

Sarah Berry, PhD  
Hobart and William Smith Colleges, Geneva, NY, USA  
First-Person Writing, Four-Way reading  
December 2011

**“Part of this sickness is owing to medicine”:  
Charlotte Brontë’s Medical Complaint in *Villette* (1853)**

During an illness in 1852 that stopped her work on the *Villette* manuscript, Charlotte Brontë suffered from an “inflammation of the liver.”<sup>i</sup> The pills she “duly and truly” took contained mercury, which was commonly given to open the bowels.<sup>ii</sup> But the treatment was worse than the ailment; she writes with sharp medical acumen in a letter to a friend, “I expect Mr. Ruddock [the surgeon] and shall ask him whether part of this sickness is not owing to his medicine.”<sup>iii</sup> Over the course of treatment, she writes, the pills made her “unable to swallow . . . my mouth became sore, my teeth loose, my tongue swelled [] raw and ulcerated;” indeed, she “could not well have articulated three sentences.”<sup>iv</sup> Her inability to write and even to speak epitomizes the convergence between nineteenth-century medical and social prescriptions for women—prescriptions that Brontë would thoroughly challenge in her last novel.

When she began writing *Villette*, Brontë was still reeling from the fatal illnesses of her siblings Emily, Anne, and Branwell. She succumbed to “depression of spirits” in fall 1851, then the winter brought “a peculiar pain in [her] right side,” followed by a cold, “inflammatory action” and “high fever at night.” While she believed that her lungs were affected, her “medical man” pronounced that inflammation had fallen on her liver, and that furthermore, there was no “danger” because it was “a case of functional derangement rather than organic disease.”<sup>1</sup> Yet, as the months passed, her recovery of health was hampered most by a heavy drug regimen. First, Ruddock overdosed her with mercury, causing the mouth ulcers and swollen tongue; she writes,

“When my Doctor came and found me in this condition he was much shocked and startled; a result had been produced which he had not intended, nor anticipated: according to him the dose of blue pill he had given was not sufficient to to salivate a child . . . Strong medicines were then administered to counteract the mistake—so that altogether I have been much reduced.”<sup>2</sup> This narrative, in which she asserts her own knowledge of her constitution and interprets both her symptoms and the effects of medication against the doctor's mistaken theories, emerges after repeated attempts over several months to describe her illness and treatment. When Bronte was finally well enough to resume work on her novel, she created an even more complete narrative of female subjection to medical power. Through the fictional Lucy Snowe, Bronte voices a protest of materialist medicine—first accepting, then questioning, and finally rejecting modern, materialist medicine and its drug regimens in favor of older humoral theory, which allows Lucy—and Bronte—greater freedom in defining herself as an independent and creative woman.

In the Bronte household, so frequently visited with illness and death, Thomas John Graham's home medical manual titled *Modern Domestic Medicine* (1826) was a secular bible, copiously annotated with Reverend Brontë's minute observations of his children's symptoms and treatments. It is perhaps not surprising, then, that after Brontë's heroine Lucy Snowe suffers the loss of her entire family, she becomes physically ill and is eventually diagnosed with “Hypochondria” (low spirits)—an affliction Brontë had—by a fictional doctor named “John Graham.”

**Materialist medicine.** Graham's modern or “materialist” medicine emphasized physical causes and treatments for every ailment, including nervous disorder and nightmares. Lucy initially shows her acceptance of materialist medicine explaining her increasing emotional

---

<sup>1</sup> To Elizabeth Smith, 29 Jan 1852 (Smith vol. 3 13-14)

distress through the language and concepts of physiology. For example, during an agonizing period when she is left alone at a Belgian school during a vacation, she proclaims, “my nerves are getting overstretched: my mind has suffered somewhat too much; a malady is growing upon it.”<sup>v</sup> Lucy’s articulation of her distress both heralds the physical illness to which she will soon succumb and echoes Thomas Graham’s theory of physically disordered nerves.

For Thomas Graham and his fellow modern doctors, disruption of digestion and waste elimination processes were both the root cause and the primary target of treatment in most diseases. In the entry on “General Nervous Disorder,” which Patrick Brontë has earmarked with a sketch of a pointing hand, Dr. Graham describes the ailment as “a general weakness and [physical] derangement of the nerves,” which is most commonly caused by “costiveness, and a deficiency of active exercise in the open air of the country.”<sup>vi</sup> Following Graham’s materialist theory, Patrick Brontë seems to have been especially attentive to bowel regulation in curing and preventing disease, for he supplements Thomas Graham’s long article on “Costiveness” with telling empirical precision that “some persons [] had only one stool in the week, & yet were healthy—& [if at home, one] gen[erall]-y should make water once in 3—or 4 hours—& not more, nor less—[always].”<sup>vii</sup> Within the passage, Patrick has marked Graham’s treatment: “the proper regulation of the bowels . . . and the quitting of sedentary habits . . . for active exercise in an open country air.”<sup>viii</sup> For all these reasons, I argue that Brontë puns on “costiveness” and its opposite, expression, in Lucy’s first illness sequence.

Soon after she **diagnoses herself** with “overstretched” nerves, Lucy becomes physically ill with a “strange fever of the nerves and blood.”<sup>ix</sup> Lucy’s next move suggests that Brontë had in mind Thomas Graham’s two “principal points of attention” for treatment of nervous disorder

---

<sup>2</sup> To Margaret Wooller, 20 Jan. 1852 (Smith vol. 3, 10)

accompanied by fever. By reading Graham's passage alongside the novel, it appears that Lucy attempts to treat *herself* via Graham's recommendation of exercise in fresh air and figuratively by what he calls "exoneration" of the bowels. Thus Lucy gets out of bed, dresses, and intends to go "outside the city" to salubrious country air.<sup>x</sup> Once in the street, however, she is diverted from her mission by church bells, which call her into a Catholic church. Lucy's impulse to make a confession despite the fact that she is Protestant points to a pun on Thomas Graham's second "point" of treatment for nervous disorder: "exoneration" of costiveness, for costive also means unable to communicate. Thus when Lucy explicitly seeks to verbally express her emotional suffering, her aim parallels in sublimated terms the passage—marked by Patrick Brontë with a sleeved arm and pointing hand—in which Graham recommends physically regulating the bowels.<sup>xi</sup> Furthermore, Lucy's hope that such expression might "soothe" her echoes what Thomas Graham identifies in his preface as "the great object of medicine," which is "the relief of irritation" by "soothing" treatments.<sup>xii</sup>

Lucy's description of her confession—her "outpouring" of a "dreary, desperate complaint" into the confessional—is rendered in language that strongly suggests relief of physical costiveness.<sup>xiii</sup> "Mechanically obedient" to the summons of the confessional, Lucy alleviates the "pressure of affliction on [her] mind" by expressing her grievous "experience[s]" to the priest, who is obligated to contain the expression.<sup>xiv</sup> Lucy reports, "the mere relief of communication . . . —the mere pouring out of some portion of long-accumulating, long pent-up pain into a vessel whence it could not be again diffused—had done me good. I was already solaced."<sup>xv</sup> Lucy's description of expressing "pain," which is "poured" into a "vessel" that safely contains her expression, thus elaborates on Graham's recommended "exoneration" of "long-continued disorder of the . . . bowels."<sup>xvi</sup> Although Lucy's self-treatment seems successful, she

falls ill again. This time she is rescued by Dr. John Graham, who brings her to his home and, over the weeks of her convalescence, transforms her into a patient. He diagnoses her ailment as “low spirits,” or “hypochondria,” and Lucy recovers, implicitly because she is ensconced in a home among her friends—for Dr. John’s mother is Lucy’s long-lost godmother.

**Questioning:** But once Lucy is well enough, she returns to her school, and again begins to show signs of illness. Specifically, she sees a “figure” “like a nun” while she is in the attic, but when others cannot substantiate her “vision” with a material explanation, Dr. John pronounces Lucy’s frightening vision “‘a case of spectral illusion[,] following on and resulting from long-continued mental conflict’.”<sup>xvii</sup> He tells Lucy, who is so alarmed she has asked if there *is* a cure for *this* ailment, that “Happiness is the cure—a cheerful mind the preventive: cultivate both.”<sup>xviii</sup> Lucy caustically tells the reader in an aside that “Happiness is not a potato, to be planted in mould, and tilled with manure,” which signals her turn away from faith in bodily regulation, especially the bowels, to “cure” and “prevent” emotional pain and affective disturbances—the same principle by which Patrick Brontë assiduously monitored rates of excretion.<sup>xix</sup>

**Rejection:** In an episode following her first vision of the nun, Dr. John insists Lucy has again seen the nun when she has not. When he refuses to believe her denial and maintains his pronouncement, Lucy suddenly and flatly rejects his authority in an aside to the reader. Far from being mentally weakened and rationally suspect, as Dr. John’s diagnosis insists, Lucy asserts control over her narrative, trumping Dr. John’s interpretation of her symptoms and reestablishing her own authority. She tells us, “Of course with him . . . it was all optical illusion—nervous malady, and so on. Not one bit did I believe him; but I dared not contradict: doctors are so self-opinionated, so immovable in their dry materialist views.”<sup>xx</sup>

Lucy's rejection of medical knowledge halfway through the novel echoes Bronte's own after protracted suffering under Ruddock's dosing. After his overdose of mercury that made Charlotte too ill to write or speak, he prescribed quinine, a stimulant, which also had deleterious effects on Charlotte's constitution. Reporting his second admission of error, she ruefully asserts her own knowledge that her body does not tolerate quinine. Lamenting the grave toll of his medicines on her "reduced" physique, she dismisses him with disgust: always apt with her figurative language, she complains that he "sticks like a leech." When Bronte resumes writing, Lucy suffers no more physical illnesses and Dr. John recedes into a subplot while Lucy enters a new plot with another man, the emotional and flamboyant M. Paul.

**Alternative: Humoral theory:** Throughout the second plot, Lucy's relationship with M. Paul revolves around her learning to write. Whereas in the first plot Lucy's self-expression was aligned with physical disorder and stifled by materialist medicine, the shift to learning to compose marks Lucy's—and by extension, Brontë's—escape from the determinism of matter promulgated by modern medicine. Accordingly, Brontë's figuration of Lucy and Paul's relationship relies on an older Western paradigm of the human body, humoral theory, which countenances not mechanical bodily determinism but the flux and balance of the four humoral liquids: blood, phlegm, black and yellow bile. Brontë's move in the second plot to conceptualize the body in terms of humoral theory allows her to reclaim for her heroine the older belief in women's powers of imagination. In humoral theory, the passions and imagination assert power over matter, causing visions and fantasies to turn into reality, especially in women.<sup>xxi</sup> In the second plot of *Villette*, then, Brontë exactly reverses materialist views of the body and transforms Lucy from a silenced subject of modern medical theory to an imaginative creator of visions and writings. As Lucy gains control over composition, she gains in health and becomes self-

determining. Brontë illustrates her educational and erotic development through humoral modes of exchange with M. Paul. Rather than defining Lucy through deranged organs such as nerves and bowels, humoral theory features systemic fluidity and accounts for individual character through a constant flux in proportions of blood, phlegm, black and yellow bile. Thus Lucy receives the choleric M. Paul's "surplus irritation," but he also draws Lucy's chronic irritation out of her.<sup>xxii</sup> At last Lucy has found a hero with sympathy—reciprocal bodily sympathy. Unlike Dr. John, whose philosophy framed and fixed her in a static role, the humoral flux between Lucy and Paul's bodies is interactive. This interaction and fluidity of identity is crucial to Lucy's development of composition skills, ultimately pointing beyond the story's ending to "Lucy's" composition of the narrative we are reading.

For Charlotte Brontë, the principles of materialist medicine and its drug regimens made her even more sick and unable to speak or write. But before she succumbed to increasing anxiety over illness that would claim her life a few years after *Villette* was published, she took command of her protagonist's trajectory from consigned patient to rejecting agent to a self-creating, healthy woman. Through fiction, Brontë exercises narrative control over illness, the social authority of nineteenth-century medicine, and the deleterious effects of rigidly prescribed drug regimens.

Questions for discussion: How do other writers advance medical resistance through fiction? What cautions should we observe when using historically specific medical theories and experiences in order to read the politics of fictional narratives, especially with regard to gender? Can we read *Villette* as a patient narrative or pathography? What does Brontë gain by voicing medical criticism through a fictional character? How does this reflect on the medical culture of

her time, particularly the gender roles in illness and medicine of the nineteenth century? How does this medical culture compare with prior and later periods in Europe or England?

---

i	<i>Letters III</i> , 15.
ii	<i>Letters III</i> , 9.
iii	<i>Letters III</i> , 5.
iv	<i>Letters III</i> , 9; 7.
v	Brontë, Charlotte. <i>Villette</i> , 196.
vi	<i>Modern Domestic Medicine</i> , 423.
vii	Note by Patrick Brontë in <i>Modern Domestic Medicine</i> , p. 251.
viii	<i>Modern Domestic Medicine</i> , 423.
ix	<i>Villette</i> , 197.
x	<i>Villette</i> 198
xi	<i>Villette</i> , 199.
xii	<i>Modern Domestic Medicine</i> , preface (viii).
xiii	<i>Villette</i> , 231.
xiv	<i>Villette</i> , 199; 200.
xv	<i>Villette</i> , 200.
xvi	<i>Modern Domestic Medicine</i> , 423; 425.
xvii	<i>Villette</i> , 312.
xviii	<i>Villette</i> , 312.
xix	<i>Villette</i> , 313.
xx	<i>Villette</i> , 321.
xxi	(Fischer-Homberger 620)
xxii	<i>Villette</i> (410; 416)