis of “Capitalist Realism” as a programmatic blindness and concomitant form of cultural production in neoliberalism, perhaps the world that Gothic nowadays projects may in fact only be “an extrapolation or exacerbation of ours than an alternative to it” (2). In this mimetic nature, contemporary Gothic may itself “function primarily to undermine the ability of individuals to think critically” (Giroux, Zombie Politics 177) and outside the cognitive frameworks of neoliberalism itself. This Gothic would be less the fantastic displacement of Le Fanu’s “in a glass darkly” than a troubling doubling which “naturalizes” the ideology and political economy of neoliberalism, making it appear unavoidable, the
aesthetics serving “the forces of ethical tranquilization” (Giroux, *Zombie Politics* 177). Contemporary Gothic’s matters might be making it increasingly difficult for Gothic to matter in the way in which we have become accustomed after some 40 years of Gothic Studies as a discipline.

If the genesis of neoliberalism can be traced to the adoption of the Chicago School’s economic programme in the late 1970s and early 1980s, this not only correlates with the birth of Big Pharma, biotech, and experimental medicine as this essay has suggested so far, it also correlates strangely with the rising share-value of Gothic Studies in academia as described at the outset of this article. As uncomfortable as this might make Gothic Studies feel, maybe this could have happened precisely because neoliberalism is comfortable with the management of the ghosts, monsters, and zombies inherent to its capitalist structures that Gothic Studies, using these as a key to reading capitalism’s structures and formations, has conducted on its behalf. Gothic might not be a therapy against, but rather another psychopharmacological component of neoliberalism’s own speculative and spectral organization. Whitman and Dow’s *Economics of the Undead* is suggestive of such a problematic account; the very fact that they can read Gothic narratives in the manner they do must be identified as a problem. As discussed at the start of this essay, the Gothic has long been explained in terms of its being a mode of resistance, a counter-discourse, which with its fantastic mode and uncanny displacements of cultural discourses and identities is capable of offering an intellectual antidote to capitalist modernity and its simplifying binaries and dubiously “naturalizing” discursive tendencies (see Kliś for a summary of this argument). The current popularity of the Gothic suggests that it may in fact be normalized and subsumed within precisely these dominant industrial cultural idioms however, as Whitman and Dow suggest—a side-effect of the popularity which has been inherent to Gothic since its inception in the late-eighteenth century, as Dale Townshend has recently argued (Townshend, Interview).

If Gothic matters today, then the mapping of the metonymical relationship between *In the Flesh* and the neoliberal medical discourses of the present discussed in the present article points more towards a diagnostic rather than a therapeutic form of activity. In a culture where trading with the undead is a source of economic optimism, a new speculative instance of venture capital, then it seems to be the case that Gothic Studies needs to consider the status of its reading and viewing practices as a cultural and political therapeutics anew. The pharmakon is both poison and cure, however, and if neoliberalism acts as though it can control and manage the Gothic, then this is a pharmacological control that may still prove toxic. The task of Gothic Studies could lie
in determining how its own particular *pharmakon* can still work, how its *Matters* can indeed *matter*.

**Works Cited**


*In the Flesh. Series One and Two*. Dir. Jonny Campbell, Jim O’Hanlon, Damon Thomas and Alice Troughton. Created by Dominick Mitchell. BBC, 2014. DVD.


