Medical men and some literary ladies

Is he one of us?

‘For my own part, I like a medical man more on a footing with the servants; they are often all the cleverer’

(Lady Chettam in *Middlemarch*, George Eliot)

Novelists can often portray their characters as more true to life and as more honest representations of people than biographers and certainly than autobiographers. A well written and researched novel conveys the mood of the times and the behaviour and aspirations of its performers much more easily than a history book. There were some remarkably perceptive female Victorian novelists, particularly George Eliot and Elizabeth Gaskell; their research, their personal experiences and their great gifts of portrayal have left us some intriguing medical men to consider.

Does anyone talk about a ‘medical man’ nowadays? Did the term mean more to the Victorians, who used it, than someone medically qualified and did it conjure up pictures of a man who not only had certain responsibilities towards his fellow men but who also had a well defined place in society? The class conscious Victorians had to know where they stood with regard to their station in life.

Where did the ‘medical man’ stand? Much depended, in those days, on whether you were a gentleman or not. Victoria Glendinning, in her biography of Anthony Trollope, discusses nineteenth century views on the class system and what constituted being a gentleman—not an easy thing to define, although gentlemen easily recognised one another and servants apparently had no problem in distinguishing them either. Being a gentleman gave access to power, influence and society; ‘The one great line of demarcation in the world was that which separated gentlemen from non-gentlemen’ said one of Trollope’s characters.

Taken as a whole, in the early years of the nineteenth century, the profession was not highly rated. This was at a time when the profession was only just beginning to present a unified face. In general, physicians were more acceptable in society than surgeons, and both more so than apothecaries, apothecary-surgeons and the ‘quacks’ dispensing their remedies around the country, although, of course, the leaders of the profession, the physicians and surgeons at the great teaching hospitals were even then already quite acceptable in ‘society’.

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George Eliot (Marian Evans)

George Eliot was an outstanding example of a Victorian novelist who researched her subjects exhaustively and was a careful observer of her fellow men and women. She was at times rather obsessed by disease and has been considered a hypochondriac; this is a little unfair, she had plenty of illness in her family and friends to worry about apart from the mental stress which must surely have arisen from her bohemian lifestyle with her partner George Lewes and her association with others leading similarly unorthodox lives. Intense research into her subjects led her sometimes to too detailed exposition and it has been said ‘she gives us occasionally a stony sermon instead of the bread of fiction’. Anthony Trollope commented that she was ‘too cerebral’. But no-one has failed to enthuse about some of her novels, particularly *Middlemarch* with its interweaving plots and well drawn characters, recently popularised by a television series. It provides many delightful comments about medicine from lay persons. The rector’s wife is ‘much too well-born not to be an amateur in medicine’. Lady Chettam obviously likes her doctors to be rough and says about a previous practitioner ‘I assure you I found poor Hick’s judgement unfailing; I never knew him wrong. He was coarse and butcher-like, but he knew my constitution’. George Eliot was close to many well known doctors and scientists; Sir James Paget was a friend as well as medical adviser and she knew Sir James Clark and Dr Neal Arnott, physicians to the Queen, also Sir Henry Holland, Elizabeth Gaskell’s relation. George Lewes, her devoted partner, had medico-scientific interests, particularly in the nervous system, and attended Medical Association meetings; before George Eliot linked up with him, she had been associated with the rather bizarre John Chapman who has been described as ‘watchmaker, surgeon, bookseller, publisher and gynaecologist’. She not only must have discussed their profession with these friends and read books about medicine and the management of its practice but she took a more practical interest; she witnessed, for example, the dissection of a brain by Dr Rolleston. Clifford Allbutt (who showed her round the new infirmary at Leeds) thought that Dr Lydgate, her great medical character, was based on him but it is more likely that she was portraying her brother-in-law, Dr Edward Clarke, who had a small practice in Meriden and problems similar to those of the fictional doctor. She did
Dr Tertius Lydgate: the story of 'the defeat of the man of the future by the stubborn conservatism of the present'

Nowhere is Eliot's rewarding research more apparent than in her portrayal of Tertius Lydgate, the ambitious young doctor who comes to the town of Middlemarch. Much has been written about him; Professor Asa Briggs, whose article Middlemarch and the doctors tells of Eliot's interest in medicine and the importance of the novel to social historians, wrote 'Middlemarch tells us far more about the significance of medical reform than . . . most academic monographs'. The novel appeared serially from 1871 to 1872 and is probably based on Coventry in the 1830s.

Lydgate is a sad character with whom one can have much sympathy. His medical education had been in London, Edinburgh and Paris and therefore could hardly have been better, but the older Middlemarch doctors note that he had 'not been to either of the English universities' and consider that he 'enjoyed the absence of anatomical and bedside study there, but came with a libellous pretension to experience in Edinburgh and Paris, where observation might be abundant indeed, but hardly sound'. He is keen on reform of the profession, uses a stethoscope, wishes to make medical scientific advances, is interested in the development of pathology and even hopes to create a medical school in the provinces.

Lydgate thinks the medical profession 'the most direct alliance between intellectual conquest and the social good'; he wants to 'keep away from London intrigues, jealousies and social truckling, and win celebrity, however slowly, as Jenner had done, by the independent value of his work' and does not want 'to have his vanities provoked by contact with the showy worldly successes of the capital'. He is anxious to follow the directions of the Apothecaries Act (1815) and 'simply prescribe, without dispensing drugs or taking percentage from druggists'. George Eliot was able, with her experience and reading, to expand on the significance of poor Lydgate's ideals and to use the antagonism which he kindles in his colleagues and the public to further her story. Everything goes wrong for Lydgate personally and financially; political and administrative problems multiply and he even prescribes unprofessionally. He has some clinical triumphs, recognising the 'pink-skinned stage of typhoid fever' misdiagnosed by another practitioner, and correcting a diagnosis of a tumour but, in doing so, he further upsets the other Middlemarch doctors.

These other doctors are wonderfully portrayed and contrasted with Lydgate. There are two physicians, the first 'of most weight' and the second with 'more penetration'—they enjoyed about equally the mysterious privilege of medical reputation and concealed with much etiquette their contempt for each other's skill'. Change is anathema to them and they strongly express disapproval of Wakley of the Lancet. There are two long established practitioners, also against reform; one says 'what I contend against is the way medical men are fouling their own nest, and setting up a cry about the country as if a general practitioner who dispenses drugs can't be a gentleman'.

Lydgate leaves Middlemarch and has to work primarily to earn money. He does 'gain an excellent practice, alternating, according to the season, between London and a Continental bathing-place'. He writes 'a treatise on gout, a disease which has a good deal of wealth on its side. His skill was relied on by many paying patients, but he always regarded himself as a failure: he had not done what he once meant to do'.

Elizabeth Gaskell

'He was not jovial . . . [he was] sparing of his words, intelligent and slightly sarcastic. Therefore he was perfectly presentable

(Elizabeth Gaskell describing Mr Gibson in Wives and daughters)

'As a gentleman, we could only shake our heads over his name and himself, and wished that he had read Lord Chesterfield's Letters in the days when his manners were susceptible of improvement'

(The Cranford ladies' opinion of Mr Hoggins, the surgeon, in Cranford by Elizabeth Gaskell)

Elizabeth Gaskell managed, amazingly, to write a variety of fiction with comedy, romance and social messages for 28 years whilst producing and attending to her family, helping in a depressed community, building up literary connections and travelling. Jenny Uglow, in a recent biography, portrays a lively wife and mother, ready to befriend others, emotional, intensely conscious of the social problems surrounding her, and giving advice and practical help wherever possible.

Elizabeth had doctors in her family and as a girl accompanied her uncle, Peter Holland, on his rounds in Knutsford. Jenny Uglow describes him as a bad tempered man, capable of sneering at people who could not answer back, a Unitarian who was involved with political and business life. His son, Henry, studied medicine in Edinburgh and rose high in the profession in London, becoming Physician in Ordinary to Queen Victoria. Jenny Uglow considers him a terrible
snob and compulsive traveller and writes ‘His Recollections drop names like confetti’. Elizabeth did not like him much. Another doctor well-known to her was her brother-in-law Samuel Gaskell, working in Manchester and apparently ‘always joking’.

Elizabeth Gaskell’s most detailed portrayal of a medical man is that of Mr Gibson in Wives and daughters. He could well represent all that she hoped a good practitioner should be and certainly has none of the reported undesirable characteristics of the Holland father and son, their bad temper and snobbery. Wives and daughters started appearing serially in 1864; it was Elizabeth’s last novel and she died in 1865 before its completion. It is a delightful story, ‘An everyday story’ as announced by its subtitle, about people in and around the town of Hollingford in the late 1820s; they are real people with emotions, aspirations and faults to, which we can easily relate.

Gibson, an Edinburgh graduate, comes to Hollingford as partner to Mr Hall and later takes over the practice. He is a great success professionally and more accepted ‘in society’ than his predecessor, perhaps because he not only has a ‘genteel appearance and elegant figure’ but because it was rumoured that his father ‘must have been some person of quality’. Gibson had even been invited to dinner with the local aristocrat whilst still a partner in order to meet Sir Astley Cooper ‘the head of the profession’. Poor Mr Hall had also been asked but could not accept because of gout and never recovered from his disappointment; he usually ate in the housekeeper’s room whereas Gibson, later, could lunch with the gentry any day—not that he often did as he was not interested in ‘social gratification’. He has all the attributes of a conscientious and thoughtful doctor; he is always available to his patients, gives good advice and carefully preserves confidentiality. His reputation had spread and apprentices paid large fees to be with him. ‘He had medical insight into the consequences to health of uncontrolled feeling’ (a commentator on the novel has pointed out that this was a widely accepted medical tenet stressed in Andrew Combe’s Principles of physiology, 1834, which Elizabeth Gaskell had read). However, his judgement of character cannot have been all that good or he would not have taken Mrs Kirkpatrick to be his second wife; she was arrogant, selfish and an appalling snob, and in no way made their married life comfortable.

Gibson was talented. He examined Osborne Hamley, the squire’s son, ‘didn’t like his looks . . . and his pulse’ and diagnosed an aneurism of the aorta. Dr Nicholls, the much respected county physician, does not agree but is proved wrong by Osborne’s sudden death. Why did Mrs Gaskell choose an aortal aneurism for poor Osborne who was still in his 20s? I cannot find any clues. It is interesting that she brought in Sir Astley Cooper as a visitor to Hollingford, for he was particularly interested in aneurysms and their surgical management. There are no suggestions in the novel that Osborne had contracted syphilis. In a letter dated 3 May 1864, she outlines her plan for Wives and daughters and mentions that Osborne ‘breaks a blood vessel, and dies’; she could already have had an aneurysm in mind.

There are other doctors in Mrs Gaskell’s novels, also sympathetically portrayed but they appear only briefly. Mr Lewis, in Ruth, is the most interesting; again a kindly man, he is notable for his adoption of the illegitimate son of the heroine Ruth who had been seduced by one of the gentry. Poor Elizabeth Gaskell was much criticised for her portrayal of kindness to the ‘innocent fallen girl’.

Mary Mitford

‘Every country village has its doctor. I allude to that particular part of the medical world, which is neither physician, nor surgeon, nor apothecary, although it unites the offices of all three; which is sometimes an old man, and sometimes an old woman, but generally an oracle, and always (with reverence be it spoken) a quack’

(Our village by Mary Russell Mitford)
Mary Russell Mitford was writing in 1820 about 'Doctor Tubb', possibly based on a doctor in her village, Three Mile Cross, on the road between Reading and Basingstoke. She became well known in the literary world, although her work cannot really be compared with that of George Eliot or Elizabeth Gaskell; she was a close friend of Elizabeth Barrett Browning, to whom she gave the famous dog Flush. She does not tell us much about medical men in her gentle little stories, a pity as she must have had a rather unusual and close experience of them.

Her father had studied medicine in Edinburgh and had also been a pupil with John Hunter; he qualified as a physician and is said to have been 'attractive, impecunious and an incurable gambler'. He married a Hampshire heiress ten years his senior and gave up work ('fortunately for his patients' says Margaret Lane in an introduction to a collection of stories by his daughter). Poor Mary had, for many years, to look after a sick mother and a hopeless father who managed to lose all the family money, including £50,000 from his wife and the remarkable sum of £20,000 which he had won in a lottery (Mary, aged ten, had selected the winning number). At one time, when short of money, Dr Mitford assisted the notorious 'Dr Graham' who provided a 'celestial bed' for the use of sterile couples and had a 'temple', at first in the Adelphi, and then in Pall Mall, where Emma Lyon, later Lady Hamilton, posed, scantily draped, as the Goddess of Hygiene. Mary supported the medically qualified wastrel and gambler with proceeds from her writing until his death when she had to organise a public subscription to pay his debts. Portraits show her to have been an attractive young woman but she developed 'shabbiness and unbecoming stoutness' and was described as 'A Sancho Panza in petticoats' by fellow novelist Letitia Landon.

Doctor Tubb, 'inventor and compounder of medicines, bleeder, shaver, and physicker of man and beast', referred to as a barber-surgeon by Mary Mitford, inherited his skill and some equipment from a great-aunt, a 'wise woman'. He is portrayed as an incompetent and unsuccessful herbalist, too fond of gin. Even his wife becomes distrustful of his prescriptions; when she needs help, someone offers to refer her to a charitable dispensary but she declines as her husband would never forget such an affront to his skill or forgive treatment by the dispensary staff whom he refers to as 'book-doctors'. She is cured by giving up all his decoctions. Many villages must have benefitted or suffered with the help of such practitioners.

Envoi

I doubt if historians in 150 years will look at fiction to find out how we behaved and they will not pause to wonder where we stood in society and whether we were gentlemen or not. Nevertheless, if for 'society' one reads 'the hierarchy of executives and managers', the question is once again 'Is the doctor one of us?' But had there been research funding from a research and development initiative as recommended by the Culyer report in 1994, Dr Tertius Lygate might have been able to do what he had meant to do.

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