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FROM MR PICKWICK TO TINY TIM: CHARLES DICKENS AND MEDICINE

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INTRODUCTION

Charles Dickens (1812-70) had three professional careers: novelist, journalist and public reader. Dickens was a true communicator not only through his writings but also through his lectures and readings. His interests included crime, education, the class system and sanitary reform. He published 15 major novels, many short stories (some with a Christmas theme), a handful of plays and several non-fiction books. His novels were initially serialised, either in weekly or monthly instalments, in magazines and then reprinted in standard book formats. He also took a keen interest in the medical profession and this together with his personal medical history I wish to discuss now.

PUBLIC HEALTH AND MEDICINE IN DICKENS'S TIME

Important developments in medicine took place in the mid nineteenth century when Dickens was at the height of his powers. In 1848, the Public Health Act reformed the sanitary conditions of towns with improved drainage and provision of sewers, the removal of all refuse from houses, streets and roads, the provision of clean drinking water and the appointment of a medical officer for each town. Although the death rate fell, life expectancy was still only 50. Infectious diseases such as cholera, pneumonia, tuberculosis, diphtheria, scarlet fever and typhoid were still prevalent and despite vaccination smallpox was under limited control. The use of anaesthetics became widely accepted after Robert Liston (1794-1847), a Scottish surgeon based at University College Hospital, first used ether and James Young Simpson (1811-70), Scottish obstetrician, later introduced chloroform into obstetric practice in Britain. Chloroform was later given to Catherine, Dickens's wife, when she gave birth to her eighth child. John Snow (1813-58), physician, administered chloroform to deliver the last two children of Queen Victoria – hence the expression 'chloroform a la reine'. Joseph Lister (1827-1912), influenced by the discoveries of Louis Pasteur (1822-95), pioneered the use of antiseptics. Florence Nightingale (1820-1910) reformed the administration and conditions of the nursing profession. In 1858, the General Medical Council was established to regulate the medical profession and establish a register of qualified practitioners.

DOCTORS, NURSES AND MEDICAL STUDENTS IN DICKENS'S NOVELS

Dickens created approximately 2000 characters in his novels and stories, of whom 50 or so were engaged in medicine in some way, mostly as surgeons. Dickens's doctors are caricatures; they are satirised and subject to thinly veiled criticisms. For example, in *Little Dorrit*, Doctor Haggage is the doctor in the Marshalsea prison where Mr Dorrit and his family are incarcerated. A scruffy practitioner and a prisoner himself, he is described by Dickens with great relish. When summoned to attend Mrs Dorrit in childbirth, he is found to be playing cards, drinking brandy and smoking a pipe with a red-faced and brandy-soaked companion. Haggage is depicted by Dickens as 'amazingly shabby, in a torn and darned rough-weather sea-jacket, out at elbows and eminently short of buttons, the dirtiest white trousers conceivable by mortal man, carpet slippers, and no visible linen'.



Nurses and Midwives

The most famous and colourful of all Dickens's medical characters is Sarah Gamp in *Martin Chuzzlewit*. It was said that 'the face of Mrs. Gamp — the nose in particular — was somewhat red and swollen, and it was difficult to enjoy her society without becoming conscious of a smell of spirits. Like most persons who have attained great eminence in their profession, she took to hers very kindly; insomuch that, setting aside her natural predilections as a woman, she went to a lying-in or a laying-out with equal zest and relish'. Mrs Gamp had an imaginary friend in Mrs Harris and an actual friend in another nurse, Mrs Betsy Prig. Both were ruthless in their treatment of patients. For example, when Mr Lewsome, himself a young surgeon, is lying desperately ill, he complains that Mrs Prig puts soap in his mouth when she is washing him.

Medical Students

Some young medical students appear in *The Pickwick Papers* as guests of Mr Wardle for Christmas. During their conversations, they shock the unworldly Mr Pickwick but amuse Sam Weller with their happy-go-lucky ways. At one point Bob Sawyer, looking around the table, exclaims that there is 'Nothing like dissecting to give you an appetite' which causes Mr Pickwick to shudder. Later, Jack Hopkins, another medical student, describes the prowess of Mr Slasher who, like other surgeons in those pre-anaesthetic days, has to operate with speed: 'He took a boy's leg out of the socket last week and the boy ate five apples and a ginger bread cake exactly two minutes after it was all over. The boy said he wouldn't lie there to be made game of, and he'd tell his mother if they didn't begin.'

MEDICAL CONDITIONS IN DICKENS'S NOVELS

Like a good doctor, Dickens had excellent powers of observation and description and he employed these skills to graphic effect when describing some unusual medical conditions in his novels. He took great pleasure in portraying the bizarre, the grotesque, and, indeed, the horrifying. During Dickens's lifetime, the visible effects of disease were much more obvious than they are today. This is partly because medical progress has fortunately eliminated many grosser manifestations of diseases, and partly because in Dickens's day there were few facilities for the segregation of people seriously afflicted in body and mind. Vague diagnoses such as brain fever (meningitis), apoplexy (paralysis due to stroke) and jail fever (typhus) appear in works by some of his contemporaries and even later. However, Dickens used his powers of observation to describe exactly what he saw and what patients told him. These accounts are like those one would expect from a trained clinician today.

The Pickwickian Syndrome

In Dickens's first novel, *The Pickwick Papers*, he introduces Joe, 'a drowsy, fat and red-faced boy' who is a servant in the household of Mr Wardle. The most frequent phrase uttered by Mr Wardle is: 'Damn that boy, he's gone to sleep again!' The boy's condition has been dubbed Pickwickian Syndrome also known as obesity hypoventilation syndrome which is the combination of obesity and hypoventilation. Normally an eponym is named after the doctor who first described it but in this case, it is named after a literary character created by Charles Dickens.

Epilepsy

Dickens described several people who suffered from epilepsy. One of these is Bradley Headstone, a schoolteacher, in *Our Mutual Friend* who suffers with isolated seizures. Another case is the poor housemaid, Guster, in *Bleak House*, who had come from the notorious workhouse in Tooting. Her epilepsy is most likely to have resulted from cranial trauma because of physical abuse at this workhouse.

Sturge-Weber Syndrome

In the 2007 BBC television production of *Oliver Twist*, Julian Rhind-Tutt played the part of Edward Leeford, alias Monks, with a port-wine stain on the left side of his face. This was plainly an interpretation by the programme's producers and make-up department of what the character might have looked like. Although Dickens does not specifically refer to a port-wine stain in the text of *Oliver Twist*, the suggestion is made clear when Mr Brownlow tells Monks '...you, who from your cradle were gall and bitterness to your own father's



heart, and in whom all evil passions, vice, and profligacy, festered till they found a vent in a hideous disease which had made your face an index even to your mind – you, Edward Leeford, do you brave me still!’ It is also clear that Monks suffers from epilepsy from Nancy’s description of him to Mr Brownlow: ‘His lips are often discoloured and disfigured with the marks of teeth, for he has desperate fits, and sometimes even bites his hands and covers them with wounds...’ A likely diagnosis for Leeford’s condition could be Sturge-Weber Syndrome, a rare congenital neurological and skin disorder which was first identified medically in 1927. Dickens described the features of the condition in *Oliver Twist* in 1839 – a full 89 years, therefore, before it was given its eponym in 1927.

Progeria

The Smallweed Family in *Bleak House* are described by Dickens as being of short stature, preserved intellect, and early ageing. This would suggest that they were suffering from a condition called progeria. Another symptom of the condition is premature baldness. Although Dickens usually paid a great deal of attention to the hair of his characters, he does not mention that the Smallweed family are bald. However, all members of the family wore hats and caps, perhaps to hide their baldness.

Dwarfism

Dwarfism or achondroplasia is found in two of Dickens’s novels. The first character is the villain in *The Old Curiosity Shop*. Daniel Quilp is described by Dickens as an elderly man of remarkably hard features and forbidding aspect, and so low in stature as to be quite a dwarf, though his head and face were large enough for the body of a giant.

The second is Miss Mowcher in *David Copperfield* whose character was thought to be based on Mrs Jane Seymour Hill, a dwarf manicurist and chiropodist and near neighbour of Dickens, living at 6 York Gate, Regent's Park. She was greatly distressed by what she and others were convinced was the portrait of her as Miss Mowcher. She wrote a letter of complaint to Dickens on 18 December 1849 and in Dickens’s reply he wrote ‘Indeed I never represent an individual but always a combination of individuals in one’. However, he later changed her character in a more positive direction in *David Copperfield* as revealed in a letter to a friend dated 12 February 1850 when he wrote ‘I am present repairing Miss Mowcher’s injury – with a very bad grace, and in a very ill humour’.

Gout

In *Pickwick Papers* Dickens wrote ‘The gout is a complaint as arises from too much ease and comfort. If ever you’re attacked with the gout, sir, jist you marry a wider as has got a good loud voice, with a decent notion of usin’it, and you’ll never have the gout aginI can warrant it to drive away any illness as is caused by too much jollity.’ In *Bleak House* Sir Leicester Dedlock is an aristocrat who suffers with gout and reference is made to the condition affecting generations of the Dedlock family.

Tuberculosis

On 3 January 1857, the *British Medical Journal* reported that ‘one person in ten now living will die of [tuberculosis]’. The connection between poverty and disease, especially in cities, had already been recognized and was discussed at length during the nineteenth century. In his works, Dickens describes three types of tuberculosis, firstly the ‘fading’ form which claimed most victims, secondly those cases which caused deformity and finally one solitary case of painful pulmonary disease.

The most famous of Dickens’s ‘fading’ tuberculosis victims is Smike, Nicholas Nickleby’s cousin in the eponymous novel. The description of Smike’s death agrees with contemporary reports of near-death incidents. Dickens writes: ‘[Smike] fell into a light slumber, and waking, smiled as before; then spoke of beautiful gardens, which he said stretched out before him, and were filled with the figures of men, women and many children, all with light on their faces; then, whispered that it was Eden – and so died.’

The first major character of Dickens suffering a disability from tuberculosis is the most famous of all: Tiny Tim in *A Christmas Carol*. This characterisation emphasises Dickens’s understanding of the connection between poverty and disease. ‘[With] *A Christmas Carol*, [Dickens] finally succeeded in awakening the nation’s conscience



to a problem it had previously been content to ignore.’ It is also likely that ‘Tiny Tim had rickets caused by low levels of Vitamin D due to a poor diet and/or lack of sunlight from blackened skies due to burning coal.

The single case of death from painful pulmonary disease due to tuberculosis is Jo, the crossing sweeper in *Bleak House*. Jo announces that he is dying. His breath, he says ‘draws as heavy as a cart.’ He might add, ‘and rattles like it.’ The metaphor of the cart is maintained until the point of Jo’s death.

CHILDREN

Much has been written on Dickens and children, focussing on his joy at their happiness, his sympathy for their sorrows and his anguish at their sufferings.

Dickens wrote an article entitled ‘The Hospital Patient’ in one of his *Sketches of Boz*. In this piece, he paints a heart-rending picture of a ward in a London hospital for the poor, with its dim light that ‘increased rather than diminished the ghastly appearance of the hapless creatures in beds, which were ranged in two long rows on either side’. He added that ‘they were victims of accidents and violence, with their faces stamped with the expressions of anguish and suffering.’

A different picture is painted in the depiction of poor Maggy in *Little Dorrit* who views the hospital where she is sent as a ten-year-old girl with a ‘bad fever’ as a blissful place: ‘Such beds there is there!’ cried Maggy. ‘Such lemonades! Such oranges! Such d’licious broth and wine! Such chicking! Oh, ain’t it a delightful place to go and stop at!’

Orphaned Children

Many orphaned children appear in Dickens’s novels. One of the most famous orphans was Oliver Twist who asked for more! Ruth Richardson, the historian, has published a book entitled *Dickens and the Workhouse – Oliver Twist and the London Poor*. She points out that the young Charles Dickens lived at one time in Norfolk Street, now Cleveland Street, in Fitzrovia, only a few doors away from the Cleveland Street Workhouse Infirmary and near The Middlesex Hospital (founded in 1745). This workhouse was the likely inspiration for Dickens’s book *Oliver Twist*. The Workhouse Infirmary building (which is now listed) later became the outpatient’s department for the Middlesex Hospital, where I attended as a medical student in the mid-1970s. Another orphan was Pip in *Great Expectations*, who has a terrifying encounter with Magwitch, an escaped convict.

HOSPITALS

Great Ormond Street Hospital

In 1850, there were still no special hospitals for children in this country, although there were 17 on the continent. Alarming in London, nearly 50% of all deaths involved young children yet children numbered only 1% of all hospital in-patients. Based on these appalling statistics, Dr Charles West (1816-98) was determined to set up the first children’s hospital in Britain. He already had experience working with children having been appointed as physician to the Universal Dispensary for Children in 1842, later renamed the Royal Waterloo Dispensary for Children and Women in 1852. Through social contacts made by his fellow doctor, Henry Bence-Jones, a committee was formed and received support from eminent philanthropists such as Baroness Burdett-Coutts (1814-1906) and public health reformers associated with the Board of Health such as Lord Shaftesbury (1801-85) and Edwin Chadwick (1800-90). Charles West had three principal ambitions for the hospital, which remain the basis of its work today: The provision of healthcare in all fields to the children of the poor, the encouragement of clinical research in paediatrics and the training of paediatric nurses.

By February 1852, sufficient backing had been obtained to open The Hospital for Sick Children at No. 49 Great Ormond Street, London. A mansion with a previous medical connection, it had been the home 100 years earlier of Queen Anne’s physician, Dr Richard Mead (1673-1754), with an extension built to house Mead’s large library containing 100,000 volumes. Great Ormond Street Hospital opened in 1852 with 10 beds. West was its senior physician for the next 23 years. Unlike today, the patients were almost all local, from the teeming slums of nearby Clerkenwell, Holborn and St. Pancras.



It was Dickens more than anyone else who, with many of his close friends, supported Great Ormond Street in the first precarious years of its existence. By 1858 the wards were becoming overwhelmed. To raise funds for expansion Dickens spoke at the charity's Festival Dinner at The Freemasons' Hall, Great Queen Street, Lincoln's Inn Fields and gave a public reading of *A Christmas Carol* at St Martin's Hall, Long Acre. These two events raised enough money to enable the purchase of the neighbouring house which increased the hospital's bed capacity to 75. However, by 1870 the wards were again becoming overcrowded and suffered poor sanitation. West and the hospital's board of management committed themselves to raising sufficient money to pay for the construction of a new purpose-built hospital which opened in 1875.

East London Hospital for Children

In 1866, east London suffered an outbreak of Asiatic cholera. The sordid poverty of the local children, overcrowding and lack of sanitation reinforced the desperate need for a children's hospital. Eventually, in 1868, the East London Hospital for Children was opened with 10 beds at a cost of £2,000. Dickens visited the hospital twice in 1869. He wrote that insufficient food and unwholesome living was the main cause of disease among the patients and advised that nourishment, cleanliness and ventilation were the best remedies.

St Luke's Hospital for Lunatics

Whenever Dickens became concerned with a matter of social importance he would find out the facts for himself rather than rely on other people. True to form, during the controversy over lunatic asylums, he visited St Luke's Hospital for the insane on 26 December 1851 and recorded his first-hand impressions in *Household Words* under the title 'A Curious Dance round a Christmas Tree'. Dickens was complimentary about St Luke's practice of 'non-restraint' and agreed that the hospital management committee could reprint the article as a promotional pamphlet.

St Luke's Hospital was founded in London in 1751 for the treatment of incurable pauper lunatics by a group of philanthropic apothecaries and others. It was the second public institution in London created to look after mentally ill people, after the Hospital of St. Mary of Bethlem (Bedlam), founded in 1246.

Certain people in Dickens's circle were professionally involved in the administration of the insane. For example, in the early 1850s a close acquaintance of Dickens was John Conolly (1794-1866), a leading psychiatrist renowned for his advocacy of non-restraint of the insane. Conolly was resident physician at Middlesex County Pauper Lunatic Asylum at Hanwell. Another friend was John Forster (1812-76), secretary to the Lunacy Commission and later a Commissioner in Lunacy who also became Dickens's biographer.

Speeches

Dickens made several speeches throughout his career in support of those hospitals which, as charitable institutions, depended on voluntary financial support. As well as supporting Great Ormond Street he had spoken on behalf of the Hospital for Consumption and Diseases of the Chest in 1843 and observed that before its foundation in 1842 'poor persons would have suffered, lingered, pined, and died in their homes, without a hand stretched out to help them in their slow decay'. Later in a speech to University College Hospital in 1864 Dickens eloquently appealed for money to be given to the hospital for the medical care it provided, for its services to medical education and for its open-minded refusal to 'coerce the judgement or conscience of any human being.'

PUBLIC HEALTH

In 1849 Dickens wrote: 'In all my writings, I hope I have taken every available opportunity for showing the want of sanitary improvements in the neglected dwellings of the poor.' He later told the Metropolitan Sanitary Association that his research 'has strengthened me in the conviction that searching sanitary reform must precede all other social remedies.' From 1850 onwards Dickens used his newly established journal *Household Words* as a powerful voice for sanitary reform. He was also friends with other public health reformers, such as his brother-in-law, Henry Austin (1812-61), who was a civil engineer for the Metropolitan Health of Towns Association, founded in 1844, and Thomas Southwood-Smith (1788-1861), physician and sanitary reformer, who devoted his life to the sick poor.



Southwood-Smith investigated at first hand the vast and overcrowded districts in London and Edinburgh, where the poor congregated, and witnessed their squalor and degradation. His reports on housing and the employment of women and children in mines were all well-known to Dickens who was his companion on several visits to the East End. It is interesting to note that passages from one of Smith's reports to Parliament appeared in *Oliver Twist* and *Bleak House*.

Edwin Chadwick, who was noted for his work on the reform of the Poor Laws and public health, published a *Report on the Sanitary Condition of the Labouring Population in Great Britain* in 1842. This is regarded as a classic text and a landmark in social history for the development of preventive medicine in Britain. Chadwick and Dickens also collaborated to improve the social conditions of the poor.

London Waters

In 1850, an article entitled 'The Troubled Water Question' appeared in Dickens's journal *Household Words* when the quality of drinking water was of public concern. The article, describing a visit to the Grand Junction Waterworks Company, Brentford helped to influence decisions about London's water supply when it was discussed at a Great Water Supply Congress in London. The article presented scientific and statistical information to the lay reader in an informal style. It pointed out that the London waterworks companies supplied London's 2.3 million population, living in 300,000 houses, with an average of 24 gallons of water per day. The article described how the water was taken from the Thames and pointed out that in the bed of the river was an enormous culvert pipe laid parallel to its path. Its mouth was open towards Richmond and was barred across with a grating, to intercept stray fish, murdered kittens, or vegetable impurities.

Dickens had problems with the supply of water to his houses. For example, when he moved into Tavistock House he regularly ran out of water and had to replace the cistern with a larger one which held up to 400 gallons. Later, in 1857 he moved to Gads Hill Place, Kent and had to have a deep well dug in his garden to provide sufficient water to the house.

Fog and Smoke

In 1851 Dickens wrote a letter to Sir Edward Bulwer Lytton which said 'London is a vile place, I sincerely believe. I have never taken kindly to it since I lived abroad. Whenever I came back from the Country now, and see that grey heavy canopy lowering over the housetops, I wonder what on earth I do there, except on obligation.'

In London, during the early nineteenth century, the homes of the upper and middle classes existed near areas of unbelievable poverty and filth. Rich and poor alike were thrown together in the crowded city streets. Street sweepers attempted to keep the streets clean and free of manure, the result of thousands of horse-drawn vehicles. The city's thousands of chimneys pots belched out coal smoke, resulting in soot which seemed to settle everywhere.

In *Little Dorrit* Dickens describes a London rain storm: 'In the country, the rain would have developed a thousand fresh scents, and every drop would have had its bright association with some beautiful form of growth or life. In the city, it developed only foul stale smells, and was a sickly, lukewarm, dirt- stained, wretched addition to the gutters.' During the London smog, when link boys carrying torches had to guide people to their homes, Dickens became very concerned at the effect the smog had on people's health. He referred to smoke pollution in a telling phrase. Smoke he said, was 'the London ivy' which wreathed itself around every building and clung to every dwelling.

Infectious Disease

During Dickens's time, infectious diseases were prevalent and are regularly highlighted in his correspondence and novels. They included scarlet fever, measles, whooping cough, consumption (TB), malignant typhus, typhoid, diphtheria, smallpox, influenza and the common cold.

Scarlet fever was a much-feared disease, which featured in several of his novels, and caused devastating epidemics through the nineteenth and early twentieth centuries, resulting in thousands of deaths. Dickens knew



more than he would have wished about scarlet fever. In 1835 both Catherine Hogarth, his future wife, and her mother contracted the disease; both survived. Later, in 1847, his son Charley caught scarlet fever at King's College School, causing the family, who were on holiday in Paris to hurriedly return to London to be near him.

The clergy and their families were not immune and between 6 March and 8 April 1856 the Dean of Carlisle, Archibald Campbell Tait (who later became Archbishop of Canterbury) lost five of his children to scarlet fever.

Whooping cough, on the other hand, was one of the major infectious diseases which failed to arouse any substantial preventive attention in the years up to 1900. It was, however, one of the great killers of nineteenth-century Britain, and an almost universal childhood experience for all social classes. For example, in 1847 Dickens wrote to Miss Burdett Coutts and said 'Tomorrow morning we are going down to Broadstairs, where we purpose remaining until the end of September-though of course I shall be continually coming backwards and forwards. Our children have all got whooping cough, and the change is recommended for them. They never cry, but go into the corners to be convulsed, and come out cheerful.' Fortunately, all his children recovered.

The 1849 Tooting Cholera Disaster

In 1849 180 children died from cholera at a privately operated residential school for pauper children in Tooting run by Bartholomew Peter Drouet. The scandal became known as the Tooting Cholera Disaster. At a subsequent coroner's inquest, presided over by Thomas Wakley (1795-1862), editor of the *Lancet*, Drouet was found guilty of manslaughter. Despite evidence showing that Drouet was negligent in the treatment of the children in his care, he was later found not guilty of manslaughter at a criminal trial. Dickens was so angry at the ruling that he wrote: 'The cholera, or some unusually malignant form of typhus assimilating itself to that disease, broke out in Mr Drouet's farm for children, because it was brutally conducted, vilely kept, preposterously inspected, dishonestly defended, a disgrace to a Christian community, and a stain upon a civilised land.'

Spitting

When Dickens went to America in 1842 he was appalled by the universal habit of spitting which he encountered during his travels. In the courts of law, the judge had his spittoon on the bench, the counsel had theirs, the witness had his, the prisoner his, and the crier his. The jury was accommodated at the rate of three men to a spittoon (or spit-box as they called it there) and the spectators in the gallery were also provided for, since so many men expectorated without cessation. There were spit boxes in every steamboat, bar-room, public dining-room, office and place of general resort. In the hospitals, the students were requested, on placards, to use the boxes provided for them, and not to spit upon the stairs. Twice Dickens witnessed gentlemen, at evening parties in New York, turn aside when they were not engaged in conversation, and spit upon the drawing-room carpet. And in every bar-room and hotel passage the stone floor looked as if it were paved with open oysters due to the amount of spitting. Dickens concluded that spitting was the most sickening, beastly, and abominable custom that ever civilization saw.

DICKENS AND MEDICINE

Dickens's broad knowledge of medicine was based on many factors including conversations with doctors plus knowledge gained from reading books and pamphlets. He knew many doctors - some as friends, some who were his family doctor, others whom he met through his professional life and some to whom he was referred by his family doctor for professional advice.

Dickens built up a large library. Two lists detailing the books and pamphlets in his collection on history, travel, natural history and supernatural reports as well as medicine-related texts have survived. These lists date from his home in Devonshire Terrace, London, and later from Gad's Hill Place, Kent, where he lived from 1856 to his death in 1870. His library at Gad's Hill Place included most of the books from Devonshire Terrace plus many medical texts on psychiatry, mesmerism, temperance and other public health issues.

Dickens's Views on Disease

Dickens was a supporter of the miasma theory which was based on the belief that diseases were caused by a poisonous vapour consisting of suspended particles of decaying matter in the air – the so-called miasma - and



characterised by its foul smell. In nineteenth-century England the miasma theory made sense to the sanitary reformers. Rapid industrialisation and urbanisation had created many poor, filthy and foul-smelling city neighbourhoods that tended to be the focal points of disease and epidemics. Following improvements in the housing, sanitation and general cleanliness of these areas, levels of disease were seen to fall, an observation that lent weight to the miasma theory. Later in the nineteenth century the germ theory of disease replaced the miasma theory. However, the miasmatisms were partially correct since by removing the causes of bad smells they inadvertently removed bacteria, the real cause of many diseases.

Dickens's Views on Health

Dickens believed in the discipline of 'air, exercise and cold water.' He once said: 'I have faith in hydrotherapy myself – drink cold water night and morning – and pour it down my back besides.' In 1849, whilst on holiday in Bonchurch, Isle of Wight he discovered a waterfall, with a cascade of 150 feet in the grounds where he was staying and managed to get it converted into a Shower Bath.

In 1839, he records swimming in the Thames from Petersham to Richmond bridge before breakfast. When he was on holiday he swam in the sea at Bonchurch, Broadstairs, Folkestone and Italy.

Dickens believed in the 'water cure' and in 1851 took Catherine, his wife, to Malvern for treatment under the supervision of Dr James Wilson (1807-67). In a letter to Wilson Dickens wrote 'I am rather uneasy about Kate, who has an alarming disposition of blood to the head, attended with giddiness and dimness of sight.'

Dickens also liked to walk long distances. For example, in a letter Dickens wrote in 1857 he said that he 'performed his celebratory feat of getting out of bed at 2 in the morning, and walking down to Gads Hill from Tavistock House – over 30 miles - through the dead of night.'

Fringe Medicine

Although Dickens was acquainted with many doctors who practised orthodox medicine he was also interested in 'fringe medicine'. One of his best friends was John Elliotson (1791-1868), professor of medicine from 1831-38 at University College, London who was forced to resign after he upset his medical colleagues by practising mesmerism on his hospital patients. Elliotson was viciously attacked in the columns of the *Lancet* which regarded mesmerism as mere quackery. Despite these criticisms, Dickens was impressed with Elliotson's demonstrations and frequently recommended his friends to Elliotson's care and even practised mesmerism himself. For example, when Dickens was living in Switzerland he mesmerised his next-door neighbour, Augusta de la Rue and tried it on his wife Catherine, during their visit to America in 1842.

Dickens was also interested in phrenology, a discipline that involved linking areas on a person's skull to aspects of the individual's personality and character.

DICKENS'S MEDICAL HISTORY

Dickens's correspondence provides us with a wealth of information regarding his health.

Colds

Dickens suffered with numerous colds and recorded 47 episodes in his correspondence between 1832-68. He sometimes had more than one attack a year: in 1844, he had five episodes and in 1851 four. He used as many as 20 adjectives to describe his colds using words such as deplorable, intolerable, oppressive, hideous, villainous, dreadful, indescribable and monstrous. In 1835, he wrote a letter to his future wife Catherine and said 'My cold I am sorry to say is very bad indeed this morning, accompanied by a head-ache, and all the unpleasantness which usually follow in its train. If it should be a damp night, and the fog should continue, would you advise me to stay at home, take some gruel, try hot water for my feet, and go to bed early?' Treatments included mustard poultices to the chest and neck, foot baths, camphor liniment to the back and drinking barley water. Complications included sinus infections, wheezing and ear infections.



Renal Colic

From childhood Dickens suffered with numerous episodes of agonising, intermittent spasms in his left side, which was most likely due to renal colic caused by kidney stones. His letters mention 12 episodes which occurred between 1834 and 1867. Dickens describes these episodes as 'rheumatism in the back', 'exquisite torture', 'spasm in my left side' and 'ecstasy of pain'. Treatments included hydrocyanic acid, laudanum, henbane and wearing a broad flannel belt around the waist.

Rheumatism of the Face or 'Tic Douloureux'

Dickens suffered with at least 10 episodes of what he called 'rheumatism of the face' and involving only one side. In one letter, he called it 'tic douloureux' which is also known as trigeminal neuralgia and first described by Dr John Fothergill (1712-80) in 1765. These episodes were often described by Dickens as 'insupportable torture' and describes himself 'tearing myself to pieces'. He treated these episodes with poultices to the face. On 26 May 1861, he wrote a letter to Lady Olliffe from Dover and said, 'I have run away to the sea beach to get rid of my neuralgic face.' Therefore, Dickens was very likely to be correct with his diagnosis of tic douloureux.

Obsessive Compulsive Disorder

Dickens developed a ritualistic routine in his domestic life, together with an obsessive approach to work, which is consistent with Obsessive Compulsive Disorder. He had a habit of rearranging furniture whenever he stayed in a hotel room and regularly inspected his children's bedrooms, leaving notes for them when he was not satisfied with their tidiness. For example, in a letter to his wife Catherine, during a visit to Bath in 1840, he wrote: 'Of course I arranged both the room and my luggage before going to bed, and had everything very tidy'. Another example was when he was on his tour of America in 1842 and he wrote 'everything is in the neatest order, of course; my shaving tackle, dressing case, brushes, books, and papers, are arranged with as much precision as if we were going to remain here for a month.'

Anal Fistula

Dickens suffered with an anal fistula for which an operation was carried out in his own home, without an anaesthetic, by the London surgeon Frederick Salmon (1796-1868), founder of St Mark's hospital. In 1841, Dickens wrote a letter to his family doctor, Frank Beard, to say: 'My Dear Beard. You will hardly believe it I dare say, for I can't, but I have been very ill for a week, and last Friday Morning was obliged to submit to a cruel operation, and the cutting out root and branch of a disease caused by working over much which has been gathering it seems for years. Thank God, it's all over and I am on the Sofa again - rather lean but filling the Doctor with boundless astonishment notwithstanding. Kate to whom I dictate this sends all kinds of loves. When you have time, come and see me.'

Overwork and Stress

Dickens worked extremely hard throughout his life and at times suffered with overwork (he wrote an average of 20-30 pages per day). He also gave numerous public readings on tours both in the UK and America, moving from one hotel to another and often travelling by rail. Because of these and other factors he suffered with stress and near-breakdown on several occasions. Whilst on his reading tour in America, on 8 March 1868 he wrote 'I am beginning to be tired, and have been depressed all the time (except when reading), and have lost my appetite.'

Gonorrhoea

Dickens suffered with what appears to have been gonorrhoea. In a letter to Frank Beard, his personal doctor, dated 25 June 1859, he wrote: 'My bachelor state has engendered a small malady on which I want to see you. I am at Gad's Hill for the summer, but have come up to London this morning on purpose.' Later in another letter to Frank Beard, on 1 July 1859, Dickens wrote 'Will you call upon me here today, after you leave home? I shall expect you between 1 and 2, but, anyway, will wait until you come. What I principally want to know is, whether your medicine irritates my skin. In other respects, I hope I'm certainly better.' Gonorrhoea was frequently treated with silver nitrate and this could have caused the rash although it could have also been due to disseminated gonorrhoea. A further clue about the diagnosis of gonorrhoea comes from a letter from Dickens to Wilkie Collins (1824-89), dated 16 August 1859. Dickens wrote: 'I want very much to come to old Broadstairs



for a day, but cannot see my way there yet: having to pick up the story, and to blaze away with an eye to October. But I don't give it up; far from it. I really do hope to come for a day, before your time is up. Perhaps a tumble into the sea might – but I suppose there is no nitrate of silver in the ocean?’

Earlier in 1851, Dickens father had died after an operation performed without chloroform by Robert Wade, a surgeon. Dickens graphically described the scene as a ‘slaughter house of blood.’ It has been suggested by Bowen that his father had a bladder stone causing urinary retention. However, there is a clue in the death certificate suggesting an alternative diagnosis which states ‘Rupture of the Urethra from old standing stricture and consequent mortification of the scrotum from infiltration of urine’. This would suggest that a urethral stricture had caused the urinary retention. A further clue is in a letter which Dickens wrote on 31 March 1851, the day his father died. The letter said ‘He [John Dickens] had kept his real malady so profoundly secret, that when he did disclose it his state was most alarmingly advanced towards the sad end.’ Therefore, it is highly likely that John Dickens had suffered with gonorrhoea which was a major cause of urethral strictures in these pre-antibiotic days.

Chronic Carbon Monoxide Poisoning

Dickens made two visits to America in early 1842 and from Nov 1867- April 1868 and travelled long distances by railway. On his second visit, which lasted five months, he suffered with a variety of debilitating symptoms including headaches, poor sleep, loss of appetite, lethargy and hair loss plus the ‘American catarrh’ which surprisingly cleared up after only four days at sea on his return journey back to England. Many of these symptoms could be due to chronic carbon monoxide poisoning from unventilated railway cars which were heated by charcoal stoves.

Other Health Issues

Dickens suffered from numerous headaches throughout his life due to a variety of reasons which include tension, migraine, colds and sinusitis. He suffered with episodes of wheezing and coughing as a complication of his colds suggesting mild asthma. Dickens also suffered with toothache, had some extractions and in 1867 a back tooth fell out. Other ailments included influenza, haemorrhoids, a carbuncle on the head, a cut shin, a bite on the arm from a horse, constipation and depression.

The year 1865

1865 was an important year for many reasons. Elizabeth Garrett Anderson became the first woman doctor to qualify in Britain, Lewis Carroll published *Alice in Wonderland* and the Locomotive Act was introduced which stipulated that you could drive your locomotive at a maximum of 2 mph in town and 4 mph in the country. However, it was also a critical year in the medical history of Charles Dickens, who was now 53 years old. During this year, he had a transient stroke – which was not considered serious - he was a passenger in the Staplehurst railway accident, he suffered the beginnings of his heart problems and the first manifestations of gout.

Heart Problems

In 1866 Dickens saw William Brinton (1823-67), physician, about an alteration in his pulse. In a letter following this consultation Dickens wrote: ‘There seems to be degeneration of some functions of the heart ...and it does not contract as it should. So, I have got a prescription of iron, quinine and digitalis, to set it a going, and send the blood more quickly through the system.’

Post-traumatic Stress Disorder

Charles Dickens was travelling with Ellen Ternan and her mother on the train; they all survived the derailment in the Staplehurst railway accident. He tended several victims, some of whom died while he was with them. The experience affected Dickens greatly; he lost his voice for two weeks and afterwards was nervous when travelling by train, using alternative means when available. This would suggest that he suffered with post-traumatic stress disorder. Dickens died five years to the day after the accident; his son said that he had never fully recovered.



Gout

In 1867 Dickens saw Sir Henry Thompson (1820-1904), professor of clinical surgery, University College Hospital, for foot problems which Dickens thought were due to walking in the snow. The initial diagnosis was an inflamed bunion and superimposed erysipelas infection. However, Thompson later changed his diagnosis to gout. Dickens then travelled up to Edinburgh and saw James Syme (1799-1870), a surgeon, who ridiculed the idea of gout. He apparently agreed that the trouble was due to walking in the snow and described the disease as 'an affection of the delicate nerves and muscles originating in cold'. Dickens had 10 episodes of gout between 1865 and his death in 1870.

Dickens enjoyed mutton chops, seafood and port, all rich in purines, which would have raised the uric acid levels in his blood and caused gout. In Dickens's time, gout was often referred to as rheumatic gout. However, in 1853, Jean-Martin Charcot, a French physician, differentiated between the two diseases. It is also interesting to note that renal colic is usually the first presenting symptom of gout and later proceeds to pain in the big toe in most patients. Treatments included laudanum to relieve the pain, poppy poultices and wearing a special protective boot. Weeks before his death Dickens even tried to wear a voltaic band on his foot to relieve his symptoms.

I believe that the reason why Dickens was in denial about his diagnosis of gout was because his two close friends, John Forster and Wilkie Collins, had gout and he did not want to suffer like they did.

Sir Thomas Watson

In 1869, whilst on one of his reading tours, Dickens suffered a mild stroke which affected the left side of his body. Frank Beard immediately travelled up to Blackpool to meet him and brought Dickens back to London to see an eminent physician called Sir Thomas Watson (1792-1882), who advised him to reduce his workload. Typically, Dickens ignored this advice and continued his punishing work schedule including a series of readings in London. On 8 June 1870, Dickens suffered a severe stroke at Gads Hill and died the following day. He was buried in Poets Corner in Westminster Abbey on 14 June 1870.

Conclusion

Dickens would have made a good doctor as he was compassionate, cared about children and the poor, campaigned on sanitary matters, was a good communicator and had excellent powers of observation and description. He believed in 'air, exercise and cold water' as the route to a healthy lifestyle. However, he probably shortened his life expectancy through overwork and especially with his arduous reading tours towards the end of his life.

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