

# Introduction

Pulmonary tuberculosis has played an influential but analytically understated part in social and cultural formation throughout human history. It has of course formed a perpetual accompaniment to that history, for the disease known to the ancient Greeks as phthisis<sup>1</sup> can be traced back to at least 3000 BC,<sup>2</sup> and – despite the hope for eradication which accompanied vaccination and the antibiotic revolution in the middle of the twentieth century - remains one of the biggest global killers even today. In this book, however, my interest is confined to the western world and the latter stages of this disease's existence. The full significance of this tiny bacteria can best be displayed through its impact upon the nineteenth century, as this was the last age in which tuberculosis was at its height in Europe, and this is the rationale behind the historical framework of this work, which covers the seventy years of Queen Victoria's reign.3 I am concerned here with revealing the ways in which tuberculosis influenced the construction of the nineteenth-century social body through its pathologising of the gender, class, and economic and aesthetic status of the individual body. The health of a nation is necessarily dependent upon the health of its citizens; disease disrupts social functioning by negatively intervening in the lives of the people. It also fractures society's view of itself as a robust, operational, organic whole, causing a separation between healthy sections as 'Self' and diseased bodies as 'Other', and the tensions this pathological split creates are at the heart of this study.

In the Victorian era consumption killed more people than cholera and smallpox combined, and was equalled only by syphilis in the extent of its effect upon the contemporary political and literary imagination. Tuberculosis and syphilis functioned as sites of social anxiety in Victorian times as cancer and HIV/AIDS do in ours, and as such provided entry into a whole world of sexual and social as well as medical discourse. Fears about femininity, (hereditary) inheritance, degeneration, national efficiency and sexual transgression are all epitomised by consumption, mainly because it

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is, as Susan Sontag suggests in *Illness as Metaphor*, a 'disease of individuals', an infection which singles out its victims rather than affecting the whole community like the fever epidemics. <sup>4</sup> Thus the consumptive seems to be set apart from his neighbours: his disease is different, therefore by implication he is in some way different too.

Disease becomes invested with a particular significance when it is not the common affliction of the whole community. This significance was very clear in the case of syphilis, a disease well known to be a consequence of sexual contact, as it indicated that the sufferer had overindulged in (probably illicit) sexual behaviour, or was the offspring or spouse of someone who had. Syphilis's physical symptoms contributed to this sense of moral certainty about its cause, for the primary chancre usually appeared at the site of initial infection and this frequently confirmed the sexual nature of its means of transmission. This enabled syphilis to be used as a political and moral tool against potentially deviant, subversive sexualities, making it, as Claude Quetel has pointed out, the 'most social of social diseases' in terms of the extent of the cultural and political response it has generated.<sup>5</sup> However, Sontag has described syphilis as 'limited as a metaphor because the disease itself was not mysterious, only awful', and it is true that the disease's meanings and its means of transmission were and are irrevocably linked.6

Tuberculosis's metaphors, in contrast, were anything but 'limited'. This disease encompassed a remarkable fluidity of meaning and associations, largely because its origins were shrouded in mystery. Tuberculosis took many forms and affected many different parts of the body - brain, spine, stomach and skin as well as lungs - with the result that it resembled a number of different diseases rather than a single killer, though it is only the most common, pulmonary form of the disease which concerns me in this study. Its one known 'calling card', internal lesions, frequently varied from soft cheesy pustules to hard chalked cavities, depending on the progression of the disease, and this complicated even its post-mortem diagnosis. It had thus evaded the medical profession for centuries, and it was not until Robert Koch's identification of the tuberculosis bacillus in 1882 that its cause and means of transmission finally became known. Even when its infectiousness was established this did not account for the seemingly random distribution of victims, however, as frequently those exposed to and infected by the disease did not go on to become actively tubercular. While 'it is possible that a near totality of the population of many large European cities in the nineteenth century... would have tested positive for exposure to the tubercle bacillus', only a small proportion of those would have actually



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become consumptive, and this inscrutable selection of victims added to the elusiveness of the disease.<sup>7</sup> As it was apparent to doctors and laymen alike that consumption's infectiousness worked differently from that of other diseases, individual susceptibility seemed dictated by an unknown X-factor which could be perceived as the workings of fate or Providence, or which could be the result of the victim's own actions, a comment on the inherent pathogenicity of their behaviour or their lives. There seemed to be a metaphysical element involved in the propagation of tuberculosis, and this enhanced its symbolic potential by allowing it to encompass a number of different meanings.

Consumption's capacity to act as a manifold metaphor made it a malleable vehicle for social expression and discussion in the art and literature of the nineteenth century. Tuberculous subjects are plentiful in the Victorian era and some of the traits associated with them have persevered to the extent of becoming part of our cultural and literary history. As this study will reveal, the disease has been associated, often simultaneously though not always congruously, with youth and purity, with genius, with heightened sensibility and with increased sexual appetites. The resulting images have become famous textual tropes: the languishing consumptive poet whose thwarted desires and personal frustrations seem to have brought about his illness; the Christlike innocence of the child who dies because they are too pure for the world; the beautiful but wan and pining girl whose decline owes as much to her broken heart as to the bacilli invading her body. Hence the inclusion of consumption in any text engages that text with the wider cultural associations that surround the disease.

This book focuses upon the Victorian novel, as this was the artistic medium through which consumption was most commonly explored and its myths and meanings disseminated throughout nineteenth-century society. No other cultural form touched and informed people across the classes to the extent that the novel did, and hence it is the best means of examining how the disease was represented and understood in popular culture in this era. It is true that much could also be said about consumption's influence on other branches of the creative arts – in particular French theatre and opera<sup>8</sup> – but an examination of such diverse forms is necessarily beyond the scope of the present work. However, in order to explore all the possible manifestations of consumptive imagery, I do invoke and discuss some of the representations of phthisis in British poetry and painting of the period where it is relevant to and bears upon my argument, in particular Dante

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Gabriel Rossetti's paintings of his wife, which owing to their important influence on the consumptive aesthetic I explore in some detail in Chapter 4.

I have also chosen to confine this work to an examination of British texts. There is a substantial body of tubercular literature in the United States in the nineteenth century, with the novels of Louisa May Alcott, L. M. Montgomery and Harriet Beecher Stowe all containing important consumptive characters,<sup>9</sup> but while these have many points in common with those I explore here, it is clearly not possible to assume a continuity of the meanings and metaphors which surround the disease. This is especially true regarding the perspective of the American medical profession, whose opinions on the cause and treatment of the disease differed from those of their British counterparts. Hence my concern remains with the English experience of the illness, the only exception among the novels being Henry James's Portrait of a Lady, which, as it was written and set in England, asserts itself as a product of British discourse about consumption despite the nationality of its author. As regards the body of medical writing about the disease, it is impossible to discount the work of several influential European physicians, particularly those colleagues of Koch who were involved in the identification of the tubercle bacillus, but I have only used as sources those works which were published in Britain, in English, and which therefore were accessible contributions to the Victorian medical profession's views about phthisis.

Chapter 1 is introductory in nature and sets out to establish a medical framework for the study, by interrogating the substantial body of literature written about consumption by physicians in the nineteenth century. I establish here a paradigm which is central to this whole argument: that a complex and symbiotic relationship seems to exist between medical writing and the popular fiction of the time. I explore the origins and nature of this relationship and the ways that the two genres interact with one another to construct the dominant stereotype of the consumptive and to produce widely held assumptions about the disease. As we shall see, a detailed examination of medical publications reveals how, through debates on the cause, diagnosis, and treatment of consumption, doctors consolidated and validated some existing cultural myths about this illness, and developed or even created others. This chapter identifies a number of the most enduring medical theories about the illness, particularly the belief that it was not infectious, that a certain type of person was likely to become consumptive, and that a lifestyle that was socially deviant in any way encouraged tuberculosis to flourish. I discuss how these representations are the attempts of struggling physicians to cope with a mysterious and incurable disease, and



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are made to serve certain political and personal agendas, namely to facilitate the social management of the illness and to validate and reinforce the authority and importance of the medical profession.

The second chapter begins my exploration of the Victorian novel. I have taken as my starting point the Condition of England novels of the 1840s and 1850s, as they are the first body of Victorian literature in which tuberculosis appears as a recurrent and central theme. Through their preoccupation with the class system, the effects of industrialisation and the state of the social body these novels reveal one of the most intriguing aspects of consumption: its association with capitalism. My argument here is that consumption works as both a disruptor of the capitalist, commercial world, and a metaphor for it, and that this produces interesting tensions within the industrial novel. This synthesis of disease and economics in the context of class issues is clearly not a new one in academic terms, and there is a huge body of work concerned with the pathologising of the industrial working class in this era. However, the majority of this criticism, from Kate Flint's The Victorian Novelist: Social Problems and Social Change to Anthony Wohl's Endangered Lives, focuses on the diseases most obviously linked to industrialisation and urbanisation – cholera, typhoid and typhus. <sup>10</sup> Yet consumption possessed symbolic potential as a metaphor for the consequences of capitalism in a way that these miasmic infections could not. Fevers were limited as metaphors because they represented such specific problems and issues, such as the sanitation debates, the need for improvement of the physical - and moral - cleanliness of the masses, and middle-class guilt at working-class suffering. Hence their inclusion in a novel must invoke these kinds of questions. Tuberculosis in contrast could not be used as a simple signifier for social conflict and social responsibility, for it did not have an identifiable environmental cause and it was not, despite a definite link with impoverishment, a disease of poverty and squalor which was confined to the lower classes. Consumption's ability to infect all social spheres rendered it a perfect symbol for the capitalist system as a whole, rather than just a means of expressing its effect upon one section of the population. In Dickens's Dombey and Son the presence of tuberculosis among the bourgeoisie indicates that the effects of industrialism extend beyond contaminated water or cramped living conditions, and suggest that it may have a harmful impact upon the soul of the capitalist as it does upon the body of the worker. Similarly, while Elizabeth Gaskell's North and South associates phthisis with the factory system, it also suggests that this disease is not only about the deprivation born of exhaustion and overwork. Bessy Higgins's illness may be contracted in her workplace, but is also linked

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to the use and ingestion of luxury goods. The process of consumption – which was of course shared by all classes – is as dangerous as the process of production: capitalism, it seems, is pathological at any stage in the system.

The focus of tuberculous literature appears to undergo a shift from the pathologising of economic status to the pathologising of femininity as the century progresses. Class remains a concern, but questions of gender predominate. In the most general sense, the rest of my study is therefore centred around the consequences of the social perception of tuberculosis as a female disease, in the context of the sexual anxieties that surrounded the approach of the *fin de siècle*. It is difficult to establish conclusively from the statistical evidence whether or not consumption actually was 'female', or, in other words, whether it did affect substantially more women than men. It certainly seems to have done in some regions of Britain, as Scotland and Ireland both have higher mean death rates from pulmonary tuberculosis for women until the turn of the century, but this does not seem to be true of England itself. Any gender difference in incidence of the disease was probably due to environmental factors, but it was still utilised as a signifier of increased female susceptibility to the disease. With some significant and usually emasculated exceptions (like the subject of my final chapter, Ralph Touchett in Henry James's *The Portrait of a Lady* ) the classic literary consumptive is inevitably a woman in the Victorian era.

Huge critical attention has been given to the figure of the sickly woman in literature, but this has also been focused upon diseases other than consumption, namely syphilis, hysteria and anorexia. Tuberculosis has significant links with these illnesses, and here I am concerned with revealing how it interacts with them to construct and reveal new pathologies of femininity. Consumption was traditionally associated with mental disorders and was regarded by the medical profession as more likely to afflict those with a certain personality type, or those suffering emotional distress. Hence it became viewed as the concrete physical manifestation of psychological problems: a kind of hysteria made flesh. As consumption signified heightened sensibility, its sufferers were portrayed as refined, intelligent and sensitive members of the upper classes - a desirable identification - yet through its association with subversive, self-inflicted diseases like anorexia, they could also be regarded as a social threat. Chapter 3 explores these and other complex and paradoxical attitudes towards the Victorian invalid through a reading of a best-selling but critically neglected late-century novel, Mrs Humphry Ward's Eleanor. 12 An examination of this text's consumptive central character reveals phthisis's unique ability to act as a signifier of purity and spirituality on the one hand, and sexual deviance on the other. Eleanor



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herself is consumed by unreciprocated love and desire as much as by tuber-culosis, and this compromises her virtuous femininity, as she becomes less passive and less self-restrained. Her desires are even more unacceptable because to satisfy them, to marry and reproduce, would perpetuate her disease and contaminate the bloodline of an old family (there are clear parallels with syphilis here). She is socially pathological in other ways too, for she is able to undermine patriarchal authority because of the powers of persuasion and manipulation which her invalid status grant her. However, this novel reveals how the consumptive patient can also function as the self-sacrificing female ideal. *Eleanor* utilises the cultural myths of spirituality which surround the disease in order to engage in debates about sin, punishment and the possibility of redemption. Ward represents her dying heroine as a Magdalen figure who, through the cleansing effect of her illness-induced suffering – and through the partly self-induced wasting of her body – transforms herself from fallen woman into a kind of female messiah

These questions about the power and appeal of the consumptive woman are developed further in Chapter 4, on the rise of the tubercular aesthetic, which explores how such a painful, debilitating and fatal disease became a fashionable, even sought-after illness in the Victorian era. In this chapter I build upon the work of Bram Dijkstra in the influential *Idols of Perversity* by examining how the nineteenth century's 'cult of invalidism' developed into the consumptive aesthetic. This phenomenon was strongly influenced by the art and literature of the period, which glamorised consumptive women and portrayed them as ethereal rather than emaciated, graceful rather than ghostly. Perhaps the most persuasive tubercular images were the pallid and fragile models and muses of the Pre-Raphaelite movement, and in this chapter I, like Elizabeth Bronfen in Over Her Dead Body, include a case study of one of the most famous: the sickly wife of Dante Gabriel Rossetti, Elizabeth Siddal. I discuss here the ways in which Siddal's disease was much more than an unfortunate affliction, suggesting that it was in fact a useful and powerful force which assisted her dramatic social rise, created her distinctive appearance, and lent her a romantically mysterious and tragic public persona. Post-Siddal, the tubercular look soon became the prevalent form of fashionable beauty, a process facilitated by the rise in popularity of the corset, a deeply political garment which fashioned its wearer into a stylishly fragile near-invalid who resembled the classic consumptive. This deliberate, constructed pathologising of the female body is highly revealing, raising questions about the nature of art, fashion and the physically damaging pursuit of an aesthetic ideal in relation to femininity

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and disease. I therefore regard the corset as an important contributor to tubercular culture, especially as there is also a link between corsetry and capitalism, as corset-making was big business in the Victorian era. This forms another instance of industry's capacity to produce disease, or, indeed, of disease's ability to generate industry in order to meet its demands. The corset thus produced consumption (or more specifically the appearance of consumption, though the actual pathological effect of tight lacing was also the subject of much medical debate) as well as trade and capital.<sup>13</sup> The power of the consumptive aesthetic and the dangerous consequences of such a fashion are central topics in the two novels I discuss in this chapter. George Du Maurier's hugely popular *Trilby* and Charles Reade's lesser-known *A Simpleton* represent two very different views of female beauty and reveal the complex and ambivalent attitudes which surrounded the tubercular 'look' and the tight lacing which helped emulate it.

This book suggests that consumption was set apart from other diseases by its unique ability to act as a hyperbolic signifier, something which made it a valuable symbolic medium in fictional texts. Chapter 5 is concerned with examining one of the most sinister 'metaphors of illness' which surround this disease: the creation of a link between phthisis and vampirism. I suggest that this association was a traditional one forged in centuries of folklore, but is picked up by and developed further in the late Victorian novel in order to articulate anxieties about the newly discovered communicability of the illness and the impact this might have on the nation and indeed the empire. Through a reading of Bram Stoker's Dracula, and with reference to several other popular vampire stories of the time, I reveal how not only the vampire's wasted victim, but the vampire him/herself, resembles the archetypal consumptive. This identification is a useful means of blurring the line between realism and science fiction for the authors who utilise it in their texts, but it clearly has negative repercussions for real-life patients. Through association with the vampire, the consumptive ceases to be a passive recipient of disease - though indeed, as previous chapters show, this was never really an accepted picture of the tubercular patient - and becomes a willing embracer of it, and one who will infect others in turn in order to survive. That this view of the consumptive was not limited to the fictional sphere is revealed by an examination of a number of late-century medical texts, whose rhetoric and images suggest that physicians too have been influenced by the vampiric association. This of course had tangible consequences for their patients, whose treatments – like the recommended consumption of fresh blood – frequently had their basis in superstition rather than scientific fact.



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The final chapter concludes my examination of the gendering of tuberculosis by looking in detail at one of the few male consumptives in nineteenth-century fiction, Ralph Touchett in Henry James's *The Portrait of a Lady.* James's choice of a disease traditionally perceived as female to afflict his central male character is a deliberate one, for consumption is the perfect vehicle through which to explore the crisis of masculinity which he suggests exists in contemporary society. Consumption, a disease associated with capitalism and luxury, becomes in this novel symbolic of the moral and emotional sickness which manifests itself in the men in *Portrait* and which is presented as the inevitable consequence of the idleness and indulgence inherent in affluent middle- and upper-class existence. Just as phthisis compromises the reproductive capacity of its sufferers – Ralph indicates that it is inadvisable for him to have children for eugenic reasons – the men in the novel are rendered physically and creatively sterile by their circumstances: they consume *objects d'art* and women, but produce nothing.

James uses topical medical and social debates about the best choice of lifestyle for the consumptive patient in order to interrogate possible solutions to the problem raised by masculinity in the text. The book juxtaposes the bourgeois recipe for health – work, marriage and domesticity – against the conventional invalid lifestyle of nomadism and bachelorhood which Ralph leads, a life which also happens to be shared by all the affluent young men in Portrait. It is useful for James's purposes that of all diseases tuberculosis responded especially well to the cosseted invalid lifestyle of rest and indulgence: it was not a disease of gradual inevitable decline like cancer but one whose uncertain progress could be repeatedly halted through careful living. This regime of invalidism offered the only available hope of complete recovery, but paradoxically it also needed to be faithfully maintained throughout life to avoid the danger of a relapse. Hypochondria was in a sense an essential component of the consumptive's quest for health, and the pursuit of longevity thus became recognised as a long-term, full-time occupation. This of course has problematic consequences for the consumptive male, whose gender success was conventionally defined by activity and productivity, and we can see the implications of this in Ralph, whose disease becomes a poor substitute for a career. However, as I will show, James proposes that even this subversive existence is in a sense more spiritually 'healthy' than that experienced by the physically well men in the novel. In particular, he makes us aware that, for certain men and particularly for the artist, invalidism has its own benefits and advantages, and they are worth some sacrifice of conventional masculine roles. This is most plainly revealed through an examination of the relationship between Ralph and



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Isabel Archer and its real-life inspiration, that between James and his dying cousin, Minny Temple. With reference to James's personal letters, I suggest how consumptive illness may be useful to Ralph and also to his creator, as a means of escaping the unappealing responsibilities and everyday domesticities which accompany health. This very autobiographical novel provides an insight not only into James's view of a pathological society, but also into his personal attitudes about marriage, creativity and the dangerously consuming nature of sexual desire.

A number of authors have worked with the study of tuberculosis's social and cultural impact over the many years of its long history. Perhaps most important of these is Susan Sontag, whose classic Illness as Metaphor delineates the symbolic associations and images that surround tuberculosis, syphilis and cancer. Sontag's work, which identifies the ways in which illness is regarded, represented and even transformed by its social context, must be a vital starting point for any exploration of tuberculosis. However, while she does quote from fictional texts to illustrate her observations about consumption's persona, there is much more to be said about the literary production of the disease than her short book can cover. Other explorations of tuberculosis manifest the same lack of detailed engagement with tubercular fiction. Thomas Dormandy's fascinating medical and social history of tuberculosis, *The White Death*, for example, includes much on the lives and deaths of its famous victims, many of whom are writers and artists, but, presumably because its author is a doctor rather than a literary critic, does not explore the potentially revealing work these consumptives left behind. Similarly F. B. Smith's The Retreat of Tuberculosis, Frank Ryan's Tuberculosis: The Greatest Story Never Told, David Barnes's The Making of a Social Disease and Katherine Ott's Fevered Lives all concentrate on the factual aspects of phthisis, namely its political impact and the medical response it has provoked. These are of course the essential foundations for any dialogue about this disease, but by by-passing its representation in fiction these works are missing an important source of information about the illness's cultural as well as medical existence. Only Clark Lawlor's recent Consumption and Literature: The Making of the Romantic Disease has so far set out to fill this gap. Lawlor's text explores the literary history of the disease from the Renaissance, through the Enlightenment and into the nineteenth century, with particular focus on the Romantic poets and their legacy. Like Sontag, he examines the cultural associations that surround tuberculosis and investigates their literary origins, and his detailed reading of Samuel Richardson's Clarissa forms an essential backdrop for my exploration of the consumptive