

From the Slaughter House of Blood to Mr Pickwick: Charles Dickens and Medicine

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Charles Dickens [1812-70] (Fig 1) was a keen observer and an expert on description. One example of this was in a letter Dickens wrote about his father, John Dickens, after his father was seen by Robert Wade (1798-1872), a urological surgeon, for urinary retention. Dickens wrote that: ‘Wade instantly performed (without chloroform) the most terrible operation known in surgery, as their only chance of saving him’. Dickens said his father: ‘bore it with astonishing fortitude, and I saw him directly afterwards – his room, a slaughter house of blood’. Unfortunately his father’s condition deteriorated and he died a few days later. The entry on the death certificate was: Rupture of the urethra from old standing stricture and consequent mortification of the scrotum from infiltration of urine.



Fig 1. Charles Dickens

Dickens was a true communicator not only through his writings but also through his lectures and readings. His interests included crime, education, medicine and the class system. He published over a dozen major novels, a large number of short stories (some with a Christmas theme), a handful of plays and several non-fiction books. His novels were initially serialised

in weekly and monthly magazines (*Household Words* and *All the Year Round*) and then reprinted in standard book formats.

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

Early influences

One early influence on Dickens's life was when his father, John Dickens, was imprisoned in the Marshalsea debtors' prison, Southwark, London with his family except for Charles, then 12, who was boarded with a family friend and his older sister Frances who attended the Royal Academy of Music. On Sundays Dickens and Frances would spend the day at the Marshalsea with the rest of the family. Years later he would use the prison as a setting in *Little Dorrit*. To pay for his board and to help his family, Dickens was forced to leave school and work ten-hour days at Warren's blacking warehouse, on the Hungerford stairs (Fig 2), London where he earned six shillings a week pasting labels on pots of boot blacking. He was living in Camden at this time and so had to walk four miles to and from work. Later he asked: 'how I could have been so easily cast away at such an age'.



Fig 2. Hungerford stairs

The strenuous and often cruel working conditions of the factory made a lasting impression on Dickens and later influenced his fiction and essays, becoming the foundation of his interest in the reform of socio-economic and labour conditions, the rigours of which he believed were unfairly borne by the poor. Dickens later reflected on his time at Warren's blacking warehouse when he wrote: 'It was a crazy, tumble-down old house with its rotten floors and staircase, and the old grey rats swarming down in the cellars, and the sound of their squeaking and scuffling coming up the stairs at all times, and the dirt and decay of the place, rise up visibly before me, as if I were there again.'

Dickens powers of observation, of the city in which he spent most of his life, acted as a stimulus to his writings. He regularly walked the city streets and his descriptions of nineteenth-century London allowed readers to experience the sights, sounds and smells of the historic city. In early nineteenth century London, the homes of the upper and middle classes existed in close proximity to areas of appalling 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 innumerable chimney pots belched out coal smoke, resulting in soot which seemed to settle

everywhere. In many parts of the city raw sewage flowed along the gutters that emptied directly into the Thames. Street vendors hawking their wares added to the cacophony of street noises.

Developments in medicine around 1850

Important developments in medicine took place in the mid nineteenth century when Dickens was at the height of his powers. The use of anaesthetics became widely accepted after James Simpson introduced ether and then chloroform into obstetric practice in Britain. Chloroform was later given to Dickens's wife, when she gave birth to her eighth child. John Snow administered chloroform to deliver the last two children of Queen Victoria – hence the expression 'chloroform a la reine'. Joseph Lister, influenced by the discoveries of Louis Pasteur, pioneered the use of antiseptics. Florence Nightingale 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. In 1848 the Public Health Act improved the sanitary conditions of towns and 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.

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. He is a scruffy practitioner and a prisoner himself and 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’. In contrast to Dr Haggage, a surgeon named Mr Chillip supervises the birth of David Copperfield in the comparatively genteel surroundings of Blunderstone rookery. Chillip gives the impression of ineffectiveness and is described as ‘...the meekest of his sex, the mildest of little men. He sidled in and out of the room, to take up the less space. He walked as softly as the ghost in Hamlet, and more slowly’.

Nurses and midwives

The most famous and colourful of all Dickens’s medical characters is Sarah Gamp (Fig 3) 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 was washing him.



Fig 3. Sarah Gamp

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 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 it they didn’t begin.’

Medical conditions and diseases

One of Dickens’s great skills was his accurate description of diseases and medical conditions. 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' appear in works by some of his contemporaries and even at a later date. However, Dickens used his powers of observation to describe exactly what he saw and what patients told him. These accounts were similar to those which one would expect from a trained clinician today.

The Pickwickian syndrome

In Dickens's first novel, *The Pickwick Papers*, he introduces Joe (Fig 4) who is '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.



Fig 4. Joe

Epilepsy

Dickens described a number of 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 as a result of physical abuse at this workhouse.

Stroke

Dickens portrays several stroke victims in his novels. Before describing them in more detail it is helpful to know what was meant by stroke during Dickens's time. In 1829, stroke was defined as 'a pathological state of the brain, characterised by the sudden suppression of higher nerve functions, consciousness, the senses and voluntary motions, in which however the lower or so-called vital functions, especially respiration and blood circulation, continue largely unimpaired'. In Dickens's novels strokes can be grouped into those that were fatal, those which were precipitated by violent emotion, those that were used as a literary device, and those associated with religious or moral rigidity.

An example of a fatal stroke appears in 'The Convict's Return' in *The Pickwick Papers* when a young man who had been transported for theft, returns to the village where he had grown up. In the meantime his mother has died and so he encounters his father – a workhouse inmate who had abused him and his mother. The old man becomes terrified at seeing his son and strikes the young man; the youth defends himself and then drops his arms to his side. The old man then utters a loud yell and his face turns black; the gore rushes from his mouth and nose, and dyes the grass dark red, as he staggers and falls. He had ruptured a blood-vessel; he was a dead man before his son could raise him from that thick, sluggish pool.

A victim of stroke following violent emotion is John Willet in *Barnaby Rudge*. When the Maypole Inn is ransacked, Willet loses his senses, not really comprehending what has befallen him, and continues to sit staring about him; awake as his eyes, certainly, but with all his powers of reason and reflection in a sound and dreamless sleep.

An example of stroke as a literary device occurs in *Martin Chuzzlewit* and affects Anthony Chuzzlewit. The sounds Chuzzlewit makes when he is stricken are misinterpreted by Mr Pecksniff and Chuzzlewit's son, Jonas, who, sees Anthony Chuzzlewit extended on the floor, with the old clerk on his knees beside him. The day after the episode, Anthony Chuzzlewit appears, dressed, in the room where his son Pecksniff is sitting. He is near death and exhibits signs typical of certain forms of stroke. He is unable to articulate, although most certainly clear in his own mind as what he is saying. He seems to utter words, but they were such as man had never heard. And this was the most fearful circumstance of all, to see him standing there, babbling in an unearthly tongue.

A stroke associated with religious and moral rigidity occurs in *Little Dorrit* to Mrs Clennam (Fig 5). Dickens describes her stroke thus: 'There, Mrs Clennam dropped upon the stones; and she never from that hour moved so much as a finger again, or had the power to speak one word. For upwards of three years she lived and died a statue.' In fact for most of the book Mrs Clennam performs the function of a psychological study of its own.



Fig 5. Mrs Clennam

Tuberculosis

Tuberculosis was prevalent in Dickens's time. 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 case of 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 due to tuberculosis is the most famous of all: Tiny Tim (Fig 6) 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.'



Fig 6. Tiny Tim

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. In fact, *Bleak House* is by far the most rewarding of Dickens’s novels for a reader interested in medical description. Most of the medical references in Dickens’s works are found here, ranging from environmental questions to specific diseases, and beyond to the inexplicable when Krook, a rag and bone merchant, dies of spontaneous human combustion.

Hospitals

Dickens had a long connection with hospitals throughout his life both in his writings and personal campaigns. 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 (Fig 7) 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.'



Fig 7. Guys Hospital accident ward

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!'

Dickens made a number of speeches throughout his career in support of several hospitals which, as charitable institutions, depended on voluntary financial support. For example, he spoke on behalf of the Hospital for Consumption and Diseases of the Chest, London in 1843 where he observed that before its foundation a year earlier '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 at University College Hospital, London in 1864, Dickens eloquently appealed for money to be given to the hospital in support of 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'.

Great Ormond Street Hospital

In 1850 there were still no special hospitals for children in Britain, although there were 17 on the continent. This is despite the fact that nearly 50 per cent of all deaths involved young children yet only one per cent of hospital in-patients were children. Based on these appalling statistics Charles West (Fig 8), a physician, decided to set up the first children's hospital in Britain. Through social contacts made by a fellow doctor, Henry Bence-Jones, a committee was formed. The committee received support from eminent philanthropists such as Baroness Burdett-Coutts and public health reformers associated with the Board of Health such as Lord Shaftesbury and Edwin Chadwick. West had three principal ambitions for the hospital, which remain the basis of its work today. These were 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.



Fig 8. Charles West (1816-98)

Great Ormond Street Hospital opened in London in 1852, with two 10-bed wards - one for boys and one for girls. 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 and gave a public reading of *A Christmas Carol*. These two events raised enough money to enable the purchase of the neighbouring house which increased the hospital's bed capacity from 20 to 75. 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 (Fig 9).



Fig 9. Great Ormond Street hospital.

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 and wrote that insufficient

food and unwholesome living was the main cause of disease among the patients.

Nourishment, cleanliness and ventilation, were the remedies he advised.

St Lukes 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. Dickens was complimentary about St Luke's practice of 'non-restraint'. He agreed that the hospital management committee could reprint the article as a promotional pamphlet.

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, 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, who was secretary to the Lunacy Commission and later became a Commissioner in Lunacy. Forster also became a biographer of Dickens.

Charles Dickens and links to John Hunter

In 1850 two articles appeared in Dickens's journal *Household Words* following visits to the Royal College of Surgeons in Lincoln's Inn Fields, London. The first article on 10 Aug 1850 was entitled: 'What there is in the roof of the College of Surgeons'. It gave intimate details of how the various anatomical specimens were prepared in the attic of the College prior to moving them down to the Hunterian Museum on the ground floor. The article described 'walls lined with boxes, something like those in the milliners shop, but instead of holding laces and ribands, we find them labelled 'Wolf', 'Racoon', 'Penguin', 'Lion', 'Albatross',

and so on with names of birds, and beasts and fishes. Another room is likened to ‘an alchemists study.’

The second article, on 14 December 1850, described the sight that greeted visitors immediately entering the museum – ‘the relics of the huge monsters who roved in the primeval wilds of our earth long before the Flood’ (Fig 10). It also mentions a pedestal on which stood the eight foot high skeleton of the Irish giant, Charles Byrne. Today Byrne’s skeleton still occupies a prominent place in the Hunterian museum.

Today both the lives of Dickens and Hunter are still remembered annually with special wreath laying ceremonies in Westminster Abbey.

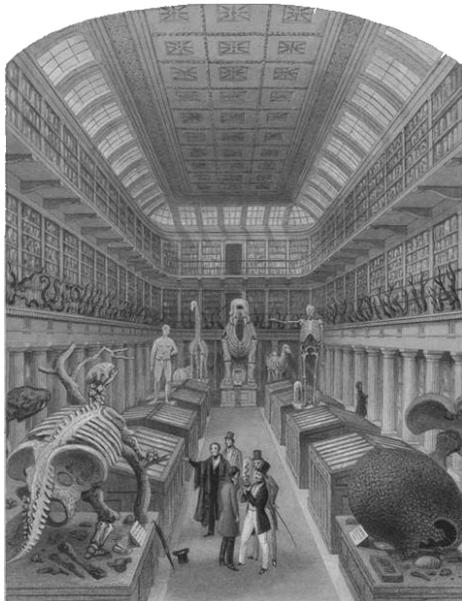


Fig 10. Hunterian museum

Prostitution

Another area that concerned Dickens was prostitution and the question of whether prostitutes could be helped to return to a normal way of life. Prostitution, disease and crime often went hand in hand and react and fed off each other. Urania Cottage was an asylum established by Dickens in 1847 with his philanthropist friend Baroness Burdett Coutts to rehabilitate former

prostitutes and other 'fallen women'. The project added a major burden in Dickens's already busy schedule, but he continued his commitment and ran the house for 12 years. It is thought that about 100 women benefited from Urania Cottage between 1847 and 1859.

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 was able to use the 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, who was a civil engineer for the Metropolitan Health of Towns Association, founded in 1844 and Thomas Southwood-Smith, who devoted his life to the sick poor.

Southwood-Smith in particular, 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, was another close friend of Dickens as well as of Southwood-Smith. Chadwick's 1842 *Report on the Sanitary Condition of the Labouring Population in Great Britain* is a classic text and a landmark in social history and the development of preventive medicine in Britain. Chadwick and Dickens 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*. The article, describing a visit to the Grand Junction Waterworks Company, 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.

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, 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 for manslaughter at a criminal trial. Dickens was angry at the ruling and 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.'

Housing

Dickens took a close interest in the improvement of peoples living conditions. In 1852, in collaboration with Baroness Burdett Coutts, he became involved in planning a large housing project known as Columbia Square, in Bethnal Green, which was completed in 1862. It consisted of four apartment blocks arranged around a courtyard, and able to accommodate 1,000 people in 183 flats. Rents ranged from 2s 6d for single rooms to 5s 6d for three room flats and all tenants had access to laundry rooms, club rooms, play areas and storage areas.

Registration of births and deaths

In 1860 an article entitled 'Registration of Sickness' appeared in Dickens journal *All the Year Round*. The article voiced concern that there was no full registration of births in Britain; a complete silence as to the still-born and no record whatsoever of the nature and duration of diseases that do not end fatally whilst those ending in death the registrar general accepted the cause of death from both competent as well as incompetent witnesses. At this time 83 per cent deaths in Britain were certified by medical attendants while 17 per cent were certified by others. Vague diagnoses such as 'want of vitality' and 'worn out stomach' were often given. More than a decade later the Births and Deaths Registration Act 1874 made registration compulsory.

Fringe Medicine

Although Dickens was acquainted with many doctors who practised orthodox medicine he was also interested in 'fringe medicine'. He was interested in phrenology, a discipline that involved linking areas on a person's skull to aspects of the individual's personality and character. Dickens also became took a keen interest in mesmerism. One of his best friends was John Elliotson (Fig 11), professor of medicine (1831-38) at University College, London

who after he upset his medical colleagues by practising mesmerism on his hospital patients was forced to resign. 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.



Fig 11. John Elliotson (1791-1868)

Dickens health issues

Dickens worked extremely hard throughout his life and at times suffered from the effects of overwork. He used to write on average of 20 to 30 pages per day and gave numerous public readings in Britain and a demanding reading tour of America. He also suffered with stress and near breakdown. Despite his exhausting schedule he enjoyed walking long distances. For example, in a letter in 1857 Dickens wrote 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'.

Dickens developed a ritualistic routine in his domestic life as well as a compulsive approach to work, which today would be considered as obsessive compulsive disorder. For example, he had a habit of rearranging furniture whenever he stayed in a hotel room and regularly inspected his children's bedrooms leaving notes when he was not satisfied with their tidiness. In 1841 Dickens suffered with an anal fistula and an operation was carried out by the London surgeon Frederick Salmon in Dickens own home, without an anaesthetic. Dickens was troubled with episodes of agonising, intermittent spasms in his left side throughout his life and is suggestive of renal colic.

Gonorrhoea

In 1859 Dickens developed what appears to have been gonorrhoea. In a letter to his doctor 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 Dickens also mentioned that his personal doctor Frank Beard prescribed medicines which irritated his skin. At this time gonorrhoea was frequently treated with silver nitrate which could have caused a rash although equally the rash could have been due to disseminated gonorrhoea. Later Dickens believed a trip to the sea would restore him and so he wrote to his friend Wilkie Collins about the possibility of going to Broadstairs. A bigger clue to this malady comes in another letter when he wrote: 'Perhaps a tumble into the sea might? But I suppose there is no nitrate of silver in the ocean.'

Medical consultations

Dickens's family doctor, Beard occasionally referred Dickens to various specialists for an expert opinion. For example, in 1866 Dickens saw William Brinton (1823-67), a 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.’

Foot problems

In 1867 Dickens saw Sir Henry Thompson (Fig 12), a surgeon 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’.

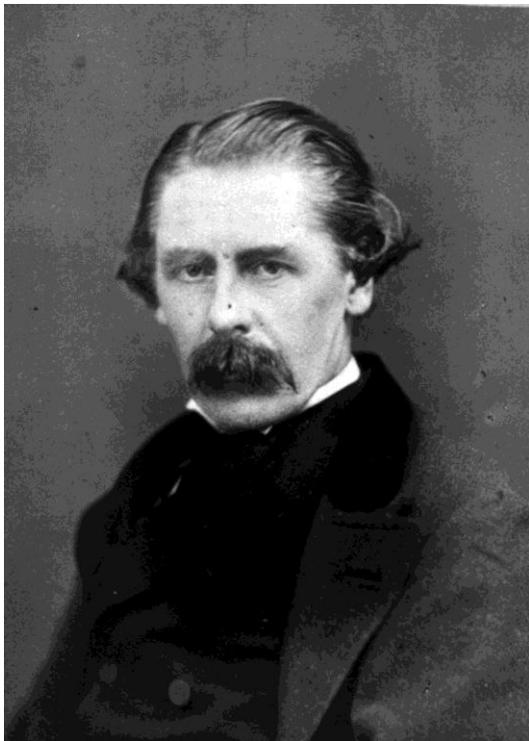


Fig 12. Sir Henry Thompson (1820-1904)

Sir Thomas Watson

In 1869, whilst on one of his reading tours, Dickens suffered with 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 Sir Thomas Watson (1792-1882), physician, who advised him to reduce his workload. Typically, Dickens ignored this advice and continued his punishing work schedule. The following year, 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.
