

Don't Get Your Nose All Bent Out of Shape!

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Photo #1



Photo #2

Anyone who watches TV has gotten used to the warnings that come with pharmaceutical ads. No, I'm not talking about the "if it lasts over four hours" one; warning heck, that's surely got to result in more sales than the two people in bathtubs watching the sun go down! No, it's the Lipitor commercials that warn against muscle aches being a sign of a rare but serious side effect. There are some rare but serious problems that can occur in life castings as well.

The first is what I call the "Bent Nose Syndrome" or BNS. Photo #1 is of Tiffany who is a very attractive young lady. But look at Photo #2, which is a plaster positive made from an alginate mold. Those who have read my articles over the years know that I never use plaster for a permanent casting. I correct what are usually small flaws in the plaster and then make a silicone secondary mold in which I cast Forton MG, polyurethane or polyester resin, or press water based clay for raku firing. However, this particular plaster mask has two problems that are so serious that it would be easier and faster to recast Tiffany than try to repair them.

Notice in Photo #2 that the nose is bent to her right which is not the case in real life. In over twenty years of life casting, I have seen BNS only three times. I learned early on that flaws in human anatomy are more noticeable in castings

than in real life. Many a time I have thought that something about the casting wasn't exactly right though I hadn't noticed it in the model. But then found out the model really did have some abnormality. But in this case, Tiffany's real nose isn't bent. I guess three times in over twenty years is a pretty minor problem, but I don't like things happening that are out of my control and I at least want to understand the causes even if I can't always be 100% the boss.

What I *think* happened in all three of these cases is that the models moved slightly at a critical time. If a model moves or shifts her/his position when the alginate is still liquid, it should just conform to the new shape. While the composition would be changed somewhat, the effect might be neutral, detrimental, or even an improvement. When I was a baby life caster, I would position the models head in a neutral straight on position. I think I was concerned that the model with no visual reference once the eyes were covered would have had difficulty maintaining a position with the head at an angle. Then one day I cast the face of a young lady about fifteen. I was so busy concentrating on the mechanics of the process that I failed to notice that she had shifted her head to the side and raised her chin slightly. When I made the plaster, I was amazed at how much the



Photo #3

position had improved the casting as compared to others that I had done. Now I always start off with the head in an interesting position though the models do not always hold it.

If the models move after the alginate has setup, the alginate will wrinkle which will definitely show up in the positive. Whether or not it can be repaired is of course depends upon how much wrinkling is present which usually it occurs at the neck. However one of the worst examples I have ever seen happened while doing a front torso. The model kept leaning more and more to the side causing a large distortion at about naval height. My original plan had been to attach a removable band of cloth as in photo #3. What I ended up doing was trimming the wrinkles off the plaster to re-contour the torso and attach permanently a cloth similar to what is shown in Photo #4 which satisfied the customer.

I think that the bent nose results from the model turning her/his head slightly at just exactly the wrong time, just as the alginate is setting up. While anything can be corrected, the easiest thing to do in this case is just repeat the casting. Also, I doubt if there is much one can do to prevent a bent nose besides encouraging the model to try to maintain the selected position. After all, three in twenty years and hundreds of castings isn't too bad of a failure rate.

Above I said that there were two things wrong with photo #2. Notice how Tiffany is frowning. I try to remember to tell the models to close their eyes without frowning which definitely detracts from the beauty of the mask. Sometimes I forget and sometimes they frown anyway. Again, the solution is a recast.

Photo #5 illustrates the third and last rare problem I want to cover in this article. Notice how the lower lip is extended making it look as if she is using smokeless



Photo #4

tobacco. What had happened was that her lips were open just a little and we pushed a small amount alginate between her lower lip and teeth as we applied the alginate. Alginate was first invented for making dental impressions and poses no health nor safety issues by being in one's mouth. However, a protruding lower lip does mess-up a portrait casting. It is possible to re-sculpt the lower lip which I have done when the model was not available for a recast. However, redoing the casting is a better solution if possible.

The problem with things that just happen is that they can go either way. Of the four examples in this article, three were detrimental and one was serendipitous. We can always fix the failures or at least hide them and then take credit we don't deserve for the successes. As I am writing this, I have something that is turning out better than I thought it would. Expect to see it in a future issue of *Sculpture Journal* with an explanation of where skill ended and luck took over.



Photo #4