

‘writing, the *pharmakon*, the going or leading astray’:
Addiction and the *pharmakon* in Nineteenth-Century
Periodical Culture

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A Thesis Submitted in Candidature for the Degree of Doctor of Philosophy

Cardiff University
2022

Summary

In his 1981 essay, 'Plato's Pharmacy', Jacques Derrida explores the fundamental duality of the *pharmakon*, demonstrating how this ancient Greek word, which signifies both cure and poison, also fuses the material with the supernatural. My thesis examines how the *pharmakon*'s oppositions underpin the complexities of nineteenth-century understandings and depictions of the drug and drug user, in both specialised professional spheres and evolving literary culture. Focusing on the periodical press of the nineteenth century, I also explore how the text itself can be seen as a *pharmakon*, and how it was encompassed within discourses of dangerous consumption.

The Introduction will establish the points of exploration of the thesis, and will provide a chronological overview of the three chapters and the material examined. Key contributions from Foucault and Derrida will be discussed, and the medical and pharmacological developments of the nineteenth century will frame the discussion of the succeeding chapters.

Chapter One considers the years 1830 to 1859, a period in which the periodical press played an increasingly instrumental role in influencing how readers absorbed fiction and journalism, while the central significance of commodities was epitomised with the Great Exhibition of 1851. The status of substances such as alcohol and opium within this commercial environment was unstable, their common usage increasingly juxtaposed with fears surrounding their physiological and mental influence.

Chapter Two (1860s and 1870s) considers how the connection between sensation fiction and consumption formed a central preoccupation of the culture of consumerism, emphasising concerns regarding gender and the merging of private and public social spheres. Cultural and medical concerns were also conflated in this period: as the physiological impact of drugs was identified as a cause of concern, the same rhetoric of addiction or abuse was increasingly applied to the consumption of fiction itself.

Chapter Three examines how the *fin de siècle* witnessed a powerful Gothic discourse, which permeated both literary and scientific texts resulting in a problematic conflation of medical progression and regression. Within both literary and professional conceptions of drug use, a shifting focus reflected concerns such as degeneration on the individual and national scales and the almost supernatural powers increasingly attributed to science and medicine.

The Conclusion draws together the considerations of the drug, body and text from the preceding three chapters in order to explore how these evolved over the course of the nineteenth century. The figure of the addict and habits of addiction were inextricably connected with these key concepts, and the Conclusion reflects on the ways in which the imbrication of drug/body/text created a problematic and multifaceted understanding of this disease.

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Acknowledgements

The completion of this thesis would not have been possible without the unwavering support and encouragement of Professor Anthony Mandal. It has been a privilege to benefit from his knowledge, enthusiasm and erudition throughout my academic studies, and his kindness and guidance over the last few years have been inexpressibly appreciated.

I am extremely grateful to Rhian Rattray and the postgraduate department in the School of English, Communication and Philosophy at Cardiff University for all their help over the years. The process of writing my thesis included many interruptions and challenges, and Rhian and her colleagues could not have done more to ensure that I was able to keep working.

I would also like to thank to my family for their practical and emotional support, for the hours of babysitting so that I had opportunities to work, and for the happiness they give unceasingly.

For my granny, Freda.

Introduction

‘[B]elow and beyond their domain’:

The Drug and the Addict in the Nineteenth Century

This *pharmakon*, this ‘medicine,’ this philter, which acts as both remedy and poison [...] This charm, this spellbinding virtue, this power of fascination, can be alternately or simultaneously – beneficent or maleficent. – Jacques Derrida (1981)¹

In his text *Medieval Bodies: Life, Death and Art in the Middle Ages* (2019), Jack Hartnell writes:

conceptions of medicine and the body in the Middle Ages were always fluctuating between the tangible and the fantastic [...]. [M]edieval healing seems caught between what we would view as clearly defined science and something far more abstract. It happily conflates thinking from the philosophical and religious realms with input from the artistic imagination, an infinitely more creative and fluid world of health than our own.²

This sense of medical pluralism, of the intermingling between the scientific and the fantastic, is a phenomenon that endured well into the nineteenth century, in both the professional and creative spheres of Victorian culture. It is exceedingly evident in explorations and discussions of the impact of drug use on the mind and body, where the medical and fanciful combine to construct a unique discourse. In literary and medical texts, the consideration of drug use and abuse frequently demonstrates the difficulty of categorisation or definition, allowing a subversive freedom of both expression and exploration. The apparently limitless potential – offered by the growing sense of pharmaceutical power and insights into the depths of physical and mental capabilities – was an absorbing yet menacing concept, and one that undermined traditional concepts of the stability of the body and body politic.

¹ Jacques Derrida, ‘Plato’s Pharmacy’ (1981), in *Dissemination*, trans. by Barbara Johnson (London and New York: Bloomsbury Academic, 2013), pp. 71–186 (p. 75).

² Jack Hartnell, *Medieval Bodies: Life, Death and Art in the Middle Ages* (London: Wellcome Collection, 2019), p. 208.

In his foundational essay, ‘Plato’s Pharmacy’ (1981), Jacques Derrida demonstrates how the *pharmakon* – an ancient Greek word meaning ‘both remedy and poison’ – carries multiple inflections, existing as a cure and its opposite, but also as a ‘charm’, conflating the material or factual with the extraordinary or mythical.³ In this way, during the nineteenth century, the drug and drug user inhabit a complex and multifaceted space, straddling both an increasingly specialised professional sphere of influence, which sought to define and control issues of consumption, and a progressively more diverse literary world, which mined the potential fantastical powers of the drug. This dissertation will examine the ways in which such duality was articulated in the nineteenth-century periodical press, and how addiction and the addicted body were conceptualised in light of the evolving discourse(s) of medicine and literature. This Introduction will establish the fundamental points of discussion and exploration of the thesis, giving a chronological overview of the progression of the subsequent chapters and the material examined within them. Relevant criticism from critical thinkers such as Michel Foucault and Jacques Derrida will be introduced to frame the wider discussion, and the pharmacological and professional developments of the medical sphere over the nineteenth century will be explored. In order to understand how specialist and popular understandings of the disease have evolved, this Introduction will also examine modern medical theories of addiction and their connections back to historicised accounts.

Plato, Derrida and the *pharmakon*

Derrida’s exploration of ‘Plato’s Pharmacy’ comprehensively details the dichotomous nature of the *pharmakon*: ‘the drug: the medicine and/or poison’.⁴ This fundamental duality is at once the locus of any conceptions or understandings of the drug and the reason for its ability to problematically evade any process of definitive classification. Embodying this division

³ Derrida, p. 75.

⁴ Ibid.

establishes the *pharmakon* or drug as a mutable and unstable entity that can be usefully applied to understanding concerns regarding practices of consumption and the body itself. Signifying cure and poison simultaneously, the drug draws attention to the unstable boundaries of the un/healthy body and undermines the implicit trust placed in consumable medicine. The *pharmakon* paradigmatically represents both the potential of medical progress and the dangers inherent in such advancements. Moreover, ‘fascination’ associated with the *pharmakon* can inform the habits and behaviour of individual agents: ‘Operating through seduction, the *pharmakon* makes one stray from one’s general, natural, habitual paths and laws.’⁵ A notion of appealing transgression is therefore established, one which can be portrayed as innocuous, as when Socrates remarks that Phaedrus has ‘found a way to charm me outside’, but also one which can signal indiscretion or violation.⁶ Again, the drug is simultaneously portrayed as a site of attraction and threat, inviting the individual to contravene established patterns of behaviour in a way that suggests both freedom from social convention and the deconstruction of reassuring normative models. Thus, Derrida’s examination of the *pharmakon* and its duality is central not only to understanding the nature of the drug, but also to shaping ideas of drug use/abuse and the individual drug user/abuser.

Turning to wider cultural practices, Derrida also demonstrates how the text itself can be understood as a *pharmakon*.⁷ In Plato’s *Phaedrus*, the ‘charm’ or ‘drug’ that tempts Socrates out of the city is a text:

Just as people get hungry animals to follow them by waving some greenery or a vegetable in front of them, so it looks as though all you have to do is dangle a speech on a scroll in front of me and you can take me all over Attica, and anywhere else you fancy. At the moment, though, this is the place I’ve come to, and so I think I’ll lie

⁵ Ibid., pp. 75–76.

⁶ Plato, *Phaedrus*, trans. by Robin Waterfield (Oxford and New York: Oxford University Press, 2009), p. 7.

⁷ Here, the ‘text’ can be understood as implying or capturing the communicative unit, something encompassing but beyond literary and non-literary contexts. W. F. Hanks refers to the text as a ‘sociocultural product and process’, identifying a fundamental sense of continuous interaction and evolution that echoes the fluctuation of the *pharmakon*. See W.F. Hanks, ‘Text and Textuality’, *Annual Review of Anthropology*, 18 (October 1989), 95–127 (p. 95).

down, and you can find whatever position you think will be most comfortable for reading, and then read.⁸

Derrida emphasises how ‘the leaves of writing act as a *pharmakon* to push or attract out of the city the one who never wanted to get out [...] They take him out of himself and draw him onto a path that is properly an *exodus*’.⁹ The text encompasses the same sense of transgressive attraction as the drug, inviting Socrates to abandon his usual habits and his sense of individual will, as he allows Phaedrus to guide him with the draw of the scroll. This dislocation of the self is a fundamental component of the relationship between the drug and the drug user, and is here shown to exist also between the text and the reader/listener. Within *Phaedrus*, however, there is an intermediary between the individual (Socrates) and the text: namely, Phaedrus himself. The text is consumed and digested as a shared social experience, suggesting reassuring male camaraderie rather than isolated or abnormal selfhood. There is a contrast, then, between the ways in which the text as *pharmakon* emphasises both the potential vulnerability of the individual and the ways in which it provides opportunities for social connection. The manner in which the *pharmakon* or text is consumed can therefore alter whether it is perceived as beneficial or harmful. While *Phaedrus* is situated within classical debates regarding individual and social interactions, the intrinsic relationship with the text that is expressed remains pertinent to our understandings of similar fault-lines within Victorian periodical culture. The format of the periodical magazine can be understood as representing a comparable intermediary to the figure of Phaedrus: just as he shares the text with Socrates, the periodical circulated and disseminated texts with a wide and socially diverse readership.

⁸ Plato, p. 7.

⁹ Derrida, p. 76.

Understandings of addiction

The duality of the *pharmakon* is central to both nineteenth-century and modern concepts of addiction. According to Harold E. Doweiko: ‘Biologists now believe that at least some mammals seem to have an inborn predisposition to seek out compounds [...] that can alter the user’s perception of the world.’¹⁰ The fifth edition of the *Diagnostic and Statistical Manual of Medical Disorders (DSM-5)* states that ‘the diagnosis of a substance use disorder is based on a pathological pattern of behaviours related to the use of the substance’, and establishes multiple criteria for identifying potential disorders.¹¹ These criteria are comprised of the groupings ‘*impaired control, social impairment, risky use, and pharmacological criteria*’, and include observing that the ‘individual may take the substance in larger amounts or over a longer period than was originally intended’, and that ‘virtually all of the individual’s daily activities revolve around the substance’ (p. 483). The groupings reveal that substance-use disorders are currently framed across multiple spheres, spanning the individual and the social, the medical and the personal, as well as the physiological. This extensive survey of behaviours and physical responses emphasises that substance abuse should be understood as a public condition as well as a private and individual one, concerning the health of both body and body politic. *DSM-5* also states that the severity of the substance-use problem can, in part, be determined through ‘the individual’s own report’, disclosing a model of collaboration between patient and doctor in categorising the condition (p. 484). That the addict participates in the medical apprehension of his or her own disorder privileges the voice of the individual

¹⁰ Harold E. Doweiko, *Concepts of Chemical Dependency*, 7th edn (Belmont, CA: Brooks/Cengage Learning, 2009), p. 7.

¹¹ *Diagnostic and Statistical Manual of Medical Disorders*, 5th edn (Washington and London: American Psychiatric Publishing, 2013), p. 483. The *DSM* is a comprehensive diagnostic manual published by the American Psychiatric Association and consulted in various professions, including the pharmaceutical and legal, as well as, principally, the medical and psychiatric. Subsequent references to *DSM-5* are taken from this edition of the manual, and will be provided parenthetically in the main body of the chapter. For more on the *DSM*, see Michael Halpin, ‘The DSM and Professional Practice: Research, Clinical, and Institutional Perspectives’, *Journal of Health and Social Behaviour*, 57.2 (June 2016), 153–67.

drug user, underscoring that personal experience is crucial to the construction of concepts of addiction.

DSM-5 also explores the physiological intricacies of drug use and abuse, stating:

All drugs that are taken in excess have in common direct activation of the brain reward system, which is involved in the reinforcement of behaviours and the production of memories. They produce such an intense activation of the reward system that normal activities may be neglected. Instead of achieving reward system activation through adaptive behaviours, drugs of abuse directly activate the reward pathways [...]. Furthermore, individuals with lower levels of self-control, which may reflect impairments of brain inhibitory mechanisms, may be particularly predisposed to develop substance use disorders, suggesting that the roots of substance use disorders for some persons can be seen in behaviours long before the onset of actual substance use itself. (p. 481)

This comprehensive explanation of the neurological impact of drugs reveals how behaviours and habits are formed and informed through the consumption of substances. While this underlines the connections between the external and internal, it also demonstrates how addiction can blur the distinction between a social problem and an individual bodily illness. While patterns of behaviour associated with substance abuse have a wider social significance, allowing the unhealthy body to be discerned and diagnosed, *DSM-5* stresses the underlying physiological responses and processes that are fundamentally at the centre of addiction. The suggestion that certain individuals may be more ‘predisposed to develop substance use disorders’ than others introduces the question of to what extent individual will or self-control influences addiction (p. 481). This possible neurological predisposition echoes the kind of discourse surrounding the *pharmakon*, where the removal of the drug user’s will or agency is acknowledged as part of the *pharmakon*’s power. The relationship between drug and drug user is subject to similar scrutiny, the idea of ‘disorder’ correlating with the sense of transgression or with the body beginning to evade regulation.

The nineteenth century and the evolution of addiction

The acknowledgement of the *pharmakon* or drug's capacity to both cure and poison encapsulates the instability of pharmaceutical knowledge during the nineteenth century, as more powerful substances and new methods of administering them led to an awareness of both potential curative advances and dangerous physiological responses. During the first part of the nineteenth century, substances such as opium were available for purchase and consumption relatively freely, occupying an accessible place in the wider consumable market that reflected the tractability with which medical treatment was viewed: 'The corner shop, and not the doctor's surgery, was the centre of popular opium use.'¹² Virginia Berridge continues:

The opium preparations on sale and stocked by chemists' shops were numerous. There were opium pills [...] opium lozenges, compound powder of opium, opiate confection, opiate plaster, opium enema, opium liniment, vinegar of opium and wine of opium. There was the famous tincture of opium (opium dissolved in alcohol), known as laudanum, which had widespread popular sale, and the camphorated tincture, or paregoric [...]. The children's opiates like Godfrey's Cordial and Dalby's Carminative were long-established. They were everywhere to be bought [...] popular remedies, patent medicines and the opium preparations of the textbooks were all available [...]. Laudanum and the other preparations were to be found not just in high-street pharmacies but on show in back-street shops, crowded with food, clothing, materials and other drugs.¹³

The variety of both forms of opium and places at which it could be procured reveal how this drug permeated everyday life, and how medicines more widely were commonly perceived as ordinary and unexceptional purchases, rather than specialised or restricted items.¹⁴ The mention of 'children's opiates like Godfrey's Cordial and Dalby's Carminative' also demonstrates how opiates were central to familial medicine (see Figures I.1 and I.2, below),

¹² Virginia Berridge, *Opium and the People: Opiate Use and Drug Control Policy in Nineteenth and Early Twentieth-Century England* (London and New York: Free Association Books, 1999), p. 30.

¹³ *Ibid.*, p. 24.

¹⁴ 'Working people were relying upon opiates purchased in this way to deal with a whole range of minor complaints. They were a remedy for the "fatigue and depression" unavoidable in working-class life at the time. They acted as a cure-all for complaints, some trivial, some serious, for which other attention was not available [...] For the most part, ailments were dealt with on the basis of community knowledge; and there was often positive opposition to the encroachment of trained doctors.' *Ibid.*, p. 31.

emphasising the popularity of the drug within the collective consciousness and its perceived comprehensive effectiveness. While substances such as opium were readily available to this extent, the consumption of drugs by individuals was not subject to strict forms of regulation, and conceptions of misuse or abuse were therefore unfixed and unstable. If the dangers of excessive consumption were not unknown, the lack of public parameters so meant that habits of addictive behaviour could persist without official or specialised definition or diagnosis.

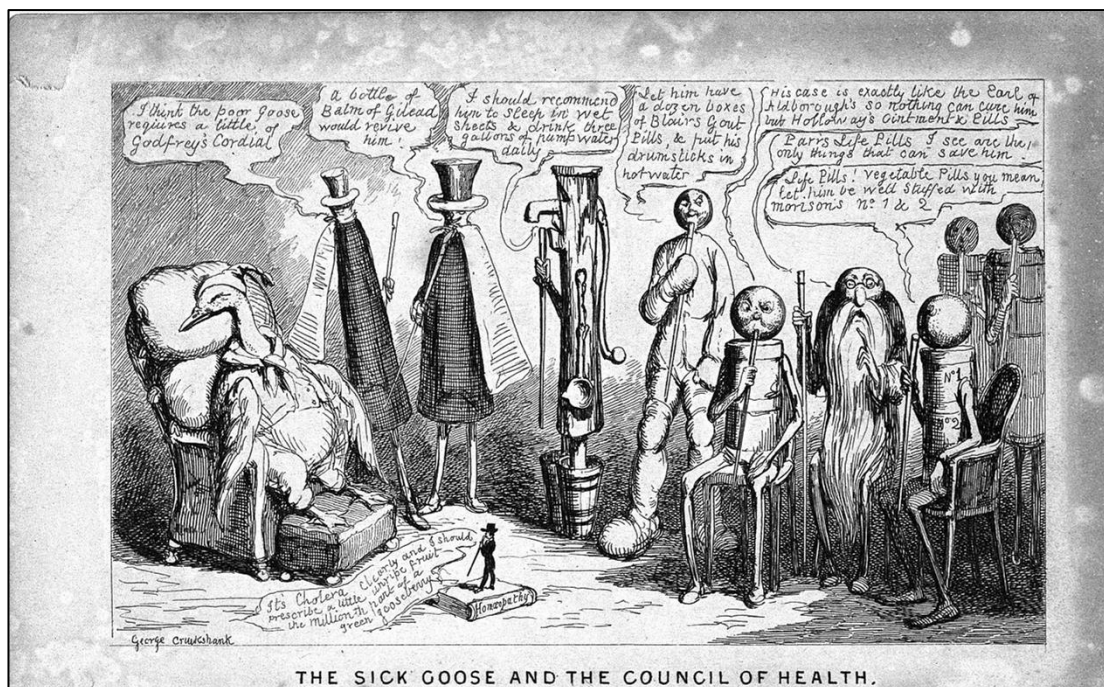


Fig. I.1. George Cruikshank, *The Sick Goose and the Council of Health* (1830–39). Wellcome Library, no. 11403i. A physician, in the guise of a bottle of Godfrey's Cordial, stands first in the queue to treat the goose.

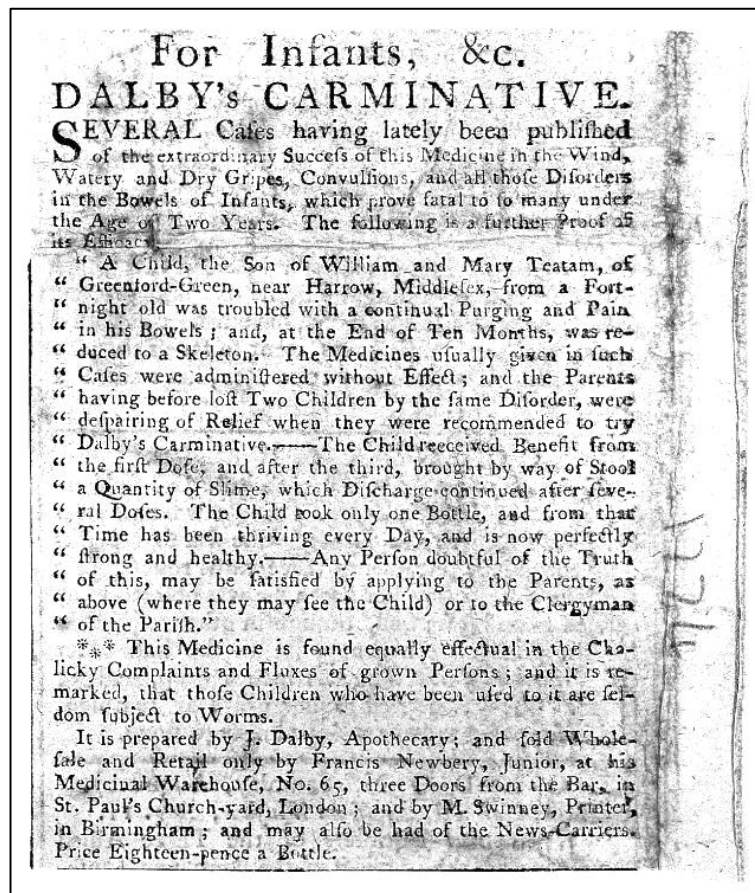


Fig. I.2. Advertisement for *Dalby's Carminative* (n.d.). Wellcome Collection.

This freedom of access to certain chemical and medicinal materials underwent a fundamental evolution during the nineteenth century that necessarily altered cultural concepts of drug use and abuse. The gradual professionalisation of the medical sphere, as well as the implementation of government acts that restricted the movement and sale of medical substances, resulted in drug habits and addiction being subjected to greater levels of scrutiny as ideas of the healthy body and body politic were reconfigured.¹⁵ The shaping of a

¹⁵ Keir Waddington discusses the complexity of the professionalisation of Victorian medical practice, noting that '[p]rofessionalization came to be defined not as a static attainment of rigid criteria, but as a rhetorical device' and 'credentialist legalistic tactics of occupational closure were pursued in the nineteenth century to define who was part of the medical profession.' Waddington suggests that a professional medical identity was 'partially fashioned through medical societies, institutional training and journals, which created sites around which practitioners could develop a visible community of interests. A model of socialization can further suggest how the common experiences of medical education represented an important vehicle through which this identity and the values associated with it were transmitted [...] Professionalization was a flexible process. It was shaped by local and national contexts, and was bound up with questions of identity, medical knowledge and practice, status and authority, competition, and training. Above all, professionalization should be seen as historically determined.' See Keir Waddington, *An Introduction to the Social History of Medicine: Europe since 1500*

recognisable and structured medical profession was an extensive process. Nevertheless, an early indication of its development was the emergence of numerous specialised periodicals, such as *The Lancet* in 1823, which indicated both a growing sense of community and a need for the existence of a discursive domain.¹⁶ These publications facilitated discussion regarding the uses of opiates and other drugs, as well as disseminating information about the potential dangers of their consumption.

The 1858 Medical Act initiated the publication of the *British Pharmacopoeia*, which, for the first time, imposed standardised measurements for preparations of substances containing opium.¹⁷ This revealed an acknowledged need to counter the dangers of unregulated or excessive consumption of the drug, and a sense of increasing concurrence between existing medical factions. It was the 1868 Pharmacy Act that imposed various conditions on the medical marketplace, and while in reality it was suggested that ‘the requirements of the [...] Act [...] as well as the powers conferred by it, have hitherto been, to a great extent, disregarded and inoperative’, this was another public confirmation of the ways

(Basingstoke: Palgrave Macmillan, 2011), pp. 167–68. Roy Porter discusses the Medical Acts of the first half of the nineteenth century, writing that ‘[a]gitation led to the Apothecaries Act in 1815, the first attempt to set standards of professional education in England and Wales. All apothecaries (in effect, general practitioners) were to be licensed, after attendance at approved lectures and six months’ hospital clinical work. Though critics disowned it as a reform which essentially confirmed the *status quo*, general practitioners would have at least have undergone some academic and clinical training, thereby raising their standing. A further forty years’ pressure, prevarication and politicking were required to produce the Medical Act of 1858, another compromise which pleased no one but which worked. This established a unified medical register of all approved practitioners, who alone would be eligible for public employment, specified entry qualifications, and created the General Medical Council (GMC) as an ethico-legal watchdog, with jurisdiction over malpractice and ‘infamous conduct’ including advertising and collaborations with irregulars.’ See Roy Porter, *The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present* (London: HarperCollins, 1997), pp. 355–56.

¹⁶ For discussion of the history of *The Lancet*, see ‘The Point of *The Lancet*’, *British Medical Journal*, 29 September 1973, pp. 649–50, and Brittany Pladek, “‘A Variety of Tastes’: *The Lancet* in the Early-Nineteenth-Century Periodical Press”, *Bulletin of the History of Medicine*, 85.4 (Winter 2011), 560–86.

¹⁷ ‘*British Pharmacopœia to be published*. LIV. The General Council shall cause to be published under their direction a book containing a list of medicines and compounds, and the manner of preparing them, together with the true weights and measures by which they are to be prepared and mixed, and containing such other matter and things relating thereto as the General Council shall think fit, to be called “British Pharmacopœia”; and the General Council shall cause to be altered, amended, and republished such Pharmacopœia as often as they shall deem it necessary.’ See ‘An Act to Regulate the Qualifications of Practitioners in Medicine and Surgery’, *British Medical Journal*, 14 August 1858, pp. 684–89 (p. 688).

in which drug consumption was beginning to be reconfigured.¹⁸ Both the process of medical professionalisation and the changing attitude towards drug use and abuse can be glimpsed through legislation and events such as the ones mentioned. However, the complexities of both specialised and popular uses of opiates, as well as the continued diversity of the medical world, meant that ideas of addiction remained mutable and unstable. Susan Zieger writes that

addiction began as an exceptional story of white, masculine, middle-class self-making gone awry, ironically confronting its own embodiment as a mode of compulsion rather than freedom, habituation rather than spontaneity, dependency rather than autonomy, and disease rather than health. Toward the end of the century, these signs of addicted compulsion merged with signs of femininity, queerness, and biological racialization, encroaching on the normative liberal subject and investing him with uncontrollable, deviant desire, disease and racial defect [...]. [I]n the period from 1860 to 1900, the white, middle-class masculinity of the habitual drunkard or intemperate began to fragment, and addiction began to organize new configurations of gender, sexuality and race [...] the first cohort of medically recognized ‘addicts’ – those whose growing habituations required higher dosages, who then suffered when they could not obtain them – were often upper- and middle-class women whose doctors had inadvertently habituated them to hypodermic morphine for pain relief. When physicians realized that the drugs they were administering had created their own regime of demand within the patients’ bodies, they began to articulate the modern symptoms of tolerance and withdrawal. In order to rebuild a tarnished reputation, they began to control the use of the syringe more tightly; many also published a petition for forswearing the administration of alcohol. By generating a medical consensus about the norms of habituation and the rules for preventing or ameliorating it, they began to reconfigure their patients’ habits as diseases.¹⁹

Zieger articulates how conceptions of the drug user and drugs existed in an unstable and changeable milieu, as, over the century, social and cultural practices and habits were repeatedly reconfigured and reshaped. Concepts of addiction and the addict themselves were implicated in multifarious concerns regarding the growing instability of fundamental sociological assumptions, such as gender, professional and domestic identities and the body/politic. Efforts to reconfigure or to control or cure addiction and the addicted body were

¹⁸ ‘Chemists and Druggists and the Pharmacy Acts’, *British Medical Journal*, 6 January 1894, pp. 31–32 (p. 31).

¹⁹ Susan Zieger, *Inventing the Addict: Drugs, Race, and Sexuality in Nineteenth-Century British and American Literature* (Amherst: University of Massachusetts Press, 2008), pp. 10 and 23.

therefore imbricated with this underlying desire to contain the perceived disintegration of wider cultural ideology.

Michel Foucault's theories regarding health and medicine are pertinent to this exploration of the cultural significance of addiction and the addict – especially in discussions of the nineteenth century, when ideas of professionalisation and institutionalisation were beginning to form and disseminate. Foucault observes:

Modern medicine has fixed its own date of birth as being in the last years of the eighteenth century. Reflecting on its situation, it identifies the origin of its positivity with a return [...] to the modest but effecting level of the perceived [...]. At the beginning of the nineteenth century, doctors described what for centuries had remained below the threshold of the visible and the expressible [...] it meant that the relation between the visible and invisible – which is necessary to all concrete knowledge – changed its structure, revealing through gaze and language what had previously been below and beyond their domain.²⁰

Foucault identifies as significant the emergence of the medical gaze and a specialised medical language, both of which shaped how disease and treatment were conceptualised and apprehended. While drug use and self-medication were prevalent within early nineteenth-century society, the act of subjecting the addicted body to the gaze of a medical profession effectively distinguished it as being deviant or abnormal, and established drug use/abuse as a form of disease that *required* observation and intervention. Although the position of the addict remained mutable in popular understanding, Foucault identifies a growing sense of subversion associated with the medical profession's identification and diagnosis of this abnormal body. The intrinsically visual emphasis of the medical gaze does, however, complicate the formation of a corresponding specialised language:

Is it possible to integrate into a picture, that is, into a structure that is at the same time visible and legible, spatial and verbal, that which is perceived on the surface of the body by the clinician's eye, and that which is heard by that same clinician in the essential language of the disease?²¹

²⁰ Michel Foucault, *The Birth of the Clinic: An Archaeology of Medical Perception*, trans. by Alan Sheridan (London and New York: Routledge, 2010), pp. xii–xiii.

²¹ *Ibid.*, p. 138.

The complexity inherent in shaping this form of language reveals why the Romantic poetic lexicon – full of fantastical imagery and physical sensation – was utilised so emphatically in the discussion surrounding drug use, both in popular and specialised publications.

The text as *pharmakon*

In addition to the transformations in medical discourse outlined above, the nineteenth century also saw fundamental changes in how the printed text itself was produced, consumed and conceptualised. The introduction and popularisation of the periodical press generated audiences that accessed and read material in novel and discrete ways. In many of the popular periodicals, such as *Blackwood's Edinburgh Magazine* (published 1817–1980), and Charles Dickens' *Household Words* (1850–59) and *All the Year Round* (1859–95), narrative texts were published in serialised instalments accompanied by illustrations and alongside diverse articles and journalism, advertisements and editorials. The majority of texts examined in this thesis were initially published in this form, which necessarily informed their narrative shape and structure, as well as their audience's response to them. Accessing and consuming texts in instalments in this way, together with an increasing readership of novels more generally, invited comparisons between the text and the drug. Moreover, concerns surrounding the potential physiological responses to dramatic narrative events – responses particularly associated with female readers – were articulated with increasing frequency. Pamela K. Gilbert notes that a 'dominant metaphor' of the nineteenth century was to view reading 'as the ingestion of drugs, particularly the reading of novels.'²² She continues to observe that the text was

presented alternately as food and poison, medicine and illicit drugs, and finally the erotic body and the contaminated body. In all of these metaphors, the text is a substance that enters the reader and has an effect on him or her. The text is not an

²² Pamela K. Gilbert, *Disease, Desire and the Body in Victorian Women's Popular Novels* (Cambridge and New York: Cambridge University Press, 2005), p. 18.

inert thing to be merely manipulated, it is active – even opportunistic [...]. Metaphors of ingestion and ingestion rebounded upon the aggressor, emphasizing the reciprocity of the boundary transgression implied. The reader who devours the text is in some sense inhabited by that text.²³

As with chemical substances, it is the relationship with the body that forms the locus of concerns surrounding texts and the way in which they are read.

This sense of apprehension also corresponds with contemporaneous beliefs about drug abuse and addiction. Gilbert identifies an 1874 issue of *Temple Bar*, which ‘asserts: “people are not satisfied even with reading worthless novels; they must then read still more worthless notices of them in the papers. It is the drunkard, not only draining his glass, but licking it out”’.²⁴ Gilbert goes on to comment that ‘[n]ot only is the text here to be devoured, it is a drug (alcohol) which has a specific negative moral effect – that of rendering the consumer bestial, like an animal in his or her consumption’. Certain habits of reading were increasingly associated with the language of addiction, emphasising how the culture of consumption was under a form of scrutiny that combined economic and medical concerns focused on the body of the consumer. Within the *Temple Bar* article there is a lack of sympathy for both the metaphorical ‘drunkard’ and the reader of ‘worthless’ texts, suggesting distaste or antipathy towards those associated with addictive behaviour. The explicit sense of immorality linked with this excess, associated with both the text and drug, reveals how, over the course of the nineteenth century, concepts of degeneration came to encompass multiple fears surrounding the disintegration of both body and body politic. While earlier reports of public habits, such as Henry Mayhew’s *London Labour and the London Poor* (serialised between 1850–52), had represented dangerous forms of consumption as a public issue and social responsibility, towards the latter part of the century, issues of abuse and addiction could be interpreted as symptoms of a cultural regression. Echoing the way in which Plato positions the text as

²³ Ibid., pp. 18–19.

²⁴ ‘The Vice of Reading’, *Temple Bar*, 42 (September 1874), pp. 251–57 (p.256); quoted in Gilbert, p. 21.

pharmakon, this propensity to identify reading as a potentially harmful or immoral activity demonstrates how certain patterns of behaviour could be reconfigured as pathological within the public consciousness.

Davy and De Quincey

The complex interaction between the scientific and the literary worlds is nowhere better exemplified than by the work of Humphry Davy (1778–1829) and Thomas De Quincey (1785–1829). Both men were experimental users of chemical substances and recorded their experiences in texts which reveal the challenges and intricacies of articulating these physical and mental sensations in the absence of an established psychological discourse. Davy's experiments with nitrous oxide were undertaken in 1799 in order to investigate its therapeutic potential; however, the records of this research demonstrate how the boundaries between scientific investigation and personal experience often blurred. The language used in Davy's accounts initially constructs a medical and professional environment in which the experiments are presented as an objective and systematic activity. Davy recounts how he 'prepared a large quantity of impure nitrous oxide from the nitrous solution of zinc', before then inhaling 'the quantities of a quart and two quarts generally mingled with more than equal parts of oxygen or common air'.²⁵ The emphasis on rigorous adherence to detailed accounts of the preparation and method of the experiments conveys a sense not only of authentic enquiry but also demonstrates their validity within a wider scientific field. Davy also mentions the presence of a 'Dr Kinglake', who 'felt my pulse' and 'informed me that it was rendered fuller and quicker' (p. 457). This additional scientific figure again affirms a sense of professional validation, while emphasising that the body of the drug user is under

²⁵ Humphry Davy, *Researches, Chemical and Philosophical; Chiefly concerning Nitrous Oxide; or Dephlogisticated Nitrous Air, and its Respiration* (London: J. Johnson, 1800), pp. 454 and 455. Subsequent citations will be taken from this edition and given parenthetically in the main text.

strict medical supervision. Kinglake's presence contributes to a view that Davy's experiments are operating in a collaborative, professional environment, rather than taking place in a private or concealed manner. In light of these framing techniques, Davy's experiments, as well as his records, would seem initially to belong to a sphere of medical collaboration and to a controlled and systematic field of discourse.

This sense of scientific objectivity is compromised by the language used by Davy as he articulates his physical and mental responses to the nitrous oxide, revealing the instability of the existing discourse associated with drug use. Davy remarks that there is an element of 'danger' in his experimental methods, exposing the personal and bodily risk at odds with precise medical control or regulation (p. 456). This uncertainty or vulnerability emphasises the troubling volatility of chemical stimulants and the unpredictability of their impact on the body. Another of Davy's records details the sensations caused by the inhalation of the nitrous oxide:

an highly pleasurable thrilling, particularly in the chest and the extremities. The objects around me became dazzling and my hearing more acute. Towards the last inspirations, the thrilling increased, the sense of muscular power became greater, and at last an irresistible propensity to action was indulged in; I recollect but indistinctly what followed; I know that my motions were various and violent. (p. 458)

The 'highly pleasurable thrilling' conveys explicitly the enjoyable physiological impact of the gas, and the way in which the inhalation made 'objects around me became dazzling and my hearing more acute' reveals an increased capacity of the body and its ability to comprehensively perceive the outside world. The 'irresistible propensity to action' and the 'various and violent' actions which are remembered only 'indistinctly' suggest diminished command over body and mind, however, undermining the appealing nature of the experience. The description suggests both an enhancement of bodily powers and a loss of bodily control, a contradictory state that is at once pleasurable and disconcerting. The duality or opposition

associated with the *pharmakon* can be found in Davy's experiences with the gas, its qualities of fascination and attraction coexisting with the potential to disturb physiological stability.

Davy's experiments, and, significantly, his methods of recording them and writing about them demonstrate how the spheres of science and literature interacted and converged during the early nineteenth century to reveal both a shared sense of inquiry and a shared discourse. Davy wrote 'notebooks, letters, poetry, and [...] a published book' about his experiments with nitrous oxide, not restricting himself to a formal record and blurring the distinction between professional and more creative forms of expression.²⁶ Davy 'produced poetry over a thirty-five year period (according to his early biographers, he began writing it long before he began his scientific labor and continued to practice the art almost until his death)', which emphasises the way in which he inhabited this shared space and can be seen as a polymathic figure who represented the amalgamation of ostensibly diverse fields.²⁷ The fact that Davy was in the habit of writing poetry before commencing his experiments with nitrous oxide suggests that, rather than there being an inherent link between drug use and poetical expression, these various different modes of communication were considered equally accessible and relevant forms of self-expression for educated figures. His poetry exploring the experiments therefore continues his participation in an overarching milieu of science and literature, rather than operating as a direct response to novel physiological experiences. Davy was also acquainted with the poets Robert Southey, Samuel Taylor Coleridge and William Wordsworth, and his familiarity with their occupation could have reinforced this sense of multitudinous expression. The environment in which Davy was articulating and recording his research permitted diverse forms of communication or discourse, allowing discussion of drug use to transcend purely medical or professional arenas. In this way, the use of chemical

²⁶ Sharon Ruston, 'The Art of Medicine: When Respiring Gas Inspired Poetry', *The Lancet*, 2 February 2013, pp. 366–67 (p. 366).

²⁷ J. Z. Fullmer, 'The Poetry of Sir Humphry Davy', *Chymia*, 6 (1960), 102–26 (p. 102).

substances, and their physiological impact, was a subject that could permeate discrete social spheres, echoing the widespread use of drugs, such as opioids, themselves.

The varied nature of Davy's writing reflects the complexity of the figure of the experimental drug user. The amalgamation of language used in his records prevents easy or definitive categorisation, and instead enables the narrating subject to inhabit multiple identities. For instance, Davy writes:

On May 5th, at night, after walking for an hour amidst the scenery of the Avon, at this period rendered exquisitely beautiful by bright moonshine; my mind being in a state of agreeable feeling, I respired six quarts of newly prepared nitrous oxide.

He further remarks that the result of this consumption was 'vivid and agreeable dreams' (*Researches*, 491–92). The descriptive tone and dreamlike atmosphere present Davy as a Romantic figure, echoing the work of his contemporaries Southey and Coleridge, and drawing the scientist into more fanciful and imaginative territory. This figure at the centre of experimental drug use was significant to perceptions of the addict, and for the evolving associations of the individual body and mind. Jan Golinski writes that 'Davy's career illuminates the relationship between the construction of individual subjectivity and the emergence of scientific institutions and disciplines in the first two decades of the nineteenth century.'²⁸ The focus on the connections between the individual and the institution reveals how knowledge surrounding the use of chemical substances could be perceived as the remit of both specialised professions and the gifted individual – just as the discourses and modes of expression used to articulate knowledge surrounding these materials spanned multiple cultural fields. Public conceptions of the drug user or experimenter evolved over the nineteenth century, and Golinski observes that Davy's 'career called for continuous self-fashioning in a changing social milieu [...] he was experimenting in molding his social

²⁸ Jan Golinski, 'Humphry Davy: The Experimental Self', *Eighteenth-Century Studies*, 45.1 (Fall 2011), 15–28 (p. 16).

persona at a time of significant historical change.²⁹ This idea of the drug user/experimenter possessing a malleable identity that could have significance in multiple cultural spheres, exerting authority in seemingly separate realms of influence, was one that had an enduring impact on nineteenth-century conceptions of the consumers of chemical or addictive substances.

The pleasurable physical effects of nitrous oxide that Davy recorded occupy a problematic place in Davy's writing. Stephanie J. Snow remarks that '[r]ather than revolutionizing medical treatments, nitrous oxide revolutionized individual sensibilities [...]. Some found themselves on the fringes of addiction [...]. Just seeing the bag caused Davy to desire the gas.'³⁰ This subversive suggestion of experimentation turning to addiction implies a lack of control at odds with scientific exactitude, and a focus on bodily sensation that prioritises individual gratification over wider medical utility. It is the inherently personal experience of Davy that unsettles and obscures his *Researches*, foregrounding the relationship between the drug user/abuser and the drug itself. This focal point has drawn comparisons between the work of Davy and that of Thomas De Quincey, whose seminal *Confessions of an English Opium-Eater* represented a watershed in cultural and literary explorations of the physiological and psychological impact of drug use. Published in 1821 in the *London Magazine*, De Quincey's account of opium use and eventual dependence draws on Romantic and Biblical lexicons to construct a novel engagement with both the properties of drugs and the ways in which they were employed or utilised. It records an interaction with opium that is intensely personal and isolated, while nevertheless forming part of the wider culture of experimentation with chemicals and stimulants that blurred the boundary between a desire for medical progress and personal enjoyment or indulgence. Both Davy and De

²⁹ Ibid., p. 17.

³⁰ Stephanie J. Snow, *Blessed Days of Anaesthesia: How Anaesthetics Changed the World* (Oxford and New York: Oxford University Press, 2008), pp. 12–13.

Quincey contributed to popular ideas of the addict through their work; however, De Quincey's text is more fully consonant with a literary tradition, published as it was in a widely circulated periodical and echoing in its Romantic and Gothic tone narratives featured in popular publications such as *Blackwood's Edinburgh Magazine*.³¹ While Davy's *Researches* contain the troubling suggestion of addiction, *Confessions* makes this struggle explicit and comprehensively explores this individual experience.

De Quincey's narrative, like Davy's texts, evades definitive categorisation. It is addressed 'To the Reader', and establishes an individual, intimate account as it relates the narrator's experiences with opium during his life in London.³² The narrator also writes that he hopes the text 'will prove, not merely an interesting record, but, in a considerable degree, useful and instructive'. This didactic element positions *Confessions* as an authoritative source of information, while its availability to a popular audience assumes both a public interest and shared familiarity with certain aspects of chemical substances and their uses. Simultaneously, De Quincey establishes a Gothic tone of immediacy and confidentiality alongside this sense of pertinence to the wider state of contemporary drug use and abuse. The duality of the text echoes that of Davy's *Researches*, as the private experiences and feelings of the individual are juxtaposed with a more comprehensive and public idea of specialised examination. At an early stage of *Confessions*, De Quincey addresses the ethical significance of detailing addiction, noting:

Nothing, indeed, is more revolting to English feelings, than the spectacle of a human being obtruding on our notice his moral ulcers or scars, and tearing away that 'decent drapery,' which time, or indulgence to human frailty, may have drawn over them.

³¹ Megan Coyer describes *Blackwood's Edinburgh Magazine* as 'the most influential and innovative literary periodical of its era', and from 1817 to 1832 it published its infamous 'Tales of Terror', which 'emerged against a backdrop of medico-scientific progress that was laden with Gothic potential: the development of pathological anatomy, phrenology, and forensic medicine.' See Megan Coyer, *Literature and Medicine in the Nineteenth-Century Periodical Press: Blackwood's Edinburgh Magazine, 1817–1858* (Edinburgh: Edinburgh University Press, 2017), pp. 1 and 36.

³² Thomas De Quincey, *Confessions of an English Opium-Eater*, ed. by Grevel Lindop (Oxford and New York: Oxford University Press, 2008), p. 1. Subsequent citations will be taken from this edition and given parenthetically in the main text.

The narrator justifies his ‘breach of the general rule’ through a belief in ‘benefit resulting to others’ from its publication (p. 2). Referring to the addict as a ‘spectacle’ and addiction itself as a ‘moral ulcer’ associated with ‘human frailty’ firmly establishes the condition as something separate and distinct from normal social patterns of behaviour, despite substances such as opiates being in common use within early nineteenth-century society.³³ In this instance, therefore, it is the addict himself who associates isolation and moral degradation with his behaviour, constructing a powerful trope of addiction that has had an enduring significance.

The narrator relates his extensive history of opium use, including the circumstances that initially led to his dependence on the drug. He recounts how he

did occasionally take opium, for the sake of the exquisite pleasure it gave me: but, so long as I took it with this view, I was effectually protected from all material bad consequences, by the necessity of interposing long intervals between the several acts of indulgence[,]

and how it was for the purpose of ‘mitigating pain in the severest degree, that I first began to use opium as an article of daily diet’ (p. 6). The assertion that the narrator was capable of abstaining from opiates for long periods of time suggests an element of self-control and that a less threatening relationship between the drug and body can exist, with patterns of behaviour more consistent with acceptable social conduct. In this instance, a controlled consumption is represented by the narrator, rather than an excessive or dangerous one, and one in which the individual body is not compromised by the potentially deleterious influence of the drug. By stating that his ‘daily’ opium habit was a result of attempting to lessen pain, the narrator also pre-empts any suggestion of indulgence or weakness of character. As previously mentioned,

³³ ‘[A]t all levels of society, opium and laudanum were commonly and unselfconsciously bought and used. Few who took the drug regularly would have bothered to analyse the reasons behind their consumption [...] the drug could originally have been taken for what can be called a “medical” need – sleeplessness, headache, depression – but as it was often and quite normally self-prescribed, the use continued perhaps after the strict “medical” condition had gone. In reality the medical uses of opium shaded imperceptibly into “non-medical” or what can be termed “social” ones.’ See Berridge, *Opium and the People*, p. 49.

self-medication was common during this period, reflected by a marketplace in which easy access to opiates resulted in consumers personally regulating their intake of substances such as these. The associations with opium established by the narrator at this point in *Confessions* correspond more closely with how the drug was commonly utilised by the wider public.

Nevertheless, the narrative proceeds to reveal how such widespread habits could descend into less desirable behaviour. This alteration – from a recognisable and familiar reliance on pain relief to a more subversive form of drug use – is marked by the narrator’s first description of opium consumption. The mundanity of a ‘wet and cheerless [...] rainy Sunday in London’ is contrasted with the ‘Paradise of Opium-eaters’, as ‘[t]he druggist – unconscious minister of celestial pleasures’ provides the narrator with the ‘tincture of opium [...] the celestial drug’. The narrator continues to describe how, on returning to his lodgings, he ‘lost not a moment in taking the quantity prescribed’, although he was ‘ignorant of the whole art and mystery of opium-taking’ (*Confessions*, p. 38). There is a juxtaposition between the Romantic language used and the detail of ‘taking the quantity prescribed’, emphasising that a method of regulation indeed existed in relation to the sale and use of the drug. The text, at this initial point, draws attention to the realistic process of obtaining opium from a druggist and the way in which the narrator adheres to the prescribed limit of consumption.

Notwithstanding the fantastical lexicon, the text is therefore able to represent a transaction common to nineteenth-century urban life and familiar to contemporary readers, giving a sense of immediacy to both the figure of the drug user and the spectre of potential misuse and addiction. This tension between access to addictive substances and the possibility of dangerous consumption pervaded specialised medical discussion, but also persisted in later literary considerations of the addict’s behaviour. In Charles Dickens’ *Bleak House* (first published between 1852 and 1853) for example, the character of Krook is manipulated by the

purchase and consumption of strong alcohol, expressing concerns about how the marketplace could facilitate this kind of behaviour. De Quincey's text explores the way in which the relative simplicity of the public's ability to self-medicate could result in forms of consumption associated with dangerous excess or indulgence, echoing the duality of the *pharmakon*.

This threat of subversive consumption immediately follows the narrator's account of purchasing the opium, as he then describes the overwhelming physiological and mental impact of the drug:

what a revulsion! what an upheaving, from its lowest depths, of the inner spirit! what an apocalypse of the world within me! That my pains vanished was now a trifle in my eyes: – this negative effect was swallowed up in the immensity of those positive effects which had opened up before me – in the abyss of divine enjoyment thus suddenly revealed. Here was a panacea – a φαρμακον νήπενθεξ for all human woes: here was the secret of happiness, about which philosophers had disputed for so many ages, at once discovered [...] (*Confessions*, p. 39)

The passage's scope for dramatic language reflects a bodily experience at odds with the sense of order and regulation implied with the idea of a prescribed dose of opium. Rather than a measured response to the drug, the narrator describes a powerful and intense reaction that is removed from a controlled medical atmosphere and instead constructs a vivid alternative discourse of drug use. The 'revulsion', 'upheaving' and 'apocalypse' that the narrator experiences reveal the fundamental and potent impact of the drug on the body, generating a sense of potential risk by emphasising the dramatic physiological changes. The dichotomy implicit in the contrast between the 'revulsion' and the 'divine enjoyment' felt not only suggests the dual poison/remedy nature of *pharmakon*, but echoes the contrasts in Davy's experience with nitrous oxide. Both Davy's *Researches* and De Quincey's *Confessions* identify this central opposition in their drug use, meaning that despite the pleasurable and fantastical effects described, the drug retains this sense of potential danger. De Quincey goes on to note that opium, 'the secret of happiness [...] might now be bought for a penny, and

carried in the waistcoat pocket: portable ecstasies might be had corked up in a pint bottle: and peace of mind could be sent down in gallons by the mail coach' (p. 39). This description of the potential of opiates reflects the growing conviction that the power and efficacy of commerce and a marketplace in which the movement and consumption of goods, including medicinal substances, could be characterised by convenience and efficiency. Given the subversive risk associated with opium, this ease of movement and access becomes a threat to both body and body politic.

Just as Davy created and recreated his identity as a scientist, *Confessions* immortalised a paradigmatic concept of the addict that influenced subsequent specialised and popular perceptions of addicted individuals. De Quincey gives the reader the illusion of proximity to the physiological and mental experiences of the narrator through the exaggerated detail of sensation, while the Gothic and Romantic language comports with a literary tradition familiar to nineteenth-century readers, which would have positioned the figure of the addict in a recognisable milieu. The text thus makes the addict an accessible figure, despite the narrative's emphasis on his social isolation. The narrator details how he was 'early distinguished for my classical attainments, especially for my knowledge of Greek. At thirteen I wrote Greek with ease; and at fifteen my command of that language was so great, that I not only composed Greek verses in lyric metres, but could converse in Greek fluently' (p. 6). The narrative also contains Greek phrases, such as 'φαρμακον νήπενθες', positioning the narrator as a scholarly and educated figure, ascribing authority over the reader and a sense of command over his subject (p. 39). While the consumption of opium was widespread among different strata of nineteenth-century society, here the narrative establishes the intellectual superiority of the narrator, which operates at odds with the levels of degradation his addiction brings him to. The combination of language – at once recognisable and accessible, while also scholarly and eclectic – constructs a rhetoric of addiction and figure of the addict for both

popular and specialised spheres of influence and discussion. While Davy's varied records of his experiences with nitrous oxide might suggest an effort to find a medium suited to the articulation of intoxication, De Quincey's *Confessions* actively creates a new and alternative discourse. In distinct but cognate ways, then, both Davy and De Quincey constructed enduring models of the drug user/addict as a male figure whose authoritative knowledge surrounding chemical substances permeated both medical and literary texts throughout the nineteenth century.

Overview of the thesis

The first chapter of this thesis, ““Scopic Culture”: Examining Addiction from 1830 to 1859”, explores the ways in which cultural concepts of drug and alcohol use and abuse formed and changed during the early decades of the Victorian era, reflecting the progression from eighteenth-century traditions towards the emergence of a society with a fundamental self-awareness and a medical sphere moving towards professionalisation. The Great Exhibition of 1851 epitomised this period's fixation with commodities and with the universalising potentiality of trade, demonstrating the central significance of the marketplace to society's conception of itself. The status of substances such as alcohol and opium within this commercial environment was unstable, their common usage increasingly juxtaposed with fears surrounding their physiological and mental influence. The rise of the Temperance Movement during the 1830s demonstrated a growing preoccupation with monitoring both individual and social patterns of behaviour, as well as with how consumption could influence the body and body politic. The dangers of drinking excessive amounts of alcohol and the idea of abstinence were heavily discussed both in literature associated with the Temperance Movement and in popular journalism and fiction, as well as more specialised forums. As noted above, the publication of De Quincey's *Confessions of an English Opium-Eater* in

1821 was a significant point of reference for literary, medical and cultural concepts of addiction during this period, influencing both popular and professional discussion. As the first third of the Victorian period wound on, the periodical press played an increasingly instrumental role in shaping Victorian culture, with both established publications such as *Blackwood's Edinburgh Magazine* and later additions such as Dickens' *Household Words* (published from 1850) influencing the way in which readers absorbed fiction and non-literary prose forms such as journalism.

Chapter One begins by considering the medical discussion of drug and alcohol consumption, examining articles and correspondence published in specialist periodicals such as *The Lancet*. These sources reveal the ways in which medical figures became increasingly concerned with the utilisation of drugs, both in cases of professional care and self-medication. The material from these publications also reveals how alcohol was encompassed within the medical structures of the period: as both a problematic substance associated with abnormal and undesirable social behaviour and as a staple of traditional medicinal treatment. A burgeoning Foucauldian medical gaze is evident in the articles, as methods of consumption were increasingly subjected to rigorous external examination, and the body evaluated in the light of an evolving set of medical and societal norms. The pieces considered reveal again how the duality of the *pharmakon*, with its ability to both harm and cure, predominated in contemporary concerns within the specialised press, as the benefits of chemical substances were measured against their potential dangers. While a specialised language of addiction was still nascent, the articles and correspondence demonstrate how the medical profession systematically articulated concerns surrounding these habits of behaviour. Alongside these texts, the chapter also considers articles from the popular press, including the *Illustrated London News* and Dickens' *Sketches by Boz* (1833–36), which similarly interrogate the social implications of the widespread excessive consumption of alcohol. Both 'Gin-Shops' by

Dickens and ‘The Dram-Drinker’ from *Illustrated London News* (1848) investigate the availability of certain types of alcohol, as well as the individuals who demonstrate problematic drinking behaviour. This public form of scrutiny draws out ostensibly private habits and reveals this inherent dichotomy of addictive behaviour, and why the discourse surrounding it within periodicals necessarily conflated the body and body politic.

The chapter continues with a close examination of the portrayal of alcohol and drug addiction in two of Charles Dickens’ novels: *Bleak House* (1852–53) and *Hard Times* (1854). Both texts were serialised in *Household Words*, forming part of the increasingly popular periodical culture of the nineteenth century that afforded readers easy access to fiction alongside journalism and social commentary. Both novels include characters whose alcohol consumption is problematic in relation to domestic and wider social structures, revealing the ways in which this abuse could harm the stability of the body politic. The figure of Krook in *Bleak House* consumes an excessive amount of gin, and this habit is exploited by others in a corrupt form of exchange that signals a wider form of social debasement. In *Hard Times*, Mrs Blackpool’s alcoholism reveals a disordered and fragmented domestic sphere, threatening the alleged sanctity of the home with her abhorrent behaviour. A comparison with these considerations of alcohol consumption appears in Nemo from *Bleak House*: his opium use can be interpreted both through the literary tradition established by figures such as Thomas De Quincey and through the lens of increased social scrutiny. The final part of the chapter examines the ways in which the status of ostensibly medical substances, such as the gas ether, could be compromised through misuse – both in professional spheres and the wider society. Echoing the sense of medical/recreational fluctuation associated with Humphry Davy’s responses to nitrous oxide, the discussion of substances such as ether in specialised publications reveals the problematic potential of these chemicals to evade control and categorisation. In these ways, Chapter One explores how the dual nature of the *pharmakon*

was increasingly recognised and discussed in both medical and popular periodical culture, and how this complexity informed literary and professional articulations of both body and body politic.

The second chapter, ‘A fuller and darker bearing’: Sensations and sensation fiction 1860–79’, considers how drugs and addiction are central to our understanding of the sensation novel phenomenon, which enjoyed the height of its popularity during the 1860s and early 1870s. The mid-nineteenth century witnessed key medical and scientific developments, including the invention of the hypodermic syringe – an object that continued the expanding professionalisation of drug use and amplified the impact drugs had on the body when consumed. As a more efficient and convenient process of administering drugs, hypodermic injections can be linked to a more expansive sense of public consumerism, encompassing remedial products within the medical marketplace. The increasing importance within Victorian society of commerce has been attributed to a robust national economy, imperial trade and the rise of the bourgeoisie.³⁴ The connection between sensation fiction and consumption formed a central preoccupation of this culture of consumerism, emphasising multiple concerns regarding gender and the problematic merging of private and public social spheres. Cultural and medical concerns can also be seen to merge in this period: as the physiological impact of drugs was identified as a cause of concern, the same rhetoric of addiction or drug abuse was increasingly applied to the consumption of fiction itself, creating an intricate discourse that served both popular and specialised discursive fields.

The work of Wilkie Collins forms an integral part of the sensation genre examined in Chapter Two. His novels *No Name* (serialised 1862–63 in *All the Year Round*), *Armadale*

³⁴ Christopher Herbert writes that ‘[t]his era of what seemed like unbounded prosperity [...] coincided with a perceived shift of influence from traditional structures of wealth based on the massive fixities of landed property to new ones based on the liquidities of manufacturing, commerce, speculation, and credit.’ See Christopher Herbert, ‘Filthy Lucre: Victorian Ideas of Money’, *Victorian Studies*, 44.2 (Winter 2002), 185–213 (p. 188). See also Thomas Richards, *The Commodity Culture of Victorian England: Advertising and Spectacle 1851–1914* (London and New York: Verso, 1990).

(serialised 1864–66 in the *Cornhill Magazine*) and *The Moonstone* (serialised in 1868 in *All the Year Round*) explore the use and abuse of opiates and the medical marketplace more widely. *No Name* features Captain Wragge, a character who becomes a patent medicine vendor, and who illustrates both the diversity of access the Victorian public had to remedial substances and the enduring recognition of medicine as a lucrative form of trade. He is described as ‘preying on the public stomach’ – a phrase which emphasises the significance of the body politic to popular and literary consciousness, as well as the predatory nature of the medical marketplace. While ostensibly comic, Wragge’s advertising campaign for the pill he markets is characterised by its opportunistic and invasive tactics. The novel connects the abundance of leaflets and posters found within the urban environment with the availability of both fiction and medicine – the excessive consumption of the written word mirroring that of drugs and remedies. *Armadales*’ *femme fatale* Lydia Gwilt exhibits a reliance on laudanum that reveals the problematic relationship that can exist between the body and drug, as well as how access to opiates operated beyond medical supervision and control during the mid-nineteenth century. The concerns surrounding opiate use are compounded by the fact that Lydia is a woman, as her consumption of laudanum disrupts both the idealised domestic sphere and the female body. Indeed, her additional associations with criminal activities emphasise that her use of opiates represents a seditious form of alternative femininity. In a similar vein, *The Moonstone* explores the complexities of the medicinal use of opiates, as they are utilised to overcome tobacco addiction. This process, although fictional, reveals the changing attitudes towards habits of consumption, and how intervention was increasingly perceived as necessary to correct individual modes of behaviour. The powerful impact of the medicinal opiates is crucial to the central mystery of the text, however, emphasising the essentially unpredictable capabilities of the drug and the dangers of its inclusion within the professional environment.

Dickens' final, unfinished novel *The Mystery of Edwin Drood* is also discussed in Chapter Two: initially serialised from April 1870, this work explores the opium addiction of John Jasper and how it is inextricably associated with his criminality. The novel opens with a description of Jasper's disorientation as he wakes in an opium den, establishing not only his subversive affiliations but an urban and sordid trope of opiate use that resonated with the popular consciousness. The drug allows Jasper to indulge the violence of his feelings for his nephew Edwin Drood, suggesting a powerful and intense psychological impact. The text makes use of sensational and extreme depictions of drug abuse, while at the same time undertaking a Foucauldian observation of Jasper's physiological state. In this context, the short story 'Mr Volt, the Alchemist', published in *All the Year Round* in 1869, explores both the use of opiates and unregulated drug experimentation and consumption more widely. Volt's position as an isolated and problematic figure is established in part through the suggestion that he uses opium. His depiction echoes literary tropes associated with figures such as Davy and De Quincey, emphasising the enduring significance of the male scientist and the conflicting valences of authority and risk that their knowledge of chemical substances represented. In addition to these fictive texts, Chapter Two will consider the discussion of addiction in journals such as *The Lancet* and the *Cornhill Magazine*. As popular periodicals, rather than medical publications, *All the Year Round* and the *Cornhill* reveal how considerations of drug use and addiction formed part of a social and cultural fascination with the body and consumption, particularly within the sphere of medical treatment and regulation. *The Lancet* reaffirms the professional preoccupation with the *pharmakon*'s remedy/poison dichotomy during this period, articulating fears regarding both medical progress and the enduring traditions of treatment. Taken together, the fiction and medical-professional texts examined in Chapter Two focus on issues of control and on the strict distinction between

ideas of regulation and excess: in this process, addiction is inextricably linked not only to multiple substances and chemicals, but to literature itself.

The final chapter of this thesis, “‘This spectral illusion – this nothing, this figment of my brain and nerves’”: Addiction, the body and the mind at the *fin de siècle*’, examines how, at the close of the Victorian age, a powerful Gothic discourse permeated both literary and scientific texts, resulting in a problematic conflation of medical progression and regression, informed by cultural as well as professional developments. This gothicisation of medicine was influenced by the unknown potential of chemical and biological discoveries during the second half of the century, alongside a reflection of and preoccupation with the figure of the scientist and his individual interaction with drugs, which stretched back to the beginning of the century. De Quincey’s *Confessions of an English Opium-Eater* was a vital text for cultural considerations of drug use and abuse throughout the century, and arguably acquired more significance at the *fin de siècle* when developments in psychological science began to reshape how addiction was viewed. Within both literary and professional conceptions of drug use, this shifting focus reflected concerns such as degeneration on an individual and national scale and the almost supernatural powers increasingly attributed to science and medicine. Stories like ‘The Wrong Prescription’ (1893) and ‘Trapped’ (1894), written by L. T. Meade and Edgar Beaumont and published in the *Strand Magazine*, engage with social and professional perceptions of addiction. As part of the *Stories from the Diary of a Doctor* series (1893–95), there is an ostensibly medical construction of addiction in each text; however, social and moral perceptions of the disease also emerge. These two short stories reveal how gender informs medical and cultural constructions of addiction, its diagnosis and treatment. While the male addict in ‘Trapped’ is feminised by his dependence on alcohol, the narrator’s interactions with the female addict of ‘The Wrong Prescription’ reveal the complex nuances of the power relationship between male doctor and female patient. While the texts do not

overtly participate in the wider Gothic tradition, they nevertheless engage with central themes of the *fin de siècle*, including the examination of the body's response to chemical stimulants, degeneration and the figure of the scientist or doctor. Written as serialised fiction within a periodical, the texts demonstrate not only the public interest in narratives of addiction and the medical understandings of this condition, but also how Gothic preoccupations permeated different forms of literary engagement with drug use.

Chapter Three will also consider Robert Louis Stevenson's *Strange Case of Dr Jekyll and Mr Hyde* (1886), a novella characterised by its preoccupation with Gothic tropes, such as the physiological and psychological effects of drug use and the destabilisation of the body and body politic. Like 'The Wrong Prescription' and 'Trapped', Stevenson's text explores the dangers of public access to drugs and the social reconfiguration of the addicted body, as well as focusing on the physical mutability and deterioration of the addicted body and the problematic relationship between scientist and drugs. While the novella was sold as a one-off publication rather than published within a periodical, it nevertheless has parallels with the form of serialised fiction, as well as representing the evolving nature of public reading habits. The text's brevity meant that the experience of reading it would resemble more closely that of reading a story within a periodical, rather than a lengthier novel, as would the relatively cheap price of one shilling. Also discussed in this chapter is Arthur Machen's 'Novel of the White Powder' (1895), which, like *Jekyll and Hyde*, centres on the supernatural physiological effects of publicly available drugs. However, here the focus is on domestic degeneration rather than scientific regression. Whereas Henry Jekyll's use of drugs reifies an alternative aspect of his own character and the threatening potential of evolving scientific practice, in Machen's text the addicted body is subject to a regressive transformation that articulates the psychological complexity of drug abuse. Both fictions thus reveal how the Gothic discourse was used to explore and interrogate the developing powers of pharmacology and the growing

investigation of psychological thought. The *pharmakon*'s duality effectively reveals the dichotomous *fin de siècle* preoccupation with both evolution/progress and degeneration/decay.

Arthur Conan Doyle's Sherlock Holmes narratives also provide accounts of chemical addiction, with Holmes's cocaine use problematically destabilising established boundaries associated with both gender and wider societal structures. Published from 1891 in the *Strand*, the texts' depiction of Holmes's cocaine habit reaffirms the trope of the isolated and intellectually gifted individual connected with drug use. Nevertheless, they also consider more widely how substance abuse was increasingly associated with ideas of national identity and the threat of the outsider or Other. In addition to fiction, medical articles and journalism from *The Lancet* and the *British Medical Journal* are considered in this final chapter, tracing the shared discourse that existed between these forms of publication and their investigation of addiction. Although ostensibly professional and specialised journals, both *The Lancet* and the *BMJ* share the inextricable social and moral considerations that characterised late nineteenth-century responses to drug abuse. Examining these publications reveals the connections between literary and specialist texts, demonstrating the overarching influence of Gothic sensibility that encompassed public discussion of medical and scientific issues. The work of figures such as Oscar Jennings is also relevant to the discussion, through its influence within both medical journals and the wider public consciousness.³⁵ Jennings' theories on addiction are representative not only of the developments in neuroscience, but of the attempts to establish drug abuse as a medical condition within both professional and public contexts. There remains, however, an explicit moral framework in Jennings's work, revealing a continued association with social and public concerns. The medical discussions of addiction

³⁵ The physician Oscar Jennings, whose work *The Morphia Habit and its Voluntary Renunciation: A Personal Relation of a Suppression after Twenty-Five Years' Addiction* was published in 1909. See p. 219 in Chapter Three.

found within *The Lancet* and the *BMJ* can be usefully compared and contrasted with works of fiction to reveal the shared preoccupations that exemplify a Gothic construction of both drug use and the body.

The Conclusion will draw together the considerations of the drug, body and text from the preceding three chapters and explore how these evolved over the course of the long nineteenth century. Scrutinising these concepts, and how they developed and changed within periodical culture, the conclusion will discuss how the *pharmakon* and its inherent duality is fundamental to their complex social and individual significance. The figure of the addict and habits of addiction were inextricably connected with these key concepts, and the Conclusion will explore the ways in which the imbrication of drug/body/text created a problematic and multifaceted understanding of this form of disease. The conclusion will also consider how the discourse surrounding addiction and the addict evolved during the early years of the twentieth century, exploring how the complexities associated with drug use and abuse continued to disrupt and destabilise socio-cultural expectations at a time of fundamental international uncertainty. Anxieties and concerns about nationality and race intensified, while advancements in scientific research saw sites such as the laboratory gain medical and cultural significance and represent an emerging shift in professional dynamics. The events and developments of the early twentieth century deepened the entrenched cultural fixation with boundaries, both public and private, and the drug and drug user continued to function as a troubling locus for fears of instability and disintegration.

* * *

This thesis examines this Victorian fixation with boundaries (of business, of genre, of empire), all of which imbricate, but which can also be connected to the notion of drug use itself, which draws together all three. As such, the condition of the *pharmakon* not only extends the understanding of the medico-literary discourse of drug use/abuse but also the

Victorian socio-cultural imagination itself. The thesis brings together intertextual and interdisciplinary considerations of the *pharmakon* as the organising principle of not only Victorian drug use but of Victorian society itself, with the motifs of consumption, literariness and nationhood all being treated as symbols of progress but also as harbingers of disaster.

Chapter One

‘Scopic Culture’: Examining Addiction from 1830 to 1859

The early Victorian period was characterised by its fascination with innovative and alternative ways of viewing and examining its own social culture. In her study *Victorian Glassworlds: Glass Culture and the Imagination 1830–1880* (2008), Isobel Armstrong suggests that innovations in the manufacture of glass and its expanding presence in domestic and public environments helped to create a ‘scopic culture’ that ‘developed from the possibilities of just three vitreous elements combined and recombined, the glass panel, the mirror, and the lens’.¹ This paradigm of a ‘scopic culture’ strikingly encapsulates how behaviours, habits and individuals were increasingly subjected to intense forms of social observation that reflected a collective self-awareness. Armstrong’s ‘three vitreous elements’ succinctly and symbolically represent the cultural changes that were occurring from the 1830s to the 1850s. The glass panel had the effect of increasing the perceived value and significance of objects or commodities that were placed behind or inside it, most clearly exemplified through the emphasis of the Great Exhibition of 1851 on the products of commerce and industry. Similarly, the mirror epitomises the idea of self-examination, a quality characterised by the way in which numerous governmental and journalistic surveys studied and reported changing metropolitan society, as well as by fiction’s movement towards social realism. Finally, the lens suggests a powerful and concentrated scrutiny of individual habits, brought before a wider public audience, transforming that which might have been associated with the private and domestic into a shared sphere of discussion.

¹ Isobel Armstrong, *Victorian Glassworlds: Glass Culture and the Imagination 1830–1880* (Oxford and New York: Oxford University Press, 2008), p. 3.

Such new ways of viewing also brought to public attention the use and abuse of alcohol or drugs in ways that seemed to threaten the health of both the body and the body politic. During the first half of the nineteenth century, there was a growing concern surrounding ideas of consumption.² Cases of adulteration and poisoning were persistently discussed in periodicals, both in popular and specialist journals, giving rise to an increased public awareness of the dangers attending chemical substances. Medicine and alcohol were encompassed within this atmosphere of scrutiny, with both professional investigation and public use revealing the worrying power and duality of such substances. An article in *Punch* from 1859 notes that '[i]n no other country is so much medicine drunk as in England', and that '[w]hen the Teetotallers have put down the drinking of spirits, they must direct their attention to the putting down of the enormous consumption of medicine [...] for, in our opinion, the one habit is just as pernicious as the other.'³ Thus, the consumption and conflation of medicine and alcohol were perceived simultaneously as a social and medical issue, associated with wider concerns regarding the trustworthiness of commodities circulating within the Victorian marketplace.⁴

² This preoccupation with monitoring or recording consumption is evident in periodicals such as *Bell's Life in London and Sporting Chronicle*, which published an account of 'Consumption of Food &c, in London' that, as well as various forms of food and drink, included an annual total of '2,000,000 barrels of ale and porter of 36 gallons each; 11,000,000 gallons of spirits and compounds; 65 pipes of wine'. See 'Consumption of Food &c, in London', *Bell's Life in London and Sporting Chronicle*, 12 October 1834, p. 1. Fears surrounding the consumption of medicine are articulated in an account published in the *Illustrated London News*, which details the 'scandalous state of our Medical system', in which a 'man lost his life by taking an overdose of colchicum, served by a chemist's errand-boy, allowed to sell medicine and poisons, though utterly ignorant of their names'. The account continues to ask: 'what security have the public that a physician's prescription might not be made a death-warrant in the same manner? [...] What with the general adulteration of drugs, and the carelessness and ignorance of those who sell them, our system of pharmacy sadly needs regulation.' See 'The Scandalous State of our Medical System Has Been Strongly Exemplified this Week', *Illustrated London News*, 15 November 1845, p. 311.

³ 'Medicine and Morality', *Punch*, 6 August 1859, p. 61.

⁴ See John Frederick Logan, 'The Age of Intoxication', *Yale French Studies*, 50 (1974), 81–94; Margot Finn, 'Women, Consumption, and Coverture in England, c. 1760–1860', *Historical Journal*, 39.3 (September 1996), 703–22; Tammy Whitlock, 'Gender, Medicine, and Consumer Culture in Victorian England: Creating the Kleptomaniac', *Albion*, 31.3 (Autumn 1999), 413–37; and Rebecca F. Stern, "'Adulterations Detected': Food and Fraud in Christina Rossetti's "Goblin Market"", *Nineteenth-Century Literature*, 57.4 (March 2003), 477–511.

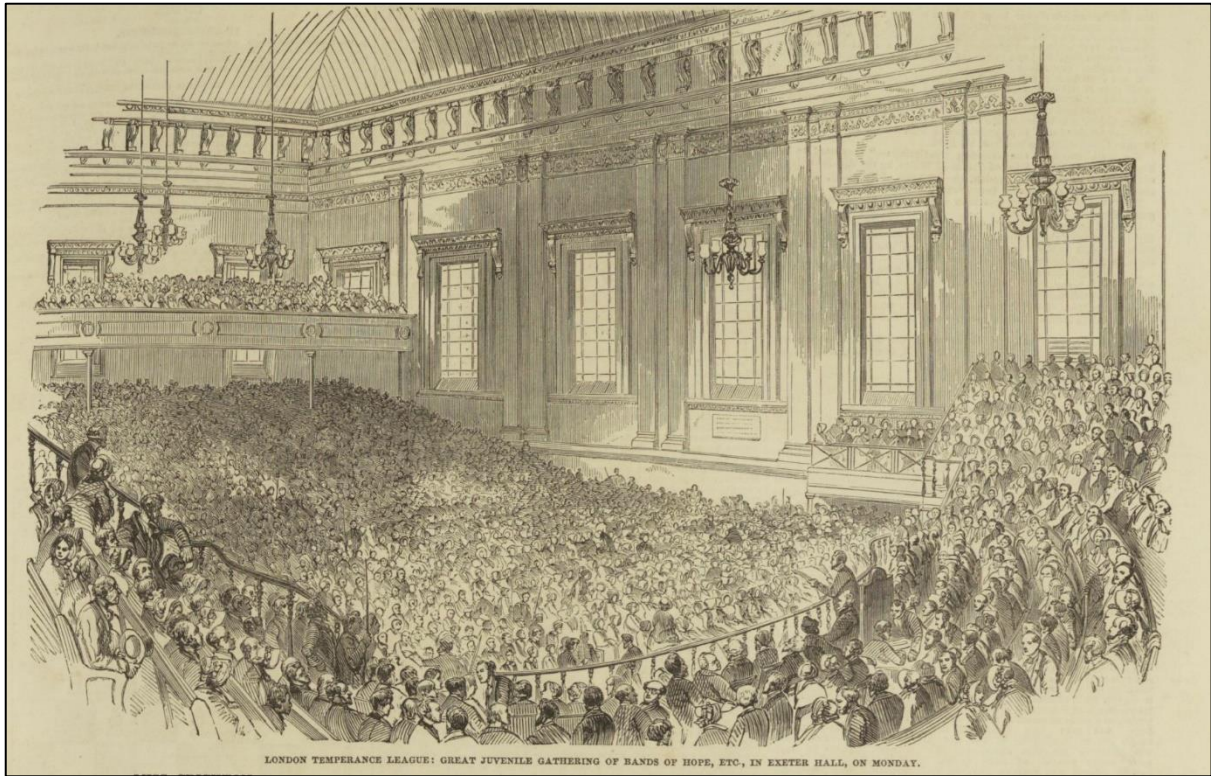
While public concerns regarding the excessive consumption of alcohol predate the nineteenth century, it was during the 1830s that the structured temperance movement began in earnest.⁵ Virginia Berridge writes that in 1832 the social reformer and campaigner Joseph Livesey ‘took the step which marked the birth of the British temperance movement’, by signing a pledge of abstinence from alcohol, notable because it encompassed ‘all types of drink’ rather than just spirits.⁶ Berridge notes that support for abstinence came from various sections of society, with the ‘emergence of philanthropic lobbies, fired by Evangelicism’, as well as ‘from self-respecting working men for whom it was a badge of “respectability”, that crucial concept for the upper levels of the Victorian working class’.⁷ The impetus for temperance was, therefore, one impressed upon the working class by figures of reform, but it simultaneously corresponded to an emerging, acute social awareness and the desire for communal and individual self-improvement. The temperance movement utilised several means of communicating with supporters and the wider public, relying on both traditional and newly developed forms of dissemination and interaction. Berridge notes that ‘[t]he public meeting was central to reform campaigns [...] of the time. It was a way of demonstrating to government the power of the movement and also of attracting support’.⁸ Meetings also gave the impression of a form of communal fellowship, which might rival that found within public drinking spaces, while appealing to those preoccupied with ideas of social respectability.

⁵ The concern surrounding the consumption of alcohol, and specifically gin, prior to the nineteenth century is demonstrated by the Spirit Duties Act of 1735 or Gin Act of 1736. This introduced both a tax on the sale of gin and the need for a licence in order to sell the alcohol in an attempt to discourage what was perceived as a dangerous increase in its public use. In her article exploring the perceived link between alcohol and crime in the eighteenth century, Dana Rabin notes that Henry Fielding ‘attributed the increase in crime to the “gin craze” and warned his readers that left unchecked it would weaken the workforce through degeneration.’ See Dana Rabin, ‘Drunkenness and Responsibility for Crime in the Eighteenth-Century’, *Journal of British Studies*, 44.3 (July 2005), 457–77 (p. 465); Roy Porter, ‘The Drinking Man’s Disease: The “Pre-History” of Alcoholism in Georgian Britain’, *British Journal of Addiction*, 80.4 (December 1985), 385–96; Jessica Warner and Frank Ivis, ‘Gin and Gender in Early Eighteenth-Century London’, *Eighteenth-Century Life*, 24.2 (Spring 2000), 85–105; and Peter Clark, *The English Alehouse: A Social History 1200–1830* (Oxford and New York: Longman, 1983).

⁶ Virginia Berridge, *Demons: Our Changing Attitudes to Alcohol, Tobacco, and Drugs* (Oxford and New York: Oxford University Press, 2013), p. 36.

⁷ *Ibid.*, p. 37.

⁸ *Ibid.*, p. 41.



LONDON TEMPERANCE LEAGUE: GREAT JUVENILE GATHERING OF BANDS OF HOPE, ETC., IN EXETER HALL, ON MONDAY.

Fig. 1.1. 'London Temperance League', *Illustrated London News*, 21 February 1852, p. 13



GRAND PROCESSION OF THE GORBALS TEMPERANCE SOCIETY, AT DUMFRIES.

Fig. 1.2. 'Temperance Grand Excursion', *Illustrated London News*, 7 August 1852, p. 13

The ability to publish and circulate both the written word and images was also central to the temperance movement, evidenced by the fact that societies ‘produced newspapers and tracts in their hundreds of thousands’.⁹ Increasing standards of literacy and the widespread circulation of texts meant that discussions regarding alcohol and abstinence could reach a wider readership, thus introducing the discourse of harmful consumption to those perceived to be most at risk.

The themes of temperance were widespread in images and texts that appeared in the 1830s and 1840s. George Cruikshank’s popular sequence of cartoons entitled *The Bottle* was published in 1847 and comprised a set of eight images that ‘showed an inevitable progression [...] from respectability to disgrace and poverty’ (see Figures 1.3–1.10 below).¹⁰



Fig. 1.3. George Cruikshank, *The Bottle. Plate I* (London, 1847): ‘The Bottle is brought out for the first time: the husband induces his wife “just to take a drop.”’

⁹ Ibid., p. 40.

¹⁰ Ibid., p. 42.



Fig. 1.4. George Cruikshank, *The Bottle. Plate II* (London, 1847): 'He is discharged from his employment for drunkenness: they pawn their clothes to supply The Bottle.'



Fig. 1.5. George Cruikshank, *The Bottle. Plate III* (London, 1847): 'An execution sweeps off the greater part of their furniture: they comfort themselves with The Bottle.'



Fig. 1.6. George Cruikshank, *The Bottle. Plate IV* (London, 1847): ‘Unable to obtain employment, they are driven by poverty into the streets to beg, and by this means they still supply The Bottle.’



Fig. 1.7. George Cruikshank, *The Bottle. Plate V* (London, 1847): ‘Cold, misery, and want, destroy their youngest child: they console themselves with The Bottle.’



Fig. 1.8. George Cruikshank, *The Bottle. Plate VI* (London, 1847): 'Fearful quarrels, and brutal violence, are the natural consequences of the frequent use of The Bottle.'



Fig. 1.9. George Cruikshank, *The Bottle. Plate VII* (London, 1847): 'The husband, in a state of furious drunkenness, kills his wife with the instrument of all their misery.'

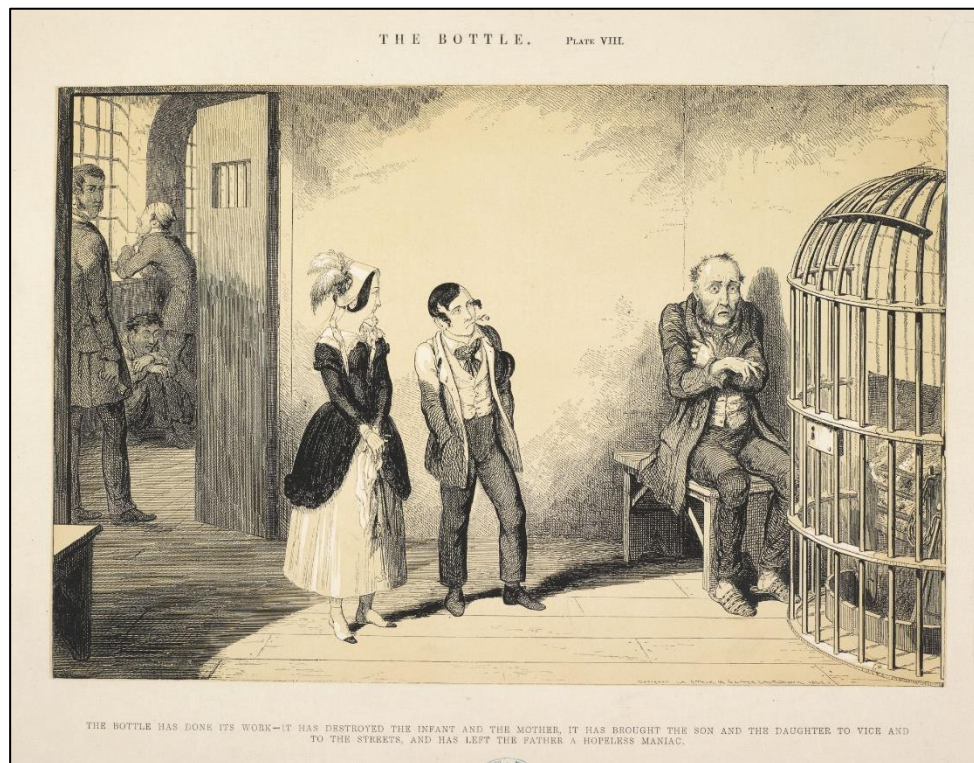


Fig. 1.10. George Cruikshank, *The Bottle. Plate VIII* (London, 1847): ‘The Bottle has done its work – it has destroyed the infant and the mother, it has brought the son and the daughter to vice and to the streets, and has left the father a hopeless maniac.’

Advances in printing processes meant that the series could be reproduced at a fairly low cost and was, therefore, available to working-class customers, demonstrating how the emerging narrative of subversive alcohol consumption was established within different social spheres through new media technologies.¹¹ Cruikshank’s illustrations sequentially deconstruct an idealised domestic scene, with the drunkard’s descent into violence and eventually incarceration effectively combining a sense of moral, social and legal transgression in the tradition of William Hogarth. The dramatic tone of the images was also to be found in the literature associated with the temperance movement. Susan Zieger notes that ‘temperance

¹¹ ‘Until 1804 no great technological changes had taken place in the printing industry. Furthermore, printers were hostile to innovation. Within a generation, however, the printing trade went through wholesale alterations. Mechanical inventions, revolutionizing all aspects of the industry, increased the output per press and per man hour. At the same time, the costs of production were reduced. The traditional wooden printing press used from Gutenberg until the end of the eighteenth century had printed 250 sheets an hour on both sides of the paper. However, the steam printing press installed by John Walter, chief proprietor of *The Times* in 1814, could produce 1,000 sheets on one side every hour.’ See William Kahl, ‘Five Centuries of Printing in London’, *Business History Review*, 35.3 (Autumn 1961), 445–56 (p. 452).

fiction characteristically adhered to a narrative formula that traced the writer's descent from bourgeois promise to destitution, followed by either recovery and moral transformation or abjection and death.¹² Through both text and image, the trope of excessive alcohol consumption leading to an inevitable social and moral decline gained popularity, demonstrating how the temperance movement 'configured the immoral lack of personal moderation known as "intemperance" as a social problem', and effectively 'invented addiction'.¹³ In this way, alcohol and its consumption became subsumed into a culture in which individual agency was increasingly inseparable from the social world. In this environment, private scenes of domestic life were publicly examined and individual habits revealed to be a symptom of wider social malaise. Texts and images such as Cruikshank's reveal how concerns about alcohol preoccupied an introspective culture increasingly characterised by its assumption of a greater sense of social culpability and collective responsibility.

Alcohol consumption was explored in texts beyond those belonging to the temperance narrative genre. Martin Hewitt writes that

condition-of-England novelists ransacked the 'bluebooks' for raw material, creating fiction that aspired to the condition of a parliamentary investigation [...] realism had strong roots back into the eighteenth century, but it was elevated to a new level of systematic deployment from the mid 1840s onwards.¹⁴

Just as the temperance movement arguably reflected an increasing awareness of and preoccupation with the everyday conditions of contemporary society, fiction also began to examine the unstable boundary between private and public, and how the domestic sphere could be readily exposed to the public gaze. Novels such as Anne Brontë's *The Tenant of Wildfell Hall* (1848) and Anthony Trollope's *Doctor Thorne* (1858) featured characters

¹² Susan Zieger, *Inventing the Addict: Drugs, Race, and Sexuality in Nineteenth-Century British and American Literature* (Amherst: University of Massachusetts Press, 2008), p. 37.

¹³ *Ibid.*, pp. 5 and 62.

¹⁴ Martin Hewitt, ed., 'Introduction', in *The Victorian World* (London and New York: Routledge, 2012), pp. 1–53 (p. 13).

associated with the excessive consumption of alcohol, exploring how this could disrupt both established domestic stability and wider social cohesion. In his review of *The Tenant of Wildfell Hall* published in *Fraser's Magazine*, Charles Kingsley wrote that the 'fault of the book is coarseness – not merely that coarseness of subject which will be the stumbling-block of most readers, and which makes it utterly unfit to be put into the hands of girls'.¹⁵ Likewise, a review in *The Spectator* objected to the 'morbid love for the coarse, not to say the brutal' which it detected in Brontë's novel.¹⁶ Thus, a fundamental dualism pervades the representation of alcohol consumption within fiction: while temperance narratives were perceived as having a didactic function and were aimed at the working-class population thought to be at risk from unhealthy habits, fiction such as that published by the Brontës portrayed a world that was recognisably, and thus problematically, bourgeois. Consequently, alcohol abuse was reconfigured as a reality that could exist within the middle-class domestic environment rather than a social problem associated with poverty. Fiction, therefore, revealed and examined middle-class society in a manner similar to the surveys of the working and labouring class, exposing its own instability as a moral and social construct. This comparison between the ethnographical survey work conducted of the working classes and fiction's interrogation of the middle classes emphasises the way in which the novel itself functioned as a narratological *pharmakon*, titillating the reader with scenes of dissolution and offering a critique of such a milieu.

The concern surrounding the excessive consumption of alcohol in both working- and middle-class circles was symptomatic of a developing commodity culture that increasingly challenged the boundary between self and society. As Zieger points out, '[b]efore they became addicts, people first became mass consumers', suggesting that the industrial and

¹⁵ [Charles Kingsley], 'Recent Novels', *Fraser's Magazine*, 39.232 (April 1849), 417–32 (p. 424).

¹⁶ 'Acton Bell's Tenant of Wildfell Hall', *The Spectator*, 8 July 1848, pp. 18–19 (p. 19).

technological advancements of the early nineteenth century helped to construct an environment in which the individual was exposed to an excessive amount of affordable material products, including food, alcohol, and imported goods from across the Empire.¹⁷

John Brewer and Roy Porter note that

[i]t is hardly possible to explore the idea of consumption without running up against a disturbing paradox: the deep ambiguities associated with the very word, 'consume'; it suggests both an enlargement through incorporation and a withering away. Consuming is thus both enrichment and impoverishment.¹⁸

On the one hand, the expanding market economy of Britain suggested a strong and positive national culture that corresponded with the healthy body of the consumer. On the other, fears surrounding corrupt or harmful consumption became inextricably associated with both the body and body politic on which marketisation and commodification depended. Just as 'wealth easily mutated into waste, so in the individual, excessive consumption could, seemingly paradoxically, produce not strength but physical dissolution.'¹⁹ Linking personal and national trends of consumption in this way demonstrates again how the self or individual was increasingly viewed as part of a larger or collective social group, and how personal or domestic habits took on cultural and national significance. In this way, the personal consumption of substances such as alcohol could be reconceptualised as a dangerous habit under the scrutiny of the public gaze.

The growing importance of visual culture in the 1840s and 1850s can be traced through the ways in which commodities were displayed and advertised to consumers. Perhaps the pinnacle of this fetishisation of the material product was the Great Exhibition of 1851, mentioned at the start of this chapter: 'a monument to consumption, the first of its kind, a

¹⁷ Zieger, *Inventing the Addict*, p. 68

¹⁸ John Brewer and Roy Porter, eds., 'Introduction', in *Consumption and the World of Goods* (London and New York: Routledge, 1994), pp. 1–15 (p. 4).

¹⁹ Roy Porter, 'Consumption: Disease of the Consumer Society?', in *Consumption and the World of Goods*, ed. by Brewer and Porter, pp. 58–81 (p. 62).

place where the combined mythologies of consumerism appeared in concentrated form.²⁰ Categorized into raw materials, machinery, manufactured products and the arts, the artefacts on display emphasised the processes and movement of commerce, while also being elevated to objects of cultural value and significance themselves. By directing the public gaze at commodities framed by glass cabinets, the Exhibition revealed the greater cultural preoccupation with examining and scrutinising facets of its own society. Hewitt notes that '[g]lass display cases helped to objectify and open out to view the artefacts they contained and the cultures and histories they sought to represent, offering, for Anthony Trollope, a metaphor for Victorian fiction writing generally'.²¹ A comprehensive cultural fascination with new ways of viewing, observing and studying thus operated within early Victorian society, with technological advances enabling a significant emphasis on the examination of physical objects. Likewise, shifts in the public and literary discourses revealed and illuminated aspects of domestic and private life, such as ideas of consumption, and the ways in which they were inextricably linked with issues regarding wider socio-economic welfare. Alcohol and drug use were reconfigured as public problems rather than private proclivities, indicative of cultural movements influenced by industrial and economic developments – although, as reviews of *Tenant* demonstrate, class distinctions altered the public response to the interrogation of these issues. The intensive examination of the link between the private and public therefore encapsulated multiple facets of Victorian society, and corresponding notions of scrutiny inevitably complicated and altered conceptions of alcohol and drug use.

This chapter will explore the complexities of the changing social and medical attitudes towards the consumption of alcohol and drugs through the analysis of the content of periodical culture from the 1830s to the 1850s. The first section, entitled 'The "poisonous

²⁰ Thomas Richards, *The Commodity Culture of Victorian England: Advertising and Spectacle 1851–1914* (London and New York: Verso, 1990), p. 3.

²¹ Hewitt, p. 17.

potion”: Examining alcohol’s problematic popularity’, focuses on the extensive discourse that appeared in specialised publications such as *The Lancet*, revealing the troubled status of both alcohol and drugs within the medical context of the first half of the nineteenth century. The correspondence from physicians that features in the periodical demonstrates not only growing concerns about the impact of alcohol and opioids on individual medical cases, but also a desire for a national form of scrutiny that reflected a more unified public and professional approach. Also discussed in the initial section of the chapter are ‘Gin-Shops’ from Dickens’ *Sketches by Boz* (1833–36) and the article ‘The Dram-Drinker’ from the *Illustrated London News* (1848). These texts show how the popular periodicals were also increasingly concerned with the ways in which private habits of consumption could in fact encapsulate more widespread social issues. The second section, ‘Addiction and alterity in *Bleak House* and *Hard Times*’, examines the way in which these two novels’ exploration of addiction articulates anxieties surrounding gender, domesticity and the physiological stability of the individual. Again, the texts demonstrate how addiction problematically reveals connections between the marginal and the public, as Dickens correlates individual ideas of deterioration with social corruption. The final section of the chapter, ‘Ethereal Experiences’: Chemical experimentation/recreation’, considers how novel chemical substances, such as ether, came to occupy an unstable position, as their use within medical circles threatened to deconstruct the threshold between scientific experiment and recreational use. Discussions within *The Lancet* of ether’s perceived medicinal utility, as well as its pleasurable physiological influence, drew parallels with the use of opioids, acknowledging the precarious duality of these drugs and the inherent dichotomy of the *pharmakon*.

The ‘poisonous potion’: Examining alcohol’s problematic popularity

In her essay ‘The Rhetoric of Addiction: From Victorian Novels to AA’ (2002), Robyn R. Warhol analyses the contradictory beliefs that became fundamental to nineteenth-century constructions and portrayals of alcoholism. Warhol notes that, according to Norman S. Miller and John N. Chappel, ‘physicians held that alcoholism was a disease – characterized by the drinker’s inability to control his or her intake of alcohol – as early as the eighteenth century’.²² Juxtaposed with this concept is ‘the ideology of temperance, which understood excessive drinking as a moral failing’, resulting in a complex and mutable sense of alcoholism that informed literary considerations of the addict.²³ Within the context of these dichotomous paradigms of pathological condition/moral failing, and the social attitudes surrounding them, Charles Dickens’ portrayals of alcoholic characters convey a preoccupation with both developing physiological understandings and fluctuating social sensibilities. Zieger suggests that, while ‘[i]n the realm of fiction, authors could reimagine addicted subjectivity and agency in ways that both replicated and changed how the broader culture viewed addiction’, in actuality ‘addicts [...] tended to occupy the margins of nineteenth-century novels, often as spectacles of moral self-limitation.’²⁴ The character of Mrs Gamp in Dickens’ *Martin Chuzzlewit* (1843–44) may initially seem to conform to this idea of marginal representation, her alcohol consumption forming part of a comprehensive set of undesirable and destructive behaviours which suggest caricature rather than realistic characterisation. Richard Barickman posits, however, that Mrs Gamp’s behaviour is ‘simultaneously walling out the restrictive pressures of a society that is severely moral (in its public pretensions, at least) and walling in covert gratifications of the forbidden desires’,

²² Robyn R. Warhol, ‘The Rhetoric of Addiction: From Victorian Novels to AA’, in *High Anxieties: Cultural Studies in Addiction*, ed. by Janet Farrell Brodie and Marc Redfield (Los Angeles and London: University of California Press, 2002), pp. 97–108 (p. 100). See also Norman S. Miller and John N. Chappel, ‘History of the Disease Concept’, *Psychiatric Annals*, 21.4 (April 1991), 196–205.

²³ Warhol, p. 100.

²⁴ Zieger, *Inventing the Addict*, p. 14.

demonstrating ‘a distinct animus against maternity and male dominance’.²⁵ The exploration of alcohol consumption thus emphasises both the potential of addiction as the basis of personal narrative and the way in which it could be employed to scrutinise wider social norms.

A letter by Dr Isaac Pidduck published in *The Lancet* in July 1851 discusses the habitual consumption of both opium and alcohol in clearly pathological terms:

it is no more ‘possible to reform a person who has been long addicted to the practice of taking opium,’ than it is to reform a patient who is paralyzed. Habitual intoxication is as decidedly a disease of the nervous system as paralysis, and as impossible to cure by an effort of volition; or, more correctly, it produces a disease of the nervous system almost as intractable as paralysis.²⁶

This letter explicitly categorises addiction not only as a disease, but as one that can be equated with physiological conditions such as paralysis. This emphasis on the physical impact of opium, and particularly its influence on the nervous system, suggests that it is a condition which can be considered and debated with little reference to moral or social considerations. While the word ‘reform’ suggests a sense of behavioural improvement, Pidduck’s rebuttal of this idea in his letter suggests that this was a point of contention, at least in specialised journals, and, therefore, that concepts of addiction or habituation were mutable or evolving. Pidduck’s correspondence continues to argue that ‘the two causes of intoxication, the narcotic and the alcoholic, are antagonistic or curative of each other; that, to a certain extent, they stand in the relation of poison and antidote’. This poison/antidote relationship between the two forms of intoxicant echoes the model of the *pharmakon*; although, rather than one substance embodying both qualities, here two substances have opposing yet complementary physiological effects. As such, Pidduck’s letter emphasises that

²⁵ Richard Barickman, ‘The Comedy of Survival in Dickens’ Novels’, *NOVEL: A Forum on Fiction*, 11.2 (1978), 128–43 (p. 134).

²⁶ Isaac Pidduck, ‘Opium-Taking’, *The Lancet*, 5 July 1851, p. 21.

specialised medical discourse both acknowledged this relationship and attempted to deploy it within medical practice.

Although Porter states that '[a]lcohol was medicinal' in eighteenth- and nineteenth-century culture, discussion in medical periodicals demonstrates that its status as such was subject to enquiry and investigation.²⁷ An earlier letter published in *The Lancet*, in July 1843 notes how, within the author's 'rural district', elderberry wine is 'in great repute for sanatory [*sic*] purposes'.²⁸ While this author depicts the habits of a rural community whose medical practices may arguably differ from those of London or other, more urban areas, it nevertheless reveals both the enduring tradition of homemade remedies and a belief in the restorative properties of certain forms of alcohol. The letter demonstrates how a range of alcohol-based substances were utilised within the wide spectrum of medical systems during the mid-nineteenth century. The correspondence continues, however, to suggest that 'the alcohol, originally requisite for its preservation, can easily be *burned out* by applying a bit of lighted paper to the surface', providing a substance that could be consumed 'with much more cheerful diligence than any remedy solely medicinal' (original emphasis). On the one hand, the letter suggests that the wine may have a positive impact on the 'consumptive subject, who at once requires his strength to be sustained and inflammatory action of the system to be kept under control'. On the other hand, it also demonstrates an awareness of alcohol's potential duality, the suggestion that the alcohol be 'burned out' implying that its use within a medical context was complex and open to variance or modification, rather than being a substance relied upon without reforms or revisions. The letter thus traces the similar application of certain forms of alcohol across both popular and specialised medical practices, but also

²⁷ Porter, 'Consumption', p. 60.

²⁸ 'Medicinal Use of Elderberry Wine', *The Lancet*, 29 July 1843, p. 625.

reveals a distinction between traditional methods and more contemporary systems of enquiry and analysis.

The practices of temperance and abstinence were themselves discussed within specialised medical literature of the period. In a *Lancet* piece for April 1842, Henry Clutterbuck, President of the Medical Society of London, articulates his views on both concepts, mentioning that while ‘*intoxicating drinks* are unnatural, and therefore injurious to the human frame’, he believes that ‘a *rigid abstinence*, in regard to either food or drink, is not, *generally speaking*, advisable’.²⁹ This phrasing reveals an attitude of caution rather than condemnation, which is perhaps unsurprising given that the abstinence movement did not rely on support from the medical sphere, but instead focused on ideas of social and moral restraint. The article goes on to remark, however, that

[t]he value of *temperance* (another word for *moderation*) cannot, certainly, be too highly estimated [...] [and that] [...] observation would lead me to believe that what is usually termed *good living* (by which I would be understood to mean a *moderate* indulgence in the pleasures of the table) conduces both to the attainment of vigorous health and to the prevention of disease.³⁰

The writer thus distinguishes between attitudes and habits of ingestion, claiming that a sense of moderation should be attained rather than more restrictive habits. This arguably correlates with the belief in the healthy body and body politic resulting from an active and dynamic form of commerce and consumption, while avoiding the potentially corrupting influence of excess or immoderation. As Porter notes, ‘[t]his model of the healthy body as a vital economy, demanding energetic stimulus, was widely accepted [...] by the medical profession itself’, demonstrating that the emerging tendency to view the individual as implicitly connected with the wider social environment also existed within specialised or professional circles.³¹

²⁹ ‘Dr Clutterbuck on Total Abstinence and Temperance’, *The Lancet*, 16 April 1842, pp. 96–97 (p. 96).

³⁰ *Ibid.*, p. 97.

³¹ Porter, ‘Consumption’, p. 60.

A response to Clutterbuck's views, also published in *The Lancet*, reveals the discussion and debate within the medical profession regarding perceptions of consumption. The author of the letter, T. Beaumont, suggests that as 'tens of thousands of valuable lives are annually sacrificed to the use of intoxicating drinks', the question of alcohol consumption should be one of 'intense interest' to medical enquiry, rather than being left to 'the province of "temperance societies"'.³² Beaumont's riposte therefore demonstrates how some factions of the profession perceived alcohol and its abuse as medical concerns, rather than social or moral failings that were the responsibility of governmental or charitable organisations. Beaumont's letter continues to state that 'on no subject has the public mind been so thoroughly abused as on the *nature and properties of alcoholic drinks*. All classes have been equally misled; nor have medical men been suffered to escape the "grand delusion"' (pp. 340–41). Alcohol's accepted position as both a form of medicinal substance and a commodity that contributed to the health and vigour of the body/body politic is instead presented as something harmful and threatening. By stating that '[a]ll classes have been equally misled', the letter suggests that alcohol's potential danger affects society at large, rather than being limited to the working classes who formed the primary focus of the temperance movements and narratives. While such narratives appealed to the desire for social and moral respectability believed to characterise the urban working class of the period, Beaumont phrases his admonition as a medical warning that bridges potential public divides rather than identifying specific social units.

Beaumont's letter also combines specific models or cases of the medical and moral dangers of alcohol. He suggests, for example, that when '[m]others [...] "abstain"' from consuming alcohol, '[h]ereditary diseases, which are so common [...] are greatly mitigated, if

³² T. Beaumont, 'Remarks Made in Opposition to the Views of Dr Clutterbuck on Abstinence from Spirituous Liquors', *The Lancet*, 4 June 1842, pp. 340–43 (p. 340). All further references are given parenthetically in the text.

not wholly destroyed' (p. 342). This implies not only an awareness of the physiological impact of alcohol on both the individual and developing child, but also proposes that changes to personal habits have implications for wider public health and the incidence of disease. Countering Clutterbuck's assertions, which suggested that healthy or moderate forms of personal consumption nourished the socio-economic condition, Beaumont advocates for abstinence as producing a positive effect on public health:

During the adolescent period, when the rising generation is too commonly initiated into the use and relish of intoxicating liquors, 'total abstinence' is of the highest importance, not only as preventive of a dangerous appetite, but also as tending to promote a sound and healthy state of the system at a point when the seeds of a premature decay are often sown by an indulgence in such liquors. (p. 342)

Here, alcohol consumption is associated with both moral transgression and medical risk, emphasising how consumptive practices simultaneously indexed scientific theories alongside models of social and ethical respectability. The tone echoes the impression of immoderation or excess found in works such as Thomas De Quincey's *Confessions of an English Opium-Eater* (1821), which associated alcohol consumption with a profligate and dissolute lifestyle. This concern for the 'rising generation' articulates fears for not only a broad social group, but also the future health of the body and body politic, exposing the ways in which alcohol consumption could be viewed as a threat to the potential and progress of Victorian socio-economic systems.

Beaumont also addresses the medicinal use of alcohol and its perceived value in this area of professional treatment. While 'wines and other alcoholic drinks are employed in the treatment of diseases by many eminent physicians', he writes: 'I strongly incline to the belief, that I have frequently administered these remedies with disadvantage to my patients, and I greatly fear that thousands have been sent prematurely to the grave through the injudicious administration of alcoholic stimulants' (p. 342). By arguing that alcohol is in fact a substance harmful to patients, the letter destabilises not only established medical practice but also

common understandings of alcoholic products. Beaumont's letter demonstrates how evolving attitudes towards alcohol consumption effected change within both social models of acceptable behaviour and contemporary scientific understandings of physiological response. The correspondence also reveals a problematic cultural dynamic in its exploration of the safety of medicinal alcohol. While emerging concepts of addiction, as well as the temperance and abstinence movements, emphasised how an individual's substance abuse conflated moral and physical deterioration, the continued use of alcohol by the medical profession signified a specialised form of consumption that was often exempted from wider social perceptions of misuse. Beaumont's letter dismantles the distinction between the private and prescribed uses of alcohol, arguing that its potentially adverse impact on the body is not limited to unsupervised or individual consumption, but could be an unintended consequence of its medical applications too. While alcohol continued to feature in medical practice, Beaumont's criticism of its remedial reputation suggests a professional awareness of the problematic duality of certain substances, as well as a recognition of the need to re-examine longstanding methods of treatment. Such critiques reveal how the ideas central to movements like temperance, for instance, could be applied to scientific procedures in addition to popular habits. Increasingly, a sense of widespread social scrutiny, across a range of discursive fields, becomes apparent as the first half of the nineteenth century unfolds, both in terms of the impact of medical intervention and on chemical substances themselves.

This propensity to inspect the characteristics of early Victorian society can also be seen in other contemporary periodicals and publications. Henry Mayhew's observations regarding London's socio-economic conditions appeared first as a series of articles in the *Morning Chronicle* between October 1849 and December 1850. Subsequently, Mayhew published his commentary in its own weekly serial, entitled *London Labour and the London*

Poor.³³ These ethnographic, and at times graphic, articles exerted an influence on both social discourse and fictional engagements with the contemporary urban environment. Ranging from examinations of trade and commerce to crime and poverty, Mayhew's articles revealed an alternative metropolitan experience that raised issues of moral responsibility as well as social culpability. Dickens shared Mayhew's fascination with the conditions of hardship and privation in London's environs, and would have been familiar with the articles themselves. Indeed, Dickens' earlier series, *Sketches by Boz*, attempts a similar kind of social and cultural documentation, although the focus is on the narrator's individual experience of the city rather than the journalistic recording of authentic encounters. The influence of Mayhew on Dickens can be seen in *Bleak House* (1852–53), where a variety of urban conditions are examined. Dickens' texts also engage with the significance of alcohol within areas of poverty, articulating both a personal and communal sense of the effects of habitual consumption.

In one of the *Sketches*, 'Gin-Shops', the narrator expounds on the way in which public houses have been subject to a form of gentrification, being replaced by 'splendid mansions, stone balustrades, rose-wood fittings, immense lamps, and illuminated clocks, at the corner of every street.'³⁴ These new establishments are presented as being part of a social 'disease' that manifests itself in a desire to remake or rebuild structures associated with trade or commerce, including 'linendrapers and haberdashers' and 'chemists' (p. 214). This terminology expresses a distaste and a distrust for the new, as well as for the emerging dominance of trade in London. It also provides an example of how medical language was appropriated to describe social forms of behaviour or cultural change, and how the medical imbricated with

³³ 'This set of interviews and statistical surveys was first published as a periodical in 1850–2, and later collected and revised as a set of four volumes in 1861–2. It was a development of an earlier set of letters on 'Labour and the Poor' Mayhew had contributed to the *Morning Chronicle* in 1849–50...' Robert Douglas-Fairhurst, 'Introduction' in Henry Mayhew, *London Labour and the London Poor* (Oxford and New York: Oxford University Press, 2012), pp. xiii–xliii (p. xv).

³⁴ Charles Dickens, 'Gin-Shops', in *Sketches by Boz*, ed. by Dennis Walder (London and New York: Penguin, 1995), pp. 214–20 (p. 216). All further references are to this edition and are given parenthetically in the text.

the mercantile in problematic ways. The evolution in the appearance of public drinking spaces may, however, also reflect an attempt to alter common perceptions of the consumption of alcohol itself. Images such as William Hogarth's *Gin Lane* (1751) traditionally portrayed gin as being connected to impoverished environments and destitute lifestyles (see Figure 1.11, below). Positioning the trade in gin in these new, superficially impressive and public sites suggests that it is associated with a more modern urban cityscape, and that alcohol consumption, in this sense, does not necessarily have to be seen as a shameful private or domestic habit. Nevertheless, the narrator's description of these new gin-shops as part of a 'disease' explicitly demonstrates that the habitual consumption of alcohol continued to have negative connotations, in this case of the subversive reshaping of London's structures.



Fig. 1.11. William Hogarth, *Gin Lane* (London, 1751), Tate Gallery

Indeed, the narrator continues to remark on the social contrast emphasised by the gin-shops' extravagant appearances. The text describes the establishments as 'invariably numerous and splendid, in precise proportion to the dirt and poverty of the surrounding neighbourhood', naming 'Drury-lane, Holborn, St Giles's, Covent-garden, and Clare-market' as 'the handsomest in London', while observing that '[t]here is more of filth and squalid misery near those great thoroughfares than in any part of this mighty city' (p. 217). This disparity between the gin-shops and their environs again stresses the connection between gin and poverty, but through a problematic contrast that also effectively reveals a duplicity associated with the trade in alcohol. The opulence of the gin-shops is shown to be indicative of a larger social problem that links habitual consumption of alcohol with an undesirable urban lifestyle, the success of these numerous establishments draining the communities in which they are found and facilitating an unhealthy standard of living. Phrases such as 'filth and squalid misery' use emotive language to generate a complex morality surrounding not only issues of poverty, but also the status of alcohol consumption in evolving notions of social responsibility. The descriptive account of the gin-shops is, so far, concerned with consumption within the framework of wider social concerns: alcohol is part of a system of trade that generates and propagates destitution and poverty within areas of London. Gin-shops are part of an unhealthy or diseased commerce that compromises the health of the body politic, their appearance of luxury and economic strength a symptom of the social failings that preoccupy works such as *Sketches by Boz*. In this sense, gin, and its consumption, retains many of the negative connotations associated with it in Hogarth's 1751 image, suggesting a pervasive and enduring connection between ideas of poverty and alcohol a century later.

The sketch continues by describing one particular gin-shop and its customers. The establishment in Drury-lane has a 'bar of French-polished mahogany' in a 'lofty and spacious saloon', continuing the sense of extravagance found in the more general account of gin-shops

earlier in the narrative (p. 218). Its patrons are portrayed as being at odds with the luxurious surroundings, including as they do ‘washerwomen’ and ‘Irish labourers’ (pp. 218, 219). Dickens also refers to ‘the throng of men, women, and children, who have been constantly going in and out’, suggesting that the gin-shop is a fundamental part of domestic routine, rather than just masculine public life (p. 219). The narrator describes ‘two old men who came in “just to have a drain”’, and having ‘finished their third quartern a few seconds ago; they have made themselves crying drunk’. Here, the text shifts its focus from presenting gin-shops as part of a broad social issue to examining personal habits of consumption. The two men lack control over their drinking, and while they function as part of a broader milieu of the gin-shop environment, they are treated as individuals with a problematic response to and relationship with alcohol. The sketch culminates in a ‘scene of riot and confusion’ as violence between customers necessitates the intervention of the police, and ‘[s]ome of the party are borne off to the station-house, and the remainder slink home to beat their wives’ (pp. 219–20). Again, the superficial ostentation of the gin-shop belies an environment of socially disruptive behaviours, articulating bourgeois concerns about the working-class population. The narrator remarks that the sketch is deliberately light in tone, as a more accurate description would be ‘painful and repulsive’ and produce a reaction of ‘coldness and disgust’ in the reader (p. 220). Behaviour associated with alcohol consumption is, therefore, framed by a nexus of values, established by the more affluent social classes, and by their implicit responses to its representation or depiction.

The influence of temperance as a social movement on early nineteenth-century literary depictions of addiction is visible both in terms of the discourse of habituation used and the narrative form itself. Amanda Claybaugh notes that the temperance narrative ‘percolated in Victorian fiction over the course of the century, rising from the anonymous tracts circulated by reformers’, and ‘[a]s early as *Boz* [...] Dickens was already making use of

this'.³⁵ Claybaugh suggests that Dickens' choice to implement a narrative structure for *Boz* resembling that of temperance literature stemmed from the fact that, when editing the *Sketches* for publication in a single volume, he had 'imposed on the vagaries of biography and the contingencies of history an arc of literary development'.³⁶ The enduring influence of the temperance 'arc' narrative is, therefore, owing to its usefulness in structuring the seemingly disparate elements of emerging literary tropes, including Dickens' panoramic depictions of urban life and its disparate characters. Claybaugh observes that 'Dickens neither endorses, nor critiques, the temperance plot. Its significance, for him, is formal rather than ideological. It is a narrative resource for making sense of economic disparities, one that offers itself up quite readily to his use'.³⁷ Dickens is, therefore, more concerned with how the shape of the temperance narrative can be used to reveal and explore the inequalities of the metropolitan environment, and the social interactions that take place within it. The temperance narrative thus offered a form that could encompass both public and private development, drawing out pertinent links between body and body politic.

Claybaugh continues to explore the ways in which Dickens' work deconstructs the themes and connections established by temperance literature and its associated social movement. The temperance narrative suggests:

Poverty, disease, crime, imprisonment, and death can all be described as the effects of drinking, while health, happiness, prosperity, and salvation can be described as the effects of sobriety [...] the bewildering and often brutal changes brought about by industrialization and urbanization were organized around, and simplified through, the story of an individual drunkard's progress from the sufferings caused by drinking to the rewards achieved by abstinence.³⁸

³⁵ Amanda Claybaugh, 'Dickensian Intemperance: Charity and Reform', *NOVEL: A Forum on Fiction*, 37.1–2 (2003), 45–63 (p. 51).

³⁶ *Ibid.*, p. 51.

³⁷ *Ibid.*, p. 52.

³⁸ *Ibid.*, p. 58.

In some ways, it is these connections between the individual and the wider *habitus* that writers such as Dickens view as presenting narrative opportunities. While the connections suggest a fundamental sense of parity, they nonetheless fail to fully represent the impact of urban hardship and privation on habits of addiction. Claybaugh points out that Dickens reveals this insufficiency by ‘parodying temperance narratives and showing them to be absurd’.³⁹ In ‘Gin-Shops’, this subversion of ideas associated with temperance is achieved by re-examining the link between poverty and the excessive consumption of gin. As noted earlier, the sketch presents the ostentatious gin-shop as part of a fundamentally flawed system of trade that both exploits and exacerbates issues of poverty. The narrative draws attention to the ‘false account of causation’ or ‘the inversion of cause and effect’ that characterise the traditional temperance narrative, meaning that it ‘misrepresents the very phenomena it is intended to address’.⁴⁰ This disparity between the temperance narrative and the ways in which it was deconstructed by pieces such as ‘Gin-Shops’ demonstrates how concepts of addiction were often characterised by a problematic public/private oscillation, which itself complicated and destabilised notions of social responsibility and personal culpability.

The vivid potential of the gin-shop and its patrons was explored more widely within early Victorian periodical culture. In its series ‘Characters about Town’, the *Illustrated London News* features ‘The Dram-Drinker’, written by Thomas Miller and with an illustration by Kenny Meadows (see Figure 1.12, overleaf). The article begins by mentioning the variety of people who frequent ‘our modern gin-palaces’, including ‘respectable men’ and ‘[m]arried women [...] at a time when they ought to be providing the dinner for their families.’⁴¹ While emphasising the diverse clientele, the piece also reveals the way in which

³⁹ Ibid., p. 59.

⁴⁰ Ibid., p. 59.

⁴¹ Thomas Miller, ‘Characters about Town: The Dram-Drinker’, *Illustrated London News*, 6 May 1848, p. 298.

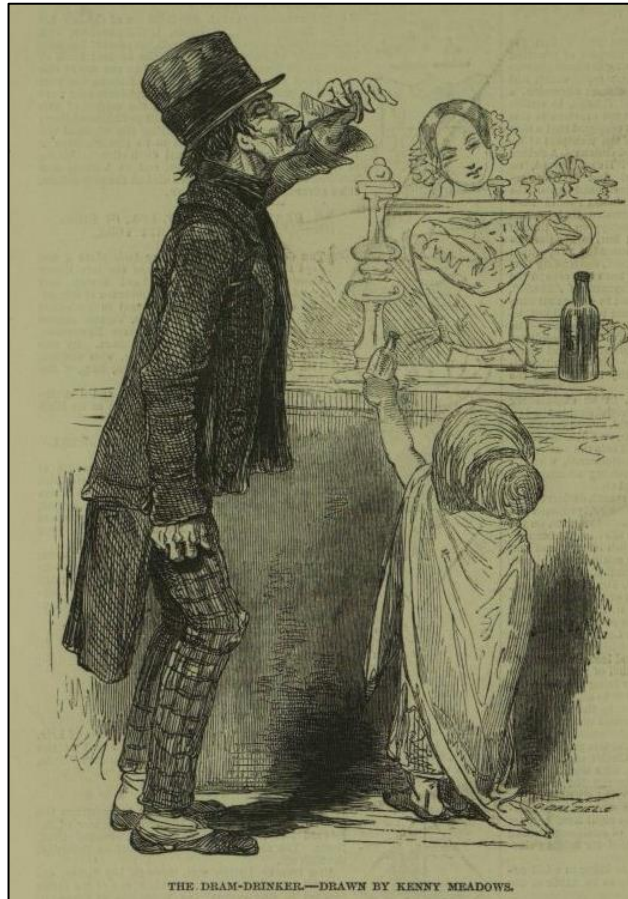


Fig. 1.12. Kenny Meadows, 'The Dram-Drinker',
Illustrated London News, 6 May 1848, p. 298.

domestic stability and established gender roles are threatened by the popularity of the gin-shop. Also numbered among the gin-shop populace are 'itinerant vendors', and 'the poor, the old, and the miserable who look and feel "half-dead," as they themselves express it, unless they are "lighted up" every two or three hours with a glass of spirits'. This description echoes the environment of 'Gin-shops' in *Sketches by Boz*, focusing as it does on the lower strata of the Victorian urban environment. The dependency that characterises the figures in the article emerges through colloquial language, giving the impression that habitual drinkers can voice and define their own actions or needs. While this is an illusory effect, it does emphasise the way in which patterns of behaviour could be interpreted in different ways by the individuals inhabiting the scenes of poverty depicted and the newspaper's middle-class

readership. The use of this language also helps the narrator present his work as an authentic representation of the gin establishment and the working-class citizens found within it, adding a deceptive sense of realism to the depiction of alcohol habituation.

Miller continues to explore the portrayal of the gin-drinkers, noting that '[m]any [...] have become so habituated to drink that they care but little for food, and very rarely partake of a substantial meal'. This posits gin drinking as an unbalanced form of consumption that encourages a lack of genuine nourishment or a corrupt and morbid alternative. The absence of sustenance reveals that the desire for gin supersedes other biological imperatives, the body adapting in response to the excessive alcohol. The subversive impact of gin and gin-shops is perhaps most apparent when the article details the way in which '[w]omen and children even are coming in with bottles; some of the latter are so little, that [...] they are scarcely able to reach up and place the bottle upon the zinc-covered bar'. The association between children and gin is made explicit:

Even these young miserable creatures are fond of drink, and may sometimes be seen slyly drawing the cork outside the door, and lifting the poisonous potion to their white withered lips. They have already found that gin numbs and destroys for a time the gnawing pangs of hunger, and they can drink the fiery mixture in its raw state.

The text's dramatic pathos emphasises again the way in which gin represents a corrupt and corrupting substance, its 'poisonous' influence magnified by its proximity to the children.

While the consumption of gin by adults can be perceived as an undesirable individual pattern of behaviour, its link to children makes explicit the idea of alcohol as a wider socio-cultural concern. The children's gin consumption is unequivocally linked to issues such as 'poverty and misery, and a want of the proper necessities of life', revealing an inherent fault within the body politic that drives 'hundreds to drink in this vast metropolis'.

When discussing the subject of the article, 'The Dram-Drinker' himself, Miller begins by describing him as a 'strongly-marked character': 'When you have once seen him, you are sure to recognise him again, for he belongs to a class which you are able to identify at a

glance'. The suggestion that habitual drinkers can be easily identified through their appearance creates a reassuring sense of social categorisation, as well as stressing the idea of detectable symptoms that mark the abnormal body. This Foucauldian observation and classification of the habitual drinker isolates the behaviour as aberrant or subversive, while at the same time emphasising the assumed shared values and characteristics of the *Illustrated London News*'s readership. Miller continues to relate the dram-drinker's actions once inside the gin-shop:

watch the intensity of his countenance while the glass is filling: there is a grim desperate smile all over it, as if he knew that it was slowly killing him, and loved the cause better than the effect. Observe how his hand trembles as he raises it towards his lips, with what silent delight he gulps down the fierce liquor, his eyes apparently closed, so intently are they riveted upon the glass, watching the last drop as it slowly trickles down the up-turned vessel, and gives a long drawn 'Ah!' – an indefinite kind of interjection expressing something like pleasure or regret, or, it may be, pain.

The passage reveals the complex and contradictory nature of alcohol addiction, emphasising the fundamental dichotomy of the *pharmakon*, and how the addict himself becomes a site of morbid fascination. The use of words such as 'watch' and 'observe' again accentuates the idea of social supervision, the reader being interpellated within a cultural machinery of regulation, with the perceived unhealthy body as the unerring focus of scrutiny. The gaze of the drinker is 'intently [...] riveted upon the glass, watching the last drop', echoing and mimicking the wider mechanisms of surveillance. This has the effect of placing the glass, and drop of gin, at the centre of the text, positioning it as the locus of social concerns surrounding alcohol and the addict.

The article also engages with the recognised medical implications of habitual gin drinking, stating that the gin is 'slowly killing' the addict, and explicitly articulating the danger inherent in excessive consumption. The 'grim desperate smile' of the drinker suggests his awareness of this threat informs his habit, also revealing the contradictory nature of addiction, in which the dominance of a psychological and physiological need overcomes the

welfare of the pathologised body. This paradox is echoed in the way the drinker is perceived to express ‘an indefinite kind of interjection expressing something like pleasure or regret, or, it may be, pain’. The dichotomous reaction of the figure recalls the feelings of pleasure and discomfort recorded by figures such as Humphry Davy and Thomas De Quincey, who used a multifaceted and complex discourse to express the sensations resulting from their own use of chemical substances.⁴² While Miller’s dram-drinker responds with similar contradictory associations, these are interpreted by the text’s narrator rather than by the addict himself. The drinker has no opportunity to express or articulate his inner experience of addiction or the impact of alcohol: rather, it is the mediating narrator who reads and infers from the addict’s external appearance and behaviour. The observation that the dram-drinker’s ‘hand trembles’ again acts as a visible sign of internal physical weakness, suggesting a moral or individual feebleness associated with the drinker’s habitual consumption. Miller uses physical description to demonstrate how internal abnormalities, or medical symptoms, can be perceived and interpreted by the social gaze, and how moral deficiencies can be identified in the same way. This in turn establishes a strict semiotic regime within the article, which encodes pathological and moral conditions as analogous signs. Moreover, the associations of addiction with poverty deny the addict the agency to contribute to the examination of his own condition, privileging instead middle-class constructions of the disease and its impact on the individual.

The narrator’s reading of the figure of the addict continues as, towards the end of the article, he ruminates on the history of the dram-drinker. Miller speculates that the man may

⁴² De Quincey refers to opium as the ‘dread agent of unimaginable pleasure and pain!’, that causes an ambiguous reaction of ‘revulsion’ and ‘upheaving’, while Davy notes that his experiments with nitrous oxide resulted in both ‘an uncommon sense of fullness of the head, accompanied with loss of distinct sensation and voluntary power’ and subsequently ‘an highly pleasurable thrilling, particularly in the chest and the extremities. The objects around me became dazzling and my hearing more acute.’ See Thomas De Quincey, *Confessions of an English Opium-Eater*, ed. by Grevel Lindop (Oxford and New York: Oxford University Press, 2008), pp. 37 and 39; and Humphry Davy, *Researches, Chemical and Philosophical; Chiefly concerning Nitrous Oxide; or Dephlogisticated Nitrous Air, and its Respiration* (London: Joseph Johnson, 1800), pp. 457 and 458.

have ‘seen better days’ or ‘held some respectable position’, and that he has ‘met with many troubles, lost or buried all who were once dear to him [...] and he strives in vain to steep his memory in forgetfulness’. This attempt to construct a narrative that explains excessive consumption of alcohol suggests that it is seen as behaviour that can be traced to situational influences, rather than any inherent physiological predisposition. The speculation that the addict has descended from a more comfortable socio-economic position echoes the traditional temperance narrative that portrayed addiction as an inevitable social and moral decline. The addict becomes a tragic figure, as his alcohol consumption is presented as a symptom of unfortunate circumstances rather than a disease in itself. An alternative history is suggested, however, adding to the multiplicity that surrounds him and his addiction:

it may be that drink itself was the first cause of all his sorrows – that he began timidly, selecting the most out-of-the-way places at the commencement, and looking cautiously around before he ventured in; and that this stealthy habit of taking his glass still remains unchanged. But few know where he lives, what he does, or in what hidden haunt his time is passed.

This alternative history places the dram-drinker’s gin consumption at the centre of his narrative, presenting it as a shameful and subversive habit that he attempts to conceal from the sight of others. Again, a sense of contradiction pervades this description, the imagined attempts at concealment juxtaposed with the intense scrutiny the article places on the drinker. The addict acquires a troubling sense of obscurity or anonymity as he evades the social gaze, positioning alcohol consumption itself as a problematic and corruptive habit. The reader of the article also becomes entangled within this complex dichotomy of concealment and scrutiny, effectively acting as conduit for the Foucauldian social gaze that both identifies subversive behaviour and the ways in which it can escape detection.

Addiction and Alterity in *Bleak House* and *Hard Times*

Henry Mayhew's *London Labour and the London Poor* also examines the urban conditions of the capital, and, like *Sketches by Boz*, allows its more privileged readership access to this parallel existence. One of the scenes described by Mayhew is that of 'the "Rag-and-Bottle" and the "Marine-Store" Shops'.⁴³ While visiting one of these locations, the narrator remarks that '[t]he stench in these shops is positively sickening', and describes how the contents of the shop – including a 'pile of rags, a sack-full of bones, the many varieties of grease' – have the effect of 'corrupting an atmosphere which, even without such accompaniments, would be too close' (pp. 165–66). The inhabitants of the shop are described as 'inmates', suggesting that the 'many deaths among [the proprietor's] children' are owing to the 'dirt and stench' of the building in which they dwell (p. 166). This sense of an abhorrent environment associated so strongly with death and decay, and in which the very air is subject to corruption, constructs a scene suggestive of the Urban Gothic, compromising the reality of the depiction by delineating the ways in which literary and factual discourses overlap.⁴⁴ That the text relies on this form of language gives the rag-and-bottle shop a sense of peculiarity that reconfigures the London landscape as something strange and unfamiliar.

The uncanny location created by Mayhew is significant not just because of the way in which it reveals a morbid fetishisation of the working-class environment, but owing to the

⁴³ Henry Mayhew, *London Labour and the London Poor* (Oxford and New York: Oxford University Press, 2012), p. 165. All further references are to this edition and are given parenthetically in the text.

⁴⁴ Robert Mighall notes that the Urban Gothic 'is not just a Gothic in the city, it is a Gothic *of* the city. Its terrors derive from situations peculiar to, and firmly located within, the urban experience.' The Urban Gothic 'reflects and exploits distinctly modern concerns about the growth of an information culture, and its correlative production of secrets.' See *A Geography of Victorian Gothic Fiction: Mapping History's Nightmares* (Oxford: Oxford University Press, 1999), pp. 30 and 31.

Richard C. Maxwell writes that in the Urban Gothic 'secrets became entangled with an idea of city life. It is possible to observe this trend in progress, emerging during the 1840s in the tales of G. W. M. Reynolds, authoritatively present shortly after 1850 in *Bleak House* [...] The urban intriguer, the incriminating document [...] are used to suggest the contradictory movements of society. London can be perceived as the center of progress, the place where rationalized techniques of government and business gradually evolve. *Household Words* often adopts such a perspective. Yet the means of rationalization (above all, writing) push the city back towards Gothic "mysteries." *Bleak House* is an account of this terrifying and unexpected regression.' See 'G. W. M. Reynolds, Dickens, and the Mysteries of London', *Nineteenth-Century Fiction*, 32.2 (September 1977), 188–213 (p. 188).

fact that Dickens later utilises a rag-and-bottle shop as the site for his examination of excessive alcohol consumption. The character of Krook in *Bleak House* (1852–53) inhabits just such a location as that described in Mayhew’s text, the parallels between the novel and *London Labour and the London Poor* amplifying both the instability of the city’s literary identity and the popular associations of alcohol addiction. The initial account of Krook’s establishment is given by Esther, who describes arriving at the shop

over which was written, Krook, Rag and Bottle Warehouse. Also, in long thin letters, Krook, Dealer in Marine Stores. In one part of the window was a picture of a red paper mill, at which a cart was unloading a quantity of sacks of old rags. In another, was the inscription, Bones Bought. In another, Kitchen-Stuff Bought. In another, Old Iron Bought. In another, Waste Paper Bought. In another, Ladies’ and Gentlemen’s Wardrobes Bought. Everything seemed to be bought, and nothing to be sold there. In all parts of the window, were quantities of dirty bottles: blacking bottles, medicines bottles, ginger-beer and soda-water bottles, pickle bottles, wine bottles, ink bottles: I am reminded by mentioning the latter, that the shop had, in several little particulars, the air of being in a legal neighbourhood, and of being, as it were, a dirty hanger-on and disowned relation of the law. There were a great many ink bottles. There was a little tottering bench of shabby old volumes, outside the door, labelled ‘Law Books, all at 9d [...]. There were several second-hand bags, blue and red, hanging up. A little way within the shop door, lay heaps of old crackled parchment scrolls, and discoloured and dog’s-eared law-papers. I could have fancied that all the rusty keys, of which there must have been hundreds huddled together as old iron, had once belonged to doors of rooms or strong chests in lawyers’ offices. The litter of rags tumbled partly into and partly out of a one-legged wooden scale, hanging without any counterpoise from a beam, might have been counsellors’ bands, and gowns torn up. One had only to fancy, as Richard whispered to Ada and me while we all stood looking in, that yonder bones in a corner, piled together and picked very clean, were the bones of clients, to make the picture complete.⁴⁵

The sense of an incomplete form of market exchange, with everything bought but nothing sold, inflects the novel’s indictment of the ineffectual judicial system of Chancery, but also reveals a distorted or exaggerated accumulation that prefigures Krook’s own dangerous consumption of alcohol.⁴⁶ The morbid and seemingly profitless form of commerce found in

⁴⁵ Charles Dickens, *Bleak House*, ed. by Nicola Bradbury (London and New York: Penguin, 2003), pp. 67–68. All further references are to this edition and are given parenthetically in the text.

⁴⁶ The Court of Chancery was concerned with equity and was ‘a crucial court because its jurisdiction allowed it to determine matters that found no remedy at common law. Its procedure by subpoena, bill, and answer allowed

both Krook's warehouse and the Court of Chancery are echoed in the unhealthy gin habit of Krook himself, exposing the suffering body and body politic that result from these cycles of trade and consumption. The bottles filling the windows further reinforce the link between public and private behaviour. The ink bottles are observed by Esther to associate the shop with the neighbouring law trade, mentioning as she does that the warehouse is a 'dirty hanger-on and disowned relation of the law' (p. 68). While the blacking bottles and medicine bottles indicate further examples of urban trade, the wine, ginger-beer and soda bottles suggest the problematic intermingling of the domestic space with the public marketplace. Evidence of private habits of consumption are quite literally on display as commodities, emphasising the significance of the public appetite to the configuration of the marketplace. The connection drawn between larger spheres of commerce and an individual's alcohol habituation demonstrates how patterns of behaviour could be characterised as social and economic issues rather than as medical ones. In the same way that the corruption of Chancery and the stifled marketplace are shown to be undesirable social problems, alcohol and addiction are presented as part of a diseased body politic.

The scene progresses from the description of Krook's warehouse to the appearance of Krook himself. An 'old man in spectacles', Krook is 'short, cadaverous, and withered; with his head sunk sideways between his shoulders, and the breath issuing in visible smoke from

the full details of a dispute to emerge, in a way not possible at common law [...] Equity's procedure allowed the court to consider cases in a more three-dimensional way. Since it did not seek to refine a single point for the determination of a jury, the court could handle cases involving many parties and a multiplicity of questions [...]. Nevertheless, if the court was of vast importance, by the early nineteenth century it was in crisis.' See Michael Lobban, 'Preparing for Fusion: Reforming the Nineteenth-Century Court of Chancery, Part One', *Law and History Review*, 22.2 (Summer 2004), 389–427 (p. 391).

Maxwell (pp. 204–05) writes that '[t]he first thing Dickens says about London is that Michaelmas Term is lately over and the Lord Chancellor is sitting in Lincoln's Inn Hall. Chancery dominates the city; it lies "at the very heart of the fog" (*BH*, 2), and from it the fog – the murk of expertise in which lawyers thrive – spreads outwards. The learning of the law and the uses to which it is put are the basis of a nightmare fantasy whose keynote – of course – is that people are always writing.' Maxwell also notes that '[t]he notion that Chancery dominated London in this way is an exaggeration with a purpose. Legal pedantry existed long before the mid-nineteenth century, and elsewhere than in cities like London, but for Dickens it is this time and place that make the abuses of Chancery so important. Chancery is at the heart of the fog and the heart of England's troubles because it exemplifies a frightening reversion: the eruption of mystery out of rationalizing, bureaucratic organization.'

his mouth, as if he were on fire within' (p. 68). This portrayal of Krook, like that of his shop, reflects the corruption found within both the judicial system explored in *Bleak House* and the unsavoury conditions associated with the poorer areas of London. The 'visible smoke' of his breath and 'fire within' prefigure the dramatic mode of his death, but also suggest a symbolic exploration of excessive consumption and alcohol addiction. The text here engages with the conception of a disease as a destructive internal force, utilising a shared framework of terminology to explore and discuss the diseased body. There is a sense that the internal impact of Krook's gin drinking can be seen externally, the peculiarity of his body expressing the violence of the alcohol's aetiological role. In a later chapter when Guppy and Jobling call on Krook, they find him 'still sleeping like one o'clock; that is to say, breathing stertorously with his chin upon his breast, and quite insensible to any external sounds'. The narrative also remarks that '[o]n the table beside him [...] stand an empty gin bottle and a glass. The unwholesome air is so stained with this liquor, that even the green eyes of the cat upon her shelf [...] look drunk' (p. 327). This episode makes explicit Krook's habitual, immoderate gin consumption, as well as the power of the alcohol to infect the atmosphere of the shop and other creatures within it. The description of Krook here is reminiscent of a more stereotypical drunk character, emphasising in this case the uncontrolled nature of his social and personal activities rather than the wider social significance of his excessive consumption.

Guppy offers to fill Krook's empty gin bottle at 'Sol's Arms', with the latter requesting the 'fourteenpenny' variety of gin; when Guppy returns with the filled bottle, Krook 'receives it in his arms like a beloved grandchild, and pats it tenderly', before realising that the bottle holds the better quality 'eighteenpenny' gin (p. 329). As well as providing an insight into the budgetary machinations of the gin trade itself, the exchange expands the complexity of the social connotations of Krook's alcohol addiction. His grandfatherly response to the return of his gin bottle is a tragicomic spectacle, revealing the depths of his

dependence on the bottle by deconstructing a healthier, familial relationship. Krook's gin habit is not framed as a medical issue, as the novel at this point emphasises the emotional and personal aberration of his situation. Guppy's gesture of buying a more expensive gin indicates the manipulation at the centre of his relationship with Krook, but also the way in which gin itself acts as a form of currency between them. Guppy is described as '[t]aking advantage' of Krook's gratitude to arrange for his friend Jobling to become a lodger at the rag-and-bone shop (p. 329). This act of using gin to influence Krook underlines the way in which his social relationships are subject to corruption owing to his status as a habitual drunkard. Krook's addiction becomes a public weakness that can be employed against him for the advancement of others, illustrating the novel's larger themes of corruption through the personal social taint associated with the habitual consumption of alcohol.

Warhol's exploration of the significance of personal experience in the development of understandings of addiction reveals a further dimension in Dickens' portrayal of Krook. She observes that the modern Alcoholics Anonymous programme is structured around '[i]ndividual recovering alcoholics [coming] to understand what they call their "disease" by repeatedly reading, listening to, and ultimately telling – and repeatedly retelling – "drunkologues", or first-person accounts of drinking behaviour that is construed as "alcoholic"'.⁴⁷ While an ostensibly modern concept, the act of 're-telling' can be found in earlier nineteenth-century accounts such as those by Coleridge and De Quincey. This idea of shaping the alcoholic's experience as a form of narrative is one which Krook is denied, however, as *Bleak House* does not provide any subjective insights into his behaviour. Instead, he is viewed externally, like Mayhew's dram-drinker, through the lens of other characters or the narrator. This focus on Krook's addiction has the effect of limiting his disease to a problematic site of social anxiety, rather than presenting an individual sense of internal

⁴⁷ Warhol, p. 98.

struggle. The cultural significance of De Quincey's *Confessions of an English Opium-Eater*, first published in 1821 and re-issued in revised form in 1856, suggests that the personal narrative of addiction remained pertinent to both social interest and literary development. By contrast, Krook's portrayal discloses an alternative literary trope at odds with this continuing fascination with the addict's own account, one which focused solely on the social symptomology of the disease. Dickens eschews the lure of subjective narrative and uses Krook's addiction to explore a larger concept of societal corruption, making personal narrative extraneous, and potentially distracting. The co-existence of these contradictory forms of expressing and exploring addiction reflect the complexities of both medical and cultural approaches to disease itself.

The infamous death of Krook re-affirms his link to the novel's theme of widespread urban corruption. Guppy and Weevle discover the remains of Krook in his rag-and-bottle shop, although the death itself is adumbrated earlier in the chapter, when Mr Snagsby remarks that the evening air in the vicinity is 'rather greasy', and is 'a tainting sort of weather' (p. 507). Guppy himself notes that Weevle's room above Krook's shop is full of 'soot' which stains his clothes 'like black fat', as well as a 'thick, yellow liquor [...] offensive to the touch and sight, and more offensive to the smell [...] A stagnant, sickening oil, with some natural repulsion in it that makes them both shudder' (pp. 512, 516). These observations construct an abhorrent environment with an exaggerated sense of debased or contaminated physicality. Indeed, it is the threat of contamination which dominates the descriptions, emphasising the idea of infectious corruption that surrounds both Krook and his addiction and the systems of Chancery. At the site of Krook's death, Guppy and Weevle discover a 'smouldering suffocating vapour in the room, and a dark greasy coating on the walls and ceiling', continuing the sense of visible and objective contamination associated with Krook (p. 519). The narrative episode culminates with the narrator's judgement that

The Lord Chancellor of that Court [...] has died the death of all Lord Chancellors in all Courts [...] attribute it to whom you will, or say it might have been prevented how you will, it is the same death eternally – inborn, inbred, engendered in the corrupted humours of the vicious body itself, and that only – Spontaneous Combustion.

The language explicitly identifies a sense of internalised damage that reflects the larger issue of distorted judicial systems, as well as the more immediate scrutiny of the self-destructive habits of addiction.

The inclusion of spontaneous combustion within *Bleak House* was and remains a central point of critical discussion. Perhaps the most vocal contemporary figure who commented on Krook's manner of death was the 'scientist, philosopher, and literary critic George Henry Lewes'.⁴⁸ Brooke D. Taylor notes that

critics generally agree that the episode symbolizes Krook's association with the all-consuming Court of Chancery. More often at issue is whether the symbolism of Krook's death relies upon the credibility of spontaneous combustion, as Dickens's defensive response to Lewes seems to suggest.⁴⁹

Dickens' insistence that scientific enquiry supported a belief in spontaneous combustion reaffirms the significance of the material and physical effects of Krook's corrupted lifestyle, emphasising the ferocity of the alcohol within his body.⁵⁰ Krook's habitual drunkenness thus takes on a dual importance, representing the flawed concept of material consumption that characterised the poverty-stricken areas of London, while articulating the evolving understanding of the human body in nineteenth-century medical investigation. Taylor also observes that, through Krook's death, '[t]he mechanized, unfeeling court system becomes a biological anomaly filled with "corrupted humours," infecting others with its injustices and

⁴⁸ Brooke D. Taylor, 'Spontaneous Combustion: When "Fact" Confirms Feeling in *Bleak House*', *Dickens Quarterly*, 27.3 (September 2010), 171–84 (p. 171).

⁴⁹ *Ibid.*, p. 172.

⁵⁰ In a letter to Dr John Elliotson, Dickens writes to thank him for the loan of a lecture on spontaneous combustion: 'I am not a little pleased to find myself fortified by such high authority. Before writing that chapter of *Bleak House*, I had looked up all the more famous cases you quote [...] but three or four of those you incidentally mention [...] are new to me – and your explanation is so beautifully clear [...]. It is inconceivable to me how people can reject such evidence, supported by so much familiar knowledge, and such reasonable analogy.' See *The Letters of Charles Dickens*, ed. by Walter Dexter, vol. 2 (London: Nonesuch Press, 1938), pp. 446–47.

false pretences before finally evaporating in a fit of greedy self-consumption'.⁵¹ By examining the analogy of spontaneous combustion, Taylor demonstrates that it is through physiological ideas of disease and excessive consumption that *Bleak House* articulates fears regarding the social and cultural disparity of the contemporary urban environment. The possibility entertained by Dickens that spontaneous combustion could have been scientifically verifiable stresses the way in which both addiction and the body represented sites of potential instability that both threatened and reified the larger social structures of the metropolis.

Richard J. Dunn points out that, as Dickens was an 'avid newspaper reader' and 'had earlier written' for the paper in which it appeared, it is likely that he was familiar with the publication of Mayhew's work in the *Morning Chronicle* from 1849.⁵² Dunn also notes that Mayhew's 'articles contain materials that anticipate specific details and more fanciful points that Dickens was to develop about Krook', although

the significance of these parallels lies neither in their mutual confirmation of contemporary street scenes nor in the irresolvable questions they raise about the consciousness with which Dickens echoed Mayhew. Rather, the parallels remain important because they reveal the grounds for Dickens's imaginative extension from factual observation to symbolic statement.

The links between Mayhew's and Dickens' descriptions are significant, therefore, owing to the way in which they emphasise that the realities of the urban landscape and population could be reframed to articulate the intricacies of both problematic or corrupted forms of trade and the cultural perception of the addict. The 'major similarity between Mayhew's anonymous speaker and Dickens's Krook is that both men are illiterate',⁵³ as Mayhew's rag-and-bottle shop owner remarks that he 'can't read very much, and don't understand about

⁵¹ Taylor, p. 176.

⁵² Richard J. Dunn, 'Dickens and Mayhew Once More', *Nineteenth-Century Fiction*, 25.3 (December 1970), 348–53 (p. 348).

⁵³ *Ibid.*, p. 351.

books'.⁵⁴ This inability to engage with texts and the information within them signals a rupture within the familiar environment of London, separating Mayhew's and Dickens' readers from the figures who inhabit their narratives.

In *Bleak House*, this disparity between individual and social patterns of literacy is particularly associated with the character of Krook, linked as he is with key personal and public texts. After discovering Nemo's body in his rooms above the rag-and-bottle shop, Tulkinghorn questions Krook:

'Hadn't you better see [...] whether he had any papers that may enlighten you? There will be an Inquest, and you will be asked the question. You can read?'

'No, I can't,' returns the old man, with a sudden grin. (p. 170)

The admission of illiteracy means that Krook is stranded within the world of texts and language he inhabits. The legal documents, as well as the personal letters, that he acquires place him in a position of potential power within the novel; however, his inability to read them renders him unable to take advantage of the information they contain. The interaction with Tulkinghorn underscores how Krook's dichotomous situation impinges on the wider social environment, hindering the processes of the judicial systems associated with Nemo's death. Krook's 'sudden grin' as he admits his illiteracy suggests a form of subversive rejection, stressing the problematic role the character plays within the narrative, and what that suggests about the doubleness of language and power. While Krook's illiteracy is established, he reveals himself to be able to decipher words and texts to a certain degree: Esther recounts how

[Krook] chalked the letter J on the wall – in a very curious manner, beginning with the end of the letter and shaping it backward. It was a capital letter, not a printed one, but just such a letter as any clerk in Messrs Kenge and Carboy's office would have made [...] (pp. 75–76)

⁵⁴ Mayhew, p. 169.

He explains that he has a ‘turn for copying from memory’ and in this manner is able to spell out for Esther the words ‘Jarndyce’ and ‘Bleak House’ (p. 76). The fact that he writes words so central to both the text’s narrative and the Chancery case reveals simultaneously that he has significant documents within his possession and that he is unable to comprehend their true import.

The link between Krook and textuality becomes significant if read against Plato’s discourse on the *pharmakon*. As noted at the start of this dissertation, Derrida comments on the beginning of Plato’s dialogue *Phaedrus*, noting that

Socrates compares the written texts Phaedrus has brought along to a drug (*pharmakon*). This *pharmakon*, this ‘medicine’, this philter, which acts as both remedy and poison, already introduces itself into the body of the discourse with all its ambivalence. This charm, this spellbinding virtue, this power of fascination, can be – alternately or simultaneously – beneficent or maleficent.⁵⁵

The exaggerated manner of Krook’s death emphasises the way in which gin reproduces the violent and destructive force of the *pharmakon*, and his connection to textuality also signals the power of the remedy/poison dichotomy. Krook explicitly states that he has ‘so many old parchmentses and papers in [his] stock’, and his fascination with words and texts, in spite of his illiteracy, portrays an ambiguous form of connection that reflects the *pharmakon*’s duplicitousness (*Bleak House*, p. 70). While Krook is able to memorise and recognise words associated with the Chancery case, he is ignorant of the fact that he possesses the crucial will that would resolve it. His possession of this will could be taken to suggest the power of the *pharmakon* as written text, while his inability to perceive and control this object simultaneously reveals its duplicitous nature as a source of hidden corruption, much like Krook himself.

⁵⁵ Jacques Derrida, ‘Plato’s Pharmacy’, in *Dissemination*, trans. by Barbara Johnson (London and New York: Bloomsbury Academic, 2013), pp. 67–186 (p. 75). See Plato, *Phaedrus*, trans. by Robin Waterfield (Oxford and New York: Oxford University Press, 2009), 230d: ‘But I think you’ve found a way to charm me outside. Just as people get hungry animals to follow them by waving some greenery or a vegetable in front of them, so it looks as though all you have to do is dangle a speech on a scroll in front of me and you can take me all over Attica, and anywhere else you fancy.’ See also *ibid.*, p. 5.

The equivalence that *Bleak House* establishes between drug and text can also be seen in the figure of Nemo (Captain Hawdon). Not only does Nemo lodge in rooms above Krook's rag-and-bottle shop, he is also subject to an addiction that results in his death. The description of Nemo's room as Tulkinghorn finds it presents an environment of scarcity, containing a 'rusty skeleton of a grate, pinched at the middle as if Poverty gripped it', a 'ragged old portmanteau' and 'one old mat, trodden to shreds of rope-yarn' (p. 164). Tulkinghorn proceeds to find the body of Nemo:

He has a yellow look, in the spectral darkness of a candle that has guttered down [...] His hair is ragged, mingling with his whiskers and beard – the latter, ragged too, and grown, like the scum and mist around him, in neglect. Foul and filthy as the room is, foul and filthy as the air, it is not easy to perceive what fumes are those which most oppress the senses in it; but through the general sickliness and faintness [...] there comes into the lawyer's mouth the bitter, vapid taste of opium. (p. 165)

The passage again suggests a link between behaviours perceived as socially or morally aberrant and scenes of poverty or want. In this case, the traces of opium use are equated with Nemo's impoverished lifestyle and prolonged physical neglect. There is, however, evidence of his profession in his rooms, as the text also describes 'a broken desk: a wilderness marked with a rain of ink' (p. 164). While the desk and ink represent Nemo's link to the public world of law and trade, the language invokes a contradictory sense of social isolation, identifying the problematic marginal space that the addict is perceived to occupy. In this scene, Dickens seems to draw on older established Romantic or Gothic literary tropes in his depiction of Nemo's situation, again constructing a form of distance or breach between the addict and the contemporary urban location beyond his room.

The drug simultaneously isolates the addict from certain normative social cultures but ensures his significance within others. Having found Nemo's body, Krook responds by saying: "Send for some doctor! [...] Here's poison by the bed!" (p. 166). When the 'dark young surgeon' arrives, he confirms that Nemo "has purchased opium of me, for the last year and a half", and that "He has died [...] of an over-dose of opium, there is no doubt [...]"

There is enough here now [...] to kill a dozen people” (p. 167). The prompt arrival of the medical professional reveals how the potential misuse or abuse of opium was considered cause for specialist knowledge and investigation.⁵⁶ While Nemo’s life as an addict is portrayed as a marginal one, his death is shown to bear social and medical significance, owing to the way in which it exposes opium as a poison rather than remedy. The question of whether ‘he did it on purpose’ is put to the surgeon, who replies that he “‘can’t say. I should think it unlikely, as he has been in the habit of taking so much. But nobody can tell” (p. 167). Opium becomes central to the question of whether Nemo’s death was accident or suicide, something that is emphasised at the coroner’s inquest. The jury are told:

‘Here’s a man unknown, proved to have been in the habit of taking opium in large quantities for a year and a half, found dead of too much opium. If you think you have any evidence to lead you to the conclusion that he committed suicide, you will come to that conclusion. If you think it is a case of accidental death, you will find a Verdict accordingly.’ (p. 177)

Thus, Nemo’s addiction is framed simultaneously within a judicial system of enquiry and a moral set of concerns surrounding the potential of suicide. The use of opium alternates from being a behaviour beyond the established social structures to one scrutinised and accommodated within the social sphere by means of a specific legal verdict.

It is the connection between text, drug and addict that I would argue is central to the narrative’s exploration of addiction. As discussed previously, Krook and his alcoholism are intrinsically connected to the documents stored within his rag-and-bottle shop, and Nemo likewise is firmly associated with the law and its documents. In addition, within Nemo’s room is found ‘a crumpled paper, smelling of opium, on which are scrawled rough memoranda – as, took, such a day, so many grains; took, such another day, so many more –

⁵⁶ This sense of professional enquiry regarding the use or misuse of opiates can be seen in *The Lancet* which publishes the ‘Records of the Results of Microscopical and Chemical Analyses of the Solids and Fluids Consumed by all Classes of the Public: Drugs and Pharmaceutical Preparations. Opium. Laudanum – Poison’. This report examines multiple samples of medicines containing opiates, comparing price and the quantity of opium found in the medicine, and stresses the importance of consistency in prescribed drugs. See *The Lancet*, 29 January 1853, pp. 116–17.

begun some time ago, as if with the intention of being regularly continued, but soon left off' (p. 171). This act of recording his opium habit, and on paper which smells of opium, makes explicit not only the link between the drug and text, but also between the drug and the act of writing or recording. Just as the descriptions of Nemo and his rooms echo Romantic language, this motif of documenting his opium habit invokes figures such as De Quincey. Krook and Nemo can be considered then as corrupted forms of the figure of the *pharmakeus*, enmeshed as they are with the *pharmakon* as both poison/remedy and as written text. Derrida notes that *pharmakeus*, or *pharmakos*, can mean 'wizard, magician, poisoner' but that '[t]he character of the *pharmakos* has been compared to a scapegoat. The *evil* and the *outside*, the expulsion of the evil, its exclusion out of the body (and out) of the city – these are two major senses of the character and of the ritual'.⁵⁷ This sense of 'expulsion' or 'exclusion' echoes the way in which addicts are marginalised within Dickens' novel, as well as their association with other culturally undesirable behaviours. The contradictory ideas of excessive ingestion and expulsion emphasise the inherently paradoxical nature of *Bleak House*'s exploration of addiction.

The subject of alcohol addiction was one to which Dickens would return a year later, with the serialised publication of *Hard Times* in 1854. In one of the novel's subplots, Stephen Blackpool, a mill worker who becomes unemployed and wrongly implicated in a robbery, is encumbered with an alcoholic wife, whose presence in the marital home is inconsistent but, nevertheless, prevents him from remarrying. Stephen's unexpected discovery of his wife in their home one night introduces her to the narrative, the text detailing that 'he stumbled against something. As he recoiled, looking down at it, it raised itself up into the form of a woman in a sitting attitude'.⁵⁸ Mrs Blackpool is, therefore, initially portrayed as less than

⁵⁷ Derrida, p. 133.

⁵⁸ Charles Dickens, *Hard Times* (London and New York: Penguin, 2012), p. 76. All further references are to this edition and are given parenthetically in the text.

human, referred to as ‘something’ and ‘it’, an abject figure who causes others to respond with horror or disgust. The description continues:

Such a woman! A disabled, drunken creature, barely able to preserve her sitting posture by steadying herself with one begrimed hand on the floor, while the other was so purposeless in trying to push away her tangled hair from her face, that it only blinded her the more with the dirt upon it. A creature so foul to look at, in her tatters, stains, and splashes, but so much the fouler than that in her moral infamy, that it was a shameful thing even to see her. (pp. 76–77)

Mrs Blackpool cannot exert control over her own body, a symptom of alcoholic excess, suggesting that her addiction has undermined or compromised fundamental physiological processes. This sense of the addicted body functioning beyond control introduces a problematic disconnection between the mental and physical. While the violent impact of alcohol on Krook is characterised by a consuming fire, here the body of the addict suffers from disintegration or degeneration. This itself reflects the perceived social deterioration of conditions for the working classes in the post-Industrial Revolution culture explored within *Hard Times*, just as spontaneous combustion echoed the corrupted consumptiveness of the world of Chancery in *Bleak House*.

The portrayal of Mrs Blackpool can also be compared with that of addiction in *Bleak House*. In the case of both Mrs Blackpool and Nemo, each novel’s initial descriptions emphasise physical disorder, with Mrs Blackpool in ‘tatters, stains, and splashes’ with ‘tangled hair’, while Nemo’s hair is ‘ragged’, demonstrating bodily ‘neglect’ (*Hard Times*, p. 76; *Bleak House*, p. 165). This suggests that both drug and alcohol abuse could be signalled through the appearance of the addict, marking them as deficient or abnormal in some way. While this reassuringly implies that the addicted body is easily identified and monitored, it also emphasises the way in which addiction was becoming an increasingly visible social disorder, drawing attention to unhealthy modes of consumption and the impact they had on domestic and professional life. A comparison of the characters of Nemo and Mrs Blackpool also reveals some essential variances. As discussed previously, the description of Nemo

associates him with ideas of the isolated Romantic addict, and there is a sense of residual pathos in his portrayal, representing his descent through the social hierarchy. In contrast, Mrs Blackpool seems to occupy a more limited space, both socially and discursively, and is consequently denied the eroded dignity that Nemo might be deemed to possess. Instead, the text suggests that her physical appearance corresponds with her ‘moral infamy’, meaning that although her body evades any sense of individual control, its function as signifier of her alcoholism readily alerts the social gaze to her disadvantaged position (p. 77). The text establishes Mrs Blackpool, like Krook, as a repulsive figure, her addiction and social disreputability problematically enmeshed in a way that reveals how disease and morality overlapped in Victorian popular culture. The fact that ‘it was a shameful thing even to see her’ implies the threat of moral contagion, framing her as a possible source of pollution or infection that could destabilise the wider social structures, not least the already precious but nonetheless precarious domestic sphere of Dickens’ world (p. 77). In the same way as Krook’s death physically contaminates his rag-and-bottle shop and the surrounding urban area, Mrs Blackpool’s degradation and squalor have the potential to taint those that view her.⁵⁹

The novel emphasises the impact of Mrs Blackpool’s alcoholism on her husband, rather than focusing on her own individual plight. After discovering her return to their home, Stephen seeks advice from Bounderby, relating the history of their marriage and his attempts to dissuade her from drinking. Stephen mentions that when they married, Mrs Blackpool

⁵⁹ Julia Kristeva writes: ‘There looms, within abjection, one of those violent, dark revolts of being, directed against a threat that seems to emanate from an exorbitant outside or inside, ejected beyond the scope of the possible, the tolerable, the thinkable. It lies there, quite close, but it cannot be assimilated.’ When discussing one of ‘the most elementary and most archaic forms of abjection’, that of food loathing, Kristeva describes the ‘spasms and vomiting that protect me. The repugnance, the retching that thrusts me to the side and turns me away from defilement, sewage, and muck. The shame of compromise, of being in the middle of treachery. The fascinated start that leads me toward and separates me from them.’ The addict can be understood as representing a form of the abject, inspiring this form of ‘repugnance’, as seen in the depiction of Mrs Blackpool’s physical form and Krook’s death. The dual responses of fascination and repulsion associated with abjection also echo the narratives’ complex exploration of the addicted body. See Julia Kristeva, *Powers of Horror: An Essay on Abjection* (New York: Columbia University Press, 1982), pp. 1 and 2.

“were a young lass – pretty enow – wi’ good accounts of herseln. Well! She went bad – soon. Not along of me. Gonnows I were not a unkind husband to her” (p. 81). Stephen’s simplistic description of his wife’s alcohol addiction suggests a wider reliance on an established moral standard of behaviour, rather than on what would have been an underdeveloped yet evolving medical framework of symptoms and disease. Stephen also denies influencing his wife’s consumption of alcohol, his assertion that he was not an ‘unkind’ husband intimating that Mrs Blackpool’s alcoholism is an inherent moral failing, rather than a response to environment or circumstances. Bounderby confirms his knowledge of Stephen’s marital disharmony, stating that ‘[s]he took to drinking, left off working, sold the furniture, pawned the clothes, and played old Gooseberry’ (p. 81). Bounderby’s words emphasise how her addiction is understood to compromise and threaten the domestic sphere and familial cohesion. By selling the furniture and pawning clothes, Mrs Blackpool literally deconstructs the marital home, making explicit the damaging impact addiction could have on significant social institutions.

As well as contaminating their marriage, her continued existence denies Stephen the opportunity to form a healthy and successful union with Rachael. The text reiterates the impact of Mrs Blackpool on this potential relationship by contrasting her presence in the home with that of Rachael. During the novel, Stephen invites Rachael and Mrs Pegler to take a cup of tea with him, and, as they approach his house, he reflects on his domestic situation:

Stephen glanced at his window with a dread that always haunted his desolate home; but it was open, as he had left it, and no one was there. The evil spirit of his life had flitted away again, months ago, and he had heard no more of her since. The only evidences of her last return now, were the scantier moveables in his room, and the greyer hair upon his head. (pp. 174–75)

This is immediately contrasted with a sense of domestic harmony associated with Rachael’s presence in his home:

He lighted a candle, set out his little tea-board, got hot water from below, and brought in small portions of tea and sugar, a loaf, and some butter, from the nearest shop. The

bread was new and crusty, the butter fresh, and the sugar lump, of course [...]. Rachael made the tea (so large a party necessitated the borrowing of a cup), and the visitor enjoyed it mightily. It was the first glimpse of sociality the host had had for many days. (p. 175)

The juxtaposition of this scene of regulated conviviality and healthy consumption with the previous remnants of desolate and depleted domesticity demonstrates how the addict disturbs the wholesome sense of home that Rachael represents. The invocation of Mrs Blackpool immediately before this passage ensures that the reader is aware that the idealised domestic relationship is an impossibility when confronted with the reality of addiction. The associations with contagion that characterised Mrs Blackpool's physical description can also be noticed here, as the narrative details how she both destroys established marital relationships and prevents alternative normative ones from forming. The addict, therefore, has a destructive, disruptive impact on the domestic environment so cherished in Victorian culture.⁶⁰

As noted earlier, notwithstanding the impact of both temperance narratives and confessional texts such as De Quincey's *Confessions* during the early nineteenth century, neither Mrs Blackpool nor Krook are ever in a position to supply accounts of their own experiences of alcohol consumption.⁶¹ The absence of 'telling' or 'retelling' a personal narration of addiction contributes to its portrayal as an alien social concern, rather than an individual, medical issue to be treated, preventing their condition from being sympathetically perceived as an illness or complaint. If, as Warhol suggests, the addict 'comes to understand [...] their "disease"' through the articulation of their experience, Mrs Blackpool and Krook are both denied such self-definition, robbing them of their subjectivity and indeed their

⁶⁰ Zieger writes that 'alcohol and drug addiction is often represented supplanting or ruining marriage [...] addicts were each marked by the desire for a substance that seemed to surpass the desire for the conventional social bonds of kinship and citizenship and by an apparent rejection of the dominant ideologies of class mobility, reproductive sexuality, and gender compliance. The marriage ruined by a spouse's habitual drinking was perhaps the most popular addiction plot in Victorian realism'. See *Inventing the Addict*, p. 173.

⁶¹ Warhol (p. 102) notes that 'in the Dickens novels [...] the drunks are the objects of ridicule and scorn [...] or of fear and loathing [...] The novels' narrative structure grants the drunken characters no subjectivity, no speaking position from which to tell the story of their addiction.'

humanity.⁶² Arguably then, neither character's presentation by Dickens suggests addiction is a disease, even while both novels emphasise their social and cultural condition as habitual drunkards. Hence, in nineteenth-century writing, a clear opposition can be identified in the idea of addiction. Either it is configured as a personally experienced disease, which can be inscribed on the page and explored through narrative, or it is portrayed as a set of social behaviours, which only exist as external markers of a disruptive degeneration that signals alterity and grotesque inhumanity.

These different ideas of identity are fundamental to the conceptions of addiction in nineteenth-century culture. Zieger writes: 'Lacking an origin in a public social ritual like drinking, women's addictions emerge from private to public once women abandon their mid-nineteenth century social role of domestic and moral management in favour of [...] self-gratification'.⁶³ As we have seen, Mrs Blackpool rejects a domestic lifestyle, subverting the idealised concepts of gender (so cherished by Dickens) by departing from the marital home. It is this breach of the private and public spheres, whose roles in the construction of gender norms are foundational, that positions habitual drinking by women as a problematic and controversial behaviour. Mrs Blackpool discards the socially acceptable identity associated with domesticity, and assumes an alternative if marginal one, linked with a coarse moral and social code. In contrast, Zieger suggests that

[b]ecause drinking almost exclusively takes place within male homosocial contexts, it will always appear on the gamut of masculine friendship, mutual pleasure, intimacy, and homoeroticism. The characteristic hetero-normative telos from a young man's carousing and camaraderie to marriage and respectable comportment also traces an arc from the convivial, public life of social drinking to private, domestic, soberer pleasures.⁶⁴

⁶² Ibid., p. 98.

⁶³ Zieger, *Inventing the Addict*, p. 175.

⁶⁴ Ibid.

The way in which Krook's drinking is depicted within *Bleak House* parodies such male 'camaraderie', as Guppy and Weevle provide him with gin not from a feeling of friendship but in order to extract information from him. Their actions can be understood as further evidence of the systematic social corruption that characterises the text, as what could be 'heteronormative' behaviour in fact represents the predatory manipulation of a destructive individual disease. There is also an atmosphere of secrecy surrounding Krook's drinking habit, associated with his concealment of significant legal documents and personal correspondence. Thus, alcohol consumption transmutes in this instance from a sign of public, masculine companionship to one of private and solipsistic individual fragility.

This subversive ability of alcohol to encourage both convivial and covert habits is explored in an 1844 article published in the *Illustrated London News* examining the link between alcohol consumption and forms of undesirable public behaviour. Entitled 'Crime and its Causes', it examines recent court cases, the details of which have been made public in various publications, noting:

Drink is still a fertile source of crime of all kinds, and, notwithstanding the exertions of temperance and total-abstinence societies, and the improved tone of society generally in this particular, we frequently find cases of excess in this despicable propensity, the details of which are absolutely frightful.⁶⁵

This wording demonstrates the multifaceted attitudes towards alcohol consumption during the period, indexing both moral and social transgression. The link between alcohol and crime suggested here also emphasises that alcohol's threat to the body politic encompasses multiple forms of corruption, including legal systems as well as public health. Making a connection between crime and alcohol in this manner reconfigures the consumer as a criminal, rather than as an addict or patient requiring medical intervention. While certain concepts of heteronormative conduct or male camaraderie associated with alcohol suggest a controlled

⁶⁵ 'Crime and its Causes', *Illustrated London News*, 11 May 1844, p. 297.

and public behaviour that strengthens rather than destabilises social bonds, the acknowledgement that consumption of alcohol can lead to crime evokes ideas of hidden and furtive actions. The criminal and the addict are thus connected through their association with subversive and clandestine habits, which negatively influence the larger community and problematically blur distinctions between individual behaviour and social phenomena. Perceptions of alcohol itself are altered by its link to crime, with its status as a commodity becoming more troubling as its circulation and availability adumbrate the dissemination of a corruptive social influence.

The article also mentions details of a specific court case, published in *The Times*, which explores how alcohol consumption could disrupt the family unit. It reports that '[t]he wife of a respectable mechanic was prevented from drowning herself from London-bridge', and at a subsequent court hearing, 'her husband appeared to give an account of her':

The poor man drew a melancholy picture of the sufferings to which his wife's habits had for a long time exposed him. They had been married 11 years, and frequently had she during that period sold all the furniture, including the very beds, and the clothes which covered the beds. Despairing [...] he determined to resign his situation, and to take her and their children to America. Thither they repaired, but the change of climate produced no alteration in those depraved habits which had inflicted so much domestic unhappiness [...] He accordingly brought her back [...] but the conduct of the wretched woman became worse and worse, and, alarmed at the example she held out to the children, he determined to let her have nothing except through the medium of the workhouse, to the authorities of which he made such allowance for her as they considered it right to demand.

The husband's narrative anticipates that of the fictional Blackpools in *Hard Times*, focusing on the way in which the woman's alcohol consumption affects her matrimonial situation, rather than on the woman as an individual addict. Just as Mrs Blackpool is denied a voice in *Hard Times*, the anonymous woman of the article has no opportunity to articulate her own experience of addiction, as her husband's account is given precedence over hers. The description of her selling furniture to fund her habit is a particularly manifest demonstration of the way in which this kind of behaviour by women was seen to deconstruct domestic

stability. Not only does the woman physically dismantle the family home, she is also perceived to threaten both her husband's working-class respectability and her children's potential position within society. In this way, the addict's behaviour is shown to have deleterious implications both privately and publicly, the court case and newspaper reports demonstrating early Victorian preoccupations with excessive consumption and its consequences.

'Ethereal Experiences': Chemical experimentation/recreation

As the previous sections have shown, various publications of the 1840s and 1850s scrutinised the use of chemical substances and habitual alcohol consumption. A feature in *Punch* published in June 1847, entitled 'Ethereal Experiences', comments that

the use of Ether is superseding that of alcohol, for the production of 'agreeable excitement'. The ladies, who used to patronise the gin-shop, now drop in at the chemists', to call for their 'ounce of Ether and a suction-pipe', instead of the classical 'quartern and three outs'.⁶⁶

This supplanting of alcohol by ether suggests an environment in which innovative or novel substances were sought after for recreational purposes, rather than being restricted to medical or scientific applications. While the gin-shop could represent a site of problematic socio-economic dynamics, the chemist's suggests a form of subversive pharmacological development that threatened to introduce unknown physiological responses. The fact that its consumers were female also emphasises the way in which the private domestic sphere associated with women was perceived as at risk through increasing exposure to commerce and public forms of trade. The satirical article reproduces correspondence ostensibly received from users of ether, 'describing the effects of the new stimulant'. The first letter is from 'Cimabue Potts, Historical Painter', who writes: 'I have imbibed Ether, and shall continue to

⁶⁶ 'Ethereal Experiences', *Punch*, 26 June 1847, p. 259.

do so till I have produced a work destined for immortality, which I confidently expect to do next week'. The piece draws upon the established literary and cultural trope of the masculine, creative drug user, irreverently positioning the use of ether within a tradition of artistic consumption and production. By juxtaposing the name 'Cimabue', an Italian painter of the thirteenth century,⁶⁷ with the bathetically quotidian 'Potts', the article ridicules not only the perceived connection between drug use and creativity, but also ether's potential to contribute to any form of artistic creation.

The letter then gives an account of the experience of taking ether, describing the 'First Stage' of the physiological impact, where the artist '[i]maged myself in Rome', before the 'Second Stage' in which he '[f]elt immortal, and was congratulated by the daily and weekly papers'. The content of the illusions caused by the ether again associates the drug with an artistic, Romantic milieu, as well as positioning the drug user within an elite creative coterie. The recording of the stages of drug use and the feelings produced also echoes and mimics the way in which earlier dabblers such as Davy and De Quincey documented their respective experiences with nitrous oxide and opium.⁶⁸ The satirical treatment of the use of ether, and its possible effects on the mental and physical state of those who consume it, not only acknowledges the enduring popularity of the perceived link between chemical stimulants and artistic vision: it also returns the discourse to a masculine and public environment, away from the world of female consumers with which the piece began. During the 'Third Stage' of his 'ethereal state', Potts imagines that he has '[p]roduced an historical picture, 25 feet by 15, representing the "Discovery of the dead body of Harold after the Battle of Hastings"', earning him 'the premium of £700 from the Fine Arts Commissioners'. This vision is juxtaposed with

⁶⁷ Cimabue, also known as Cenni di Pepo, was born in Florence in 1240 and was associated with mosaics as well as painting. See Giorgio Vasari, *The Lives of the Artists* (Oxford: Oxford University Press, 2008), pp. 7 – 14.

⁶⁸ See Humphry Davy, *Researches, Chemical and Philosophical; Chiefly concerning Nitrous Oxide; or Dephlogisticated Nitrous Air, and its Respiration* (London: Joseph Johnson, 1800) and Thomas De Quincey, *Confessions of an English Opium-Eater*, ed. by Grevel Lindop (Oxford: Oxford University Press, 2008).

the ‘Last Stage’ of intoxication, in which Cimabue ‘[r]ecovered and found myself, with the bladder empty, in the Goose and Gridiron’. The humiliation of Cimabue’s empty bladder brusquely deflates the lofty associations of his vision, and the contrast of the notable historical scene and artistic success with the deflatingly prosaic urban environment reveals the reality of consumption, locating the use of stimulants within a recognisable and accessible topos.

The second piece of fictional correspondence in the article is from ‘Thomas Lint, a Student at Bartholomew’s’ and relates the way in which ‘[e]ther parties are all the go amongst our fellows’. While the drug is here associated with the medical profession, the colloquial and trivial tone emphasises a recreational and frivolous attitude, portraying the ways in which chemical stimulants could develop into popular objects of fashionable consumption. The ‘ether parties’ attended by the ‘fellows’ of St Bartholomew’s Hospital suggest a male camaraderie similar to that traditionally associated with pubs. Such associations consequently present the use of ether as less controversial, a pastime which can be contained within prescribed social boundaries. Lint’s letter also records various stages and sensations of intoxication. During the ‘[f]irst ten minutes’, he notes that he felt ‘[a]ll-overish, with a tendency to pitch into opposite neighbour, succeeded by a lively sense of my own importance’. This is followed, in the ‘[s]econd five minutes’ by a ‘severe flood of tears’ and ‘a surprising imitation of Herr Von Joel, and a general challenge to the company’. The swift and varied gamut of emotional and physical states suggests a lack of physiological and mental control, but also mimics the more methodically recorded observations of figures such as Davy and De Quincey.⁶⁹ The name ‘Herr Von Joel’ may refer to a performer who

⁶⁹ As well as diaristic and experimental traditions, a literary one can also be traced. The ‘Tales of Terror’ published by *Blackwood’s Edinburgh Magazine* until the 1830s similarly explored and recorded, in detail, the physiological and mental reactions to dangerous and extreme situations. In one narrative entitled ‘A Night in the Catacombs’, the narrator recounts his experience of terror: ‘I yielded up every faculty to the influence of an ill-defined and mysterious alarm. My eyesight waxed gradually dull to all but the fleshless skulls that were glaring in the yellow light of the tapers – the hum of human voices was stifled in my ears [...] I felt nothing but a

frequented Vauxhall Gardens in the early 1830s and the early 1840s.⁷⁰ The fact that Lint imitates this performer, rather than a more intellectual literary or cultural figure, again emphasises the mocking tone with which ether is discussed. The lowbrow figure of entertainment does, however, correspond to the text's association of ether with popular recreation, as opposed to the more esoteric pursuits of Coleridge, Davy and De Quincey.

In professional publications such as *The Lancet*, the discussion of ether use emphasises its potential for medical applications. An article from April 1847 entitled 'On Ether-Vapour: Its Medical and Surgical Uses' by John Gardner describes the 'attempts to discover its value as a therapeutic agent so universally in progress' and states that these efforts are 'so important as to demand from every one who possesses any information, or who succeeds in eliciting any new facts, their immediate publication'.⁷¹ This suggests not only how Victorian medical professionals positioned ether within evolving surgical practices, but also the importance of developing pioneering techniques. Ether, therefore, occupied a place within the Victorian medical *habitus* that prioritised experimentation and investigation – one that was itself satirised by the likes of *Punch*, which stressed personal experience rather than professional analysis. The request for 'immediate publication' also reveals the importance of periodicals such as *The Lancet* in advancing medical research and professional discourse. Gardner discusses the diverse medical opinions regarding the use of ether in surgical procedures, noting that 'some surgeons have refused to use ether vapour on the ground that its effect is simply intoxication' (p. 349). Thus, problematic duality emerges in this

painful sense of oppression from the presence of others, as if I could not breathe for the black shapes that were crowding near me [...] To the rapid whirl of various sensations that had bewildered me ever since I left the light of day, a season of intense abstraction now succeeded [...] How long I stood motionless in this condition I know not [...]. See Daniel Keyte Sandford, 'A Night in the Catacombs', *Blackwood's Edinburgh Magazine*, 4.19 (October 1818), 19–23 (p.21).

⁷⁰An issue of the *Illustrated London News* from 1844 mentions in its report of an evening pantomime that 'Herr Von Joel considerably added to the evening's amusement, by giving his extraordinary Imitations of Beasts, Birds, &c'. See 'Pantomimes and Christmas Pieces', *Illustrated London News*, 28 December 1844, p. 408.

⁷¹ John Gardner, 'On Ether-Vapour: Its Medical and Surgical Uses', *The Lancet*, 3 April 1847, pp. 349–54 (p. 349). All further references are given parenthetically in the text.

discussion of ether, whose potential as a pioneering anaesthetic conflicts with its links to undesirable behavioural patterns of indulgence or excessive consumption resulting in ‘intoxication’.

The article also discusses the indeterminate narcotic effects of ether, with Gardner remarking that

the etherized state appears to me altogether different from any intoxication I have ever witnessed [...] [as] in far the majority of cases, the recovery of the etherized person is sudden, precisely resembling the act of waking from sleep; and in no case have I seen sickness, or heard of headach [*sic*]. (p. 350)

He then speculates whether it would ‘be possible, with any form of alcohol, to intoxicate persons unaccustomed to its influence without both these symptoms occurring on recovering from unconsciousness?’ This comparison of ether with alcohol, although ostensibly differentiating the two, nevertheless reveals their common ability to influence the body and produce states of insensibility. Gardner’s assertion that recovery from ether inhalation is ‘sudden [...] resembling the act of waking from sleep’ does, however, arguably suggest that the impact of ether on the body is less disruptive and resembles or replicates normal physical processes, as opposed to the abnormal symptomology of alcohol. Gardner also details two cases in which the deaths of patients had been incorrectly attributed to the administering of ether during surgical operations. In his description of one of the cases, he observes that ‘whether the inhalation continued during the whole time the operation lasted, or not, witness could not say’. Gardner instead emphasises that professional control protocols were ignored, possibly leading to the misuse of ether, and further notes how unreliable or incomplete evidence compromised any rigorous investigation of the circumstances which led to the patient’s death: ‘it is the reverse of benevolent and praiseworthy, to obstruct, by a hasty and ill-considered judgement, the employment of an agent which, judiciously used, promises so greatly to benefit mankind’ (p. 351).

The article goes on to examine the history of the medicinal uses of ether. It identifies Dr Richard Pearson as the first to propose ether as ‘a therapeutic agent by inhalation’, in his 1794 pamphlet, *A Short Account of the Nature and Properties of Different Kinds of Airs* (p. 351).⁷² Gardner quotes from Pearson’s notes on his patients’ inhalation of ether, including one woman who ‘said she was somewhat giddy after every inhalation’. Antedating Davy’s experimentation with nitrous oxide, Pearson employs a similar discursive register, identifying a problematic and inextricable link between medical or scientific experiment on the one hand and personal experiences of pleasure caused by the inhalation of ether on the other. Gardner’s article attributes ether’s omission from subsequent medicinal procedures to the ‘loose methods of experimenting, and the total inconclusiveness of the attempts to employ gaseous remedies’ found at the Pneumatic Institution,⁷³ emphasising not only the perceived importance of rigorous scientific investigation but how pertinent experimentation was to the realities of contemporary medical practice. The history of ether use thus reveals the ways in which substances could be introduced to or withheld from the public, owing to their role within an evolving but unstable system of scientific experimentation. The first use of ether in a surgical procedure is attributed to Dr W. T. G. Morton in 1846, an American dentist practising in Boston, who experimented with the gas on himself before applying it to his patients. The article notes that this meant ‘often incurring no small danger, *and once during that period with very nearly fatal results*’, again stressing the potential risks inherent in

⁷² Richard Pearson, *A Short Account of the Nature and Properties of Different Kinds of Airs, so far as Relates to their Medicinal Use; Intended as an Introduction to the Pneumatic Method of Treating Diseases, with Miscellaneous Observations on Certain Remedies Used in Consumptions* (Birmingham: Baldwin, 1794). Pearson was a physician at the Birmingham General Hospital and a member of the Royal College of Physicians, London.

⁷³ The Pneumatic Institution, situated in Bristol from 1799 to 1802, was founded by the physician and chemist Thomas Beddoes in order to conduct research on the physiological effects of gases, such as oxygen and hydrogen. It was at the Pneumatic Institution that Humphry Davy ‘made his name, experimenting with nitrous oxide gas and recording its effects in his notebooks, letters, poetry, and in a published book.’ See Sharon Ruston, ‘The Art of Medicine: When Respiring Gas Inspired Poetry’, *The Lancet*, 2 February 2013, pp. 366–67 (p. 366). See also Trevor H. Levere, ‘Dr Thomas Beddoes and the Establishment of his Pneumatic Institution: A Tale of Three Presidents’, *Notes and Records of the Royal Society of London*, 32.1 (July 1977), 41–49.

working with chemical substances, and the unpredictable boundary between remedy and poison (p. 353). The use of ether indexes the problematic connection between drug and doctor in the process of personal experimentation during the long nineteenth century.

Gardner also quotes from a paper published in the *Journal of Science and the Arts* which notes that '[w]hen the vapour of ether, mixed with common air, is inhaled, it produces effects very similar to those occasioned by nitrous oxide' (p. 352). Both Gardner's article and the paper he cites refer to Davy's research of and experimentation with nitrous oxide, locating ether within an established tradition of scientific enquiry, despite its disruptive imbrication of the professional and recreational milieus. Davy's notes on his experiments with nitrous oxide discursively combine pleasurable feelings with scientific investigation, and this is echoed in the article's discussion of ether.⁷⁴ The paper quoted goes on to state that, on inhalation of the vapour, 'a stimulating effect is at first perceived' and 'a sensation of fulness is then generally felt in the head', resulting in 'a succession of effects similar to those produced by nitrous oxide'. While this repeats the comparison with nitrous oxide, the description of the influence of ether avoids overt impressions of pleasure, so that the shadow of recreational use is diminished and ether is positioned as a purely medicinal substance. The citation from the paper concludes with the admonition that '[i]t is necessary to use caution in making experiments of this kind. By the imprudent inspiration of ether, a gentleman was thrown into a very lethargic state [...] considerable fears were entertained for his life'. The discussion of ether thus acknowledges its potential dangers and the implicit perils of

⁷⁴ Davy's notes on his experiments with nitrous oxide include the following observation: 'The first feelings were similar to those produced in the last experiment; but in less than half a minute, the respiration being continued, they diminished gradually, and were succeeded by a sensation analogous to gentle pressure on all the muscles, attended by an highly pleasurable thrilling, particularly in the chest and the extremities. The objects around me became dazzling and my hearing more acute. Towards the last inspirations, the thrilling increased, the sense of muscular power became greater, and at last an irresistible propensity to action was indulged in; I recollect but indistinctly what followed; I know that my motions were various and violent.' See Davy, pp. 457–58.

experimentation itself, emphasising the dual nature of the *pharmakon*, as well as the unstable position of the *pharmakeus*.

The problematic effects of ether are more sensationally explored in an article published in the *Illustrated London News* in February 1847, entitled ‘Inhalation of Ether (from a Correspondent)’. The writer begins by describing ether as ‘[t]his most remarkable and providential gift to humanity’, before providing information regarding ‘an experiment which accidentally occurred to myself.’⁷⁵ Again, the article emphasises the link between the substance and personal experimentation, the use of the word ‘accidentally’ implying a lack of scientific precision. The author relates the inconsistencies resulting from the inhalation of ether, including the fact that the experimenter had to

dilute the Ether vapour, rather than promote its activity by the application of heat [...] [and] afterwards repeated the same experiment, under the same circumstances, on a robust person about twenty years old, and found the same strength of mixture which produced suffocation with me was inhaled by him without the least inconvenience.

These observations reveal that not only can variations occur in the preparation of the substance as its usage evolves and is subjected to further interrogation, but that its physiological impact on the people who inhale it can differ dramatically. Ether’s status within Victorian medical discourse is, therefore, unstable and inconsistent, associated with individual or private, rather than collaborative and public, experimentation. The article notes that the ‘robust person’ responded to the ether by being ‘seized with a fit of laughter, clapping his hands together at the same time, in the most violent manner, precisely as though he had been under the influence of nitrous oxide.’ This reaction was so ‘extravagant and ludicrous’ that ‘several gentlemen present believed it to be an affectation’, further confirming the similarities between ether and nitrous oxide, as well as a belief that its symptoms can be performed or imitated.

⁷⁵ ‘Inhalation of Ether’, *Illustrated London News*, 6 February 1847, p. 91.

This motif of taking on a specific identity associated with personal use of chemical substances becomes more persistent as the article continues. The narrator explains that he

had not the least intention to pursue the experiment further than testing it under several degrees of dilution, but, alas! when I had arrived to that part of the experiment [...] I was spell-bound: I had imbibed the fascinating draught and was transported into other worlds [...] I experienced a sensation stealing softly through my whole frame of the most extatic and indescribable pleasure.

Again, comparisons arise with the narrative of personal encounter popularised by De Quincey, with the article utilising the language of Romantic captivation, focusing on psychological and physical experiences rather than objective medical analysis. The narrator consciously takes on the character of the *pharamkeus*, emphasising his own connection to the substance and employing recognisable Romantic inflections in order to assert the connections between himself and figures such as De Quincey: ‘I recollect reading an extract from a work entitled “The Opium Eater”. The feelings and sensations there so powerfully portrayed, are an exact parallel, and were recalled to my mind whilst under the influence of the Ether’. Not only the sensations of De Quincey’s habit, but the way in which they were articulated, are unambiguously equated with the narrator’s own experience with ether, locating this portrayal of ether use within a literary rather than a medical tradition. While this is perhaps unsurprising given the publication in which the article was published, it nevertheless reveals that drugs and their experimental usage were staged in the popular press, rather than being restricted to the more specialist readership of the professional journals. The article’s byline, ‘Inhaler’, reaffirms the motif of the author’s identity constructed through his relation to the chemical substance.

While the article seems to emphasise the personal experience of inhaling ether, it nevertheless engages with scientific, regulated processes of administering the gas to patients.

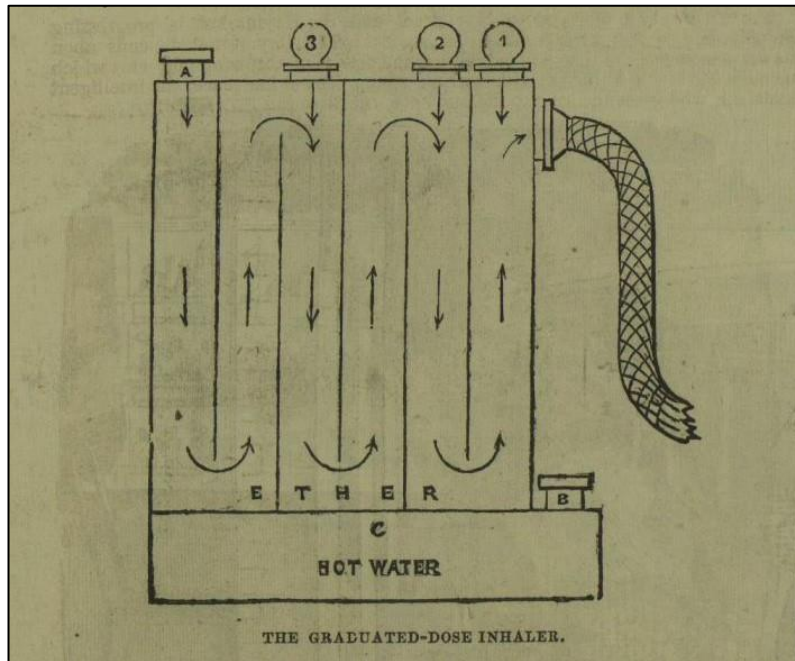


Fig. 1.13. 'The Graduated-Dose Inhaler', *Illustrated London News*, 6 February 1847, p. 91.

It includes a diagram of 'The Graduated-Dose Inhaler' (see Figure 1.13, above) and describes the instrument's features, including 'two chambers; the upper one to contain the Ether, and the lower one to contain warm water', suggesting that it is 'extremely beautiful in theory, and appears to possess all the necessary qualities'. The application of knowledge acquired through experimentation to the practicalities of overseeing a patient's inhalation of ether reveals a shift within the article: from the previous focus on the individual to one on more general surgical practice. In this way, the article differs fundamentally from the intertexts it echoes, as, rather than constructing a solipsistic drug user as its organising subject, it actively engages with contemporary developments in medical procedures or routines.

The account of the Inhaler continues as the article describes 'several openings for the entrance of air; it is by these openings that the strength of the dose is graduated', as well as mentioning the fact that 'the Ether can, at any time, be turned off [...] it gives the operator a perfect command over the power of the instrument, without, in any degree, disturbing the patient'. These features emphasise a process of control or governance that challenges the tone

of pleasurable excess found in the earlier relation of personal experiences of ether inhalation, suggesting a bifurcation in how the use of substances were perceived by Victorian commentators. While individuals connected with the scientific or medical profession arguably established experimental practices characterised by a lack of control, the administration of ether to patients here is clearly associated with a sense of discipline and restraint. The opposing tones of the article thus inflect wider distinctions regarding the contested position of ether within the private and public spheres.

While the introduction of innovative chemical substances was presented as both fascinating and frightening in early Victorian periodicals, the use and misuse of established drugs also remained pertinent to the period's developing medical and professional *habitus*. A letter published in *The Lancet* from June 1851, signed 'Medicus', addresses 'Teetotalism and Opium-Taking' and suggests that the use of opium is 'much on the increase in the rural districts of this country.'⁷⁶ The letter poses the question of whether it is 'possible to reform a person who has been long addicted to the practice of taking opium', revealing both a worrying intensification of the perceived misuse of this substance and the uncertainty regarding treatment of the habit itself. The suggestion that the use of opium is becoming more popular in the 'rural districts' also challenges the established conventions of urban isolation associated with figures such as De Quincey, emphasising the contemporary realities of substance misuse rather than long-standing conventional tropes. The letter notes:

We all know the injurious effects its long-continued use produces both on body and mind; but it is only the unfortunate victims themselves who can depict the miserable depression, the indescribable uneasiness, they experience, when deprived of the accustomed dose.

While this presumes sufficient medical knowledge of the physical and mental impacts of sustained opium use, it also positions the addicts themselves as figures of insight,

⁷⁶ 'Medicus', 'Teetotalism and Opium-Taking', *The Lancet*, 21 June 1851, p. 694.

highlighting their unique ability to articulate the experience of addiction. Thus, the article suggests that the configuration of medical and cultural understandings of drug habituation was contingent upon a collaboration between professional expertise and individual experience. Referring to the addicts as ‘victims’ does, however, mitigate some of their perceived authority, suggesting diminished control or capability.

The letter considers the possible causes for the growth in opium users, suggesting that ‘[s]ince the crusade of the teetotallers against spirit-drinking, there is great reason to believe that the practice of taking opium is on the increase’, explicitly linking temperance with the rise in usage of alternative stimulants. In this way, *Medicus* proposes that opium is popularly considered a recreational substance that can be substituted for forms of alcohol, rather than being a medical drug restricted to professional use. The mention of temperance, or teetotalism, stresses the multifarious cultural responses to consumption of different substances within the popular sphere. While the discourse of temperance focused on social or moral models of excess, this letter instead initially emphasises the detrimental physiological and psychological impact of long-term opium addiction. Thus, the proposed link between declining alcohol consumption and increased opium use reveals the complex discursive field that framed social configurations of consumption. The letter also mentions that ‘one of the first of our physicians describes [opium] as a virtuous and comparatively harmless species of excitement, compared with gin-drinking’, treating it with ‘undue lenity’ which ‘may unintentionally contribute to the extension of the vice’. This reveals an underlying conflict within Victorian professional circles, in which perceptions of substance use were contingent upon the fluid taxonomies of evolving medical assessment. *Medicus* focuses on the potential risks of opiate use, exhorting his readers that the figures who diminish the real danger jeopardise the establishment of standardised and stable public understanding of the drug. The author suggests that this inconsistency among vocal professional figures generated confusing

popular understandings of the substance, meaning that public use of the drug simultaneously contravened *and* conformed to contemporaneous medical practice.

The letter seems to confirm this paradoxical attitude by distinguishing between types of opium use: ‘For those unfortunate creatures who daily resort to this baneful drug as a cheap species of intoxication, I have but little sympathy or commiseration’, but ‘there are others, especially among the middle classes of society, who resort to the use of opium, under the pressure of severe mental distress’. This reading suggests that the motivations for using opiates could be assigned to social categories such as class, rather than a physiological aetiology. While middle-class users of opiates could be sympathetically portrayed as patients in a medical context, the spectre of cheap, proletarian intoxication indicates an undesirable lifestyle at odds with both social mores and medical practice. This disparity continues as the letter relates how, for the middle-class patient,

[w]hen relief is obtained by such means, the practice soon becomes habitual. What was at first a moral solace is now converted into a physical necessity; while Time [...] only serves to strengthen the chains of that habit, into which his sufferings have betrayed him.

The bourgeois opiate user is exempted from accusations of excessive intemperance, with the focus turning instead on the overpowering nature of the substance and the almost involuntary habituation that results from using opiates. While the notion of intoxication suggests a pleasurable personal experience associated with irresponsible recreation, here the correspondent emphasises the distress of the addict, again portraying a patient rather than a disreputable individual. The letter demonstrates how contradictory concepts of addiction co-existed during the early Victorian period, and how that paradox often resolved itself on an axis of social status, which ranged from working-class addicts enslaved by their intemperance to middle-class patients who were victims of unintended pathological conditions.

The final section of the letter discusses the treatment of a specific patient. Described as an ‘unfortunate being’, the patient had experienced a ‘severe domestic trial’, and was ‘induced to resort to morphia as a means of procuring sleep’. This account continues to distinguish between motives for opiate use, as the drug user here is depicted not as using the substance for recreation, but rather from an unpleasant necessity. The patient is subsequently ‘unable to throw off the habit he has so unwittingly contracted’, emphasising his blamelessness, with the word ‘contracted’ suggesting contagion or contamination that supersedes individual volition. When the patient is ‘[d]eprived of the accustomed dose, which I should premise is not a very large one, he describes himself as “irritable, dejected, prostrate in body and mind, and utterly incapable of discharging the ordinary duties and business of life”’. Medicus continues to moderate the depiction of the patient’s drug use, mentioning that the dose taken is ‘not a very large one’, avoiding any suggestions of excessive consumption that might be perceived as otherwise irresponsible. While the discussions of substances such as gin and ether focused on the critical danger of excess, articulating both morally or socially reprehensible dissolution and unstable medical control, this letter suggests that, with respect to the use of opiates, even a controlled, moderate dose can be framed as an undesirable form of behaviour. This reflects a more substantive concept of medical control or restriction surrounding substances such as morphia, reconfiguring even usage that would not otherwise be considered physically dangerous. The fact that the patient articulates his own symptoms within the letter also reveals his status as a reliable narrator of his drug experience, rather than being presented as a morally dubious object of intemperance subject to an external gaze.

The letter concludes by seeking advice and information from the medical community. ‘Medicus’ asks whether he should ‘advise [his patient] to leave it off totally and at once, and trust to time and nature for relief’ or ‘recommend a gradual diminution of the dose’, or if there is some ‘other stimulant less injurious in its effects, yet still capable of preventing that

collapse of the system which assails every victim who wishes to reform'. The variety of possibilities reveals how the question of discouraging the use of opiates was one which preoccupied medical discussion throughout the period, and how it was associated with the continual development and scrutiny of treatment. While the idea of complete abstinence and relying on 'time and nature for relief' implies a form of remedy involving only a degree of professional intervention, the suggestion of an alternative drug posits ideas of further scientific research and investigation, as well as continued medical supervision of the patient and the substances they ingest. The letter also mentions that 'Coleridge used to assert that he could leave off when he chose [...] but I never knew but one who had permanently succeeded in his efforts at reform'. The reference to the Romantic poet acknowledges the enduring cultural legacy of drug use established by Coleridge and his contemporaries. The suggestion that Coleridge could 'leave off when he chose' implies a mastery over opiates, which contrasts with Medicus' scepticism regarding the ability of users to permanently renounce their habits. The letter's opposition between the singular individual experience of the drug user and the variability of cases encountered by the medic not only reveal the duality of opiates themselves, but also the complexity inherent in professional discourses of treatment.

Conclusion: 'Scopic' sensation

During the early nineteenth century, the widespread focus on observation – fundamental not only to the genre of realism, but increasingly found in specialised and popular journalism – drew attention to the dichotomy of concealment and visibility that characterised concepts of addiction. The articles and letters from *The Lancet* discussed in the first section of this chapter demonstrate how the consumption of alcohol formed part of this problematic locus of investigation. Their emphasis on both individual enquiry into specific medical cases and the encouragement of a wider sense of parity in how the profession viewed and treated alcohol

consumption encapsulates how the body and body politic were progressively equated and compared in an emergent culture of conscious self-examination. The importance of monitoring consumption gained significance as a social concern, a feature seen in both ‘Gin-Shops’ in *Sketches by Boz* and ‘The Dram-Drinker’. These sketches articulate a sense of individual circumstantiality, as well as demonstrating how personal experiences of addiction reflect larger paradigms of excessive or unhealthy consumption within the urban environment. My analysis of Dickens’ *Bleak House* and *Hard Times* reveals how addiction and the addicted body could occupy seemingly marginal spaces but nevertheless infect and undermine domesticity and social stability. The figures of Krook, Nemo and Mrs Blackpool problematically conflate the private and public spheres, enabling the exploration and critiques of both personal and social issues of consumption. The final section of the chapter draws out the problematic status of chemical substances within the more specific world of medicine, with the blurring of experiment and recreation revealing how specialised use of drugs was itself as convoluted as popular habits of consumption. Addiction brings to the fore the dichotomies of personal/public and visible/marginal, as well as the fundamental duality of the *pharmakon* itself, encapsulating the complexities of the ‘scopic culture’ of the early nineteenth century.⁷⁷

The intense sense of scrutiny that characterises the texts and articles considered has the contradictory effect of revealing how the individual addicted body could be concealed, yet remain connected to wider social tensions or patterns. The rise in cases of social documentation corresponded with a growing sense of communal responsibility that focused on how addicts and their patterns of behaviour could disrupt cultural norms, as well as how drugs and alcohol were represented to the public by the medical profession. The perceived connection between body and body politic was fundamental to a society so preoccupied with

⁷⁷ Armstrong, p. 3.

the concept of self-examination, meaning that addiction was increasingly framed by a social, rather than a personal, discourse.

The next chapter will move on to examine how addiction and the addict were portrayed and explored in periodical culture during the 1860s and 1870s. This period saw an increase in the number of periodicals published, as well as the rise in popularity of sensation fiction, a genre that continued to demonstrate a fascination with ideas of consumption. In contrast to the themes of social examination that broadened the gaze outwards from the addict, sensation narratives focus inwards, transforming the addicted body into the locus of multiple fears. Rather than occupying marginal roles in the narrative, sensation fiction frequently brings addicts and addiction to problematic central space, revealing a growing preoccupation with the abnormal or deviant. A greater fixation on the drug as a consumable object is also found in sensation novels, articulating anxieties about the medical marketplace and how commodities were circulated. In correlation with this focus on the addicted body is an emphasis on how the text itself has been reconfigured as a consumable commodity, and a drug-like substance, which comes to be associated with dangerous or excessive consumption. Sensation fiction therefore articulates how the text itself can be seen as a *pharmakon*, casting doubt on its status within society, as well as the integrity of the reader's body.

Chapter Two

A ‘fuller and darker bearing’: Sensations and Sensation Fiction 1860–79

In *Moulding the Female Body in Victorian Fairy Tales and Sensation Novels* (2016), Laurence Talairach-Vielmas notes how the fairy tales in particular ‘often play with language’ and that ‘[t]hrough their reworking of traditional tales, Victorian experimental fairy tales and fantasies play with words in order to stress the instability of signs. No longer fixed and becoming ambiguous, signs seem to float free, culminating in nonsense’.¹ This ‘instability’ and ambiguity of language that characterised emerging literary works of the 1860s and 1870s recalls strikingly the duality inherent in the *pharmakon* and emphasises the contemporary significance of its ability to evade or manipulate categorisation. Talairach-Vielmas’s work identifies how, at mid-century, language more widely was increasingly subject to deconstruction and shown to embody such slippage, revealing how the word and text were examined and identified as potentially subversive or deviant. When discussing sensation fiction, Talairach-Vielmas writes that ‘the sensational female characters are duplicitous and treacherous, and suggest the discrepancy between appearance and reality’. Thus, the female body itself becomes a text, a *pharmakon*, which occupies and represents multiple spaces and meanings, problematically demonstrating that it can be ‘simultaneously angel and demon, beauty and beast, undercutting feminine stereotypes traditionally associated with passivity and victimization’.²

Texts/words and female bodies were, therefore, shown to be capable of a disturbing dissemblance that could dismantle the structured ideologies of the Victorian world.³ This

¹ Laurence Talairach-Vielmas, *Moulding the Female Body in Victorian Fairy Tales and Sensation Novels* (London and New York: Routledge, 2016), p. 6.

² *Ibid.*, p. 7.

³ ‘Among the most shocking aspects of the sensation novel (to contemporary reviewers) were its focus on bodily sensations – of fear, anxiety, and embarrassment as well as sexual feeling – and its representation of its female protagonists not simply as passive victims of male power and their own feelings, but also as actively desiring

multifarious dynamic was arguably most visible in the sensation genre, but was also a fundamental component of the advertisements that were found throughout the Victorian world, including within the pages of periodicals and interspersed with works of fiction and journalism. Advertisements both reflected and shaped how the body was represented and perceived within popular culture, this symbiotic relationship revealing developing economic and commercial practices and changing domestic habits. Within advertisements, language's ability to evolve and mutate enabled the innovative concepts of the commodity and consumer to be created, contributing to the shifting nature of the marketplace. This complexity is explored in Sara Thornton's *Advertising, Subjectivity and the Nineteenth-Century Novel: Dickens, Balzac and the Language of the Walls* (2010), in which she observes that advertising was 'a newly visible form of representation which was changing social structures and public and private behaviour.'⁴ Thornton's work emphasises the extent to which advertisements would have been a fundamental component of the mid-century city's composition and of a person's visual experience of their environment. She notes that '[t]he printed matter that an average citizen might see on the streets London [...] grew vertiginously in the mid-nineteenth century, helped by improved printing techniques, cheaper paper and the thrust given to the advertising of commodities by the Great Exhibition of 1851, as well as the lifting of taxes on advertising, newspapers and paper itself'.⁵

Thus, the profusion of advertising can be seen as part of an increasingly self-aware commercial sphere that evolved as a result of the growing social significance attached to both the consumer and the commodity, as well as technological advances that enabled greater

and, in some cases self-consciously manipulating the desires of others in order to circumvent the usual constraints of their gendered roles and get what they want'. See Lyn Pykett, 'Sensation and the Fantastic in the Victorian Novel', in *The Cambridge Companion to the Victorian Novel*, ed. by Deirdre David (Cambridge and New York: Cambridge University Press, 2001), pp. 192–211 (p. 204).

⁴ Sara Thornton, *Advertising, Subjectivity and the Nineteenth-Century Novel: Dickens, Balzac and the Language of the Walls* (Basingstoke: Palgrave Macmillan, 2010), p. 1.

⁵ *Ibid.*, p. 4.

access to the home and individual. Thornton also examines the impact of the profusion of advertising on individual reading practices, noting that

the experience of reading was becoming a matter of having text drift or rush past the eye [...] small frames pass in front of the eye in quick succession, which has the effect of reducing text to contiguous units [...] We might say that the act of reading itself becomes serialized [...] it implies a taking in by the eye of a whole framed space in one go or gulp before moving on to another.⁶

Correlating with how fictive texts were increasingly published in instalments within periodicals, advertisements reconstructed the ways in which information could be collected, disseminated and consumed. As well as altering how texts were read, advertisements also manipulated the meaning of language, as

advertisers themselves picked up on the unpredictable fate of the physical medium of language – paper and ink and their vulnerability to weather or to defacement or to the whimsical readings and inattentions of passers-by – and from this formed an understanding of language’s sliding, shifting nature.⁷

As the consumption of texts by the individual and collective reader(s) evolved to reflect this multitudinous landscape of advertisements and unreliable form of language, reading itself was increasingly identified as potentially deviating from recognised or established patterns of behaviour, destabilising both domestic security and the individual body.

The 1851 article ‘Bill-Sticking’, written by Charles Dickens for *Household Words*, notably emphasises the sense of excess and invasion already associated with advertising in the capital, remarking how bills and placards infiltrate ‘uninhabited houses [...]. dead walls [...] omnibuses’, the ‘very stones of the pavement’, as well as ‘enormous vans, each proclaiming the same words over and over again from its whole extent of surface’.⁸ An uncanny urban landscape emerges, marked by emptiness or death and populated by structures now transformed into fungible symbols of commerce, in which signification is detached from any viable referents. In a world so saturated with the evidence of trade, reading was not only

⁶ Ibid., pp. 8–9.

⁷ Ibid., p. 27.

⁸ Charles Dickens, ‘Bill-Sticking’, *Household Words*, 22 March 1851, pp. 601–06 (p. 601).

associated with the individual body but with the socio-economic body politic and the state of its commercial market. The ideas of immoderation found within Dickens' article were arguably mirrored by the popular attitude to medication at mid-century. An expanding and lively medical marketplace had transformed the product of medicine into a valuable and in-demand commodity: as Roy Porter notes, 'the empire of disease, and the relative inefficiency of medicine, jointly paved the way for lively medical pluralism', creating a multifarious environment of orthodox and alternative medical authorities.⁹ To construe the medical marketplace as driven by an oppositional conflict between professional and unqualified medicine vendors is a reductive perspective, however, which overlooks the element of entrepreneurial economic competition and interaction which existed. Within popular periodicals, advertisements demonstrated this sense of pluralism, as in an issue of the *Illustrated London News* which contains an advert for 'Dr Locock's Pulmonic Wafers'.¹⁰ Here, the use of the medical appellation hints that an association with the qualified establishment is a successful marketing trope, emphasising the problematic way in which medicine was immersed in a commercial discourse and culture, and how medical terms were reproduced within the language of advertising.

⁹ Roy Porter, *Health For Sale: Quackery in England 1660–1850* (Manchester and New York: Manchester University Press, 1989), p. 25.

¹⁰ 'Dr Locock's Pulmonic Wafers', *Illustrated London News*, 29 October 1870, p. 23.



Fig. 2.1 John Orlando Parry, *A London Street Scene*, 1835, Alfred Dunhill Collection

action for its buyers’ and ‘combine[d] medical discourse and commercial interest in trying both to create a gendered identity of the beneficiary of miraculous multipurpose pills and to expand the marketability of their pills in a scenario of constantly reinvented ailments and marketing targets’.¹¹ Through this portrayal of a gendered consumer and multifarious product, the patent medicine vendors sought to reflect and profit from domestic concerns, constructing a form of commerciality that shaped the consumer’s perception of their own body and the expectations placed on medical products. The advertisements published by patent medicine vendors encouraged consumers to examine and ‘read’ their own symptoms, effectively medicalising the individual’s experience of their corporeality and amalgamating the domestic with the commercial. As with the language of sensation, medical advertisements positioned the body as a text to be interpreted and the drug or medicine as a commodity whose power – and, therefore, marketability – was contingent on its mutable nature in treating multiple disorders. This reconfiguration of the body/text and the increasing focus on how language could manipulate and be manipulated corresponded with developments within the publishing industry that altered popular reading habits and subsequent perceptions of the consumption of literature.

This chapter will examine how the reader’s interaction with the text, whether a public encounter with advertisements or a private experience within the home, was subject to these instances of slippage. The work of Thomas De Quincey continued to exert significant influence on how addicts and addiction were framed, and the chapter will consider how this was made explicit through the discussion of his texts within periodicals, and implicitly through the discourse of both fictional narratives and medical articles. During the 1860s and 1870s medical pluralism continued, and the chapter will explore the inherent socio-economic

¹¹ Alberto Gabriele, *Reading Popular Culture in Victorian Print: Belgravia and Sensationalism* (New York: Palgrave Macmillan, 2009), pp. 87 and 88.

complexities of the marketplace and their impact on concepts of addiction through the examination of contemporary advertisements and the discussion of the pharmaceutical trade found in specialised periodicals such as the *British Medical Journal*. The chapter will then scrutinise the ways in which these problematic commercial exchanges influenced the depiction of drug use and abuse within serialised fiction, including that of Wilkie Collins and Charles Dickens. Underpinning this textual analysis will be a consideration of how texts themselves were increasingly viewed as subversive commodities, associated with fears surrounding excessive consumption and the disintegration of the public/private dichotomy. The fundamental connection between text and drug, as identified by Derrida, and the inconsistencies inherent within them convolute depictions of both the addict and addiction, revealing the essential instability of the body itself.

The enduring influence of De Quincey

The legacy of figures such as Thomas De Quincey continued in periodical culture of the 1860s and 1870s. In an article published in the *British Quarterly Review*, the autobiographical *Works of Thomas De Quincey* is discussed, demonstrating his continued relevance to the contemporary culture. The article explores the details given of De Quincey's childhood, noting that '[h]is sensibilities were to all his other senses like an exaggerating prism to the eyes', and that '[a]nother child's dream would have been the child De Quincey's nightmare'.¹² These phrases construct a narrative that presents De Quincey as an atypical and isolated individual, even in childhood description, seeming to prefigure his later identity of the Romantic addict. Ideas of unusual psychological sensitivity present the addict as a kind of fixed identity that was perceptible even when De Quincey was a child. The article goes on to

¹² 'The Works of Thomas De Quincey', *British Quarterly Review*, 38.75 (July 1863), 1–29 (p. 2). Subsequent quotations will be given in the main body of this chapter.

recount De Quincey's first experiences with opiates: 'the laudanum [...] suddenly opened up to him an elysium of sensation [...] The unspeakable relief and the sense of delicious ease [...] were followed by positive rapture throbbing through the whole frame and whole being' (p. 6). This reiteration of De Quincey's initial experience suggests that his account retains a form of cultural authority as a source of knowledge, rather than being replaced by purely medical or specialised language. The scrutiny of De Quincey's subjective physiological sensations also implies that a popular fascination with opiate use remained in place during the 1860s, forming an unstable perception of the drug and its powers. This retrospective examination of De Quincey's construction of the figure of the addict, and the discourse he shaped to articulate opium's bodily effects, demonstrate how his work continued to inform cultural conceptions of drug use.

This exploration of De Quincey's writing continues to focus on the physiological and psychological impact of opiates, recounting that consuming laudanum made him

more than eloquent and gave the power of enduring unheard-of fatigue; it gifted him with more than second sight, and made the gates of the spirit-world fly open at his approach and invite his wanderings amid all the glorious potencies of joy and being, of sight and sense, that lay beyond them. (p. 7)

The text constructs the addict as an almost supernatural figure, but although he is perceived as being able to transcend the human or material spheres of existence, enhanced physical senses are identified as a fundamental part of this individual experience. Thus, the spiritual journey is grounded in an awareness of human physiology. Initially, the addict is presented as neither a negative nor a dangerous figure, as the article focuses on the personal imaginative encounter rather than on what this particular individual's drug use represents within wider society. De Quincey's use of laudanum is not contextualised within the heightened awareness of drug abuse and medical legislation of the 1860s, but rather positioned at a safe temporal distance. This lack of social interaction forms a core element of the article's discussion of

drug use and creativity: ‘What of narrow-souled and stupid guardians, what of slender means and social ambition that was little likely to be gratified’. The piece also notes: ‘How De Quincey worked at Oxford, how he fared in the schools, or what position he held with his tutors, we know not’ (p. 7). Such phrases emphasise a disconnection from social and cultural expectations, situating the addict as an unknowable and enigmatic figure, capable of evading forms of categorisation. While the article is responding to De Quincey’s own creation of the identity of an addict, its focus on a literary construction demonstrates that it is still considered pertinent to the contemporary perception of addiction and those suffer from it.

The article offers a sympathetic social response to the addict and addiction, and in its discussion of the negative impact of opium on De Quincey, it notes: ‘Heaven forbid we should speak of this brilliantly gifted and much-suffering man with harshness or presumption’, suggesting a consideration of the individual’s merits is not precluded by the knowledge of his drug habit (p. 9). It also implies a degree of empathy that is arguably at odds with the moral sense of shame typically associated with addiction and drug abuse in other periodical publications, including specialised medical material. De Quincey’s status as a celebrated literary and cultural figure goes some way to account for this display of consideration; however, it is his ability to define and articulate his own disease that allows him to resist the medical and social assessments prevalent during the 1860s and 1870s. Rather than being categorised or diagnosed by a professional, De Quincey’s *Confessions* allowed him to express his own relationship with drug use and thus to construct his own version of his identity as an addict. The article in the *British Quarterly Review* responds to and reinforces De Quincey’s personal narrative, rather than reshaping it to reflect contemporary medical and social perceptions. As such, the act of shaping addiction as a personal narrative within literature of the period often contends with conflicting emphases on professional medical diagnosis or social patterns of degeneration. This clash between self-

vocalisation and enforced categorisation highlights the period's fundamentally divisive ideas of addiction, revealing both fascination and revulsion. Within sensation fiction, accounts of opiate use provide a contradictory appeal that can be manipulated by authors, ambivalently combining a reassuring sense of social categorisation and an engaging narrative of individual struggle. The examination of De Quincey's work in periodicals demonstrates that the figure of the addict remains a central one within the mid-Victorian zeitgeist.

This preoccupation with opium and its use was also related to its international significance, and its connection with concerns regarding British influence and trade abroad. The periodical *The Dark Blue* (1871–73) featured a short story entitled 'A Pipe of Opium' by George Alfred Henty, published in 1872, and predominantly set in India, which explores the fears associated with wider Imperial relations. The First and Second Opium Wars (1839–42 and 1856–60) had confirmed the drug's associations with complex international phenomena and provoked discussion and debate surrounding the significance of the drug within domestic British culture.¹³ 'A Pipe of Opium' details events occurring during the time of the Indian Mutiny or Rebellion (1857–58), a crisis that came to signify the potential weakness of British international authority. The story establishes an ambiguous sense of exotic foreignness with the use of opium, associating it with both mystical customs and supernatural events. While centred on Colonel Harley's experience of taking opium in India, this account is contained by

¹³ The Opium Wars of 1839–42 and 1856–60 revolved around the trade of opium between Britain and China. James F. Miskel writes: 'The first war with China unquestionably provoked some of the interest in the drug. An informal symposium at the Westminster Medical Association on the general topic of opium indulgence in England and China typifies, in many respects, the state of medical opinion on the narcotic. There were debates throughout the profession on the actual effects of the opium habit on the health of the individual, on the relative dangers of addiction to opium and liquor, and on the comparison between opium eating, as practiced in England, and opium smoking, the vogue in the Orient.' See 'Religion and Medicine: The Chinese Opium Problem', *Journal of the History of Medicine and Allied Sciences*, 28.1 (January 1973), 3–14 (p. 4). Roy Porter writes: 'Cultivating opium poppies in Bengal, Britain's East India Company exported the drug illegally to China, the trade amounting in 1839 to 400,000 chests of opium. China grew anxious about the threats to health, morale and its silver reserves. The British pushed the drug, China resisted, and war resulted. After the First Opium War (1840–42), China lost Hong Kong; the second Opium War (1857–60) meant further losses of Chinese sovereignty and an enforced open door for the opium trade.' See Porter, *Greatest Benefit to Mankind*, p. 664. See also Barry Milligan, *Opium and the Orient in Nineteenth-Century British Culture* (Charlottesville and London: University Press of Virginia, 1995).

his interactions with male friends at a London club, where he relates the incident. Harley begins his narrative with the ‘singular exordium’ of asking his friends not to repeat the tale ‘until after I have left England, and then to put in entirely different names and places’, and the narrator describes how the friends ‘moved our chairs rather closer to the fire, took a sip at the grog’.¹⁴ These details construct an atmosphere of secrecy and mystery, emphasising the supernatural elements of the narrative as well as a sense of male camaraderie.

This idea of homosocial companionship is pertinent to Harley’s account, concerning as it does his time spent with the military in India. His experience of using opium in India is also in the company of another member of the army, associating experimental drug use with this sense of male sociability. The opium is provided to the two men by a fakir, or Indian holy man, who

darted forward, gave us each a pipe, took two red-hot pieces of charcoal in his fingers without seeming to know that they were hot, put them upon the pipes, and then recommenced his singing and gesticulations. A glance at Charley to see if, like myself, he too were ready to carry the thing through, and then I put the pipe to my lips. I felt at once that it was opium, of which I had once before made an experiment, but mixed with some other substance, which was, I imagine, haschish [*sic*], a preparation of hemp. Three or four puffs, and I felt a drowsiness creeping over me. I saw, as through a mist, the fakir swaying himself backwards and forwards, his arms waving and his face distorted as if in a fit. Another minute and the pipe slipped from my fingers, and I fell back insensible. How long I lay there I do not know. I woke with a strange and not unpleasant sensation, and presently became conscious that the fakir was gently pressing, with a sort of shampooing action, my temples and head. When he saw that I opened my eyes he left me, and performed the same process on Charley. (pp. 33–34)

The account emphasises the exotic and unfamiliar in its description of the fakir’s actions, and the uncertainty as to the exact components of the substance being consumed suggests an element of potential risk. While Harley notes that he ‘felt a drowsiness’ and ‘woke with a strange and not unpleasant sensation’, he does not expand on any physical sensations caused by his use of the drug, unlike the detail provided in accounts by figures such as Humphry

¹⁴ George Alfred Henty, ‘A Pipe of Opium’, *The Dark Blue*, 3.13 (March 1872), 27–42 (p. 28). All further references are to this edition and are given parenthetically in the text.

Davy and Thomas De Quincey. The significance of the incident can therefore be seen to be both his immersion in a foreign custom and the fact that he shares the episode with a friend, rather than being presented as an isolated experience. The narrative's emphasis on the shared male experience of the imperial unknown associates the use of opium, in this case, with a remote culture, rather than presenting the drug as a familiar component of the British lifestyle, available to a wide spectrum of domestic society. In the context of the narrative's focus on the Indian Mutiny, this emphasis on cohesive masculine company articulates contemporary preoccupations with the stability of British authority and security abroad.

The absence of comment on any physical sensation relating to the use of opium within the narrative constructs an alternative perception of the drug user himself. Harley's 'drowsiness' and insensibility suggest a temporary sense of bodily vulnerability, but there is no indication that his experience results in any strong attachment or dependency on the drug. Harley also notes that he 'woke with a strange and not unpleasant sensation'; however, it is unclear if this is a result of the opium or the actions of the fakir as he 'was gently pressing [...] my temples and head' (p. 33). This lack of detail regarding the physical impact of the drug results in ideas of indulgence, pleasure or some form of dramatic physiological experience being absent from the narrative, meaning that Harley does not become strongly associated with opium, and in fact seems essentially unaltered by his use of it. This sense of disconnection between drug and drug user suggests a form of opium use in which the body of the individual can retain a sense of inviolability. Again, this is arguably pertinent to the narrative context of the Indian Mutiny, and the corresponding importance attached to the security of British rule. Harley's ability to consume the opium without any reaction suggests that he is not subject to the potential corruptive weakness associated with it, and that this presentation of drug use functions as a counter-example to the challenges of imperial rule that threatened the perceived stability of British masculinity and national security more widely.

The stable and secure British male body abroad represented the idealised notion of Britain's global position at a time when international discord was being reported and circulated within the periodical culture that had permeated Victorian society. The body and body politic remain intrinsically linked, with the drug user's body in this instance representing an uncontaminated endurance.

While the physiological impact of opium use is not the principal subject of the narrative, it does relate the seemingly supernatural result of the psychological experience. While under the influence of the opium, both Harley and his friend Charley confess to having experienced vivid 'dreams' about the future events of the Indian Mutiny. These prophetic dreams are both distinct and graphic, detailing the violent uprising of the Sepoy soldiers and revealing to both men the way in which they will each survive the conflict. Initially, the tale appears to offer an objective explanation for the visions, with Harley suggesting:

The opium naturally had the effect of making us both dream, and as we took equal doses of the same mixture, it is scarcely extraordinary that they should have affected the same portion of the brain, and caused a certain similarity between our dreams. In all nightmares one is on the point of something terrible happening, and it was the same thing here. Not unnaturally, in both our cases, our thoughts turned to the soldiers. If you remember, there was a talk at mess a little time since as to what would happen in the extremely unlikely event of the Sepoys mutinying in a body. I have no doubt that was the foundation of both our dreams. It is all natural enough now we can think it over calmly. (pp. 35–36)

This attempt to explain the dramatic dreams of both men posits a rationalised physiological response to chemical consumption that acknowledges the drug's ability to directly influence neurological activity, while simultaneously denying it any creative visionary power. The account seemingly eschews the supernatural associations of opiate use in favour of the more discriminating tone of medical modernity. As the narrative progresses, however, the prophetic powers of the opium dreams are borne out by the events experienced by Harley, seemingly confirming the drug's mysterious and transcendental capacity. The tale ends with the narrator stating that 'at the door we separated, a quiet party considering the lateness of the

hour; but the story we had heard had quite taken away any disposition for talk, and often as I have thought it over, I have never been able to explain it with the slightest satisfaction to myself' (p. 42). The shared security of the social gathering disintegrates as the men disperse, and the narrator suggests that the account of opium use is inexplicable, effectively undermining the previous attempt at rational explanation. Hence, the tale concludes with both the collapse of the shared male community and a seeming reaffirmation of the supernatural associations of opiate use.

The periodicals of the 1860s and 1870s, in both their fiction and criticism, demonstrated a similarly contradictory tendency to combine a retrospective inflection with a wider articulation of modernity in their examination of the consuming body. The texts discussed in the rest of this chapter emphasise how society was increasingly captivated by new modes of literary consumption, from the abundance of advertisements filling the urban landscape to the serialised fiction popularised within periodicals. The way in which these novel literary forms shaped both patterns of social behaviour and individual bodily responses can be seen as symptomatic of a wider cultural consideration of the national marketplace, as well as a concentrated focus on the domestic sphere. As a consumable product that carried with it associations of questionable international relations, and infiltrated the Victorian home, opium, in various forms, also embodied these fears concerning the body and body politic. Articles discussing De Quincey, and his literary work, reflected an enduring fascination with this Romantic figure and his subversive habits of consumption, ensuring that any emerging medical or fictional account of drug use was informed by these persistent tropes of illicit danger. The genre of sensation fiction in particular echoes the preoccupation with bodily sensation that characterises De Quincey's account of opiate use. Fiction such as 'A Pipe of Opium' demonstrates a seemingly contradictory desire to evoke supernatural and exotic associations of drug use, while also imposing rationality on the narrative, in line with

emerging medical theory. Tension between this evocation of previous prose and developing scientific principles resulted in a sense of volatility surrounding both the consumption of drug and text, emphasising the continued instability of domestic and national structures. The *pharmakon*'s significance, as both drug and book, is therefore central to the periodical culture of the mid-nineteenth century, becoming the locus of individual desire and national threat.

'The Thralldom of the Vice': Administering opium in the periodical press

The entanglement of commerce, medicine and the act of reading, as well as consumption itself, necessarily reconfigured cultural understandings and depictions of drug use and addiction. The surfeit of quack vendors offering easily consumable remedies by means of a profusion of advertisements throughout urban landscapes helped to reinforce the idea of medicine as a substance that transected the commercial and domestic worlds. Therefore, excessive or dangerous consumption of medicine came to be associated with mercantile and private or familial concerns. The troubling dual nature of medicinal substances is also explored within sensation fiction itself, dwelling as it does on the potential of drugs to act as poison if taken in excess. In the medical press of the 1860s and 1870s, the response to the growing number of alternative remedies emphasised both the danger of such substances and the importance of professional medical controls over consumption. Within this mutable environment, addiction and the excessive consumption of drugs were problematically characterised as economic, domestic and medical issues. Despite the legislative measures to restrict the sale of medicinal substances from the professional pharmaceutical establishment, easy access to patent remedies suggested that the unauthorised use of medicine was still a common occurrence, rather than one which carried negative cultural associations. However, the increasing medical and public awareness of the dangers of excessive consumption meant that depictions of drug use and addiction were also beginning to be linked with ideas of

potentially transgressive, or even criminal, behaviour. The threat to the body posed by drugs assumes a subversive significance, focusing on the dangers of poison as well as a more ineffable sense of how these substances could remove the individual's control of their body.

The cure/poison opposition embodied within the drug as *pharmakon* was crucial to the evolution of both the medical profession and its periodicals. Even as developing technology allowed more advanced methods of professional diagnosis and treatment, patent medicines prevailed as a popular model of relief, ensuring that an alternative system of medication continued to exist. In addition, more potent forms of existing drugs circulating within the marketplace at mid-century added to the dangers perceived as inherent in consumption, both illicit and prescribed. These dualities – of professional and controlled treatment existing simultaneously with an unregulated market, and the increasing awareness of the potential harm substances such as opium might inflict on the body – were articulated within specialised periodicals, debate and discussion, revealing how pertinent these issues were to the public consciousness. Concerns surrounding consumption, particularly those of substances classed as medicinal, possessed an urgency owing to the way in which they demonstrated how the divide between the domestic sphere and the marketplace could be breached.

The Lancet frequently discussed the dangers of consuming unregulated patent medicine, identifying the way in which it could embody the dual nature of the *pharmakon*. In an item of correspondence headed 'Poisoning by Dr Locock's Wafers', one David Easton MD reports his treatment of a child who had 'eaten nearly a whole box' of the medicine.¹⁵ The letter concludes with the supposition that the pills contain 'a powerful narcotic ingredient, injurious if taken in large quantities, and highly dangerous to children'. This belief

¹⁵ David Easton, 'Poisoning by Dr Locock's Wafers', *The Lancet*, 27 October 1860, p. 420.

correlates with the nuances found within the concept of the *pharmakon*, where the distinction between remedy and poison is dependent on the dosage taken. Derrida writes:

the beneficial essence or virtue of a *pharmakon* does not prevent it from hurting. The *Protagoras* classes the *pharmaka* among the things that can be both good (*agatha*) and painful (*aniara*). The *pharmakon* is always caught in the mixture (*summeikton*) [...] examples of which are *hubris*, that violent, unbounded excess of pleasure that makes the profligate cry out like a madman [...] This type of painful pleasure, linked as much to the malady as its treatment, is a *pharmakon* in itself. It partakes of both good and ill, of the agreeable and the disagreeable.¹⁶

This violence and uncontrollable form of excess that Derrida identifies within the ambiguous nature of the *pharmakon* is particularly pertinent to the often sensationalised and Romantic language associated with mid-century discussion of the use and abuse of powerful narcotic substances, including opium (a constituent of many patent medicines and of Dr Locock's Wafers in particular). The motif of excessive consumption is one which resonated both as a medical and economic warning: just as the safe dose of medicine could compromise bodily health and result in addiction if increased, so too could an extravagant or profligate attitude to material culture result in an uncontrollable and potentially corrupt body politic.

4 ADVERTISEMENTS.

CAUTION.—CHLORODYNE.

VICE-CHANCELLOR WOOD stated that Dr. J. COLLIS BROWNE was undoubtedly the Inventor of Chlorodyne; that the statements of the defendant Freeman were deliberately untrue, and he regretted to say they had been sworn to. Eminent Hospital Physicians of London stated that Dr. J. COLLIS BROWNE was the Discoverer of Chlorodyne; that they prescribe it largely, and mean no other than Dr. BROWNE'S.—See *Times*, July 13th, 1864. Subsequently confirmed by the trade at large.—See the *Lancet*, April 8, 1865. The Public, therefore, are cautioned against using any other than

DR. J. COLLIS BROWNE'S CHLORODYNE.

THIS INVALUABLE REMEDY produces quiet refreshing sleep, relieves pain, calms the system, restores the deranged functions, and stimulates healthy action of the secretions of the body, without creating any of those unpleasant results attending the use of opium. Old and young may take it at all hours and times, when requisite. Thousands of persons testify to its marvellous good effects and wonderful cures, while medical men extol its virtues most extensively, using it in great quantities in the following diseases:

CONSUMPTION, ASTHMA, BRONCHITIS, WHOOPING COUGH, NEURALGIA, DIARRHŒA, RHEUMATISM, SPASMS, &c.

EARL RUSSELL has graciously favoured J. T. DAVENPORT with the following:—"Extract of a despatch from Mr. WEBB, H.B.M.'s Consul at Manilla, dated Sept. 17, 1864: 'The remedy most efficacious in its effects (in Epidemic Cholera) has been found to be CHLORODYNE, and with a small quantity given to me by Dr. Burke I have saved several lives.'"—Important Testimonials from numerous Medical Men accompany each Bottle.

SERIOUS RESULTS HAVE ARISEN FROM THE USE OF SPURIOUS CHLORODYNE.

CAUTION.—Always ask for "Dr. J. COLLIS BROWNE'S CHLORODYNE," and see that his name is on the Government Stamp. Reduction in price.—Now sold in Bottles, at 1s. 1½d., 2s. 9d., 4s. 6d., and 11s., double quantity.

Sole Manufacturer, J. T. DAVENPORT, 33, Gt. Russell St., Bloomsbury Sq., London.

Fig. 2.3. 'Dr J. Collis Browne's Chlorodyne', *All the Year Round*, 29 December 1866, p. 4

¹⁶ Jacques Derrida, *Dissemination* trans. by Barbara Johnson (London and New York: Bloomsbury Academic, 2013), p. 102. The *Protagoras* refers to Plato's dialogue, named for pre-Socratic philosopher Protagoras.

In an advertisement from *All the Year Round*, the medicinal product ‘chlorodyne’ is prominently paired with the word ‘Caution’, revealing the sense of uncertainty and precariousness that surrounded the popular use of drugs (see Figure. 2.3, above). Here, the advertisement makes use of this public wariness to ‘caution against using any other than Dr. J. Collis Browne’s Chlorodyne’.¹⁷ The advertisement itself construes the very *representations* of medicinal substances as potentially harmful, owing to the fraudulent practices prevalent within the market, while nevertheless transforming such threats into a promotional technique: the only genuine, and therefore safe, product is that marketed under the imprimatur of ‘Dr J. Collis Browne’. The manufacturer is positioned as a commercial authority, directing and controlling the consumer’s use of chlorodyne, thus reflecting the medical profession’s desire to control public access to drugs. The medical marketplace is constructed as an environment in which manufacturers create and manipulate public concern about the safety of commodities to compete for dominance and control. The dual nature of medicine was a recognised and publicised phenomenon, not only encompassing the innate dangers of powerful substances but also the consequences of the practice of adulteration. Substances such as opium, which was imported from significant distances and underwent several refining processes before entering the English marketplace, clearly presented numerous opportunities for adulteration. Closer to home, many medicinal products sold over the counter were further compromised by manufacturers, chemists and apothecaries attempting to extract a greater monetary return from this trade. In this context, the advertisements reveal a disturbing marketplace in which alternative products are shown to be consistently unstable, and the manufacturer in question is positioned as a single point of medicinal authority and financial security. Teleologically, this reliance on the medico-economic hybrid model resulted in the

¹⁷ ‘Dr J. Collis Browne’s Chlorodyne’, *All the Year Round*, 29 December 1866, p. 4.

increasing professionalisation and specialisation of medical practices governed by systematic regulation.

In an article published in the *British Medical Journal* early in 1864, the lectures of Dr Garrod on British pharmacopoeia are summarised and his comments on various chemical substances noted. When discussing ‘Preparations of Opium’, Garrod remarks that a change in medicinal regulations means that ‘all the medicines containing opium in the British pharmacopoeia are so named as to contain the name of that drug’, a subject that ‘engaged much of the attention of the Pharmacopoeia Committee’.¹⁸ This focus within the medical community on enforcing transparency on the use of opium suggests increasing recognition of both its potential danger and its widespread use. The article continues by noting that ‘it was thought that any inconvenience arising from patients becoming acquainted with the nature of their medicine, would be more than balanced by the absence of any attempt at concealment’ (p. 238). The complexity of the relationship between patient and doctor is revealed by this consideration, with the increased transparency emphasising both a renegotiation of medical power and responsibility and a recognition of the benefits of increasing the popular knowledge regarding chemical substances. This represents not only a development in how professional interaction was perceived but also how the medical world was beginning to make use of the patient’s own awareness of the dangers of opium use to establish the regulated consumption of drugs. The article’s discussion of opium nevertheless draws attention to the drug’s enduring central place within the canon of prescribed medical substances, despite its potential dangers. Fundamentally, the text reveals the medical negotiations surrounding the prescribed use of opium that were consistently informed by public opinion of drug use and of the medical profession itself.

¹⁸ ‘Dr Garrod’s Lectures on the British Pharmacopoeia’, *British Medical Journal*, 27 February 1864, pp. 237–40 (p. 238). All further references are given parenthetically in the text.

This unstable professional perception of opium use is still under scrutiny in an 1868 *British Medical Journal* article, which publishes the transcript of Alexander Fleming's lecture on the 'Treatment of the Habit of Opium-Eating.'¹⁹ The lecture begins by stating that the habit 'will not very often come under your notice in practice', emphasising that the condition is not one primarily associated with the middle-class or professional spheres more likely to engage the services of specialised medical care (p. 137). This phraseology also suggests that the popular fascination with opiate use, articulated in the serialised narratives of authors such as Wilkie Collins, was not representative of mid-Victorians' real experience of medicinal substances or their unregulated use. Instead, Collins' exploration of drug use articulated a more general concern with excessive forms of consumption and evolving medical science, and represent a powerful literary trope that drew on traditional and liminal experiences of drug use. The lecture does, however, mention that the use of opium has 'become very prevalent in England, more especially among the labouring classes', an observation that suggests both a problem of public welfare and an awareness of the social complexities that inform the professional consideration of drug habits. The latter is emphasised, as Fleming continues to note that 'partly from the unwillingness to confess the habit, and partly from the circumstance that many take it within such limits, as not to involve serious evil to the health, the treatment does not frequently fall to the care of the medical man' (p. 137). This articulates the potential for social disgrace that was associated with the use of opiates at this time, as well as a growing specialist awareness of the limits at which opiates could safely be consumed. Fleming again highlights the continuing negotiation that existed between patient and practitioner, necessarily informing professional concepts of drug dependence and treatment.

¹⁹ Alexander Fleming, 'Clinical Lecture on the Treatment of the Habit of Opium-Eating', *British Medical Journal*, 15 February 1868, pp. 137–39. Subsequent references will be given parenthetically in the main text.

The language used within Fleming's lecture reveals the paradigmatic cultural perceptions of drug use that continued to shape developing medical practice. The words 'vice' and 'evil' illustrate the strong sense of moral, rather than physiological, disorder associated with an opium habit, and arguably correlate with the connections that exist in sensation narratives of the 1860s and 1870s between opiates and subversive or marginal figures. The lecture states that '[m]uch tact is often required to elicit a confession from those suffering under the thralldom of the vice', demonstrating how the intricate questions of morality connected with drug abuse inform the complexities of the doctor-patient relationship (p. 137). Rather than a prescriptive or clinical mode of interaction, Fleming emphasises a confessional and personal tone of contact: while the doctor is still positioned as an authoritative figure, the dynamics of the professional relationship are nevertheless problematic. The piece continues its discussion of opium addiction, noting that 'unless the habit have been of long continuance, and the moral sense so seriously enfeebled that all feeling of shame is lost, the patient will often persist in denying the fact' (p. 137). This again stresses ideas of social and individual corruption rather than medically defined symptomology, and the sense of negotiation between patient and professional. The implication that the patient should feel 'shame' over their addiction delineates a medical construction heavily informed by wider concerns regarding appropriate cultural consumption, as well as an increasing fixation on the regulation and control of medicinal substances. While the moral language reveals this intricate medical environment, it is also arguably relied upon in the absence of a developed psychological discourse that would allow professional discussion of the addict's behaviour beyond contemporaneous models of categorisation.

The complexity of opium's cultural and medical significance comes to the fore in Fleming's lecture. The text details the case of a medical practitioner who 'had taken opium for forty-seven years' to control the physiological effects of asthma. While this doctor had

sometimes taken ‘as much as one ounce of laudanum daily’, he was also capable of abstaining from the use of opiates for months, and he ‘could trace no injury whatever to this moderate use’ of the drug (p. 137). Not only does this account effectively emphasise the dual nature of opium as *pharmakon*, in its remedial and destructive guises, but it also presents a form of habitual drug use that is not subject to the tropes of moral or social shame prevalent earlier in the article. The fact that the drug user is himself a doctor establishes an assumed chemical knowledge that mitigates risks of unregulated or irresponsible use of the drug, in spite of the large doses referred to in the example. By emphasising that the doctor’s use of opiates is ‘moderate’, the lecture presents an idea of medical control that actually contributes to the efficient execution of his professional duties – although it is quick to state that this kind of habit is ‘exceptional’. While there is an attempt to convey some sense of moderation, it is undermined by the exceptionalism of the case itself, which raises implicit concerns regarding the unstable position of medicinal substances and the medical profession. The connection between the drug and the doctor that is established problematically entangles the professional and personal, echoing the complex social and medical issues that underpinned drug abuse more generally. By presenting a figure who is at once a medical official and a drug user, Fleming’s lecture demonstrates how notions of established social and professional authority influenced perceptions of medicine and its use.

Fleming states that the purpose of his lecture is to draw attention to possible symptoms of opium abuse and to manners of treating the condition. The earliest signs of an opium habit ‘occur in the nervous symptoms presented between the doses’, and include ‘extreme depression’, feeling ‘restless, peevish’ and ‘exhibit[ing] a singular incapacity of fixing the attention, or of taking an interest in the ordinary affairs of life’ (p. 137). This description establishes the importance of psychological symptoms in drug habits, and recognition of the way in which they are increasingly taken into account by the Foucauldian

medical gaze.²⁰ The lecture also articulates the way in which the addict is perceived to be removed in some way from normative social and cultural routines. This arguably reshapes the enduring image of the isolated Romantic drug user from the early nineteenth century, by framing the individual and spiritual struggle as a medical or chemically induced symptom.

Fleming suggests that, if the opium habit is maintained,

the mind of the patient [...] becomes involved, the memory and judgement are enfeebled, and, whatever power of self-restraint the sufferer may have originally possessed, there is now little hope of his being able to exert it successfully to resist the indulgence. (p. 137)

The medical discourse describing the disease emasculates and infantilises the addict, focusing as it does on drug use as an individual weakness rather than a physiological condition. By referring to the use of opiates as an ‘indulgence’, the text is again echoing ideas of Romantic and profligate habits, instead of presenting a pathological need. While references to figures such as De Quincey and Coleridge, and the type of drug use associated with them, enabled medical texts to reform and develop a specialised discourse of addiction, the emphasis on restraint or indulgence reveals a growing cultural fixation with ideas of excess and control. The treatment for addiction subsequently recommended by Fleming engages with both established medicinal practice and developing theories of the condition. The lecture mentions the importance of the ‘*sudden* suspension of the habit’, rather than gradually reducing consumption, as this immediate cessation is ‘easier’ for the patient (p. 137). Fleming then suggests that the resulting physiological effects of withdrawal should be medicated with substances such as phosphoric acid. This emphasis on an immediate cessation of the habit also draws attention to the importance of ideas of controlled consumption that privilege the

²⁰ ‘The observing gaze refrains from intervening: it is silent and gestureless. Observation leaves things as they are; there is nothing hidden to it in what is given. The correlative of observation is never the invisible, but always the immediately visible, once one has removed the obstacles erected to reason by theories and to the senses by the imagination. In the clinician’s catalogue, the purity of the gaze is bound up with a certain silence that enables him to listen.’ See Michel Foucault, *The Birth of the Clinic: An Archaeology of Medical Perception*, trans. by Alan Sheridan (London and New York: Routledge, 2003), pp. 131–32; also, see p. 134 of the book for further discussion of Foucault’s theory of the clinical gaze.

authority of the medical professional above the addict's individual desires. Fleming's lecture positions drugs and drug use in a complex manner, echoing the tensions inherent in the developing models of patient and professional. The piece does, however, clearly trace a particular preoccupation with certain forms of language and discourse, extrapolating the ways in which habits of consumption and addiction were beginning to be mapped diagnostically.

Within wider periodical culture too, the complexities of drug consumption were examined, with popular titles such as *Punch* engaging with the social ramifications of this concern. Exploring the growing awareness of the public implications of opiate use during the 1860s, a satirical article in *Punch* entitled 'Anodynes in the Workhouse' engages with the socio-economic complexities of regulating drug use within public institutions such as the workhouse. The dispenser of St Pancras workhouse reportedly requests 'three pounds weight of crude opium' per week with which to 'make tincture of opium and mix with various medicines' to treat the inmates in his care.²¹ The article goes on to note that, to the Guardians of the St Pancras workhouse, 'the idea of supplying paupers with unlimited anodynes was of course monstrous', owing to the fact that 'they must go on increasing the quantity' and 'augmenting the expense of this sort of indefinite medical relief'. These comments, although satirical, demonstrate simultaneously a sense of public recognition of opiate habituation and the increasing mercantilism of medical practice. The social and economic emphasis reveals a class-based form of drug regulation, in which professional care provided to the institutionalised poor was informed by monetary considerations. The dispenser is subservient to the Guardians of the workhouse, demonstrating how control of money and its expenditure were inextricably linked with control of access to drugs such as opiates. This sketch characterises the workhouse's use of opium as undesirable, but it is the associated monetary expenditure that is presented as excessive rather than the level of drug consumption itself. As

²¹ 'Anodynes in the Workhouse', *Punch*, 13 July 1867, p. 17.

we shall see, within sensation fiction of the 1860s and 1870s, the portrayal of addiction or dangerous consumption of drugs was used to explore changing relationships between individuals and the public sphere. This *Punch* article demonstrates how wider periodical culture similarly explored these ideas of excess, emphasising the position of the marketplace and the commercial power of opiates.

The powerful culturally constructed vision of opium use popularised by figures like De Quincey also endured throughout the 1860s and shaped explorations of this drug and others. We see this in operation in ‘Mr Volt, the Alchemist’, a story published in *All the Year Round* in 1869, in which a solicitor comes into contact with the eponymous scientist who is described as ‘either an old young man, or a young old man.’²² This dichotomy continues, as the narrator remarks that although Mr Volt has a ‘kindly and intellectual’ face, he also has ‘matted grey hair and beard’ and his eyes ‘glowed with a strange dull lustre that made me suspect opium’ (p. 127). In its presentation of the alchemist, the narrative reconfigures the Romantic figures of the opium addict and isolated scientist, expressing succinctly the idea of archaic science and chemical substances that contrasts with the established bourgeois professions of the solicitor–narrator and his medical friend. Here, the mention of opium is clearly associated with a lifestyle and scientific practice at odds with the wider, evolving mid-Victorian world. This initial sense of disconnection between contemporary and antiquated practice is, however, refuted, as Mr Volt asserts that the form of ‘chemical research’ with which he is associated has been responsible for the discoveries of ‘steam, gas, electricity’: the very foundations of Victorian industry (p. 128). There is, therefore, a juxtaposition, as the narrative exploits traditional associations of opium use but positions them alongside progressive forms of technology and science. The portrayal of drug use is part of the

²² ‘Mr Volt, the Alchemist’, *All the Year Round*, 9 January 1869, pp. 127–32 (p. 127). All further references are given parenthetically in the text.

narrative's attempts to inflect a complex and unstable scientific world in which progression and regression are inextricably connected.

The narrative goes on to recount the apparent death of the alchemist under circumstances which are subject to scrutiny and associated with drug use. The narrator remarks that Volt's body 'gave out a most powerful and unmistakable odour of opium', not only leading to the conclusion that he died from 'an enormous overdose', but that '[a]s he had been a good chemist, it was hardly reasonable to suppose that he could have taken such a dose ignorantly' (pp. 129–30). The association of opium with this potential 'suicide' or murder manipulates the established sensationalised tropes of drug use, reframing the professional scientific environment into one that reveals unregulated, dangerous and possibly criminal activity (p. 130). The alchemist's knowledge of the drug is also problematic, reflecting a marketplace characterised by uncontrolled access to large doses of opium and a non-professional familiarity with ostensibly medical materials. The troubling connection between the consumptive public market and drug use is further developed in the 'unmistakable odour of opium' leaking from Volt himself, explicitly and grotesquely drawing attention to the troublesome body of the drug user (p. 130). Drug and body become fused, transforming the latter into a revelatory object that turns drug use from a secretive or private habit into a public one. During the inquest into Volt's death, the narrator recounts the public opinion that 'old Volt were certain to pison hisself [*sic*] accidentally some day, and now he had been and gone and done it', a suggestion that again articulates a belief in the dangers of both drug use and scientific research (p. 130). The sense of inevitability in the phrase also reveals opium and drug use more widely as a potential danger, or rather identifies individual relationships with drugs that are perceived as volatile.

'Mr Volt, the Alchemist' explores the physiological and mental effects of newly discovered substances, encompassing drug use as both a scientific and private habit. Volt

informs the narrator that he has discovered ‘a certain solvent’ which will ‘resolve the being we call man [...] into his primitive elements of body and spirit: allowing the spirit by itself to travel over the universe, free from the gross trammels of the fleshy element’ (p. 128). The idea of the divided self permeates medical and popular literature throughout the nineteenth century, and the narrative suggests that progressive chemical research associated with discoveries such as ‘steam, gas, electricity’ also has the ability to transcend bodily limitations (p. 128).²³ While this form of drug use initially seems to be presented as part of an evolving scientific positivism, a sensational or Romantic lexicon is used to describe its effect, complicating the drug’s portrayal and introducing a fascination with the self rather than any putative social or cultural benefit. Within the narrative, there is a focus on the body of the drug user, manifest in Volt’s dead body and its strong odour of opium. While under the influence of the newly discovered drug himself, the narrator experiences a delusion or hallucination and believes that his friend Mark Stedburn has been disembodied, finding his ‘*pure essence of Mind*’ which has been ‘distilled’ by Volt out of his body and is now in a phial labelled ‘Mark Stedburn, Bottled Feb. 4, 1857’ (p. 130). There is a clear emphasis that the misuse of chemical substances could result in a loss of control over the body, exposing it to risk from an invasive and scientific force. Rather than the expansive and universal sense of freedom associated with drug use earlier in the narrative, here there is a sense of reduction, and a threat of containment and imprisonment.

Both popular and professional circles were increasingly aware of the inconsistent effects of opiates, with the body necessarily becoming a focal point of investigation and

²³ The exploration of the divided self or double, the tension between mind and body, man and animal, can be seen in literary works across the nineteenth century, in works from Mary Shelley’s *Frankenstein* (1818) to Oscar Wilde’s *The Picture of Dorian Gray* (1890), arguably culminating in Robert Louis Stevenson’s *Strange Case of Dr Jekyll and Mr Hyde* (1886). Scientific texts, such as Charles Darwin’s influential *On the Origin of Species* (1859), T. H. Huxley’s *On the Physical Basis of Life* (1869) and George John Romanes’ *Mental Evolution in Man* (1888) also contributed to the discussion surrounding the potential duality of the nature of the human body and human experience.

fixation. In some correspondence published in *The Lancet* in 1863, ‘S.S.’ recounts a medical case dealing with ‘The Effects of Small Doses of Opium’. Beginning his letter by acknowledging that ‘sometimes even in small doses, opium acts as a poison’, S.S. goes on to describe an ‘extraordinary train of symptoms’ that ‘ought [...] to be generally known’.²⁴ While the belief in opium’s unpredictable medical nature asserted in the letter was widely accepted by the mid-century, the subsequent discourse turns the body of the patient into an ‘extraordinary’ spectacle that should be ‘known’ and experienced by the profession at large. The volatility of opium’s impact on the body suggests a lack of medical or professional control, becoming instead an almost sensational manifestation of both the drug’s and, more problematically, the body’s ability to evade regulation. The letter goes on to relate the symptoms of a woman after being administered opium, which include being ‘almost deprived of sight and hearing’ and ‘seized with shivering’, as well as a ‘rash’ and a ‘burning, pricking sensation’. The letter quotes the patient herself rather than mediating her words through authoritative medical language, privileging her voice and her experience of the drug. Her symptoms describe a body beyond the patient’s own control, as her senses fail and the word ‘seized’ suggests a violent force. It is also a fundamentally physical response to opium, the rash acting as a visible sign of illness on the body and the ‘burning, pricking sensation’ emphasising corporeal discomfort. The letter articulates fears surrounding the body’s unreliable relationship with opium, which point to a medical environment of uncertain potential and progress, with advancing scientific awareness simultaneously increasing understanding and revealing persistent gaps in knowledge.

This sense of uncertainty regarding the use of opiates is prevalent within the medical press and is found in another letter of 1863 published in *The Lancet*, entitled ‘Poisoning by Opium’. Here, the writer questions a case of opium poisoning reported in a previous issue,

²⁴ S.S., ‘The Effects of Small Doses of Opium’, *The Lancet*, 21 March 1863, p. 341.

asking: ‘did the child really get that quantity? did Mr. Ellis analyse any of the laudanum?’²⁵

Both access to the drug and the quality and strength of the drug itself are called into question, suggesting that the marketplace is unregulated by medical restriction or supervision. Public use of opiates, especially when associated with children, is linked to a pervasive sense of potential excess, which is at once juxtaposed with the language of scientific measurement and investigation. The letter relates that the writer ‘made several inquiries of druggists who manufacture the laudanum that is bought by the keepers of small hucksters’ shops’, a phrase that emphasises not only the way in which the drug is circulated through the marketplace but also the multifarious and numerous sources of access available to the drug user. Again, there is a focus on the public nature of opiate use, the doctor’s ‘inquiries’ signalling growing attempts to assert professional control over the provision and circulation of drugs. The letter finally addresses the different forms of laudanum available, which can be ‘weak with spirit’ and ‘coloured up with burnt sugar, and flavoured often with gentian’. The mention of adulteration further positions this form of opiate as a potentially dangerous commodity, encompassed within a wider preoccupation with the purity of consumable goods within the Victorian market.²⁶ The manipulation of this resource emphasises its commercial potential rather than its medical function, inscribing a form of public use of drugs that is separate from and uncontrolled by professional authority.

The tension between the mercantile and the medical was also explored in publications with broader cultural scopes, underscoring its significance to the contemporary social consciousness. An article entitled ‘Sleep’ published in the *Cornhill Magazine* discusses the

²⁵ ‘Poisoning by Opium’, *The Lancet*, 5 September 1863, p. 292.

²⁶ Criticism examining the adulteration of products during the nineteenth century includes G. R. Searle, *Morality and the Market in Victorian Britain* (Oxford: Clarendon Press, 1998) and Anthony S. Wohl, *Endangered Lives: Public Health in Victorian Britain* (Cambridge, MA: Harvard University Press, 1983). Contemporary sources that explored the safety of the marketplace included the pamphlet *How to Detect Adulteration in our Daily Food and Drink; a Complete Analysis of the Frauds and Deceptions Practised upon Articles of Domestic Consumption, by Tradesmen and Manufacturers: With Full Directions to Detect Genuine from Spurious, by Simple and Inexpensive Means* (London: Groombridge and Sons, 1855).

ways in which ‘the physician and his pharmaceutical treasury’ may treat insomnia.²⁷ While the word ‘treasury’ suggests how commercial value is attributed to medical resources, their status as commodities explicitly affirmed, a sense of cultural worth is also nonetheless conveyed. The article asserts that any ‘sleeping potion’ provided will ‘be some preparation of opium’, continuing to remark that ‘every one has his views and theories about opium’, emphasising the public’s familiarity and discursive engagement with the drug and its use (p. 236). The intrinsically public nature of the medical marketplace is thus emphasised, as the article delineates both the commercial trade in drugs and the social awareness of opium and its uses. The use of the phrase ‘sleeping potion’, however, links opiates with a more traditional, even folklorish, discourse at odds with the modern marketplace. De Quincey is mentioned, revealing the enduring literary and public influence of his work on cultural concepts of drug use, but the article distinguishes between the ‘poetry of this drug’ found in his *Confessions* and the ‘prose [...] written in the pages of many medical authors’ (p. 236). The existence of these two discourses or lexicons surrounding opium reveals the multifaceted cultural responses to drug use, acknowledging the divide between popular representations of drugs such as opium and medical opinion.

The inclusion of opium in an article discussing sleeping habits reveals how drugs were not associated with strictly medical issues but were utilised throughout Victorian bourgeois life. The article delineates a cultural attitude towards both medicine and health that proposed not only a wide application for chemical substances, but a sense that problems with little or no medical basis (such as lack of sleep) could nevertheless be treated with medical resources. Thus, ‘Sleep’ identifies a set of commercial and cultural aspects of opium that would initially seem to mitigate the increasingly stricter controls of professional medical

²⁷ ‘Sleep’, *Cornhill Magazine*, 14.80 (August 1866), 226–37 (p. 236). Further references are given parenthetically in the text.

practice. Conversely, one might argue that through the medium of the popular press, these cultural and commercial views were in fact shaping the development of medical discourse itself.

The commercial dynamics of drug use take on even more complex configurations when the discourse of international politics is considered. The enduring connection between opium and China is explored within the periodical *John Bull and Britannia*, emphasising the concepts of nationality and imperialism that were intrinsically linked with the popular perception of the drug. Tensions surrounding the opium trade understandably informed the public view of drug use, and a review of Revd R. Cobbold's *Pictures of the Chinese, Drawn by Themselves* (1860) demonstrates how concepts of addiction could be informed by complex national dynamics. The article notes that 'the Chinese war' is a 'popular' topic, suggesting a public consciousness of both the political and cultural resonance of China on Victorian culture.²⁸ One of the 'pictures' mentioned in the review is that of 'The Opium-Smoker', which focuses on the 'lean craving countenance' and describes the 'misery of the victim of this vice'. The text thus emphasises the physicality of addiction, as well as the moral or ethical status of the drug user, ensuring that drug use is presented as a physical, visible disease. However, the account of the picture also presents the act of smoking opium, and the user himself, as a public spectacle or object of interest, consequently revealing a cultural fascination with both Oriental identity and opiate use. The article relates how the drug 'is first taken at late hours in dissolute company', as well as pointing to the 'knowing agony of the unsatisfied craving' – phrases which seem to echo the discourse popularised by figures such as De Quincey.²⁹ This recognisable form of prose suggests synchronicity between popular

²⁸ 'Literary Review: *Pictures of the Chinese, Drawn by Themselves* (Rev. R. H. Cobbold)', *John Bull*, 7 January 1860, p. 11.

²⁹ De Quincey describes how he would 'commit a debauch of opium', as well as the 'revulsion' and 'upheaving' of opiate use and the 'dread swell and agitation of the storm' of abstinence. De Quincey, *Confessions of an English Opium-Eater*, ed. by Grevel Lindop (Oxford and New York: Oxford University Press, 2008), pp. 44, 39 and 80.

constructions of British and non-Western addiction. Thus, while the Opium Wars with China (1840–42 and 1857–60) and the cultural influence of the Orient arguably provide a narrative frame for certain ideas of national identity, the language of drug use itself was already imbricated in wider economic and international tensions.³⁰

The complexity inherent in periodical culture's treatment and examination of drug use demonstrates how both social and medical discourses struggled in the second half of the nineteenth century to categorise and contain patterns of behaviour more frequently identified as subversive or abnormal in the body and body politic. An increase in professional controls conversely drew attention to the ways in which the movement and consumption of opiates continued to be characterised by a sense of economic and individual plurality. The articles, correspondence and short works of fiction published during the 1860s and 1870s articulate this duality of perceived scientific and economic innovation and the enduring proclivity for prioritising the individual experience within both the domestic sphere and the marketplace. The dual nature of the *pharmakon* was framed by the dichotomies entrenched in the mutable socio-economic climate of the mid-century, and, similarly, ideas of addiction and the addict were (re)formed by this pervading instability.

Consuming sensation fiction

The 1860s and 1870s witnessed a substantial increase in the number of periodicals in circulation, largely due to the abolition of the tax on paper in 1861, and this growth influenced how texts were written, published and consumed.³¹ Margaret Oliphant's 1862

³⁰ See note 13 (p. 117)

³¹ 'Once newspapers and magazines were finally and fully liberated from fiscal restraints after 1861 their rate of growth was remarkable [...] In 1864 *Mitchell's Newspaper Press Directory* recorded 1,768 titles; by the time of Victoria's Golden Jubilee in 1887 this figure had risen to 3,597 [...] What must have been clear to any aspiring novelist by mid-century was that Victoria's reign was not, in publishing terms at least, going to be characterized by the book, but rather by the newspaper and the magazine.' Simon Eliot, 'The business of Victorian publishing', *The Cambridge Companion to the Victorian Novel* ed. Deirdre David (Cambridge and New York: Cambridge University Press, 2001), pp. 37–60 (p. 48).

article ‘Sensation Novels’ articulates the burgeoning tension associated with certain popular reading practices during the mid-nineteenth century. Oliphant writes that ‘it is only natural that art and literature should, in an age which has turned to be one of events, attempt a kindred depth of effect and shock of incident’, revealing an interdependence between the sensation novel and the culture in which it circulated and which it attempted to represent.³² Oliphant notes that the ‘stimulant’ of sensation fiction was potent, resulting in a ‘significant and remarkable quickening of public interest’, observing the way in which these texts had the ability to influence social behaviour, and how this genre permeated public consciousness in a new and powerful way (p. 565). Simultaneously, Oliphant’s language emphasises the individual and private responses provoked by the act of reading, with the ‘depth of effect and shock of incident’ illustrating the intrinsic physical reaction to the sensational material, and the profound relationship between text and body, as well as that of text and body politic. This sense of the individual experience continues in Oliphant’s discussion of the serialised fiction of Wilkie Collins, where she identifies the ‘thrills’, ‘wonder, terror, and breathless interest’ found in the ‘positive personal shocks of surprise and excitement’ of his work *The Woman in White*, published from 1859 (p. 566). Serialised sensation fiction is therefore presented as a phenomenon of duality, producing innovative responses to the texts in both public and private contexts and, critically, to the manner in which they were consumed.

Oliphant’s article continues this exploration of contrast, or conflict, within sensation fiction through a closer examination of the manner of its publication. Referring again to Collins’ novels, she notes that ‘no successful work can apparently exist in this imitative age without creating a shoal of copyists’, and the

violent stimulant of serial publication – of *weekly* publication, with its necessity for frequent and rapid recurrence of piquant situation and startling incident – is the thing

³² Margaret Oliphant, ‘Sensation Novels’, *Blackwood’s Edinburgh Magazine*, 91.559 (May 1862), 564–84 (p. 565). Subsequent quotations will be given in the main body of this chapter.

of all others most likely to develop the germ, and bring it to fuller and darker bearing. (p. 568)

The language demonstrates the perceived unhealthy nature of serialised sensation fiction, emphasising instead the potential physical threat of both ‘violent stimulant’ and ‘germ’. The rapid process of writing, publication and consumption of the serialised text is itself associated with connotations of violence, imbuing both the genre of sensation fiction and individual narratives with a sense of threat pertinent to public and personal habits of reading. Likewise, the phenomenon, identified by Oliphant, of ‘copyists’ in ‘this imitative age’ suggests a troubling and uncontrollable replication and recreation of this dangerous material, circulating within the marketplace and accessing the home. The popularity of the sensation text within society puts at risk both the private familial sphere and the individual body, with Oliphant linking the replicated text and adulterated drug. Tension between pleasurable reading matter and transgressive reading practices is, therefore, identified by Oliphant’s article, portraying the text as *pharmakon*, and its impact on the reader as comparable to that of the drug.³³

The association of sensation fiction with more worrying aspects of consumption is discussed in an 1863 essay by Henry Mansel, published in the *Quarterly Review*. The article focuses on sensation novels and their fundamental influence on the ‘nerves’ of the reader, as well as how ‘[e]xcitement and excitement alone seems to be the great end at which they aim’.³⁴ This focus on the physiological impact is continued with the observation that

³³ Pamela K. Gilbert writes that reading can be ‘figured’ as ‘the ingestion of drugs [...] presented alternately as food and poison, medicine and illicit drugs, and finally the erotic body and the contaminated body. In all of these metaphors, the text is a substance that enters the reader and has an effect on him or her. The text is not an inert thing to be merely manipulated, it is active – even opportunistic [...] Metaphors of ingestion and ingestion rebounded upon the aggressor, emphasizing the reciprocity of the boundary transgression implied. The reader who devours the text is in some sense inhabited by that text.’ See Pamela K. Gilbert, *Disease, Desire and the Body in Victorian Women’s Popular Novels* (Cambridge and New York: Cambridge University Press, 2005), pp. 18–19. Similarly, Tamara S. Wagner notes: ‘Fiction itself was posited as addictive, as feeding on and into the action of experiencing, vicariously through reading, the sensations of accidental and deliberate poisoning, suicide, and attempted suicide, while seemingly policing the use of substances in detailing their destructive potential.’ See Tamara S. Wagner, ‘Clinical Gothic: Sensationalising Substance Abuse in the Victorian Home’, *Gothic Studies*, 11.2 (November 2009), 30–40 (p. 30).

³⁴ Henry Mansel, ‘Sensation Novels’, *Quarterly Review*, 113.226 (April 1863), 482–514 (p. 482). Subsequent quotations will be given in the main body of this chapter.

‘excitement, even when harmless in kind, cannot be continually produced without becoming morbid in degree’, a phrase which seems to echo Oliphant’s article in its suggestion that it is the repetitive nature of sensation fiction and its manner of publication which pose a threat to individual and public welfare (p. 482). The word ‘morbid’ carries medical associations, found as it is in specialised discussions of models of behaviour, including that of drug abuse.³⁵

Thus, the focus on the fundamentally physiological influence of sensation novels imbricates a shared medical and cultural discourse, demonstrating the inextricable connections between body and body politic. Mansel’s article continues to state that ‘works of this class manifest themselves as belonging [...] to the morbid phenomena of literature – indications of a widespread corruption, of which they are in part both the effect and the cause’ (pp. 482–83). The idea of sensation fiction generating corruption within popular culture again suggests pertinent correlations with the way in which unregulated drug use was increasingly being viewed as a widespread social disease. By identifying fiction as both ‘effect’ and ‘cause’ of this degeneracy, Mansel introduces a fundamental association between the consumption of literature and the drug or *pharmakon* itself, as both are perceived as being open to abuse. The complexities of the public’s response to sensation fiction are drawn out and shown to reflect a growing preoccupation with unstable social and individual security.

Mansel makes explicit the perception of reading sensation fiction as a dangerous or undesirable habit, suggesting that the genre has been ‘called into existence to supply the cravings of a diseased appetite, and contributing themselves to foster the disease, and to stimulate the want which they supply’ (p. 483). This phrase emphasises how multiple forms of behaviour were being subsumed into contemporary medical culture and discourse, and reconfigured through the burgeoning construction of addiction as a disease. The discourse of

³⁵ ‘In *Die Morphiumsucht* (1878) [The Morbid Craving for Morphia], Eduard Levinstein (1831–82) described morphia addiction.’ See Roy Porter, *The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present* (London: HarperCollins, 1999), p. 664.

corrupted or diseased appetite correlates with the professional and cultural exploration of unregulated or non-medicinal drug use, as well as ideas of transgressive consumption more widely. This thread continues when the article notes that a ‘commercial atmosphere floats around works of this class, redolent of the manufactory and the shop. The public want novels, and novels must be made – so many yards of printed stuff, sensation-pattern’ (p. 483).

Mansel’s emphasis on the commercial nature of sensation fiction reveals how concerns surrounding consumption and consumables also encompassed issues associated with the marketplace itself and its increasing proximity to the domestic and individual spheres.

The idea that sensation fiction may carry the taint of commercial interaction into private environments articulates fears of invasion and of established barriers being overwhelmed. The focus is firmly on the way in which the public preoccupation with material culture could represent a problematic form of morbid consumption. Thus, in its discussion of both sensation fiction and drug use, the article identifies a growing concern with the possibility of a corrupt marketplace that damages the body and body politic rather than strengthening them, in which commercial interaction is reconfigured as a potentially dangerous habit. The connection between reading and addiction continues in the article, with the suggestion that serialised sensation narratives are ‘[w]ritten to meet an ephemeral demand, aspiring only to an ephemeral existence [...] striving to act as the dram or the dose, rather than as the solid food, because the effect is more immediately perceptible’ (p. 485).

This direct comparison between the impact of fiction and that of drugs or alcohol makes the habit of reading sensation literature analogous to other questionable forms of consumption.

The implication that this type of narrative has an ‘immediate’ yet unfulfilling physiological impact also expresses concern about a form of consumption that delivers short-term effects rather than continual sustenance, resulting in an inevitable series of repeated ingestions that echoes fears of dangerous habits of abuse explored in Oliphant’s article.

Such connections between sensation fiction, consumerism and disease models of consumption are even more explicitly brought together in an article published in *All the Year Round* in 1863. Entitled ‘Not a New “Sensation”’, this text notes that it is ‘the fashion now to dwell on certain morbid failings and cravings of the grand outside Public – the universal customer [...] who goes round every market, purse in hand, and orders plays, poems, novels, pictures, concerts, and operas.’³⁶ The article acknowledges the way in which fiction, and literature more generally, is increasingly subsumed into a culture in which objects are perceived primarily as commercial consumables, and the consumer himself as an acquisitive public figure. The negative associations of the ‘morbid failings and cravings’ are again an indication of the way in which multiple forms of consumer habits were framed within a pseudo-medical discourse in order to pathologise public behaviour.

‘Not a New “Sensation”’ observes the fears surrounding the public appetite for sensation fiction, noting that

because this faithful patron chooses to have his meats highly spiced and flavoured, the cry is, an unnatural appetite for *sensation!* This is a new and unhealthy greed – a diseased craving, an unwholesome fancy. This hungering after ‘sensation’ is a diseased and morbid appetite, something novel and significant of degeneration. (p. 517)

The article attempts to deconstruct the ways in which sensation fiction is associated with corrupted consumption and excess through the exaggerated use of medical or specialised terminology. The focus on appetite and degeneration found in the article does echo the discourse used within specialised publications that discuss opium or other addictive habits; however, it arguably does not emphasise so heavily the moral aspect that is common in medical journals of the time. The lexis in ‘Not a New “Sensation”’ does not construct an immoral individual but is instead preoccupied with ideas of physiological disorder and

³⁶ ‘Not a New “Sensation”’, *All the Year Round*, 25 July 1863, pp. 517–20 (p. 517). Subsequent quotations will be given in the main body of this chapter.

corruption. The text suggests that ‘this taste for fiery sauces, and strongly-seasoned meats and drinks, is of very ancient date; nay, with the public – so long as it has been a public – it has been a constant taste’ (p. 517). The proposition that the public appetite for sensational narratives is neither a new nor a novel occurrence confirms that it is, rather, the specifically dangerous levels or habits of consumption that preoccupy popular culture during the 1860s and 1870s. It is the *manner* of consumption, rather than the literary commodities themselves, which arguably forms the fundamental core of these social concerns. While ‘Not a New “Sensation”’ attempts to chart a long history of public reactions to sensational fiction, earlier texts to which the article refers, including Matthew Lewis’s *The Monk* (1796), would not have been subject to the same serialised publication as contemporary work. It is this repeated routine of weekly or monthly consumption of the written word, echoing the repetition of the drug or alcohol abuser, which is identified as a harmful habit.

The perception of sensation fiction as a dangerous form of particularly female consumption is deconstructed by Nicki Buscemi, in a 2010 essay that explores the fiction of Mary Elizabeth Braddon published in *Belgravia* magazine. Buscemi notes how Braddon

acknowledges both the potential danger of reading and the immoral nature of sensational behaviour. *Birds of Prey* and *Charlotte’s Inheritance* locate the threat of reading within medical literature instead of novels, though, and the sensational activities that she highlights are carefully planned murders committed by a rational doctor rather than the impetuous actions of a passionate woman. Braddon thus utilizes *Belgravia*, a periodical venue for ‘light’ literature, to question the power dynamics set up and reinforced by prominent and ‘serious’ medical journals such as *The Lancet*.³⁷

This reversal of established ideologies is embodied in the character of Philip Sheldon from *Birds of Prey* (1867). A ‘surgeon-dentist’, Sheldon ‘uses information gleaned from *The Lancet* to poison his friend Tom Halliday under the guise of treating him for a head cold so that he can marry Tom’s wife and inherit Tom’s money’, and is used by Braddon to ‘question

³⁷ Nicki Buscemi, “‘The Disease, which had hitherto been Nameless’”: M. E. Braddon’s Challenge to Medical Authority in *Birds of Prey* and *Charlotte’s Inheritance*’, *Victorian Literature and Culture*, 38.1 (March 2010), 151–63 (p. 151).

the quality and availability of Victorian medical literature and the belief that doctors should be implicitly trusted.³⁸ Buscemi's article demonstrates how Braddon's fictions offer 'an alternative, and even more sensational, possibility for narrative contagion that involves a seemingly more objective reading population: male, medical practitioners and their professional reading.'³⁹ This interpretation of Braddon's work usefully constructs an alternative gendered ideology that situates the professional male reader and the male body as both susceptible to forms of corruption more popularly associated with the female reader. Professional medical literature, such as *The Lancet*, is reconfigured as potentially subversive material through its system of shared knowledge about the body. Buscemi also notes how Braddon emphasises 'Sheldon's anonymity as a reader in the newly-available sea of medical information and the potential hazards resulting from this accessibility'.⁴⁰ This idea of anonymity frames a subversive body politic in which the individual male body can evade detection and in which criminality can be problematically diffused. Here, the medical publication itself becomes the *pharmakon*, dispersing information about the body that can both heal and harm, transforming the trusted professional medical figure into a criminal, and worryingly unknown and unknowable, entity.

'[T]he modest little bottle': Laudanum in the fiction of Wilkie Collins

The fiction of Wilkie Collins, published in periodical form, embraced and explored this sense of the unstable addict/addiction, scrutinising the intricacies of uncertainty associated with the use of pharmaceuticals and consumption more widely, as well as the volatile relationship between patient and medical professional. The texts focus predominantly on the consumption of opiates, substances widely used within both the medical marketplace and domestic

³⁸ Ibid., p. 152.

³⁹ Ibid.

⁴⁰ Ibid. p. 153.

environments, their misuse arguably more subversive because of their familiarity. The field of discussion and concern surrounding the use and abuse of drugs articulated in medical journals was reflected in Collins' fiction in the inconsistent and fluid depiction of these opiates and the figures who consume them. Collins' work also revealed how the text itself acted as *pharmakon*, examining how the public's consumption of the written word increasingly had an impact on bodily health and the individual experience.

Collins' novels *No Name* (1862–63) and *The Moonstone* (1868) were serialised in Dickens' *All the Year Round*, while *Armadale* (1864–66) appeared in the *Cornhill Magazine*, demonstrating that depictions of drug use, although potentially sensational, were thought acceptable material for publications that had a varied audience in terms of age and class. The texts explore the way in which drug use could destabilise domestic and commercial consonance, as well as how it revealed the mutable nature of concepts of gender and identity. Collins scrutinises the loss of physiological and psychological control experienced through drug use, and the duality of attraction and repulsion this phenomenon holds. While De Quincey largely associated this mental transcendence with an intellectual Romanticism, during the 1860s and 1870s, it began to signal a problematic dislocation within the individual experience. Here, the body is reduced to an object that is potentially disposable, linking it firmly with the commercial conceptions of trade and the marketplace. The significance of the *pharmakon*'s dual power centres on its ability to deconstruct and reconfigure models of the body and its value within the complex socio-economic framework of mid-century.⁴¹

⁴¹ Gerda Reith writes that addiction 'is underpinned by what can be described as a deification of the commodity, whereby a substance – usually described as a 'drug' (or, increasingly, an experience, described as 'drug-like') – is attributed with influential powers – no less than the ability to overwhelm the sovereign individual and transform them into something else entirely – an addict. As the bearer of these 'addictive' properties, the commodity appears to take on a demonic life of its own, and swallows up everything – reason, volition and autocracy – it comes into contact with.' See Gerda Reith, 'Consumption and its Discontents: Addiction, Identity and the Problems of Freedom', *British Journal of Sociology*, 55.2 (June 2004), 283–300 (p. 285).

No Name articulates the popular and sensational perceptions of the medical market traced in the preceding section. Published in *All the Year Round* from 1862, the novel explores both opiate use and the sale of patent medicines. Magdalen Vanstone purchases a bottle of laudanum from a chemist, ostensibly to treat a ‘toothache’, and this transaction reveals the complex dynamics of medical commerce.⁴² As ‘a matter of form’, the chemist ascertains both Magdalen’s name and address before providing the drug, and the text asserts that while this is a ‘precaution [...] natural to a careful man’, it ‘was by no means universal, under similar circumstances, in the state of the law at that time’ (p. 491). Such phrasing suggests that there was a growing public awareness of the need for caution in the circulation of opiates, while also signalling that this awareness did not necessarily correspond with contemporary legislation or commercial practice. Consequently, the text establishes the idea of a worryingly accessible medical trade, especially as Magdalen purchases the laudanum under a false name. The physiological dangers of opiate use are emphasised through the chemist labelling the laudanum bottle with the word ‘POISON’, as well as his warning to Magdalen that the substance could cause ‘Death to the strongest man in England’ (pp. 491–92). These concerns encompass both a general public anxiety surrounding commodities and a sensationalised portrayal of commerce that demonstrates the personal dangers of Magdalen’s potential misuse of the drug.⁴³ This dual representation draws attention to the cultural fascination with the figure of the opiate user, seen in the texts discussed above, as well as the wider implications of opiates on the body politic.

⁴² Wilkie Collins, *No Name*, ed. by Virginia Blain (Oxford and New York: Oxford University Press, 1998), p. 491. All further references are to this edition and are given parenthetically in the text.

⁴³ An 1870 article succinctly articulates this sense of concern, examining as it does the ‘systematic adulteration’ that characterised the marketplace at mid-century. The piece details the various Commissions, Select Committees and published papers and reports that revealed the extent of adulteration that impacted the sale of food and drugs, and, consequently, the public and governmental scrutiny of these practices (1851–54 Analytical Sanitary Commission, 1855 Select Committee of the House of Commons and annual reports of the Commissioners of Inland Revenue dating from 1857 to 1869 are all cited in the article). See ‘The Adulteration of Food and Drugs’, *Fraser’s Magazine*, 6 (June 1870), 718–30 (p. 718).

This preoccupation with the body and with laudanum itself is extended and exaggerated in Magdalen's dramatic consideration of suicide by overdose: 'The bottle was so small, that it lay easily in the palm of her hand. She let it remain there for a little while, and stood looking at it' (p. 497). The gazes of both Magdalen and the reader are thus directed at the bottle of laudanum, which becomes an object of fearful fascination and a spectacle of popular medical fear. This fixation with the bottle continues in the passage: 'The faint clink of the bottle, as it fell harmlessly from her loosened grasp, and rolled against some porcelain object on the table, struck through her brain like the stroke of a knife' (p. 497). The contrast between the innocuous language of 'faint clink' and 'fell harmlessly' and the violence of the latter part of the sentence emphasises not only Magdalen's disturbed mental state but also the exaggerated physical *thingness* of the laudanum within a domestic environment. This sense of the extremes found within the scene suggests an incongruity between the drug and the environment, illustrating the invasive threat posed by the substance. Magdalen's purchase and use of laudanum thus become something at odds with feminised domesticity, associated instead with her sensationalised characterisation and uncertain social status. The passage also dwells on the physical act of Magdalen drinking the laudanum, relating how '[s]he removed the cork, and lifted the bottle to her mouth' (p. 498). Even though she ultimately decides not to drink the laudanum, the text nevertheless expresses a fascination with the image of consumption – specifically, female consumption. Although Magdalen is not addicted to opiates, she is nevertheless exposed to the dangers of unmonitored drug use, such that her actions involving the laudanum are implicitly associated with a form of femininity increasingly linked with consumerism and the unstable social dynamics of the market.



Fig. 2.4. John Everett Millais, illustration to Wilkie Collins, *No Name* (London: Low and Marston, 1864)⁴⁴

The 1864 volume edition of *No Name* features an illustration by John Everett Millais depicting the scene in which Magdalen contemplates suicide (see Figure 2.4, above). In the novel, she leaves her decision to chance, determining that if an odd number of ships pass her window during the next half-hour she will drink the laudanum. The image depicts Magdalen holding a watch in one hand and reaching towards the laudanum with the other, but, significantly, not actually grasping it. While this distinction reflects the element of chance and uncertainty present in the narrative, it also emphasises the concerns surrounding female access to drugs. Magdalen's dress, the dressing table and mirror, and the material and furnishings visible in the image disclose a recognition of commodities and a specifically female form of consumerism. The domestic space in which Magdalen is presented thus accentuates the connections between the private female environment and the commercial

⁴⁴ Image obtained from <<http://www.victorianweb.org/art/illustration/millais/31.html>>.

market. Victorian femininity itself is, therefore, arguably reconfigured to reflect this uncertain amalgamation of private and public.⁴⁵ The laudanum's position is also indeterminate within the image. The presence of the bottle within this space reflects the relative ease with which the drug could still be accessed and brought within the domestic sphere. However, the indecision or hesitation conveyed by Magdalen's outstretched fingers articulates a sense of danger associated with the drug and its unregulated consumption. While Magdalen ultimately decides not to drink the laudanum, the image demonstrates that female access to drugs and the possibility of consumption within the domestic space is sensational enough in itself. As such, it is the uncertainty or instability of this female figure that causes concern.

The medical marketplace continues to be a focal point in *No Name* and reveals further social and cultural tensions as the narrative proceeds. Magdalen's mentor, co-conspirator and would-be betrayer Captain Wragge describes his patent medicine business to her, explaining that he is 'now living – on a Pill' (p. 710). The dual meaning of 'living' emphasises the connection between health and commerce that dominated cultural perceptions of medicine during the Victorian period. Wragge also mentions the extensive reach of the advertisements for his patent medicine, noting:

Hire the last new novel – there I am, inside the boards of the book. Send for the last new Song – the instant you open the leaves, I drop out of it. Take a cab – I fly in at the window, in red. Buy a box of tooth-powder at the chemist's – I wrap it up for you, in blue. Show yourself at the theatre – I flutter down on you, in yellow. (p. 710)

This trope of invasion or excessive permeation is another form of consumption, the adverts being consumed by the public just as the pills themselves are. This link between the ingestion

⁴⁵ Tammy Whitlock writes: 'Despite rhetoric about the safety of the domestic sphere, middle-class women found retail culture catering to their needs and desires. The decade of the sixties was a high point in the material and commercial culture of this consumption orientated century.' Tammy Whitlock 'A "Taint Upon Them": The Madame Rachel Case, Fraud, and Retail Trade in Nineteenth-Century Trade', *Victorian Review*, 24.1 (Summer 1998), 29–52 (p. 31). For more on the problematic connection between the female body and consumerism see Elizabeth Carolyn Miller "'Shrewd Women of Business": Madam Rachel, Victorian Consumerism, and L.T. Meade's "The Sorceress of the Strand"', *Victorian Literature and Culture*, 34.1 (March 2006), 311–32; Lisa Niles 'Owning "the dreadful truth"; or, Is Thirty-Five Too Old? Age and the Marriageable Body in Wilkie Collins' *Armadale*', *Nineteenth-Century Literature*, 65.1 (June 2010), 65–92; and Gilbert, *Disease, Desire and the Body*, *passim*.

of drugs or medicine and advertisements reveals a wider preoccupation with consumer habits and the body politic. The activities mentioned in Wragge's advertisements – including hiring books, travelling in cabs and visiting the theatre – ensure that this pattern of consumption traverses class boundaries, making it an issue for society at large rather than for a minority. While addiction is troubling because it represents an uncontrolled and unmonitored use of powerful drugs, it is also arguably represented (particularly in *No Name*) as a transgressive misuse of commodities. The description of Wragge's advertisements reveals a concern surrounding the public consumption of the written word, as the adverts are consumed with a similar kind of excess as the medicine itself.⁴⁶ Thus, the fixation with commercial transactions demonstrates how multiple forms of consumption become instilled with mercantile significance and relate to a persistent focus on the body politic. The activities listed by Wragge require the expenditure of capital, while the circulation of the advertisements and pills echo these movements of currency, creating a correlation between medical and economic enterprise. The language used also considers Wragge's financial health as if it were a consequence of consuming the kind of patent medicine he advertises: he is 'solvent, flourishing, popular – and all on a pill'. Explicitly linking the drug and money, even in this satirical manner, Collins emphasises the commodity culture of medicine, depicting an open market for the consumption of such substances, rather than a secure model of medical control.


⁴⁶ Thomas Richards notes: 'Patent medicine advertisers followed the lead of Victorian physicians in turning the most private ministrations of the body into the subject of spectacular public scrutiny [...] Almost every article of legislation that Parliament aimed at the advertising industry during the nineteenth century had been formulated with the human body expressly in mind and was intended to assert the government's hegemony over a site – the body and its manifold processes – that many in power feared had long been forfeit to an underworld of advertisers.' See Thomas Richards, *The Commodity Culture of Victorian England: Advertising and Spectacle 1851–1914* (London and New York: Verso, 1990), pp. 71 and 169–70.

**IN THE EAST INDIES,
South America, Australia, Canada, West Indies,
Cape of Good Hope, New Zealand, &c.**

PARRS LIFE PILLS

are now generally established as the most favourite family medicine. They are mild and pleasant in their action, and they should be resorted to whenever there is any symptom of indisposition. Their use is universal—their reputation boundless.

NOTICE.—Round the sides of each box of the genuine medicine is affixed the English Government Stamp, on which is engraved, in white letters on a red ground, the words



Sole Proprietors, T. ROBERTS and Co., 8, Crane Court, Fleet Street, London.—May be had of any medicine vendor, in boxes, 1s. 1½d., 2s. 9d., and in family packets, 11s. each.

Fig. 2.5. 'Parr's Life Pills', *All the Year Round*, 3 April 1869, p. 7

An advertisement, published in *All the Year Round* on 3 April 1869, similarly demonstrates this expansive potential of medical commodities (see Figure 2.5, above). Parr's Life Pills have no discernible link to the medical profession: rather, they take their name from Thomas Parr, a man reported to have reached over 150 years of age during the seventeenth century. This initially aligns the product with an alternative and unorthodox medical culture, like that of Captain Wragge; however, the advertisement also creates a form of imperial grandeur, proclaiming the popularity of the drug in the 'East Indies, South America, Australia, Canada, West Indies, Cape of Good Hope, New Zealand etc.' The advertisement firmly identifies itself with this sense of empire, a fundamental ideology which had been powerfully articulated through the Great Exhibition of 1851 and continued to permeate through spheres of national and international trade. A global marketplace is generated through the inventory of destinations, the circulation of pills creating an imperial sense of conquest and revealing an ever-growing economic climate in which England's stock was ascendant. The Great Exhibition had displayed to an exaggerated extent the connection

between the British Empire and commerce, as well as the fiscal and national security that this produced.⁴⁷ In contrast to the domestic medical milieu discussed previously, Parr's Life Pills position themselves within this wider economic and imperial network, the advertising practice revealing an increasingly self-reflective nationalism where the health of the body was equated with the health of the Empire. The scale of the medical commerce found within the advertisement juxtaposes the public economy with the private body, revealing the threat implicit within positioning medicine as a valuable commodity.

Wilkie Collins' 1866 novel *Armadale* explores the subject of addiction more comprehensively. The novel's antagonist, Lydia Gwilt, suffers a laudanum habit that becomes entangled with the problematic constructions of gender and morality that she also represents. Lydia writes in her diary:

Who was the man who invented laudanum? I thank him from the bottom of my heart whoever he was. If all the miserable wretches in pain of body and mind, whose comforter he has been, could meet together to sing his praises, what a chorus it would be!⁴⁸

By referring to laudanum as a 'comfort', this passage initially portrays the consumption of the drug as a less subversive habit and the consumers themselves as objects of sympathy rather than censure. Lydia's words focus on the relief provided by laudanum to physiological distress rather than the potential physical dangers of unregulated drug use, configuring habitual use not as an immoral indulgence but a necessary form of therapy. The reference to the high numbers of laudanum users further suggests that a common and well-established social relationship with opiates exists. These ideas are challenged, however, by the novel's

⁴⁷ Richards: 'as the century progressed, advertising became the primary beneficiary of, and vehicle for, the commodity spectacle first synthesized in 1851. From the exhibition advertisers learned that the best way to sell people commodities was to sell them the ideology of England, from the national identity embodied in the monarchy to the imperial expansion taking place in Africa, from the many diseases threatening the national health to the many boundaries separating class and genders.' See *Commodity Culture of Victorian England*, p. 5.

⁴⁸ Wilkie Collins, *Armadale*, ed. by Catherine Peters (Oxford and New York: Oxford University Press, 2008), pp. 513–14. All further references are to this edition and are given parenthetically in the text.

own format. The passage is part of Lydia Gwilt's diary, a form of writing that emerges from the individual and personal, and as such arguably accentuates the private aspect of her laudanum habit. Lydia's rhetoric also has the effect of drawing attention to her femininity in relation to addiction, as she refers to the male inventor of laudanum, rather than the drug itself, as her 'comforter' (p. 513). Just as the relationship between male practitioners and female patients emphasised the instability of the boundaries of the private female space, laudanum comes to represent a masculine invasion or incursion into this environment.⁴⁹ By introducing these considerations of gender relations, the novel discloses a preoccupation with the woman's body and her consumption.

Armada also explores the physiological and mental influence of laudanum. Writing in her diary, Lydia describes the effect of the drug:

I have had six delicious hours of oblivion; I have woke up with my mind composed [...]. I have dawdled over my morning toilet with an exquisite sense of relief – and all through the modest little bottle of Drops, which I see on my bedroom chimney-piece at this moment. 'Drops,' you are a darling! If I love nothing else, I love *you*.' (p. 514)

This passage once again suggests a duality to the novel's portrayal of laudanum. Lydia writes that the drug leaves her mind 'composed', suggesting that an orderly or secure psychological state is brought on by her use of laudanum, which would seem to support a pseudo-medical use of the drug. This initial reassurance is undermined, however, by the emotive language with which Lydia describes her response to laudanum: the 'delicious hours of oblivion' and 'exquisite sense of relief' suggest an indulgent habit that exists in opposition to a rational medical routine. The attractions of laudanum are increasingly associated with pleasurable

⁴⁹ Miriam Bailin writes: 'Purportedly come to heal, the doctor brings to bear upon this most intimate and emotionally charged area of human experience [the sick room] the same contaminating aspects which are seen as infecting society as a whole.' See Miriam Bailin, *The Sickroom in Victorian Fiction: The Art of Being Ill* (Cambridge and New York: Cambridge University Press, 1995), pp. 24–25. See also Mary Poovey, "'Scenes of an Indelicate Character": The Medical "Treatment" of Victorian Women' *Representations*, 14 (Spring 1986), 137–68.

physiological and psychological feelings, rather than simply giving respite from discomfort or pain, resulting in the use of the drug becoming more disruptive. The image of the bottle on the 'bedroom chimney-piece' further emphasises the domestic associations of self-medication, revealing that private, rather than professional, interactions with drugs endured despite the increasing presence of the medical institution. This depiction of opiates within the domestic space, although symptomatic of a wider social phenomenon, also suggests something transgressive about Lydia's femininity: it hints at the deception and concealment that characterise her interactions with other characters and reveals a sense of corrupt subjectivity. Lydia's assertion of 'If I love nothing else, I love *you*', addressed to the 'Drops' also suggests a troubling relationship with the substance, and a dependency that is expressed as through a pathologised form of affection or attachment.

Both Lydia and Magdalen represent deviant forms of femininity, their links with opiates emphasising the ways in which they deconstruct ideologies associated with the female body and its interactions with the masculine and public spheres of experience. The description of Magdalen's potential overdose is immediately followed in the narrative by her marriage to Noel Vanstone, emphasising the sense of social or moral 'suicide' that she equates with this act. When discussing her imminent wedding, Magdalen 'repressed the shudder that stole over her, at that reference to the marriage on the lips of a stranger', the text stressing the fundamental physicality or 'sensation' of her response, and drawing a parallel between the experience of the marriage and the impact of the drug on the body (*No Name*, p. 503). This focus on bodily sensation is continued in the description of Magdalen during the wedding: 'The one person present who remained outwardly undisturbed was Magdalen herself. She stood with tearless resignation in her place before the altar – stood, as if all the sources of human emotion were frozen up within her' (p. 511). Here, it is the absence of perceivable emotion that renders her body problematic, as it evades being read or deciphered

by the external gaze, emphasising the deception being practised by Magdalen as she marries under a false identity. While the fact that she is able to control her bodily responses and appear ‘outwardly undisturbed’ is of concern, the use of the word ‘repressed’ suggests that this is the result of a struggle and that the body associated with drug use is subject to issues of division and is capable of threatening or evading individual governance. Magdalen therefore represents a matrix of aberrant femininity that locates multiple sites of concern within the body, including a worrying ability to conceal information and emotion from the public gaze, as well as a sense that the body itself is something that must be constantly restrained due to its innate duplicity.

The portrayal of the unreliable female body is most fully realised in Lydia Gwilt. *Armada* focuses on the trope of mistaken or double identity, resulting in an intense scrutiny of appearances by characters and the narrative itself. Reverend Brock warns Ozias Midwinter about Lydia but provides an incorrect account of her physical appearance, leading Midwinter to examine Lydia, and compare her with Brock’s description:

The hair in the rector’s description was light brown and not plentiful. This woman’s hair, superbly luxuriant in its growth, was of the one unpardonably remarkable shade of colour which the prejudice of the Northern nations never entirely forgives – it was *red!* [...] her eyes, large, bright, and well-opened, were of that purely blue colour, without a tinge in it of grey or green, so often presented to our admiration in pictures and books, so rarely met with in the living face [...] This woman’s lips were full, rich, and sensual [...] Her chin, round and dimpled, was pure of the slightest blemish in every part of it [...] the most startling, the most unanswerable contradiction that eye could see, or mind conceive, to the description in the rector’s letter. (pp. 334–35)

This description initially portrays Lydia as a form of feminine ideal, with emphasis given to the ‘pure’, ‘sensual’ and ‘luxuriant’ nature of her countenance. There is, however, an element of excess in Midwinter’s perception of her, which again suggests the female body escaping from ideological frames of limitation, as well as undertones of excessive and dangerous consumption. This sense of potential threat anticipates Lydia’s subsequent actions, and articulates a disturbing incongruity between external appearance and internal intention, and a

dichotomy within the physical form. Both Magdalen and Lydia exert control over their external appearance and their physicality in order to manipulate and deceive male characters within the two narratives, and *No Name* and *Armadale* focus on how the women's actions reveal a resulting instability or slippage of boundaries associated with the female body. The way in which Lydia's appearance contradicts Brock's mistaken report also emphasises the innate connection between the unreliable text and the unreliable body. The discrepancy between the body described in the letter and Lydia's physical body represents a site of misinformation, in which signs and signifiers fail to correspond. The inconsistency found within the female body is echoed formalistically within the letter, as the written word initiates and reinforces misconceptions of identity and allows incidents of deception to develop and progress. The letter is shown to be liable to error and becomes an untrustworthy text that embodies the novel's wider themes of dichotomy and the mutable association between appearance and interior reality. Both text and body reveal a problematic slippage of meaning and a lack of individual control associated with forms of language and expression.

The two Collins novels discussed foreground the ways in which text and body become unstable and unreliable when associated with perceptions of drug use and abuse. Whether letter, diary or professional publication, the text represents a problematic area of slippage, where meaning, as well as identity, can be reconfigured, and where a sense of contagion emerges. The structure of *No Name* itself reinforces this idea of fluctuation, with the narrative presented as 'scenes' ('The First Scene', 'The Second Scene') interspersed with letters and documents presented 'Between the Scenes' (pp. 5, 185 and 170). While this framework functions to progress the narrative, it also allows counternarratives to emerge and offer a sense of alterity. The relationship between body and text is a site of concern, embodying as it does ideologies of consumption and gender, as well as the dichotomy between external appearance and interior reality. The depiction and exploration of drug use

emphasises the ways in which the body can be perceived as an unreliable and duplicitous form of text, slipping between being the focus of the socio-medical gaze, and evading it.

Opium and the unreliable body in *Armadale*, *The Moonstone* and *Edwin Drood*

Both Collins' *Armadale* and *The Moonstone* (1868) emphasise this sense of inconsistency in their explorations of the drug-influenced body. The idea of addicts shaping their own identity through structuring their addiction as a form of narrative (popularised by De Quincey's work and later responses to his text) is explored within the two novels. In *Armadale*, Lydia observes that the users of laudanum are chiefly 'miserable wretches in pain of body and mind', emphasising that the addict is a suffering individual rather than a self-indulgent one (p. 513). While Lydia's consumption of laudanum is associated with and helps shape her position as a threatening female figure, her articulation of her reasons for using the drug introduces an element of sympathy for her unstable social situation, stressing the complex duality of the addict's identity.⁵⁰ As previously observed, however, the insights into Lydia's laudanum habit are provided through passages of her diary. De Quincey's *Confessions of an English Opium-Eater* is presented as a public form of narrative in which the reader is directly addressed and the addicted narrator can openly share his own perception of his identity, giving the account of opium use a cultural and social authority. By contrast, Lydia's diary presents a private record of her own identity, one which cannot be affirmed through public acknowledgement. Gendered ideas of addicted identity are revealed through this comparison, emphasising that while the male intellectual form of addiction popularised by De Quincey

⁵⁰ Todd Meyers: 'lies are a precondition of therapeutic activities that reach back to Plato and the Hippocratic canon. In Plato's *Phaedrus* we find the conception of the *pharmakon*, which carries the double-meaning of healing substance and poison. Related to the *pharmakon* is the *pharmakos*, the sacrificial subject (but also poisoner, criminal, and outsider) whose supposed falsehood and subsequent end brings "truth" to the community.' See Todd Meyers, 'Promise and Deceit: *Pharmakos*, Drug Replacement Therapy, and the Perils of Experience', *Culture, Medicine and Psychiatry*, 38.2 (June 2014), 182–96 (p. 184). See also Gerard Dollar, 'Addiction and the "Other Self"', in *Beyond the Pleasure Dome: Writing and Addiction from the Romantics*, ed. by Sue Vice, Matthew Campbell and Tim Armstrong (Sheffield: Sheffield Academy, 1994), pp. 268–74.

retains an element of public authority, female addiction is limited to the private sphere. Although Lydia's limited self-articulation does arguably allow the reader opportunities to empathise with her position, the way in which the text frames these sections of her own narrative transforms her identity as an addict into a secretive or subversive one. Thus, Lydia is denied the ability to frame her addiction as a narrative, consequently leaving her identity to be constructed through (masculine) medical and cultural categorisation.

In *The Moonstone*, the addict's identity is similarly shown to be complex and problematically inscribed within social discourse. Ezra Jennings gives Franklin Blake a copy of De Quincey's work, not only emphasising its continuing relevance to the medical sphere, but also its significance as a public avatar of the male addict. In some ways, Jennings' discussion of his use of opium correlates with aspects of De Quincey's text: for instance, his revelation that he is 'under the influence of a dose of laudanum, some ten times larger than the dose Mr Candy administered to you' powerfully establishes his knowledge and tolerance of the drug, suggesting a position of personal authority regarding its use.⁵¹ Initially, therefore, the text seems to confirm the perception of the (male) addict as an authoritative figure. As the novel progresses, however, this view is undermined, as the narrative reveals the unreliability of this shared perception when Jennings describes his own 'abuse' of opium to Blake owing to an 'incurable internal complaint' (p. 380). While the conversation between Jennings and Blake provides an opportunity for the former to articulate his addiction and, to a certain extent, to form his own identity within a shared masculine environment, this is undermined both by the secrecy surrounding his social position and his imminent death. Jennings' identity remains associated with private and secretive individual concerns rather than with a public awareness of his struggle.⁵² The contrast between Jennings' own opium habit and that

⁵¹ Wilkie Collins, *The Moonstone*, ed. by Sandra Kemp (London and New York: Penguin, 1998), p. 391. All further references are to this edition and are given parenthetically in the text.

⁵² 'Collins' writing of physical difference in this 1868 narrative, his consistent placement of images of the abnormal body (usually female, impoverished, and impaired) against images of the normal body (usually male,

articulated in the text he gives to Blake highlights the contradictions between public and private concepts of opiate use. Rather than his opium consumption forming an authoritative personal narrative, Jennings' conversation with Blake resembles a confessional and private discourse that again associates drug use with private and hidden concerns. Unlike De Quincey's public and authoritative 'confessions', which seemingly transcend the personal, Jennings' own confessions are more akin to Lydia Gwilt's, despite the seeming distinctions between masculine public authority and feminine private debility. In this latter case, the 'confessions' suggest the revelation of an intimate private narrative to a public audience.

The Moonstone also explores how tobacco could be encompassed within the narrative of substance abuse. Although considerably more innocuous than opiates, tobacco was another potentially disruptive substance subject to scrutiny and associated with addiction during the 1860s. The *Cornhill Magazine* explores the 'Use and Abuse' of tobacco at length, suggesting that it is 'as well worth considering as the great alcohol question itself'.⁵³ While the article notes that 'a dignitary of the Church has painted tobacco as a "gorging fiend"', this hyperbolic language is tempered by the article's attempt to 'consider calmly the purely physiological aspect of the question', revealing a sense of contrasting cultural attitudes, similar to those associated with substances such as opiates (p. 605). The examination of the physiological impact of tobacco within this article suggests both widespread public use and a growing interest in potential health issues connected to it. The article notes that the nicotine and empyreumatic oil produce 'certain special effects on the nervous system', affecting the

privileged, and able), constitutes an early comment on and a potentially transformative critique of those modern practices (and resulting cultural forms) which in their origin intend to define, designate, medicalize, control, and exclude the body that is physically and cognitively different. By structuring *The Moonstone* around a set of culturally-scripted, dichotomous images and characters, and by then writing through this dichotomy (undermining it in the very moments of its construction), Collins is able to fracture and displace the entire discursive complex of the norm and its assertions of normativity through popular cultural forms.' See Mark Mossman, 'Representations of the Abnormal Body in *The Moonstone*', *Victorian Literature and Culture*, 37.2 (September 2009), 483–500 (pp. 483–84).

⁵³ 'Tobacco: Its Use and Abuse', *Cornhill Magazine*, 6.35 (November 1862), 605–15 (p. 605). Further references are given parenthetically in the text.

‘brain, the spinal cord, and the sympathetic nerves’: the language used is similar to the discourse associated with opiates, suggesting that tobacco can be located within a medicalised field of knowledge. The article also remarks on the ‘chronic dyspepsia’ that results from ‘habitual excess’, connecting tobacco to habits of addiction and excessive consumption or misuse (p. 605). Like opiates, the physiological impact of tobacco is also described in relation to the nervous system, again indicating a common focus for medical investigation. Thus, tobacco should be considered part of the wider examination of publicly available substances that took place within both the popular and medical press, associated with the developing discourse of addiction and substance abuse. As physiological knowledge permeated popular print culture, the explicit connection made between biological processes and tobacco smoking also served to pathologise social or personal habits for a wider public audience.

Within *The Moonstone*, the habit of tobacco smoking is explored and problematically linked with opium. The figure of Jennings forms the focus of multiple concerns associated both with his race and use of opium. He explains that he suffers from ‘an incurable internal complaint’ that has ‘forced me from the use of opium, to the abuse of it’ (p. 380). While the explicit identification of this ‘abuse’ contributes to the associations of Jennings’s unstable racial identity, it is also an acknowledgement of this habit as a medical and social condition. Jennings’ comments also establish opium’s fundamental properties of pain relief and thus its central use within nineteenth-century medicine, referring to the drug as ‘all-potent and all-merciful’ (p. 380). The portrayal of opium is, therefore, complex, as the drug is presented as both a source of relief and a dangerous substance owing to its misuse. This multifaceted representation of opium continues when Jennings reveals to Franklin Blake that Blake was ‘secretly given’ laudanum on the night of the diamond’s disappearance. Jennings mentions the public’s ‘ignorant distrust of opium’ and how this results in every doctor being

occasionally ‘obliged to deceive his patients’ with regard to the medicine they receive (p. 386). Public wariness towards opiates suggested by the text reveals a greater awareness of the danger of drugs than is implied in *No Name*’s depiction of the vibrant medical marketplace in which pills are a profitable commodity.⁵⁴ In contrast to the image of manufacturers earning an income from a widespread social impulse to consume medicinal products, Jennings’ comments suggest a public mistrust of both the medical profession and the drugs they use. In this light, *The Moonstone* reveals a distinction between the drug as a commodity and the drug as a perceived threat to domestic and psychological security.

Collins’ novel emphasises this plurality of popular conceptions of drug use through its inclusion of the work of De Quincey. Jennings responds to Blake’s questions about laudanum by giving him a copy of *Confessions of an English Opium-Eater*. This reflects the position De Quincey’s text held as a pseudo-medical authority on drug use, as well as the blurred boundaries between his account and other professional medical narratives. The novel goes so far as to quote De Quincey, partaking of the wider cross-fertilisation that existed intertextually between the modes of popular and professional writing. Jennings uses the example of De Quincey’s experience to explain the physiological impact of laudanum, which he says is ‘comprised [...] in two influences – a stimulating influence first, and a sedative influence afterwards’ (p. 392). This discussion demonstrates again how De Quincey and his work were perceived as possessing a medical or professional authority, as well as how Collins’ fiction assimilated specialist terms to convey the impact of the drug on the body. By inflecting these medical concepts for a popular audience, Collins circulated them among his

⁵⁴ Eighteen sixty-eight, the year in which Collins’ *The Moonstone* was published, also saw the introduction of the Pharmacy Act, restricting the sale of opiates to registered pharmacists and druggists – a legislative measure that suggests shifting popular and professional opinion surrounding medication and public access to it. Virginia Berridge writes: ‘Throughout the 1850s and 1860s, there were debates about various bills brought forward to control the sale of poisons [...]. There was a division of opinion between public health interests, which almost uniformly called for greater restriction, and pharmacists, who saw the realities of their own position. Pharmacists also realized that opium played a great role in the lives of the poor and even public health interests had to acknowledge this.’ See Virginia Berridge, *Demons: Our Changing Attitudes to Alcohol, Tobacco, and Drugs* (Oxford and New York: Oxford University Press, 2013), p. 57.

readership, and the novel – and sensation fiction more widely – became a tool for diffusing this form of knowledge. Jennings uses both Blake's tobacco withdrawal symptoms and opium as part of an 'experiment', turning the body and the drug into unknown objects that require further scrutiny (p. 391). The well-established physiological effects of opium on the body consequently become unpredictable and must be re-examined in order to categorise them effectively. The fact that this experiment is carried out in a residential house, rather than a laboratory or clinical space, again highlights the connection between the professional and the domestic; however, here that link is more subversive. Rather than occupying a field of knowledge shared in a professional environment, the drug and its medical significance are an invasive presence in both the body and house. Drug use is repositioned as an activity that must be monitored and regulated by professionals, with this form of concentrated and prescriptive observation subverting the stability of the domestic space. The covert nature of the experimentation further emphasises this sense of boundary transgression.

The examination of the public or popular perception of opiates continues as the novel discusses the possible physical responses to laudanum. Blake remarks:

I don't understand the effect of the laudanum on me. I don't understand my walking downstairs, and along corridors, and my opening and shutting the drawers of a cabinet [...]. All of these are active proceedings. I thought the influence of opium was first to stupefy you, and then to send you to sleep. (p. 391)

Blake's articulation of the difference between his expectations of the drug and the reality of his experience with it suggests a sense of unpredictability associated with the use of opiates. Instead of a soporific effect or idealised psychological reverie, Blake's exaggerated 'active' physiological response to the laudanum draws attention to the way in which the drug's impact on the body can result in unexpected behaviour, defying individual and medical discipline. His comments introduce the sensational fear of the body evading control and performing unknown and even criminal acts. While the depictions of Magdalen and Lydia explored the questionable and unreliable female body, here the masculine body associated with drug use is

shown to escape individual governance completely. This worrying sense of incapacity is continued in the text's portrayal of Jennings's own drug use.

Jennings counters Blake's expectations regarding the effects of opiates when he remarks that he is 'at this moment, exerting my intelligence [...] in your service, under the influence of a dose of laudanum, some ten times larger than the dose Mr Candy administered to you' (p. 391). While this comment emphasises the belief that opium can benefit rather than hinder mental faculties, it also reveals Jennings' dependence on increasingly higher doses of the drug. This form of tolerance can be linked with both economic and medical ideas of increasing and excessive consumption, symptomatic of a form of national consumerism and a body politic increasingly associated with extreme demand. The desire for opiates, both individual and national, is linked with international tensions and effectively affirms the broader dynamics of the text: opium and the Moonstone itself both necessitate an interrogation of the imperial circulation of bodies and the transgression of national boundaries. The male body is the fundamental site of these apprehensions, the helplessness of Blake and increasing tolerance of Jennings emphasising how socio-economic patterns of consumption were perceived as undermining the security of the body politic, resulting in a lack of national control and reliance on an ambiguous imperial product.⁵⁵

The figure of the Colonel similarly embodies these cultural and social concerns surrounding opium. He is described as a 'notorious opium-eater' and has been on 'Indian wanderings', drawing exotic and subversive associations in the narrative in connection with the Moonstone itself (p. 48). Indeed, one of the main functions of the Colonel's description is arguably to emphasise the almost supernatural qualities of the gemstone and provide it with a

⁵⁵ Marty Roth writes: 'In the mid-nineteenth century, colonial invasion literally took the form of Oriental drugs that disrupted metropolitan life by overstimulating or debilitating it, by causing its citizens either to run amok or to become immobilized.' Marty Roth, 'Victorian Highs: Detection, Drugs, and Empire', in *High Anxieties: Cultural Studies in Addiction*, ed. by Janet Farrell Brodie and Marc Redfield (Los Angeles and London: University of California Press, 2002), pp. 85–93 (p. 87).

troubling mystical heritage. As well as being ‘given up to smoking opium’, the narrative describes the Colonel as ‘trying strange things in chemistry, sometimes he was seen carousing and amusing himself among the lowest people in the lowest slums of London’ (p. 44). The act of smoking opium, rather than taking it in the form of laudanum, again emphasises the Oriental associations of the Colonel. His drug habit is explicitly associated with a set of activities represented as objectionable, including both a disquieting idea of scientific experimentation and unacceptable social interaction. The Colonel’s opiate use is, therefore, portrayed as an undesirable habit but not configured as a medical condition or disease. The moralistic tone is also evident in the description of the ‘solitary, vicious, underground life’ led by the Colonel (p. 44). The language here establishes a sense of social isolation that is necessarily connected to the Colonel’s drug use, as well as his scientific investigations and lower-class associations. Consequently, the figure of the addict is defined through problematic societal circumstances rather than medical diagnosis. The novel’s portrayal of the Colonel hints at moral or social condemnation, something that can also be found in medical narratives of addiction, illustrating that there was a shared cultural perception of opiate use recognisable to both readers of sensation fiction and medical practitioners. As previously stated, the Moonstone and opium both introduce problematic questions regarding imperial security and the stability of the body and body politic.⁵⁶ The Moonstone’s questionable provenance reflects the problematic international significance of opium, and both the stone and drug create associations of criminality and subversive patterns of behaviour with the male body.⁵⁷ The Colonel, Blake and Jennings represent how the trade

⁵⁶ *The Moonstone* constructs ‘a private, domestic history as simultaneously imperial, collapsing not only home and away, but also private and public, and family and empire’. See Melissa Free, “‘Dirty Linen’: Legacies of Empire in Wilkie Collins’ *The Moonstone*”, *Texas Studies in Literature and Language*, 48.4 (Winter 2006), 340–71 (p. 340).

⁵⁷ This sense of connection with violent criminality is apparent after the diamond’s initial theft from the shrine in India, when the Moonstone ‘passed (carrying its curse with it) from one lawless Mohammedan hand to another’ before being acquired by the Colonel: ‘I saw John Herculastle, with a torch in one hand, and a dagger dripping with blood in the other. A stone, set like a pommel, in the end of the dagger’s handle, flashed in the torchlight, as he turned on me, like a gleam of fire’ (pp. 13 and 14). In his account of the Moonstone’s theft,

in and use of opiates manipulate and threaten the national body politic, with the fragility of control of the individual's body acting metonymically for wider social disturbance.⁵⁸

The complex sense of exoticism associated with opium consumption and its unreliable influence on the body is thematically central within Dickens' unfinished work, *The Mystery of Edwin Drood* (1870). Serialised in separately issued numbers rather than within a periodical, the novel explores how notions of criminality were increasingly associated with unregulated drug use, altering how addiction and the addict were conceptualised. The novel's initial chapter introduces the character of John Jasper as he visits a London opium den, where traditional stereotypes associated with this site seem to be reinforced. As well as Jasper, the opium den is occupied by 'a Chinaman, a Lascar, and a haggard woman', suggesting that the consumption of opium, or more specifically, the habit of smoking opium, is associated with both foreignness and the working class.⁵⁹ While this seems to engage with sensationalised ideas of the urban landscape, the narrative continues with the observation from the woman that "the business is slack, is slack! Few Chinamen about the Docks, and fewer Lascars, and no ships coming in, these say!" (p. 1). A further line bids Jasper remember that "the market price is dreffle high just now [...] More than three shillings and sixpence for a thimbleful!" The woman's comments emphasise the international market and trade of opium, rather than constructing it as a form of Romantic or Oriental aestheticism, stressing that Jasper is consuming a commodity. *Edwin Drood*, therefore, presents this habit of opium smoking as part of an international economic market, albeit a subversive and alternative one, with

Gabriel Betteredge also laments: 'here was our quiet English house suddenly invaded by a devilish Indian Diamond – bringing after it a conspiracy of living rogues, set loose on us by the vengeance of a dead man' (*Moonstone*, 46). When discussing the impact of laudanum use on Franklin Blake, Ezra Jennings remarks that '[u]nder the stimulating influence, the latest and most vivid impressions left on your mind [...] would be likely [...] to become intensified in your brain, and would subordinate to themselves your judgement and your will' (p. 392).

⁵⁸ Free also suggests (p. 341) that 'what is really on trial in this novel is personal and national responsibility in the violence of imperialism'.

⁵⁹ Charles Dickens, *The Mystery of Edwin Drood*, ed. by Margaret Cardwell (Oxford and New York: Oxford University Press, 2009), p. 1. All further references are to this edition and are given parenthetically in the text.

recognisable processes and systems. While the text establishes the opium trade in this way, it also retains a sense of the covert or unknown. The hostess of the opium den maintains that ‘nobody but me (and Jack Chinaman t’other side of the court; but he can’t do it as well as me) has the true secret of mixing it’ (pp. 1–2). This suggestion of secrecy surrounding the drug and its composition adds a transgressive significance to the commodity, while also drawing on fears surrounding the adulteration of food and medicines and the dangers inherent in this practice. Thus, the trade and consumption of opium disclose both economic and bodily concerns.

The physiological impact of opium and opium withdrawal also makes its appearance in *Edwin Drood*’s first chapter.⁶⁰ Jasper’s disorientation is the first thing the reader experiences with the line: “‘An ancient English Cathedral town? How can the ancient English Cathedral town be here!’” (p. 1). This lack of clarity in the text mirrors Jasper’s own confused psychological state, and continues with a description of Jasper ‘[s]haking from head to foot’ with a ‘trembling frame’, while his ‘scattered consciousness [...] thus fantastically pieced itself together’ (p. 1). The emphasis on the instability of both body and mind not only articulates the powerful physiological influence of the drug but also a worrying psychological transcendence. Figures such as De Quincey and Coleridge had already popularised the belief that opium allowed a problematic form of mental freedom, but within *Edwin Drood* the drug stimulates a complete form of psychological deconstruction, meaning Jasper has to reconstruct his consciousness.⁶¹ The drug is associated with a loss of control over both mental and physical faculties, echoing the quasi-supernatural fears explored in texts such as ‘Mr

⁶⁰ Robert Tracey notes that ‘Dickens does draw on contemporary medical ideas about the nature of the opium experience and its after-effects, and about the nature of dreaming and of hallucination. He owned *Human Physiology* (1835 edition) by his friend Dr. John Elliotson, *The Anatomy of Drunkenness* (1827) and *The Philosophy of Sleep* (1840 edition) by Dr. Robert Macnish (*Letters* 4: 713, 725; Stonehouse 42, 77), books that examined the phenomena of dreaming, including drug-induced dreaming.’ See Robert Tracey, “‘Opium Is the True Hero of the Tale’: De Quincey, Dickens, and “The Mystery of Edwin Drood””, *Dickens Studies Annual*, 40 (2009), 199–214 (p. 201).

⁶¹ This echoes Derrida’s discussion of the subversive nature of the *pharmakon*: ‘This charm, this spellbinding virtue, this power of fascination, can be alternately or simultaneously – beneficent or maleficent’ (p. 75).

Volt, the Alchemist' and suggesting that popular conceptions of drug use were increasingly preoccupied with more sensational ideas of chemical power and bodily impermanence. The discourse of addiction is, therefore, reconfigured as a language and a form of habituation that exists within the framework of medical and literary sensationalism.⁶² Jasper is also described as imagining a 'horde of Turkish robbers' and '[t]en thousand scimitars flash[ing] in the sunlight', as well as 'white elephants caparisoned in countless gorgeous colours' (p. 1). The Oriental imagery adds to the sense of mental and physical displacement, stresses the enduring significance of the figure of the Romantic opium consumer and suggests the imperial concerns associated with the trade of opiates.⁶³ Thus, the addict functions as a figure who represents certain intellectual and psychological freedoms, while also being the object of the sensational rhetoric and medical discourse of the 1870s.

Edwin Drood extends this examination to demonstrate how the body of the drug user signalled a disintegration of the boundary between individual and commercial. When Jasper returns to the opium den later in the narrative, the woman remarks that she "'didn't suppose you could have kept away, alive, so long, from the poor old soul with the real receipt for mixing it'" (p. 206). This explicit acknowledgement of opium's addictive quality also draws the reader's attention to the patterns of trade and demand that govern the drug market and the economic value of these substances. When Jasper remarks that he has been "'taking it now

⁶² Doris Alexander suggests that, within *Edwin Drood*, ideas of individual 'psychological abnormality' are not only associated with Jasper, but that '[o]thers in the novel are subject to anomalies of consciousness' and '[d]erangements of perception'. Seen as part of this encompassing theme, Jasper's opiate-induced disorders frame a wider scrutiny of the stability of mental acuity. See Doris Alexander, 'Solving the Mysteries of the Mind in "Edwin Drood"', *Dickens Quarterly*, 9.3 (September 1992), 125–31 (pp. 125–26).

⁶³ Joachim Stanley discusses how the ideology of the Orient 'provides a means by which Jasper can maintain, at least at some level, a Manichean, but fallacious distinction between "ordinary" consciousness and the alternative provided by the drug. It seems likely that Jasper is uneasily aware that the focus of his journeys at the peak of the trance is rather closer to home; ironically, it is only when the drug's hold upon him is lessening that he is able to conjure up and vet appropriately Eastern scenes. The Orient frequently connotes an admixture of deceit and underlying truth in Dickens's work, and, on this basis, its presence here is of a piece with a divided man with dual lives that keep intertwining. However, opium, and not the Orient, is the means by which underlying passions are consciously realized and fantastically acted out, albeit that, as an Oriental product, it also functions as the symbolic exemplification of the self-deceit that underpins most notions of a viable double-life.' See Joachim Stanley, 'Opium and *Edwin Drood*: Fantasy, Reality, and What the Doctors Ordered', *Dickens Quarterly*, 21.1 (March 2004), 12–27 (p. 17).

and then in my own way”, the woman admonishes: ““Never take it in your own way. It ain’t good for trade, and it ain’t good for you”” (p. 207). This exchange reveals a further alternative and unregulated form of drug use: Jasper’s private abuse of opiates brings the habit within a more problematic and unknowable space than even the subversive yet recognisable opium den. His ability to gain access to opiates in this way reflects the open medical marketplace of Victorian Britain, but by associating it with the addicted and criminal body this marketplace becomes a site of unknown danger. The way in which the woman specifically equates the health of her own trade with the health of the addict would also seem to emphasise the disquieting effects of linking the body with commerce. Jasper asks the woman if the drug ““is as potent as it used to be””, as the taste seems different and the effects ‘slower’ (p. 207). The woman suggests this is owing to Jasper’s growing tolerance for the drug, again drawing attention to the way in which changes in physiological dependence influence the economic power of the drug. As the addict increases his dosage and his consumption of the drug, there is a parallel increase in the value of the drug as a commodity and its movements through the marketplace.

Occupying this ambiguous position, the body of the addict is scrutinised in *Edwin Drood*, with Jasper observing that

the woman has opium-smoked herself into a strange likeness of the Chinaman. His form of cheek, eye, and temple, and his colour, are repeated in her. As he lies on his back, the said Chinaman convulsively wrestles with one of his many Gods, or Devils, perhaps, and snarls horribly. The Lascar laughs and dribbles at the mouth. (p. 2)

The bodies of the addicts can be seen to represent sites of individual disruption and national concern. The way in which the woman seems to resemble the Chinese man suggests a worrying sense of assimilation, with opium use or addiction resulting in a loss of her English identity.⁶⁴ National as well as individual boundaries are undermined by her transformation, as

⁶⁴ Stephen D. Arata writes that the *fin de siècle*’s ‘most important and pervasive narrative’ was ‘of decline, a narrative of reverse colonization. Versions of this story recur with remarkable frequency in both fiction and nonfiction texts throughout the last decades of the century. In whatever guise, this narrative expresses both fear

the body functions as a visible and marked signifier that reveals not only the presence of opium itself, but the cultural concerns surrounding the moral and cultural status of drug use. The descriptions of the Chinese man and Lascar depict violent and uncontrolled bodies, emphasising a fear that drug use removes this individual authority over physiological and psychological processes. The fact that it is Jasper, another addict, who scrutinises the three bodies in this manner suggests a sense of self-regulation or examination, or a desire to categorise or gain a form of control over the body and drug use. This is further evident when Jasper examines the woman more closely, watching ‘the spasmodic shoots and darts that break out of her face and limbs, like fitful lightning out of a dark sky, some contagion in them seizes upon him: insomuch as he has to withdraw himself’ (p. 2) This description again locates the body as being beyond the addict’s individual control, but also introduces a sense of contamination or corruption associated with that same body. It is interesting that Jasper, himself a user of opium, recoils from this feeling of contagion and suggests a distinction between different drug users.

Jasper’s fixation with the body of the addict also explores a further aspect of drug use: its potential to disclose physical and psychological knowledge. The way in which Jasper travels to London to smoke opium can be interpreted as an attempt to enforce and maintain the division between his criminality and his other social roles, including those associated with the church, or to control the darker aspects of his nature. This sense of division is, however, deconstructed as Jasper’s opium habit is increasingly portrayed as a dangerous indulgence. It

and guilt. The fear is that what has been represented as the “civilized” world is on the point of being colonized by “primitive” forces. These forces can originate outside the civilized world [...] or they can inhere in the civilized itself [...] Fantasies of reverse colonization are particularly prevalent in late-Victorian popular fiction [...] In each case, a terrifying reversal has occurred: the colonizer finds himself in the position of the colonized, the exploiter becomes exploited, the victimizer victimized. Such fears are linked to a perceived decline – racial, moral, spiritual – which makes the nation vulnerable to attack from more vigorous, “primitive” peoples [...] Reverse colonization narratives [...] contain the potential for powerful critiques of imperialist ideologies, even if that potential usually remains unrealized. As fantasies, these narratives provide an opportunity to atone for imperial sins, since reverse colonization is often represented as deserved punishment.’ See Stephen D. Arata, ‘The Occidental Tourist: “Dracula” and the anxiety of reverse colonization’, *Victorian Studies*, 33.4 (Summer, 1990), 621–45 (p. 623).

is while he is under the influence of opium that his criminal actions become known to another character, again suggesting that the addict's body reveals or exposes that which might otherwise remain hidden. Jasper's own close observation of the other addicts in the den concludes when he 'bends down his ear, to listen to her mutterings' before deciding that they are '[u]nintelligible!' (p. 2). This process is repeated with the Chinaman with the same results, suggesting that both Jasper and the text are preoccupied with the information that drug-influenced bodies can hide or articulate. Although Jasper is reassured that no intelligible material is provided by the addicts, the act of trying to decipher their speech suggests that the addicted body is capable of both concealment and a possible problematic exposure.⁶⁵

This juxtaposition is arguably the central focus on which *Edwin Drood's* exploration of drug use turns, as it relates to the way in which Jasper attempts to conceal his criminality. The cultural perceptions of opium-smoking and the unregulated use of this substance in themselves give the character of Jasper transgressive associations that allow the reader to discern his innate corruption. However, the novel's portrayal of Jasper's opium use is not limited to this manipulation of contemporary concerns. Instead, his opium-smoking habit represents the blurred boundary between controlling and indulging in his own criminality, using it as he does to repeatedly imagine accomplishing his murderous intentions towards Edwin. While the male body associated with drug use and subversive, or criminal, behaviour is, in part, representative of wider social concerns surrounding the movement of drugs and the integrity of the body politic, here the addicted body of Jasper also becomes an unreliable text that simultaneously allows and indulges notions of criminality, and potentially reveals them

⁶⁵ Bert Hornback writes: 'If I argue that *Edwin Drood* tries to teach us that we must observe carefully in order to know anything, to understand anything, I must acknowledge that Jasper – the evil creature – is one of the best observers in the story. His diary, however, exposes his falsification of what he sees. Is he simply hypocritical in his affection for Edwin, and in what he writes? Or is he delusional, self-delusional, when he sets pen to paper?' See Bert Hornback, 'The Book of Jasper', *Dickens Quarterly*, 24.2 (June 2007), 78–85 (p. 81). Jasper's ability to acutely observe or perceive is juxtaposed with his creation of an unreliable text, suggesting that manipulation or distortion is associated with his drug use.

to the narrative gaze. The addict's intense scrutiny of other addicted bodies discloses an attempt to achieve forms of both self-regulation and self-knowledge. The tension between revealing too much and too little, between withholding and revealing, echoes that of the *pharmakon*, where the distinction between poison and remedy rests on just such a sensitivity.

The sensation fiction discussed in this chapter demonstrates a focus on the instability of both language and text and reveals how this corresponded with a similar characteristic of the body of the drug user or addict. The scrutiny that the drug and drug user are placed under, by the narrative gaze and other characters, exposes a slippage between external appearance and internal reality, portraying the drug-influenced body as an unreliable figure, disrupting the connection between sign and signifier. As well as this form of gaze, the drug user frequently exhibits an intense self-examination, an internalised interrogation that reveals the uncertainty of the addict's own experience. The complexities of consumption position body and text as mutable points of mis/information, embodying a problematic dissemblance that evades categorisation and order. The medical texts and advertisements discussed also reveal how even specialised language could be subject to complex shifts, reflecting and informing public views of private bodies. The cautionary discourse found in medical periodicals could be reframed to encourage commercial exchange, exposing the duality of words and texts.

The final chapter will consider how the addict's body is further transformed into an unknown and unknowable site through its association with advancing scientific endeavour, increasing imperial disquiet and emerging psychological discourse. From the 1880s onwards, a resurgence of Gothic tropes and themes can be found in the narratives published, further defamiliarising the human body, as well as both the urban cityscape and domestic sphere. While sensation fiction had shown the possibility of inconsistency between appearance and internal reality, the narratives of the final decades of the nineteenth century contained bodies which could materially transform, mutable figures that revealed the fundamental instability of

the physical form. As more potent forms of drug were developed, the focus on how these substances affected the individual, physically and mentally, became more concentrated, and, in its intensity, figuratively dissected the body in order to perceive any change. The body associated with drug use is, therefore, one which consistently rejects forms of permanency, splitting into separate entities or transfiguring completely. The *pharmakon*'s influence has also become more volatile – as the power of available drugs increased, so too did the danger and uncertainty associated with their use. The distinction between cure and poison was increasingly indefinite and attenuated, echoing the lack of certainty surrounding the body itself.

Chapter Three

‘This spectral illusion – this nothing, this figment of my brain and nerves’:

Addiction, the Body and the Mind at the *Fin de Siècle*

During the final decades of the nineteenth century, reports and discussion of the Whitechapel murders, now popularly attributed to ‘Jack the Ripper’, extensively occupied the pages of the British press. In the absence of perceivable progress in the official case, newspapers and periodicals speculated about both the perpetrator and his motive, in language that revealed the *fin de siècle*’s preoccupation with violent social or moral atrophy. The *Pall Mall Gazette* published a list of ‘Suggestions of the Public’ relating to the crimes, including that the murders were committed by a ‘fanatical vivisectionist’, a ‘Burke and Hare Theory [...] that the murderer is employed to get anatomical specimens for some experimentalist’ and ‘[t]he Jekyll and Hyde Theory – [t]hat the murderer lives two lives, and inhabits two houses or two sets of rooms’.¹ These theories conflated violence and criminality with the medical or scientific sphere, specifically one associated with experimental modernity. The figure of the murderer himself seems to have been publicly perceived as representing a dangerous professional knowledge that exceeded its margins of control, embodying the conflict between advancement and degeneration that characterised the *fin de siècle*. The sense of an untrustworthy duality or doubleness is fundamental to the discourse surrounding the murderer and the crimes, perceivable in the dramatic language used within the press. While many publications nurtured public fascination with the case, *The Lancet* suggested that such interest was a ‘declension in the public tone and taste’, and revealed a ‘growth of a taste for sensationalism, as shown by the character of journalism, fiction, and the stage’.² The article

¹ ‘Who Is the Murderer and How May He Be Caught?’, *Pall Mall Gazette*, 2 October 1888, p. 7.

² ‘The Growth of Sensationalism’, *The Lancet*, 27 October 1888, pp. 827–28 (p. 827).

emphasises the distinction between ‘reasonable publicity’ and the ‘prurient and demoralising amplification of [...] sickening details [...] pandering to low passions’, which may have a ‘corrupting influence’ on certain members of society. The tone of contemporary literature is also addressed by the article, which states that the ‘realism’ of novels consists of ‘the deliberate and systematic choice of what is vile and corrupt for the purposes of fiction’.³ This condemnation of the public, cultural preoccupation with violence and immorality, and the belief in its adverse impact on society reveal an underlying state of vulnerability and volatility that threatens body and body politic.

The instability prevalent at the *fin de siècle* manifested itself in literary developments that explored the potential fissures in once-reliable cultural referents. Debbie Harrison discusses how the final decades of the nineteenth century were characterised by ‘a style of writing that combines medical realism with the Gothic mode’. Harrison continues: ‘This medico-Gothic mode also introduced an element of subversion through the doctor’s personal relationship with drugs and addiction, which in turn undermined the perception of rational middle-class masculinity’.⁴ Her article explores how literary and medical discourses were increasingly conflated during the 1880s and ’90s in attempts to articulate fears surrounding the individual body and body politic. As Harrison notes, the figure of the male doctor represented a site where these concerns seemed to converge, and where ideas of transgression and progress were in conflict. The sense of dichotomy or slippage associated with the doctor and drug use evokes the figure of the *pharmakeus*, embodying a problematic contradiction that undermined the sense of both professional privilege and secure masculinity.⁵ This was

³ Ibid., p. 827.

⁴ Debbie Harrison, ‘Doctors, Drugs, and Addiction: Professional Integrity in Peril at the Fin de Siècle’, *Gothic Studies*, 11.2 (November 2009), 52–62 (p. 53).

⁵ In his discussion of ‘Plato’s Pharmacy’ (1981), Derrida asks whether the figure of Socrates is ‘a master of the *pharmakon*? And in that way isn’t he the spitting image of a sophist? A *pharmakeus*? A magician? A sorcerer? Even a poisoner?’ See *Dissemination*, trans. by Barbara Johnson (London and New York: Bloomsbury Academic, 2013), pp. 71–186 (p. 119).

most sensationally apparent in the cultural response to the murders attributed to Jack the Ripper, which ‘journalists such as W. T. Stead thought were perpetrated by a sadistic medical maniac’ and ‘gave rise to an unprecedented level of hysteria in the local and national press.’⁶ The imbrication of medical professional and criminal that occurred within both the press and popular imagination had been prefigured within the fiction published in the periodicals, and anticipated by texts such as Robert Louis Stevenson’s *Strange Case of Dr Jekyll and Mr Hyde* (1886).⁷ The concepts of the doctor/scientist and drug user/addict had been problematically conflated throughout the century in popular culture, partly in response to the enduring presence of figures such as Humphry Davy and Thomas De Quincey. Fiction published during the *fin de siècle* articulated more exaggerated fears by means of a violent and destructive form of masculinity associated with science or medicine, and positioned the drug, whether medicinal or experimental, as a site of corruptive, or contaminative, potential.

Harrison’s article references the work of Fred Botting in its discussion of *fin de siècle* literature. In his landmark work *Gothic*, Botting suggests that although the Gothic texts of the last decades of the nineteenth century

hark[ed] back to Romanticism, it was in the context of Victorian science, society and culture that their fictional power was possible, associated with anxieties about the stability of the social and domestic order and the effects of economic and scientific rationality.⁸

An integral link existed between contemporary social and scientific developments and the texts that could be classed as Gothic at the Victorian *fin de siècle*, emphasising the specific temporal pertinence of the interplay between evolving scientific and literary discourses.

While the Gothic genre had traditionally been associated with medieval or feudal European

⁶ Harrison, p. 53.

⁷ While Stevenson’s *Jekyll and Hyde* was not serialised within a periodical, its initial publication (intended for the popular Christmas market for ghost stories) resembled a form of ‘penny dreadful’: a cheaply produced magazine whose sensational material and relatively inexpensive cost made it appealing to a popular audience. In this sense, the text is more comparable with serialised periodical fiction than with more costly novels published individually.

⁸ Fred Botting, *Gothic*, 2nd edn (London and New York: Routledge, 2014), pp. 128–29.

contexts, by grounding their texts within a recognisable and contemporary world, nineteenth-century authors increasingly gave a new intensity and corporeality to contemporaneous anxieties, most notably at the end of the century. Medicinal science was at the forefront of this cultural disquiet, with popular conceptions of pharmaceutical research and experimentation focusing on the almost supernatural potential of the field.

Keir Waddington notes that ‘social historians of medicine have pointed to a medicalization of society and the growing authority of medical experts and the state from the late nineteenth century onwards to define the normal and the pathological.’⁹ Through this evolution within society, the sublimation of scientific or medical narratives within the Gothic genre can be seen as part of a wider cultural preoccupation rather than a specifically literary phenomenon. It is in Gothic fiction, however, that fears surrounding medicine and drugs were articulated most effectively, the medical discourse within the texts allowing a comprehensive examination, not only of science’s capabilities but of its potentially deleterious impact on both society and individuals. Reconfiguring established concepts of the human body and mind, medical Gothic reflects the conflicting senses of progression and regression that characterised *fin de siècle* popular culture. Waddington further suggests that ‘in the last decades of the nineteenth century ideas about heredity and degeneration acquired a new significance as part of wider discourses about the state of European nations, empires and race that reflected the socio-political pessimism of the period’.¹⁰ The danger that characterised Gothic explorations of drugs and medicine also, therefore, encompassed fears concerning national and international issues as well as those surrounding the individual body.

The *fin de siècle* Gothic preoccupation with scientific experimentation and its intrinsic connection to the self and the body once again recalls the work of figures such as Humphry

⁹ Keir Waddington, *An Introduction to the Social History of Medicine: Europe since 1500* (Basingstoke and New York: Palgrave Macmillan, 2011), p. 255.

¹⁰ *Ibid.*, p. 328.

Davy and Thomas De Quincey. This inherently masculine sense of investigation demonstrates an enduring pertinence to cultural examinations of the drug and drug user, as well as the human body more widely. Texts such as Stevenson's *Jekyll and Hyde* and the anonymous 'The Strange Experience of Mr Luke Venables' (1891) reveal a conscious reflection and manipulation of the scientist-figure and the milieu of physiological experimentation which he inhabited. The pathologies associated with drugs and their impact on the body were also increasingly appropriated by texts such as Arthur Machen's 'The Novel of the White Powder' (1895), as well as *Stories from the Diary of a Doctor* (1893–95) by Louisa Thomasina Meade and Edgar Beaumont. While the work of Davy and De Quincey retained cultural significance throughout the nineteenth century, the 1880s and '90s also saw substantial developments in fields related to psychological investigation, ensuring that the connection between mental and physiological processes increasingly formed both a professional and popular focus.¹¹ The more that knowledge was discovered, or posited, about mind and body, however, the more each seemed capable of becoming unknowable sites associated with the unfamiliar and the incomprehensible.

During the nineteenth century, cultural perceptions of drug use were revolutionised by the increasingly advanced field of psychology.¹² The formulation of this scientific field was perceived as essential to a comprehensive medical knowledge, with William James writing in 1890, for instance, that 'brain experiences, must take a place amongst these conditions of the mental life of which Psychology need take account.'¹³ The dialogue between medical and

¹¹ Significant publications of the late 1800s include Emil Kraepelin's *Compendium der Psychiatrie* (1883), Hermann Ebbinghaus's *Über das Gedächtnis* (1885), William James's *The Principles of Psychology* (1890) and Sigmund Freud's *Die Traumdeutung* [*The Interpretation of Dreams*] (1899). Eighteen eighty-three saw the founding of the first experimental psychology research laboratory at Johns Hopkins University in Baltimore.

¹² See 'Introduction' from p. 7, as well as Louise Foxcroft, *The Making of Addiction: The 'Use and Abuse' of Opium in Nineteenth-Century Britain* (Aldershot and Burlington: Ashgate, 2007); Stephanie J. Snow, *Blessed Days of Anaesthesia: How Anaesthetics Changed the World* (Oxford and New York: Oxford University Press, 2008); and Virginia Berridge, *Opium and the People: Opiate Use and Drug Control Policy in Nineteenth and Early Twentieth-Century England* (London and New York: Free Association Books, 1999).

¹³ William James, 'Principles of Psychology' (1890), quoted in *Literature and Science in the Nineteenth Century*, ed. by Laura Otis (Oxford and New York: Oxford University Press, 2009), pp. 373–77 (p. 376).

literary explorations of the mental faculties is one which has been widely acknowledged, with the discussion of drug use and abuse being encompassed within this evolving discourse. De Quincey's 1822 account of the 'art and mystery of opium-taking' describes the initial consumption of opium in language that draws on both philosophical and Biblical referents: 'what a revulsion! what an upheaving, from its lowest depths, of the inner spirit! what an apocalypse of the world within me!'¹⁴ This powerful mode of expression articulated complex ideas about addiction in the midst of underdeveloped psychological and medical terminology. James's *Principles of Psychology* arguably echoes this sense of inner violence and turmoil when considering the impact of drugs, noting that 'consciousness is abolished or altered' through 'a very few ounces of alcohol or grains of opium'.¹⁵ The implicit power of the drug that can 'abolish' consciousness and prompt an internal 'apocalypse' through the ingestion of only a small amount suggests a corrupted consumption where there can be no moderation or individual control. Thus, a sense of dangerous excess continued to inhabit the emerging lexicon of psychological research, articulating a problematic dichotomy of progression and regression.

Opium dens in the *Strand Magazine* and *Illustrated London News*

The preoccupation with corruption or regression that characterised *fin de siècle* culture was evident in the continued fascination with habits of opium-eating, and the sites associated with the practice. An article in the *Strand Magazine* from 1891 gives an account of the experience of visiting an opium den, specifically 'the den which was visited by Charles Dickens' and using 'the pipe which had the honour of making that distinguished novelist sick.'¹⁶ The den

¹⁴ Thomas De Quincey, *Confessions of an English Opium-Eater*, ed. by Grevel Lindop (Oxford and New York: Oxford University Press, 2008), p. 39.

¹⁵ James, p. 376.

¹⁶ 'A Night in an Opium Den', *Strand Magazine*, 1.6 (June 1891), 624–27 (p. 624). Subsequent quotations will be taken from this text and given parenthetically in the main body of this dissertation.

is, therefore, initially constructed as a form of tourist attraction, of interest because of its link to literary traditions rather than its pertinence to the current state of social, moral or indeed medical conditions. By placing its emphasis on cultural relevance, the article reveals how certain habits of drug use were enmeshed within popular consciousness without necessarily being perceived by the reader as having medical significance. The narrator of the article states:

I had lovely dreams, and I have no doubt that by the aid of imagination, and a skilful manipulation of De Quincey, I could concoct a fancy picture of opium-smoking and its effects, which might pass for a faithful picture of what really occurred [...] what those dreams were, I could not for the life of me now describe, for they were too aërial and unsubstantial to be caught and fixed, like hard facts, in words, by any other pen than that of a Coleridge, or a De Quincey. (p. 624)

This passage accentuates how literary interpretations of opiate use influenced public perspectives of this form of drug consumption, constructing and perpetuating the Romantic ideal of the isolated but gifted individual. The article does, however, also identify the slippage between the reality of opiate use and the literary construction of figures such as De Quincey and Samuel Taylor Coleridge. The acknowledgement of this interposition brings to the fore the complexity inherent in creating a meaningful discourse surrounding opium and its ab/use: medical, as well as popular, discussions of the drug encompassed this illusory nature of language and performative aspect of addiction. The narrator of the article, while satirical in his tone, states that he has ‘confined’ himself ‘strictly to the facts of my experiences’ (p. 624), positioning the text as an alternative form of drug narrative – one that eschews the fantastic in favour of a form of realism, and a vision of the opium den as it existed rather than as a literary trope.

This realistic narration of the experience continues as the narrator describes in detail the individuals encountered in the opium den. The proprietor of the den was ‘a Chinaman named Chang’, who

took great pains to explain to me that his wearing no pigtail was attributable, not to his own act and deed, but to the fact that that ornament had been cut off by some person or persons unknown, when he was either drunk or asleep [...] The deadliest insult which can be offered to a Chinaman (so I understood him) is to cut off his pigtail, and it was only when referring to this incident, and to his desire to wreak a terrible vengeance upon the perpetrators, that there was any cessation of his embarrassing smile. The thought of the insult [...] and of his consequent degradation in the eyes of his countrymen, brought so evil a look upon his parchment-coloured features, and caused his small and cunning eyes to twist and turn so horribly, that I was glad to turn the conversation to pleasanter topics [...] (p. 625)

The description of this incident suggests an enduring fascination with Chinese customs and their significance within the urban site of London, representative as they were of the city as a multinational location rather than a symbol of British nationality.¹⁷ While the anecdote, and personal description, reinforce stereotypical perceptions of Chinese identity, the article's focus on the body of the proprietor also demonstrates a significant preoccupation with individual physicality. The incident of the pigtail raises the concern of the body being vulnerable to a form of disfigurement that alters or even erases identity, threatening the fundamental links between appearance and subjectivity. The lack of certainties surrounding the incident contributes to this sense of anxiety, the unknown assailants representing an indefinable danger and the detail of the man being 'drunk or asleep' suggesting a substance-induced weakness or exposure. The 'evil' transformation of the proprietor's appearance when he speaks of the theft and the way in which his eyes 'twist and turn so horribly' also reveal a fixation with changes to bodily appearance and how these can be perceived or represented as macabre or unpleasant (p. 625). While the article portrays exaggerated forms of this bodily response, it nevertheless articulates an increasing anxiety surrounding the possibility of

¹⁷ In his seminal work *Orientalism*, Edward W. Said writes that 'so far as the West was concerned during the nineteenth and twentieth centuries, an assumption had been made that the Orient and everything in it was, if not patently inferior to, then in need of corrective study by the West. The Orient was viewed as if framed by the classroom, the criminal court, the prison, the illustrated manual. Orientalism, then, is knowledge of the Orient that places things Oriental in class, court, prison, or manual for scrutiny, study, judgment, discipline, or governing.' The sketch under discussion can be said to affirm ideas of Orientalism through its scrutiny of the opium den and the individuals within it, as well as through its informational tone. See Edward W. Said, *Orientalism* (London and New York: Penguin, 2003), pp. 40–41.

uncontrollable and intense physiological change, and the Chinese man's association with opiates draws substance use into this discourse. The narrator's scrutiny of the den's proprietor expresses both national and bodily insecurity, and the ways in which they are connected.

The sense of close observation is continued as the narrator enters the den and comes into contact with other opium users. The 'reeking hole' is 'dirty and dark', and the 'wretched smokers' encountered within are noted for the 'ghastly pallor of their complexion' and the 'listlessness of their bearing' which reminds the narrator 'not a little of the "white lepers" of Norway' (p. 625).¹⁸ This comparison equates the drugged body with the diseased and foreign body, othering it and portraying it as a site of anxiety regarding national and individual security. The description once again emphasises the way in which the body associated with drug use is perceived as abnormal or disconcerting to the observer, encompassed within a medical framework – even though, in this instance, it is not one specific to addiction. The sketch continues to describe another individual present at the opium den:

a partly naked Malay of decidedly evil aspect, who shrank back on my entrance, and coiled himself up in the recesses of a dark corner, whence he lay furtively watching me, very much in the same way in which the prisoned pythons in a serpent-house watch the visitors who come to tap at the glass of their cages. (p. 626)

This depiction dehumanises the individual associated with drug use, emphasising instead an animalistic quality of the body that creates a threatening and unnerving presence, articulating

¹⁸ This association of leprosy with Norway was due to the research into the disease and the discovery of its cause at Norwegian institutions: 'An historical overview of leprosy research and control in Norway indicates that leprosy was not regarded as a serious health problem by the Norwegian authorities prior to the 1820s. Censuses of leprosy sufferers in 1836, 1845 and 1852 each reported more new patients. Control measures were initiated following the 1852 census which reported 1782 patients. A Chief Medical Officer for Leprosy was appointed, and local measures were entrusted to District Health Officers. By Royal Decree in 1856, the National Leprosy Registry of Norway was founded. The first leprosy hospital in Norway, St George's in Bergen, probably dates back to the 15th century. In 1849, a leprosy research hospital was completed. Three additional hospitals were built in the period 1854–1861. The total capacity in 1861 was 930 beds. In 1873, the leprosy bacillus *M. leprae* was discovered at the research hospital, and it became recognized that leprosy is an infectious disease. It was suggested that transmission could be reduced by isolation of contagious individuals from the general community. The admission to hospitals was voluntary up to 1875. By legislation in 1877 and 1885, leprosy patients either had to be isolated in separate rooms in their homes, or had to be admitted to a hospital, if necessary with the help of the police.' See Abraham Meima, et al., 'Disappearance of Leprosy from Norway: An exploration of Critical Factors using an Epidemiological Modelling Approach', *International Journal of Epidemiology*, 31.5 (October 2002), 991–1000 (p. 992).

negative stereotypical imperial attitudes. The description also reiterates the significance of the gaze upon the body, stressing as it does the furtive scrutiny of the opium user, adding to the sense of unease and complicating the observatory authority of the narrator. The imagery of the serpent-house, with visitors watching the animals in glass cages, stresses how the individuals in the opium den are reduced to spectacles put before the public gaze of the reader, the body of the drug user presented as a curiosity or novelty equatable with exotic creatures. The complex interaction between the narrator and the 'Malay', stressing how both observe and are observed, creates a sense of mistrust that reaffirms the potential threat of the mutable body.

The importance of observation remains paramount throughout the article, with the narrator remarking that one of the Chinese opium smokers

lay down on his back with his arms behind his head, and with his legs drawn up to his body, in which singularly graceful and easy attitude he carried on a conversation with his friend, watching me narrowly all the time, through the chink between his knees (p. 626).

While not portraying the man as animalistic, the description nevertheless maintains the preoccupation with the body, intently noting his movements and recording his position with corporeal precision. The contrast between the description of the 'Malay' and the 'Chinamen' suggests a lack of parity in popular perceptions of the drug user and non-British individuals, establishing a complex and disparate attitude towards these figures. The narrator does, however, emphasise that the Chinese man was 'watching me narrowly all the time', returning the narrative focus to keeping the individual body under scrutiny, as well as suggesting that drug users were observing subjects themselves as much as they were an object of observation. The act of returning the gaze gives the drug user a threatening agency, and a power which undermines that of the observer, shaping this figure as an active participant within complex social and cultural interactions.

The reversal of the narrative gaze continues as an ‘Englishwoman’ within the opium den ‘proceeded to take stock’ of the narrator:

Beginning at my boots, and travelling up by way of trousers and waistcoat, up to my collar and face, she examined me so critically and searchingly from head to foot that I fancied once or twice I could see the row of figures she was inwardly casting up, and could hear her saying to herself, ‘Boots and trousers, say, sixty bob; and watch and chain, a couple of flimsies each; which, with coat and waistcoat, bring it up to thirty shiners; which, with a couple of fivers for links, loose cash and studs make about forty quid – that’s *your* figure, young man, as near as I can reckon it’ (pp. 626–27).

This mercantile deconstruction of the narrator again demonstrates a negotiation of power, as well as the intrinsically economic nuances in perceptions and portrayals of drug use. The unnerving transformation of the body to a monetary ‘figure’ combines this association of the drug with trade and the fear of the mutable body, the woman’s gaze demonstrating a destructive and consumptive force. The complexity of the narrator’s interactions within the opium den reflects the uncertainty inherent in his position: he is both an observer and participant, attempting to maintain an external gaze while simultaneously being subsumed by the environment of the den. The article demonstrates a fixation with observing the changeable body of the drug user, and reveals that the body of the observer can also be subject to an uncertain mutability.

The *Illustrated London News* also explored the enduring prevalence of the image of the opium den. An article from December 1890, entitled ‘An Opium Den in East London’, acknowledges the influence of ‘Dickens and other popular writers’ in perpetuating the familiar cultural concept of the opium den, as well as its associations with concern surrounding drug use and abuse.¹⁹ The article initially stresses the inauthenticity of literary invention, emphasising that many of the dens in London have been ‘shut up’, suggesting a distinction between the imagined urban landscape of the past and its present reality. The article also states that the opium den does not do ‘half the mischief that was and still is done

¹⁹ ‘An Opium Den in East London’, *Illustrated London News*, 6 December 1890, p. 711.

by the gin-shop at the street corner’, distinguishing between different forms of substance abuse, and between the wider impact they have on the wellbeing of the body politic. As with opiates, the cultural perception of gin and its consumption was complex, encompassing multiple socio-economic nuances that reflected changing national and historical attitudes. This reference to it within an article exploring the use of opium suggests the emergence of an intricate consideration of how to articulate and categorise different forms of unhealthy or excessive habits.²⁰ Despite this development, many of the tropes popularly and historically associated with opiate use are reaffirmed within the article, stating as it does that ‘the opium-smoker will become a [...] wretched creature [...] unless he happens to be a man of high intellectual faculty and literary attainments, a De Quincey or a Coleridge’. As with the *Strand* piece, the article initially establishes a distinction, heavily associated with the legacies of work by De Quincey and Coleridge, between the scholarly masculine drug user and a baser sense of addiction, reiterating the discontinuity that existed within popular concepts of drug use. There is a duality inherent within the reference to forms of drug culture, with the continued significance of individual figures seemingly at odds with the more general sense of corruption that pervades the wider social aspect.

The complexity of popular attitudes towards drug use is emphasised through the illustrations which accompany the article (see Figure. 3.1, below). The text itself states that ‘[t]o see four or five men deliberately stupefying themselves, and destroying nerve and brain, in a garret in the East-End, is a disgusting spectacle’, explicitly combining physiological discourse with a sense of cultural or moral disapproval. Describing the scene as a ‘spectacle’ emphasises public fascination with aspects of drug use, as well as echoing the sense of close observation found within the *Strand* article discussed above. It also suggests a performative

²⁰ See Chapter One (from p. 39) for a discussion of the ways in which alcohol consumption was encompassed within and also informed emerging concepts of addictive behaviours.

element to this form and site of consumption, one linked to their intrinsic literary significance and the way in which works of fiction perpetuated a sense of public voyeurism surrounding drug use. The articles discussed, as well as fictive accounts of opium dens and their inhabitants, can be placed within a broader visual culture that foregrounded the intricate connection between the observer and observed, as well as the complex fetishisation of the body of the drug user. The sense of multifaceted display or performance is arguably less evident in the illustration accompanying the article, which depicts four Oriental men smoking opium within a dark room containing only basic domestic furniture but ostensibly respectable.



Fig. 3.1. 'An opium den at the East End of London', *Illustrated London News*, 6 December 1890, p. 712

The men's nationality is conveyed both through their physical features and various sartorial details; however, the image does not portray them as the 'wretched' individuals described in the text, instead depicting them as respectably dressed, and, apart from one sleeping, conscious and calmly smoking around the central lamp. The disparity caused by the image's sedate atmosphere in contrast with the text's description of a 'disgusting spectacle' suggests a lack of cohesion within attitudes towards patterns of behaviour associated with

drug use, and slippage surrounding the (perceived) identities of those that consumed these substances.

Drug habits in *fin de siècle* periodical culture

The enduring cultural fascination with opium can also be seen in the fiction published within periodicals. ‘The Man with the Twisted Lip’ by Arthur Conan Doyle, published in the *Strand Magazine* in July 1891, depicts and explores the opium habit within a recognisable bourgeois urban environment and society. The initial paragraphs describe the character of Isa Whitney, who is described as being ‘much addicted to opium’, his initial experience with the drug ‘a foolish freak when he was at college, for having read De Quincey’s description of his dreams and sensations, he had drenched his tobacco with laudanum in an attempt to produce the same results.’²¹ The description of Whitney’s early drug use as ‘foolish’ portrays it as an imprudent act of inexperience rather than a dissident rejection of the cultural norms regarding opiate consumption, suggesting that he is a more accessible figure and not one fundamentally detached from familiar society. The reference to De Quincey emphasises the recurring fascination with the mythical Romantic associations of opium use, Whitney’s attempt to recreate the infamous ‘dreams and sensations’ revealing a popular attitude that privileged this account over subsequent medical knowledge. The narrative initially demonstrates a preoccupation with these sensationalised physiological responses to opium, reflecting the amalgamation of fascination and concern that was associated at the *fin de siècle* with medicinal substances that were dichotomously familiar and potentially dangerous. The text continues to describe Whitney as ‘an object of mingled horror and pity [...] with yellow, pasty face, drooping lids and pin-point pupils, all huddled in a chair, the wreck and ruin of a

²¹ Arthur Conan Doyle ‘The Man with the Twisted Lip’, *Strand Magazine*, 2.7 (July 1891), 623–37 (p. 623). Subsequent references are taken from this version of the text and given parenthetically in the body of the chapter.

noble man' (p. 623). These established tropes of the opiate addict, as well as the implicitly moralised tone of Watson's narration, reaffirm Whitney's position as a pitiable, rather than threatening, figure, associated not with ideas of criminality but with a tragic sense of degenerative nobility. The initial description of Whitney, therefore, introduces multiple and complex concerns surrounding opium, the significance of drug abuse in a period of pharmacological progress and the fear of disintegrating masculinity.

'The Man with the Twisted Lip' also reaffirms ideas associated with the popular conception of the opium den. Whitney is reported to visit, and subsequently needs rescuing from, an opium den 'in the furthest east of the City' named the 'Bar of Gold', where he is 'among the dregs of the docks, breathing in the poison' (p. 623). The implicitly exotic and luxurious connotations of the den's name juxtapose the idealised sense of international trade with the insalubrious reality of the London docks, while the 'poison' of opium reflects the corruption of the colonial marketplace. The attenuated urban location emphasises the disparate social associations linked to the different areas of the Empire represented microcosmically by London, as well as the sensational tone of the narrative itself. The text provides a lengthy description of the 'Bar of Gold', which is

[in a] vile alley lurking behind the high wharves which line the north side of the river [...] Between a slop shop and a gin shop, approached by a steep flight of steps leading down to a black gap like the mouth of a cave [...] (p. 624)

A quasi-supernatural atmosphere emerges through this description, with the 'black gap like the mouth of a cave' and the 'flickering oil lamp above the door' echoing tropes found within exploratory narratives and suggesting that the opium den and addicts are somehow Other (p. 625). The geographical location, although fictional, is clearly and thoroughly fixed in the reader's mind, while the proximity of both slop and gin shops establishes the social position of the opium den, identifying concerns associated with working-class lifestyles. Just as the addict is portrayed using longstanding literary tropes, the den is also represented as belonging

to a familiar archetypal metropolitan topos. The subterranean aspect of the opium den suggests an even more extreme dissociation from the domestic security of bourgeois London, as well as a sense of degeneration into a primitive human state.

Doyle's text continues its exploration of the popular image of the opium den, shifting focus to its interior and the figures found within. Watson describes a 'long, low room, thick and heavy with the brown opium smoke, and terraced with wooden berths, like the forecastle on an emigrant ship' (p. 624). The comparison of the den to a ship transforms it into an unsettled space, the reference to emigrants re-enforcing this lack of reassuring national identities or margins.²² Thus, the addicts within the narrative are arguably depicted as victims of the displacing effect of international trade, their presence a subversive reminder of the invasive nature of colonialism within London. There is also an explicit contrast between the domesticity of Watson's 'cheery sitting-room' and 'arm-chair' and the subsequent description of the opium den, emphasising the displacement from a professional or bourgeois lifestyle. The narrative goes on to note that '[t]hrough the gloom one could dimly catch a glimpse of bodies lying in strange fantastic poses, bowed shoulders, bent knees, heads thrown back and chins pointed upwards' (p. 624). This imagery ascribes a Gothic quality to the opium den and the addicts, whose bodies are distorted and rendered uncannily inhuman. Just as the den itself has no fixed position within the urban landscape, the opium addicts' bodies have become a monstrous mimicry of the human form, symbolising the moral distortion popularly associated with their drug habit. The opium users '[talk] together in a strange, low, monotonous voice' –

²² Depictions of the nineteenth-century opium den such as Conan Doyle's can be framed by Foucault's theory of the heterotopia, which is a 'counter-site[s], a kind of effectively enacted utopia in which the real sites, all the other real sites that can be found within the culture, are simultaneously represented, contested, and inverted.' The opium den can be understood as this kind of space that exists liminally in cultural practice, while simultaneously reaffirming and destabilising cultural boundaries. Foucault also notes that these heterotopias are 'most often linked to slices in time [...] The heterotopia begins to function at full capacity when men arrive at a sort of absolute break with their traditional time', suggesting a particular significance to public fascination with the image of the opium den at the *fin de siècle*, a period of fundamental social uncertainty associated with the approaching new century. See Michel Foucault, 'Des espaces autres' (Of other spaces), translated by Jay Miskowicz, *Diacritics*, 16.1 (Spring 1986), 22–27 (pp. 24 and 26).

this description emphasising their abnormality and dehumanising them further, suggesting that they are distinct from normal social interaction (p. 624). Watson as narrator focuses the reader's view of the addicts through a moral and medical lens, anatomising bodies and subjecting them to a rigorous and categorising gaze. Addiction and addicts are revealed as both almost supernatural beings and inextricably linked to social and cultural values.

This association of drug use with the abnormal or unnatural is at the centre of a fictional piece published in *All the Year Round*, also in 1891. Titled 'The Strange Experience of Mr Luke Venables', the text is presented as the 'faithful transcript' of the account of a man awaiting trial for murder and is prefaced by the comments of 'Henry Keene-Adams, Esq., M.B., M.R.C.S.', who states that he 'looked at it chiefly from a professional point of view'.²³ Representing the narrative as an authentic account of medical interest follows an established literary pattern of staging texts in ways that stressed their pertinence to nineteenth-century readers, while emphasising how medical or scientific practices informed the presentation and shaping of fictional texts. The pseudo-medical confessional nature of the text also enables the narrator to establish a tone of intimacy, and affords the reader the authoritarian gaze that assesses the boundaries of the ab/normal. The narrator establishes the authenticity of his experiences by stating that he does not believe in 'mesmerism, animal magnetism, odic force, or anything of that sort', and that he 'remained throughout completely master of myself, for the simple reason that I knew perfectly well that these phenomena were due to natural causes, and were capable of explanation according to undiscovered but simple natural laws' (p. 254). This assertion reveals the scientific pluralism that operated during the *fin de siècle*, as well as the way in which the unknowable outcomes of scientific progress influenced the cultural understanding of individual experience. The narrator's statement emphasises this imbrication

²³ 'The Strange Experience of Mr Luke Venables', *All the Year Round*, 12 September 1891, pp. 254–60 (p. 254). Subsequent references are taken from this version of the text and given parenthetically in the body of the chapter.

between popular and scientific perspectives, which enabled public familiarity with contemporary theories and how individual lives could be considered through such specialised lenses.

The story also demonstrates how Romantic literary tropes continued to be utilised to explore changing attitudes towards both drug use and scientific concepts. Venables writes that ‘I have all my life been something of a recluse’, and describes how the solitary nature of his house corresponds with his own character:

The sombre appearance of the place suited my idiosyncrasy, and accorded with my habit of mind, which always had a tendency to melancholy. I loved, too, to wander under the dark shade of the trees on a summer noon, or, better still, to sit by my parlour fire and hear them moaning and shrieking like creatures in pain, through a long winter’s evening. (pp. 254–55)

Constructing this sense of personal and geographical reclusivity, Venables initially portrays himself in a similar manner to figures such as De Quincey, whose 1821 *Confessions* helped to popularise separation from society as a fundamental part of the addict’s identity. There is, however, an element of cruelty in Venables’s enjoyment of the trees ‘moaning and shrieking like creatures in pain’, which brings to the narrative a darker sense of isolation and suggests a more macabre individual deviancy. The passage portrays a discordant natural environment that reflects the dissonance or conflict within Venables’s own temperament, prefiguring the exploration of the divided self later in the narrative. Venables continues to describe his lifestyle, including that his

time was occupied in reading, chiefly books on psychology and physiology, and in the dangerous but delightful amusement of day-dream or reverie. Many a time have I spent hours in my little study, or in summer sitting on a bench in my old-fashioned garden, in a state of semi-unconsciousness, while my fancy led me by the hand and took me beyond the rocky barrier which separates this dull world of ours from ‘faery land forlorn’. (p. 255)

This passage again seems to evoke echoes of the intellectual Romantic, emphasising Venables’ familiarity with evolving scientific theory; however, it also suggests that this habit of reading represents an unhealthy and excessive consumptiveness, consolidating his

separation from wider social interaction rather than diminishing it. The focus on division is continued with Venables' practice of indulging in 'day-dream or reverie', which further removes him from the reassuring or familiar experience of corporeality. The tropes that once constructed an idealised, if isolated, Romantic figure are, in this text, malformed and instead result in the portrayal of a problematic and dislocated individual.

Venables continues to stress his fascination with physiological and psychological theory. In particular, he focuses on 'spectral illusions', and the 'curious tale of a portrait-painter' who

[a]fter gazing at the face and form of his visitor for that length of time, putting a line or two on the canvas as he did so [...] could conjure up that person's appearance at will, and complete the portrait at his ease, working from the imaginary form which his memory supplied. (p. 255)

Venables is curious to discover whether this ability can be 'cultivated', and, after seeing 'a girl of surpassing grace and beauty', attempts to 'coax my eyes to recall the form and lineaments of the girl whose image filled my mind' (pp. 255, 256). He continues to describe the experience:

I summoned up all my powers, fixed my gaze on the vacant space at the end of the bench on which I was sitting, and tried to imagine that she was actually seated there [...]

It came!

Suddenly, unexpectedly, as if my efforts at recalling and picturing the image had nothing to do with it, the sweet vision was before my eyes!

For some minutes I sat silent, revelling in the possession of my treasure, afraid to speak or move, lest the phantom should fade away for ever. I was well aware that what I saw was purely the creation of my own fancy, a spectral illusion [...] But it was delightful to have it by me. The likeness to the original was perfect [...]. I knew [...] that my new companion was invisible to all but myself, that it was no ghost that haunted me, but a simple natural illusion. (p. 256)

The account of this first 'illusion' continues to emphasise a sense of contradiction or uncertainty, such that while Venables stresses his own 'powers' in forming the image of the girl and states his belief that it is his 'creation', the figure is also referred to as a 'phantom', a 'companion' and as appearing as though Venables's 'efforts [...] had nothing to do with it'

(p. 256). The narrative, therefore, simultaneously proposes and denies the agency of this ‘illusion’, calling into question both its provenance and its power, and instilling further ambiguity within the text. The suggestion that the ‘phantom’ may be beyond the remit of Venables’ control reflects wider *fin de siècle* anxieties surrounding the unknown capacity of scientific advancement and the potential capabilities of the body itself. This doubt – associated with the relationship between Venables and the illusion he manages to create – illustrates the dichotomy between the perceived power and vulnerability of the individual, a problematic sense of duality that characterised the cultural introspection of the last decades of the nineteenth century.

Venables’ narrative continues to focus on this confusion between illusion and reality as his relationship with the girl, Ida, develops. He describes how ‘many times’ after his first experience of her, ‘the vision of this pale, sweet-faced girl came to cheer my loneliness; I grew to expect her appearance, and even began to hold conversation with her’ (p. 256). The blurred line between appearance and reality is confused further when Venables recounts meeting the real Ida, and establishing a relationship with her: ‘During those precious minutes she was mine, not in fancy alone, but in flesh and blood’ (p. 256). The distinction between the image of Ida and her reality becomes unstable, despite Venables’ assertion of her corporeality, owing to his previous insistence on the convincing presence of the illusion. The text establishes Venables as an unreliable narrator, whose ability to distinguish between the illusory and the real becomes increasingly precarious, and whose command of his own capabilities is shown to be questionable. The disintegration of the boundary between the real and imagined is continued as Venables describes the progression of his abilities to Ida:

‘I can imagine that I see an image of myself.’
‘Of yourself!’ she echoed. ‘How perfectly horrible!’
‘Not at all,’ I replied, “I think it most interesting.’
‘Interesting? – yes, in a way. But so eerie, so uncanny. I should die of fright if such a thing should happen to me.’ (p. 256)

Venables's capacity to 'see an image' of himself undermines the stability and validity of his own identity, his power in creating this illusion both demonstrating a psychological talent and destabilising the solidity of his physiological form. Ida's horrified response articulates this *fin de siècle* fear of the divided self, and the anxiety induced by the idea of a loss of control over the individual body. Venables' pseudo-scientific 'interest' contrasts with Ida's rejection, suggesting a morbid curiosity that reflects a dangerous environment of subversive enquiry.

Venables and Ida's discussion of these illusions traces the anxieties surrounding the evolving connection between science and humankind, and the fundamental questions that it raised about individual nature. Venables states that he 'did feel rather like Frankenstein' when he succeeded in creating his own illusory double, demonstrating the enduring pertinence of comparison with Romantic literary figures associated with a form of isolated masculine intellect (p. 257). The reference to 'Frankenstein' also evokes the volatility of scientific experimentation associated with Mary Shelley's 1818 novel of the same name, and prefigures the tragic complexities of Venables' own narrative as he inevitably struggles to control the power he has discovered. This increasing dissonance is also evident in Ida's language, as she refers to the illusion as 'a spectre' and as being 'strange; almost wicked', undermining Venables' rationality and introducing a threatening, supernatural tone that emphasises fear of corruption (p. 257). Venables describes how the creation of his double came from his habit of 'pitting the lower part of my being against the higher, to see which will win', articulating the concept of the divided nature of man, and a sense of internal conflict that mirrored a wider discord perceived in the body politic (p. 257).²⁴ The cultural preoccupation with the opposition between progress and entropy within society is articulated through the attitudes of Venables and Ida, with her fears reflecting an inherent caution

²⁴ For discussion of this sense of individual and social division see e.g. Gail Marshall, ed., *The Cambridge Companion to the Fin de Siècle* (Cambridge and New York: Cambridge University Press, 2007).

towards the unknown of both physiological and scientific capability, and Venables' overconfident belief in his own abilities shown to repeat recognisable tropes of destructive forms of experimentation. The illusions that Venables creates are, therefore, set within the context of *fin de siècle* uneasiness about emerging scientific theory and practice, with Romantic literary figures, such as Frankenstein, providing a referent for ideas of both potential regression and danger. The literal and figurative duality of the illusions articulates this sense of division that characterised the *fin de siècle*.

The subversive threat inherent in Venables' abilities is brought violently to the fore through the influence of opium. After being rejected by Ida, Venables' ability to distinguish between reality and illusion weakens, and the suggestion of a malformed sensibility is heightened. Venables describes how a 'black thought came into' his mind: 'suppose I were to watch for her as she passes the corner of the cliffs, clasp her in my arms, and leap over the precipice?' (p. 258) While Venables seemingly dismisses this impulse, its articulation indicates a form of descent, associated with criminality and corruption, which, although sensationalised, echoed wider anxieties of individual and social degeneration. Venables describes how, after these violent imaginings, he 'went to my medicine cupboard, poured out a dose of laudanum, drank it off, and threw myself on the bed', and proceeds to describe the physiological and psychological influence of the opium:

I felt as one benumbed; and yet my fancy was morbidly alive. I began to wonder whether I was alone. I turned, and in a half-dazed state looked across towards the window. And there – merciful Heaven! – I saw sitting on the window-seat, distinct in the moonlight, the very image and figure of myself!

It was I – my second self – or rather the spectre, the optical illusion which I had often amused myself by creating. It sat with its head between its hands, just as I myself had sat, an hour before. And as I watched it, I trembled.

There was nothing surprising in the fact that my optic nerves and the delicate organs of the eyes, excited, and not soothed to sleep, by the opium, should be capable of presenting me with an image of myself. The thing had often happened to me before; but never had I shrunk from the phantom as I shrunk now. What if it should lift its head and look at me? What if it should renew the temptation I dreaded?

Was that I myself, sitting with hidden face? Did I merely imagine that I was lying in bed? (p. 259)

Venables's horrified response to the 'optical illusion' and the sense of malevolence that he attributes to it are at odds with the equanimity of their previous encounters, suggesting that the consumption of laudanum has in some way corrupted his abilities, or amplified the perceived power of the 'spectre' in relation to its corporeal counterpart. The passage makes explicit the fear and revulsion felt as a result of this physiological duality, the 'second self' signifying both the 'lower' nature of the individual and a complete loss of control over the body that underpinned discourses of drug use at the *fin de siècle*, as well as the preceding century.

Venables' uncertainty about whether he is truly the figure at the window or in the bed discloses a fundamental fear of dislocation between mind and body, and the potential immateriality of the physical form. The narrative heavily implies a connection between the appearance of the spectre and the murder of Ida, with Venables discovering that

the suit of tweeds which I had worn the day before were marked all over with greenish mould [...] Had I been, by some absurd freak of fortune, accused of having caused poor Ida's death, would not some say I had soiled my clothes by leaving my room by the window at night? (p. 260)

Venables' unreliable narration insists on ambiguous responsibility for Ida's death, suggesting that it could be attributed solely to the 'phantom', rather than Venables himself in his state of psychological and physiological confusion. This insistence nevertheless again emphasises how the consumption of substances such as opiates was perceived as compromising the boundaries of the individual body and revealing a malformed potential for violence and corruption.

Perhaps the most infamous Victorian depiction of the dramatic physiological impact of drugs on the consumer is found in *Strange Case of Dr Jekyll and Mr Hyde* (1886), which amplifies the nootropic powers of chemical substances. In the novella's final chapter, 'Henry

Jekyll's Full Statement of the Case', the troubled doctor notes the 'trembling immateriality, the mist-like transience, of this seemingly so solid body in which we walk attired. Certain agents I found to have the power to shake and to pluck back that fleshly vestment'.²⁵

Deconstructing the idea of the body as a stable or reliable form, this passage instead emphasises its innate mutability and volatility, and the ability that chemical substances have to reveal and to manipulate this inconsistency. As the boundaries of physiological certainty dissolve, a subversive potentiality is revealed within the chemical substances available for consumption, a troubling and seemingly limitless pharmacological freedom and an increased recognition of the power of drugs to reshape both body and body politic.

Jekyll's obsessive observation and study of his own body subversively reconfigures the Foucauldian regulatory gaze associated with the medical profession. He initially views his attempt to separate the 'continuously struggling' elements of man as a form of progress, a means of perfecting the human form that adheres to the medical procedure of detecting and correcting physical deviation (p. 56). The intrinsically flawed nature of his process becomes evident, however, as the 'second form and countenance substituted' by Jekyll represents a reconstruction of the human body in the form of a subversive Other, which leads eventually to self-destruction. While Jekyll insists on the 'immateriality' of the human body, it is in fact the very real and material nature of his second self that reveals death as the only true escape from the body (pp. 57, 56).

The transformative physical process caused by the drug is described in detail in *Jekyll and Hyde*, and can be compared with accounts of more general substance use such as those by Davy and De Quincey. Jekyll describes '[t]he most racking pangs [...] a grinding in the bones, deadly nausea [...] these agonies began swiftly to subside [...]. There was something

²⁵ Robert Louis Stevenson, *Strange Case of Dr Jekyll and Mr Hyde*, ed. by Robert Mighall (London and New York: Penguin, 2003), p. 56. Subsequent references will be taken from this edition of the novella, and will be presented parenthetically in the main text of the chapter.

strange in my sensations, something indescribably new and, from its very novelty, incredibly sweet' (p. 57). The contradictory nature of the drug's effects seems to embody both the pleasure attributed to chemical substances and the discomfort that results from abstinence. The 'indescribable' and 'sweet' sensations that seem to render the body unfamiliar are similar to the 'highly pleasurable thrilling' mentioned in Davy's notes and place Jekyll's experiments in a context of scientific enquiry where technical rigour and personal pleasure exist in problematical synchronicity.²⁶ Jekyll's 'racking pangs' echo De Quincey's violent experience of the physiological impact of opium, which caused a sense of 'revulsion' and 'upheaval', language that emphasises bodily disruption.²⁷ Jekyll's account of drug use places the painful experience before the pleasurable, this reversal of the expected order of substance-induced sensations emphasising the singularity of both the drug and the experiment itself, participating in a popular discourse of drug culture, while simultaneously manipulating it in order to configure an unfamiliar and troubling scientific world. The body of the drug user is, therefore, subject to a transformative process that penetrates even to the 'bones', the fundamental framework of the human form exposed to an influence perceived as unnatural, owing to the 'deadly nausea' it causes. Jekyll also mentions 'a current of disordered sensual images running like a mill race in my fancy', echoing Davy's impression of nitrous oxide use resulting in 'vivid ideas passed rapidly through the mind', and suggesting a form of enhanced mental or psychological power.²⁸ The disorder and sensual nature of these images, however, suggests a subversive and chaotic excess, rejecting both social and medical categorisations.

²⁶ '[A]n highly pleasurable thrilling, particularly in the chest and the extremities. The objects around me became dazzling and my hearing more acute. Towards the last inspirations, the thrilling increased, the sense of muscular power became greater, and at last an irresistible propensity to action was indulged in; I recollect but indistinctly what followed; I know that my motions were various and violent'. See Humphry Davy, *Researches, Chemical and Philosophical; Chiefly concerning Nitrous Oxide; or Dephlogisticated Nitrous Air, and its Respiration* (London: J. Johnson, 1800), p. 485.

²⁷ '[W]hat a revulsion! What an upheaving, from its lowest depths, of the inner spirit! What an apocalypse of the world within me! That my pains vanished was now a trifle in my eyes: - this negative effect was swallowed up in the immensity of those positive effects which had opened up before me - in the abyss of divine enjoyment thus suddenly revealed.' See Thomas De Quincey, *Confessions of an English Opium-Eater*, p. 39.

²⁸ See Stevenson, p. 57 and Davy, p. 460.

The descriptions of Hyde himself also delineate the body as subjected to repeated or uncontrolled drug use. The initial account of Hyde given by Enfield relates ‘something wrong with his appearance [...] He must be deformed somewhere; he gives a strong feeling of deformity, although I couldn’t specify the point’ (*J&H*, p. 10). Hyde’s physical form possesses an objectionable, yet ineffable, quality that is revealed to the social gaze but capable of eluding categorisation or definition. While it can be argued that this sense of deformity might be associated with an idea of corrupt or subversive drug use, Hyde is primarily symbolic of Jekyll’s repressed nature rather than an alternative identity formed by the drug itself. The idea that drug use results in the revelatory substitution of the repressed or primal human form for the socially acceptable professional figure is an extension of the discourse articulated by Davy and De Quincey, in which the body becomes unfamiliar or uncontrollable.²⁹ The lack of control over the body associated with drug use persists and intensifies once the transformation from Jekyll to Hyde begins to occur indiscriminately: ‘I had gone to bed Henry Jekyll, I had awakened Edward Hyde. How was this to be explained? [...] how was it to be remedied?’ (p. 61). The clinical and fixated scrutiny of the addict’s body is demonstrated through Jekyll’s observation of his own form; the realisation that he is not looking at his hand – ‘professional in shape and size: it was large, firm, white and comely’ – but at Hyde’s – ‘lean, corded, knuckly, of a dusky pallor and thickly shaded with a smart growth of hair’ – alerts him to his own lack of bodily control (p. 61). The distinction here is clear between the Occidental white professional male and the drug-induced Other; once again, it is the drug that reveals the existence of this primal regressive state beneath the professional white veneer.³⁰

²⁹ Davy (p. 458) notes that, when under the influence of nitrous oxide, ‘the sense of muscular power became greater, and at last an irresistible propensity to action was indulged in; I recollect but indistinctly what followed; I know that my motions were various and violent’.

³⁰ In *Degeneration*, Max Nordau writes that the *fin de siècle* was characterised by this form of inconsistency: ‘The disposition of the times is curiously confused, a compound of feverish restlessness and blunted discouragement, of fearful presage and hang-dog renunciation. The prevalent feeling is that of imminent

‘Morphinomania’: Morphine and the female body

In an article published in *The Nineteenth Century* in 1887, Seymour J. Sharkey discusses the condition of morphinomania. Referring to this ‘uncontrollable craving for morphia’, Sharkey provides both the French *morphinomanie* and the German *Morphiumsucht* within the initial paragraph, creating the sense of an international scope of medical scholarship as well as revealing the pertinence of addiction and drug use within non-British medical markets.³¹ The European aspect introduces a sense of foreign power that connects the idea of morphine abuse with a disruptive ‘otherness’, further emphasised both by the mention of ‘opium-eating’ in ‘China and other Eastern countries in which it is so rampant an evil’ and of the belief that ‘[a]lmost every country in Europe [...] has been invaded by the pernicious habit’ (p. 335). The *fin de siècle* anxieties of invasion and degeneration, most famously explored in Bram Stoker’s *Dracula* (1897), are here inextricably linked to the cultural construction of morphine abuse, and engage with a popular Gothic medical discourse. The reference to China introduces a troublesome imperial tone, suggesting as it does the Opium Wars of 1839–42 and 1856–60, as well as a popular cultural construction of Orientalism strongly associated with opiates. Morphinomania is here represented as an invasive threat from the East and a problematic shadow of imperial power that suggests regression rather than progress.

The condition is also strongly associated with French, and particularly ‘Parisian’, society, as Sharkey quotes from Professor Paul Regnard’s 1885 lecture, *Deux poisons à la mode: la morphine et l’ether* (Two fashionable poisons: Morphine and ether) (p. 336).

Regnard states that ‘at the very moment I am speaking to you the pink of society in Paris [...]

perdition and extinction. *Fin de siècle* is at once a confession and a complaint [...] In our days there have arisen in more highly-developed minds vague qualms of a Dusk of the Nations, in which all suns and all stars are gradually waning, and mankind with all its institutions and creations is perishing in the midst of a dying world.’ See Max Nordau, *Degeneration* (Lincoln, NE and London: University of Nebraska Press, 1993), p. 2.

³¹ Seymour J. Sharkey, ‘Morphinomania’, *Nineteenth Century*, 22.127 (September 1887), 335–42 (p. 335). Subsequent quotations from this article will be provided parenthetically in the main body of the chapter.

is peacefully poisoning itself', this quotation suggesting the immoral excess or indulgence popularly associated with French culture and literature in Victorian Britain. The connection between morphine abuse and foreign literature is emphasised here by the inclusion of a passage from Alphonse Daudet's *L'Evangeliste: roman parisien* (*The Evangelist: A Parisian novel*, 1883), in which female morphinomania is explored. Thus, gendered and nationalistic discourses are combined in order to explore the dangers morphinomania presents to the Victorian world. Daudet's *L'Evangeliste* states that a 'whole society of such ladies exists', and a further quotation from the American MD Alonzo Calkins suggests that morphine 'commands the especial patronage of English ladies' ('Morphinomania', pp. 336–37).

The injection of morphine is also described by Sharkey as being 'fashionable', constructing the practice as part of the commodity culture of nineteenth-century British and European society that was strongly associated with female consumption (p. 337). Sharkey's article emphasises this preoccupation with the ways in which female drug use subverted established gender ideals and structures of moral behaviour. The article does, however, complicate the issue of addiction through the account of a male morphine addict and his uncontrollable desire for the drug when the 'regular time for the injection arrives':

If in such moments as these one tries to oppose him, to prevent his injection, or to delay it, he gets into a violent rage – he is beside himself. For the least remark his wife might make to him, he would break and smash everything. In fact, one day, when Madame L. had delayed an injection which she hoped by entreaties to prevent, he was seized with a regular attack of furious madness. (p. 338)

While the interaction initially seems to portray the wife of the addict as the idealised domestic figure, this is complicated by the element of control she exerts over her husband's access to morphine: the uncontrollable urges of the addict effectively feminise him, and the woman's ability to delay, if not to prevent, the administration of the drug allows her to usurp a traditionally masculine position of power.

Sharkey's narrative articulates a further dichotomy, as it addresses the distinction between the medical administration and personal abuse of morphine. Stating that 'the habitual employment of injections has its origin, in almost all cases, in its legitimate use as a medicinal agent', he suggests that morphine abuse results from corruption of medical resources rather than from implicitly dissolute intentions (p. 337). He notes that morphine injections are 'the most effectual and speedy method of affording relief' from extreme pain, emphasising not only the drug's necessity to Victorian pain regulation but also the state of medical investigation and comprehension of opiates (p. 338). The role of medical practitioners in introducing morphine to patients appears to be presented as a professional necessity, absolving them from any blame in first administering the substance. Through this construction of the correct and compulsory utilisation of morphine, the article in effect articulates the need for professional control and restriction in the medical marketplace. In contrast to this considered and medically authoritative use of opiates is the portrayal of morphine abuse as form of degenerative indulgence. Quoting again from Regnard's lecture, the article suggests that some people "take morphia in the same way that others smoke, drink, or play music [...] to kill time, to divert themselves, to fill with vague musings the void which idleness leaves in useless lives" (p. 336). This recreational use is specifically associated with the fashionable and leisured world, operating at odds with the professionalism of medical men and the scientific control essential to their administration of the drug. Morphine is shown to be a commoditised aspect of this lifestyle and its use as a form of a diversion, rather than purely medicinal substance, demonstrates how medical practice had been appropriated by wider social behaviours. The implicitly moral language used to describe 'idleness' and 'useless lives' positions the circulation of the drug as part of a sensationalised culture of dissipation associated with an invasive foreign influence.

Discussion of the different means of storing or transporting drugs and syringes reveals the complex amalgamation of the commercial and the medical. As previously mentioned, the article quotes from *L'Evangeliste*, a novel by Alphonse Daudet, which mentions the 'little silver case with the needle and poison', while another comment by Dr Demetrius Zambaco remarks that '[l]adies even [...] go so far as to show their good taste in the jewels which they order to conceal a little syringe and artistically made bottles' (pp. 336–37).³² These descriptions emphasise the intrinsic link between drug and marketplace, revealing the commodity culture which developed around the morphine habit. Again, the use of morphine is associated with female habits of commerce and consumption, imbricating a private feminine world with the public and commercial. These decorated objects are also problematical as they 'conceal' both the drug and syringe, underpinning the worrying sense of secrecy associated with addiction.

The medical tale 'The Wrong Prescription', written by Louisa Thomasina Meade and 'Clifford Halifax' (pseudonym of Edgar Beaumont) and published in the *Strand Magazine* in 1893, also demonstrates this fixation with the physicality of the morphine habit, featuring as it does an image of a syringe and case (see Figure 3.2, below).³³ In this example, however, the case lies open, displaying to the reader/viewer both drug and syringe, the worrying concept of concealed transgression replaced by a powerful acknowledgement of the cultural influence of morphine. While the medical profession of the narrator lends a sense of sanction to the illustration, the narrative also confronts the reader with a sensationalised pictorial

³² Dr Demetrius Alexandre Zambaco was a French physician working in Constantinople during the latter years of the nineteenth century who also wrote on the condition of morphine addiction. See P. E. Caquet, 'France, Germany, and the Origins of Drug Prohibition', *International History Review*, 43.2 (2021), 207–25.

³³ Louisa Thomasina Meade and 'Clifford Halifax' [i.e. Edgar Beaumont], 'The Wrong Prescription', *Stories from the Diary of a Doctor*, *Strand Magazine*, 6.36 (December 1893), 600–13 (p. 603). Subsequent quotations are from this text and will be given parenthetically in the main body of the chapter.

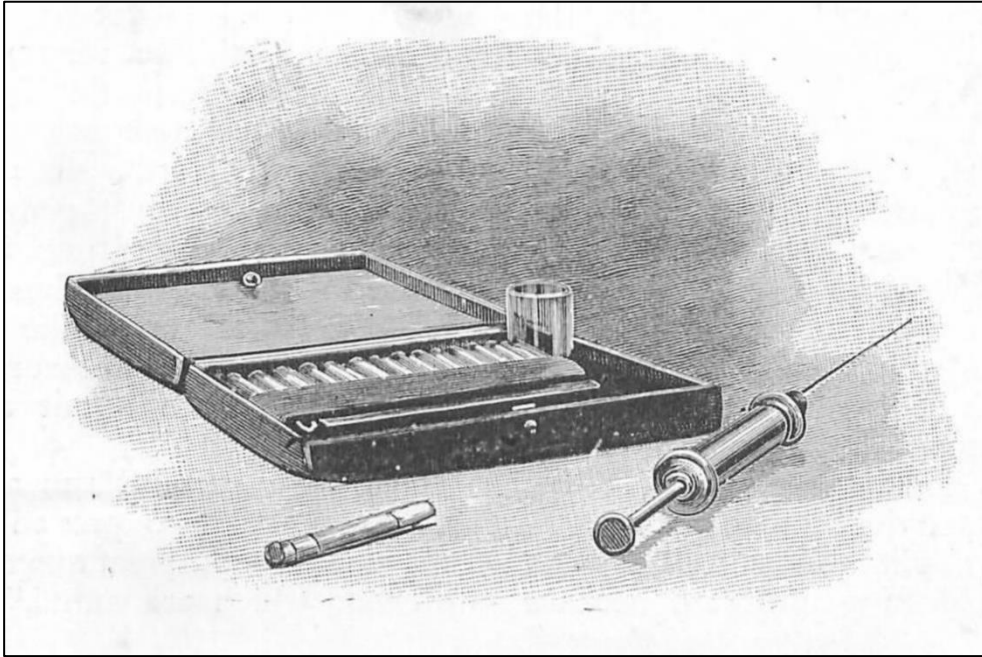


Fig. 3.2. 'Stories from the Diary of a Doctor: The Wrong Prescription',
Strand Magazine, 6.36 (December 1893), p. 613

response to the perceived abuse of medicinal substances. Arguably, the silver case from France, jewelled containers from Turkey and the box depicted within the *Strand's* fiction all establish the object as spectacle, signifying excessive abundance or a degenerate consumer habit. These artefacts, together with the needles and drugs they contain, are a worrying inversion of the idealised attitude towards commodities that existed during the first half of the nineteenth century, as articulated through events such as the Great Exhibition of 1851.³⁴

The emergent discourse of addiction during the nineteenth century focused on the image of the contaminated body: both the human body contaminated by the abuse of morphine and the body politic contaminated by subversive ideas of social dissolution. In Sharkey's 'Morphinomania', discussed above, a further quotation from Daudet describes how the morphine 'goes in a moment into arm or leg', while a more detailed extract from

³⁴ As previously mentioned in Chapter One (p. 48), Thomas Richards discusses the complexities of nineteenth-century attitudes towards consumerism and how the Great Exhibition of 1851 was 'a monument to consumption, the first of its kind, a place where the combined mythologies of consumerism appeared in concentrated form.' See *The Commodity Culture of Victorian England: Advertising and Spectacle 1851–1914* (London and New York: Verso, 1990), p. 3.

Zambaco's account of popular female use of the drug in Turkey reveals that '[a]t the theatre, in society, they [...] watch for a favourable opportunity of pretending to play with their trinkets, while giving themselves an injection of morphia in some part of the body which is exposed, or even hidden from view' (pp. 336–37). The combination of public spaces and the 'exposed' female body destabilises the model of privacy and domesticity usually associated with the body and with femininity, drawing the article's narrative into the sensationalised discourses surrounding the use of drugs. While Zambaco's account deploys geographical distance to separate Western and Turkish practices, the example of the theatre conversely draws parallels between Turkish and European culture, rather than emphasising the Otherness of the former.

There is also a troubling sense of duplicity in Zambaco's account of female morphine use, its hidden and furtive presence in public spaces revealing social as well as individual misdemeanours. The image of the contaminated body is perhaps most striking when the article explores the 'ill effects which morphia produces' (p. 339). Stating that 'all degenerate, both bodily and mentally', the text details the 'pale, sallow, and emaciated' appearance of the addicted body, also mentioning that 'the digestive processes are disordered [...] They become sterile, and lose their energy and interest in life' and 'those parts of the body which are within reach of the syringe are one mass of sores'. This description constructs the addicted body as a grotesque object under an interrogative social gaze, both biologically and aesthetically disordered and deviant, while the use of the word 'sterile' introduces a sense of stifled reproductivity, threatening the continuation of both body and body politic. While such acts of categorisation construct a medically objective view of the addicted body, they nevertheless reveal the object of study as a culturally charged site of concern.³⁵

³⁵ Louise Foxcroft suggests that by the mid-nineteenth century, '[t]he perceived nature of addiction was one of voluntary or involuntary personal decay, either being a cause for alarm, and its narration fed into cultural conceptualisations of decadence and degeneration present in post-Darwinist Victorian society.' See Louise

Diary of a Doctor: Serialised addiction

Periodical fiction published in the later nineteenth century engages with the powerful and enduring types of addiction narrative outlined in the previous section. These narratives explicitly focus on the body or human form and the ways in which increasingly potent substances affected it. Published as part of the *Strand's Stories from the Diary of a Doctor* series between 1893 and 1895, Louisa Thomasina Meade and Edgar Beaumont's 'The Wrong Prescription' (1893) features a young female morphine addict, Frances Wilton. The eponymous Dr Halifax first encounters Frances when she is in a 'complete state of prostration' due to 'the awful storm of abstinence'. He notes that her 'respiration was hurried', her pulse 'was beating one hundred and fifty times to the minute' and comments that he 'pushed up her sleeve and saw certain marks on her slightly wasted arm' (p. 603). These observations draw the reader's attention to the female body, constructing a Foucauldian supervisory code that allows the medical profession to monitor the human body and identify deviant physiological symptoms, turning the medical gaze into an instrument of normalising power. While the detail of Frances' pulse and respiration suggest an objective medical perception, the implicitly moralised observation of the marks on her arm transforms her into a fallen woman, rather than a partner in a patient/doctor relationship. This aspect of social behaviour is consistently opposed to medical professionalism, with Halifax commenting that this kind of abuse of morphine is 'a very wicked habit' that leads to the 'destruction of all the moral qualities' (p. 604). The body of the female addict is here intrinsically linked to a moral discourse of disease and social deviance which formed an essential element of the nineteenth century's cultural response to illness.

Foxcroft, *The Making of Addiction: The 'Use and Abuse' of Opium in Nineteenth-Century Britain* (Aldershot and Burlington, VT; Ashgate, 2007), p. 59.

A second tale from the *Diary of a Doctor* series features a male alcohol addict: ‘Trapped’ (1894) relates Halifax’s treatment of Wilfred Tollemache, initially for delirium tremens and subsequently for the underlying addiction. Tollemache is described as ‘a big, rather bony fellow, loosely built. He had heavy brows, his eyes were deeply set, his lips were a little tremulous and wanting in firmness, his skin was flabby.’³⁶ This contradictory physiological appearance reveals the deeper psychological disorder of addiction, the body becoming a revelatory instrument that allows disorders or medical deviance to be diagnosed. Not only does the body act as a medical text that can be read by the doctor: as an alcoholic, Tollemache embodies cultural anxieties regarding addiction. The physical description delineates a lack of physiological control, the ‘loosely built’ frame combining with the ‘tremulous’ lips and ‘flabby’ skin to convey a sense of bodily disorder or profligacy. Tollemache goes on to relate the symptoms of his addiction, describing feeling ‘restless and nervous’, ‘consumed by thirst’ and like ‘the wretched victim of a demon’ (p. 467). These complaints articulate not only the alcoholic’s physiological unease, but also an excessive form of bodily suffering that displaces the addicted body from medical taxonomy into Gothic discourse. The description of Tollemache’s ‘tremulous’ physical appearance and his own account of his illness combine to undermine the masculinity of the addict: Tollemache is both denied physical, masculine power and shown to be powerless within a Gothic pattern of suffering, in which the male addict’s body becomes feminised through his addiction and his lack of control over the disease.

The meretricious impact of substances like alcohol on the body preoccupied periodical culture, especially medical journals like *The Lancet*. In an article from 1861, Dr Daniel Hooper discusses ‘The Alcohol Question’, asking: ‘How do alcoholic liquors act on

³⁶ Louisa Thomasina Meade and ‘Clifford Halifax’ [i.e. Edgar Beaumont], ‘Stories from the Diary of a Doctor: Trapped’, *Strand Magazine*, 7.41 (May 1894), 465–80 (p. 465). Subsequent quotations are from this text and will be given parenthetically in the main body of the chapter.

the human body – as foods or as poisons?’³⁷ Hooper goes on to state that ‘[a]lcohol appears to seek out and fix upon *nervous* matter, and to act directly and specially upon it, just as other agents localize themselves in particular organs’.³⁸ Thus, Tollemache’s description of feeling ‘nervous’ refers not just to an emotional sense of unease, but also to a medical lexicon through which the physiological impact of alcohol can be categorised and comprehended. Meade and Beaumont’s story makes use of contemporary scientific discourse to explore both the physiological and psychological disorders experienced by the addict. The specialised action of alcohol, identified in *The Lancet* article as ‘seeking out’ matter, ascribes a vaguely predatory aspect to its nature, and emphasises the duality articulated by the food/poison dichotomy explored in the text. Hooper’s article goes on to discuss the debate surrounding alcohol’s harmful impact on the body, mentioning the theory that alcohol ‘only stimulates the brain and nerves as the spur does the horse, and that this stimulation wastes and destroys it’, describing it as ‘a sort of suicidal instrument to the nervous system, goading it on to its own destruction!’³⁹ This detrimental impact emphasises the physiological sense of violence associated with alcohol consumption to which wider Victorian literature and culture responded, discussed previously in texts such as *Jekyll and Hyde*. The insistence on this idea of destruction reveals an anxiety surrounding alcohol and articulates an exaggerated medical definition that shares a discourse with both literary and Gothic explorations of the human body.

³⁷ Daniel Hooper, ‘The Alcohol Question’, *The Lancet*, 25 May 1861, pp. 507–09 (p. 507).

³⁸ *Ibid.*, p. 507.

³⁹ *Ibid.*, p. 508.



Fig. 3.3. 'Stories from the Diary of a Doctor: Trapped', *Strand Magazine*, 7.41 (May 1894), p. 467

This complex perception of the addicted body is explored in the illustrations accompanying the *Diary of a Doctor* series, where the association of violence with physiology is explicit. 'Trapped' includes an image that shows Tollemache in an exaggerated pose standing before the seated Halifax, accompanied by the caption, 'I am the wretched victim of a demon' (see Figure. 3.3, above). The excess conveyed in the body language of the image suggests a dramatised rather than naturalistic discourse. This medicalised form of Gothic emphasised a literary culture that increasingly identified the body and addictive substances as sites of concern, articulating wider anxieties surrounding scientific development and the body politic. The body of the addict is subjected to the gaze of both reader and Dr Halifax, establishing simultaneously social and medical supervision, and

suggesting that addiction itself is a cultural transgression as well as a physiological deviance that needs to be monitored.

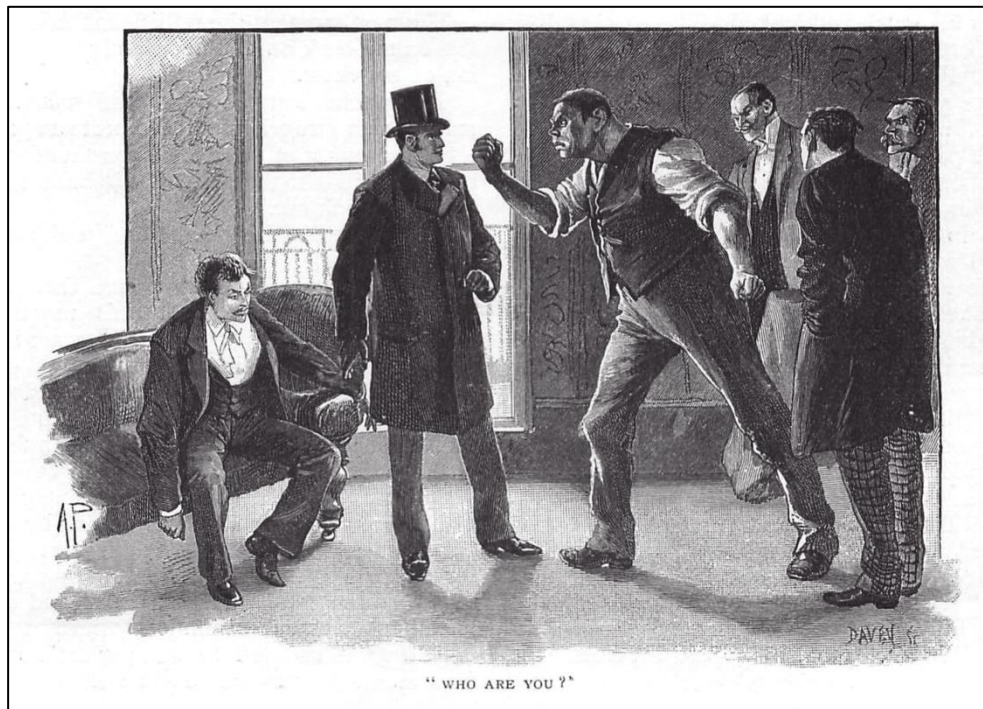


Fig. 3.4. 'Stories from the Diary of a Doctor: Trapped', *Strand*, 7.41 (May 1894), p. 475

A second image of the addict is found towards the end of the narrative and depicts a seated Tollemache in disreputable company from which he is saved by Halifax (see Figure 3.4, above). Here, the medical professional operates as a form of barrier between the inebriated or addicted body and the representation of social iniquity. The suggestion that medicinal aid is needed to combat this form of addiction suggests not only the increasing remit of the profession but also an emphasis on medical control of substances which can lead to addiction. The raised fist of one of the thieves again introduces associations of crime and violence to the world of alcohol addiction, revealing an intrinsic link to criminality within the construct of addiction and the addicted body. Tollemache's seated position also suggests a lack of physical power, however, once again associating the addict with emasculation. The

combination of a subversive connection with criminality and this emasculatory presentation reveals the multiplicity of nineteenth-century cultural understandings of addiction.

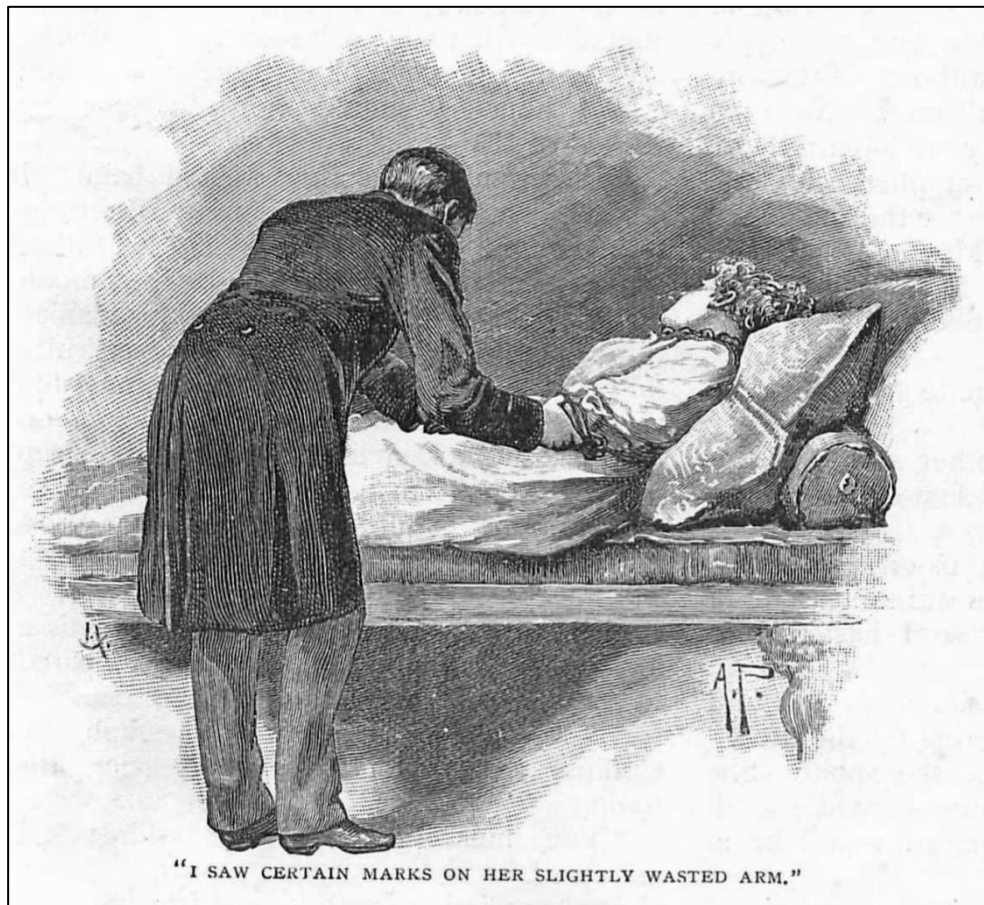


Fig. 3.5. 'Stories from the Diary of a Doctor: The Wrong Prescription',
Strand Magazine, 6.36 (December 1893), p. 603

The visual portrayal of Tollemache can be compared with that of Frances Wilton in 'The Wrong Prescription' (see Figure. 3.5, above). Here, the first illustration to depict Frances shows the moment Halifax encounters her in a state of 'complete nervous prostration', noticing 'certain marks on her slightly wasted arm' (p. 603). The illustration contains the same voyeuristic tone as the text itself, subjecting the body of the female addict to the gaze of both doctor and reader. The chiaroscuro of the scene accentuates the focus on the female and addicted body, in addition to the subversive discovery of the marks which reveal her morphine addiction. As well as portraying the addict's body as a text to be read

and diagnosed by the doctor, the image emphasises the questionable relationship between doctor and patient, as the boundary between public and private is dissolved within an intimate medical encounter – hinting at the underlying duality of medical substances, such as the morphine itself, which is both remedial and addictive.

A second image shows Frances being chastised by the standing Halifax, in an illustration that once again emphasises the regulatory aspect of the medical profession and its

perceived powers of correction which transform the addicted body into an object to be monitored and corrected (see Figure. 3.6, opposite). The female addict is portrayed as childlike through her bowed head and clasped hands and through the dominant stance of the authoritarian doctor. The troubling femininity associated with her form in the previous illustration is removed through this pose and interaction, an

unthreatening figure

established in its place, which arguably represents an attempt to negate the corruption of morphine use on the female body. The illustrations suggest that the female addict's body is a mutable and unstable entity with multiple meanings inscribed upon it within popular discourse and visual culture.

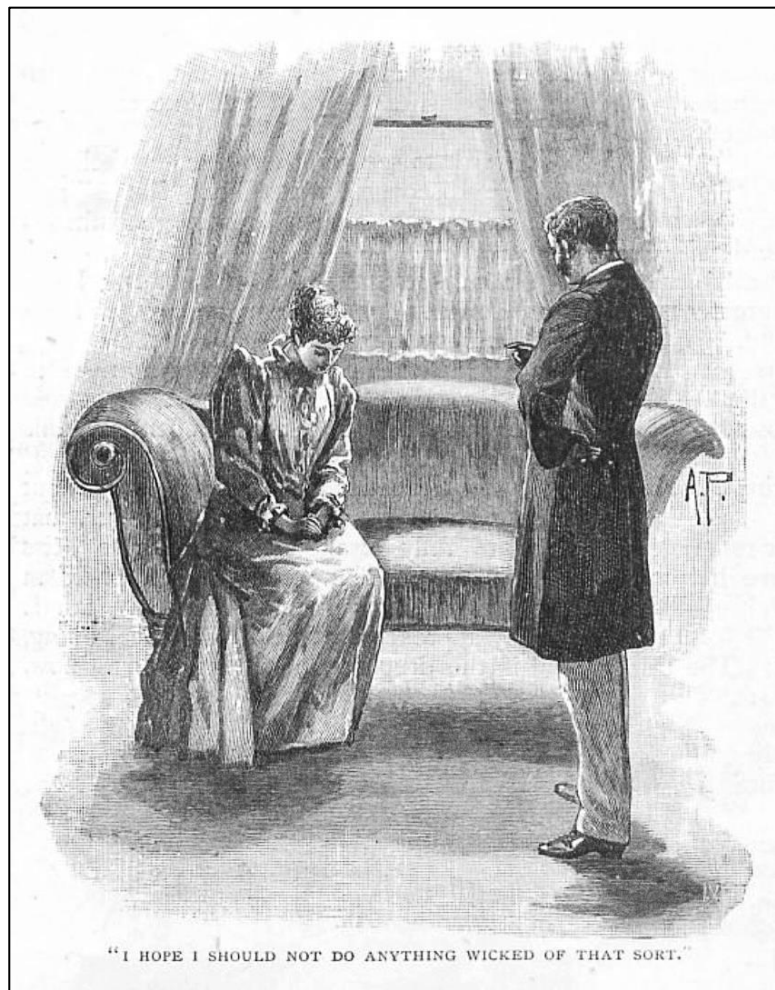


Fig. 3.6. 'Stories from the Diary of a Doctor: The Wrong Prescription', *Strand Magazine*, 6.36 (December 1893), p. 605

This focus on the instability of the body associated with morphine use, and its implications for the wider medical and social understandings of individual or bodily responsibility, can also be found on specialised periodicals. Medical journals such as *The Lancet* represent not only a specialised discursive form of knowledge, but also an interactive environment for an evolving popular conception of addiction narrative. In an article entitled ‘Abuse of Morphine’ from 1890, the ‘medical and legal aspects of the prolonged employment of morphine’ are discussed with reference to a study by a Dr L. R. Régnier.⁴⁰ Two ‘distinct varieties of morphinism’ are identified: one resulting from an ‘inevitable therapeutic necessity’, the other born of ‘a depraved appetite’ and characterised by ‘a constant sense of desire, together with hereditary or acquired nervous symptoms’ (p. 986). Here, a clear distinction is made between bodies subjected to controlled medication and a form of morphine use identified as an abuse. The mention of a ‘hereditary’ aspect to the condition evokes the pervasive concept of degeneration – the human body subject to this process being simultaneously associated with and opposed to the circumstances of medical progress reified by the journal itself. The descriptor ‘depraved’ defines a moral imperative and demonstrates the intermingling of scientific and social ideas, which form the basis of this medical classification. Again, the word ‘nervous’ stresses this central concept of the addicted body, revealing a biological model which represents both a progressive medical understanding of physiology and a framework susceptible to the duplicitous impact of drugs. The article continues to discuss the association between morphine use and ‘criminal responsibility’, demonstrating the identification of the addicted body as a criminal, as well as medical, object (p. 987). Despite this association, the article mentions ‘the impossibility of treating morphinomaniacs against their will by seclusion’, articulating a complex understanding of

⁴⁰ ‘Abuse of Morphine’, *The Lancet*, 8 November 1890, pp. 986–87 (p. 986). Subsequent quotations will be from this article and will be given in the body of the chapter.

both a desire to control the criminalised body and an acknowledgement of the psychological disorder of addiction (p. 987). Such specialised and professional discourse reveals the multiplicity of cultural constructions of addiction, as well as the myriad ways in which bodies subjected to drug use were constructed.

The discussion of the use and abuse of opiates in specialist publications like *The Lancet* represented both dissemination of individual research and debate among peers. The article's consideration of Régnier's study emphasises that '[w]hen the habit arises from an "inevitable therapeutic necessity" – i.e., when the drug is taken for the relief of constant pain, – the prognosis is very different from when it is an indication of a depraved appetite' (p. 986). The combination of objective diagnostic terminology and explicitly moralised language illustrates the socially informed paradigms encoded within medical discourse and the dichotomous public concept of addiction visible even in professional forums. The article defines those viewed as misusing morphine as being 'characterised by a constant sense of desire, together with hereditary or acquired nervous symptoms' (p. 986). The description of this form of monomania reveals a perceived lack of control in connection with the addict, effectively constructing a figure that is subject to dominant internal instincts directed by chemical stimulation and inborn impulses. The conclusion, that the condition of 'morphinomania may lead to profound modifications of the mental state', acknowledges the self-exploratory theories of texts such as De Quincey's, delineating the context of dialogue that existed, but also draws this aspect of opiate use into medical discourse (p. 987). The article illustrates a subtle shift in the construction of addiction: the condition is pathologised, while the addict is reformulated as a patient deviating from medical norms.

While neither 'Trapped' nor 'The Wrong Prescription' categorically criminalises the addicted body, there are suggestions of this association between the pathological and criminal states. In 'Trapped', an intoxicated Tollemache is lured to a 'thieves' den' in a 'long,

straggling, slummy looking road' in Balham (pp. 475, 474). The placement of the inebriated body in this insalubrious urban location not only manipulates traditional geographical associations of drug culture but also reveals the connotations of crime that were to be found within popular conceptions of the addicted body. While Tollemache's excessive consumption of alcohol itself is not portrayed as criminal, the narrative convincingly demonstrates how his addicted body is compromised in a way that allows it to be overwhelmed by the illicit elements of urban society. It is Halifax who rescues Tollemache from this predicament – the medical professional acting as moral and legal force both literally and figuratively. Within Sharkey's 'Morphinomania', addiction is treated as a 'moral perversion' rather than a criminal act. Stating both that '[e]ducated, intelligent men and women, otherwise deserving of respect, descend to lying' and '[u]ntruth is a second nature with them', the article emphasises the associations with duplicity that attached to morphine abuse, with the use of the word 'descend' suggesting a perversion or deformation of the human nature (p. 339). 'The Wrong Prescription' would seem to indicate that this link between deception and morphine addiction is an established cultural concept, as the narrator remarks that 'the morphia-maniac thinks nothing of telling lies' (p. 604). This focuses on perceived personal transgression rather than criminality, the text constructing this form of drug abuse as a moral concern, rather than one existing solely within a frame of illegality.⁴¹ While the exploitation of the trade in morphine is explicitly condemned by the narrative, the addict seems removed from this judgement: the manipulation of access to dangerous drugs is condemned rather than the addict herself.

Fictional accounts of addiction such as the *Diary of a Doctor* series participate in the evolving interaction between medical and literary discourses. The narrator of 'The Wrong

⁴¹ While the text seems to posit this potential distinction between personal transgression and criminality, the two were imbricated through works such as Cesare Lombroso's *L'Uomo Delinquente (Criminal Man, 1876)* which considered how the idea of 'moral insanity' could conflate the criminal with the personal and physiological. See Cesare Lombroso, *Criminal Man* (Durham, NC and London: Duke University Press, 2006).

Prescription’ confirms the ‘startling and painful’ truth of Frances’ condition by diagnosing her as ‘a confirmed morphia-maniac’ – these phrases stressing the sensational impact of this portrayal and the implicitly moral and social concerns raised by female addiction (p. 605). In her exploration of women and morphinomania in late nineteenth-century Britain, Susan Zieger suggests that texts which explored the female use of morphine were ‘largely written by medical men whose analyses mixed scandalized morality with scientific suggestion as they began to articulate a disease model of inebriety and later, addiction.’⁴² ‘The Wrong Prescription’ expresses this combination of violated feminine codes and medical authority, capitalising on the alarming revelation of the deviant female. Frances’ own response to her condition seems to confirm its inherently subversive nature: when questioned by Halifax she denies taking morphine and replies that she ‘should not do anything wicked of that sort’, a ‘flimsy half denial’ that the narrator is able to dismiss as ‘in keeping with her disease’ (p. 604). Likewise, ‘Trapped’ reveals a further complexity in its textual constructions of the addict: in contrast to Frances Wilton’s silence and denial, Tollemache is able to verbalise his own addiction, labelling himself a ‘dipsomaniac’ and relating symptoms which include ‘bad dreams’, feeling ‘restless and nervous’ like ‘a man possessed’ (pp. 466–67).

This insight into the physiological and psychological states of the addict thus generates a gendered distinction, creating a public and masculine form of self-expression which Frances is denied. In addition to emphasising this discrepancy, Tollemache’s language draws on a Gothic discourse that reformulates the exploration of physiological processes and ‘unconscious cerebration’ which preoccupied contemporary alienists and neuroscientists. Halifax mentions that addiction is ‘closely allied to insanity’ and a form of ‘strong animalism’, demonstrating the increasing importance placed on psychiatric investigation of

⁴² Susan Zieger, “‘How far am I responsible?’: Women and Morphinomania in Late Nineteenth-Century Britain”, *Victorian Studies*, 48.1 (Autumn 2005), 59–81 (p. 59).

disease, but also arguably anticipating the trauma-based modelling of Freud and the Vienna School (pp. 467–68).⁴³ In contrast, within ‘The Wrong Prescription’ the physical symptoms of morphine withdrawal are framed through the combination of an authoritative medical diagnosis with a socially and morally encoded view of a fallen woman, the construction of the female addict necessarily embodying this contradictory dialectic. Rather than a psychological exploration of addiction, the text reveals the fetishised female addict’s deviant body as the focus of the medical practitioner’s attentions, thus drawing out the dynamics of power that underpin the physician/patient relationships which occupy the pages of the *Diary of a Doctor*. This exploration of addiction is characteristic of wider *fin de siècle* concerns regarding dysfunctional masculinity and unstable subjectivity which were articulated through this novel and subversive language.⁴⁴

The same complex amalgamation of specialist medical analysis and popular exploration that is found in the portrayal of the addict can be seen in the examination of addiction treatment. The work of Dr Oscar Jennings in this field was frequently published in *The Lancet*, and demonstrates a comprehensive engagement with both innovative research and developing theories.⁴⁵ An 1887 article by Jennings discusses the relief of morphine cravings through the administration of alternative medication, including sparteine, an antiarrhythmic agent, and nitro-glycerine, a vasodilator.⁴⁶ The use of these drugs in the

⁴³ For discussion of Freud see George Makari, *Revolution in Mind: The Creation of Psychoanalysis* (London: Duckworth Overlook, 2008); and Lily and Robert Shaw, ‘The pre-*Anschluss* Vienna School of Medicine – the Physicians: Sigmund Freud (1856–1939), Julius Wagner-Jauregg (1857–1940) and Karel Wenckebach (1864–1940)’, *Journal of Medical Biography*, 24.2 (22 July 2014), pp. 158–68.

⁴⁴ For more discussion on the intricacies of language at the *fin de siècle*, see Christine Ferguson’s *Language, Science and Popular Fiction in the Victorian Fin de Siècle: The Brutal Tongue* (Abingdon and New York: Routledge, 2016), p. 8, where she suggests that ‘interest in [...] the brutality of language itself, saturated late Victorian mass culture.’

⁴⁵ Dr Oscar Jennings (1851–1914) settled in Paris in 1875 and was for many years a correspondent for *The Lancet*. He ‘had devoted himself to the study of the morphia habit, on which he had published several books, besides a number of articles in French medical periodicals and in the columns of the *Lancet*.’ See ‘Obituary’, *The Lancet*, 12 December 1914, pp. 1383–84 (p. 1384).

⁴⁶ Oscar Jennings, ‘The Relief of the Morphia Craving by Sparteine and Nitro-Glycerine’, *The Lancet*, 25 June 1887, pp. 1278 – 80. Sparteine is described as a ‘heart tonic’ by Jennings, and is an antiarrhythmic drug, used to treat abnormal heart rhythms (p. 1278). Nitro-glycerine, a vasodilator which widens the blood vessels, was also administered by Jennings, providing a ‘more rapid and much more ephemeral’ relief than the sparteine from the

treatment of addiction demonstrates both the recognition of genuine physiological and neurochemical disturbances caused by morphine abuse and the ways in which pharmaceutical properties could be manipulated to alleviate suffering. The article states that ‘in these agents, properly administered, we possess a means which will enable any morphia *habitué* earnestly desirous of leaving off his intemperance to carry the process of weaning to a successful issue’ – one of the implications being that the addict’s attitude towards recovery plays a fundamental part in the success of this method.⁴⁷

A 1909 issue of *The Lancet* also contains a discussion of the development of addiction treatment, with further reference to the work of Jennings. Titled ‘The Re-Education of the Will in the Treatment of Drug Habits’, the article focuses on the belief that ‘the condition to be dealt with is at the bottom a disorder of the will and [...] it can only be really cured by restoring the patient’s power of self-control.’⁴⁸ It also states that ‘psychical treatment is so essential that even the best conceived physiological remedies will fail to do all that they should if they are not seconded by influences that act on the patient’s mentality.’⁴⁹ The professional language here reflects the growth of an ideology that asserted the significance of the individual and individual psyche, moving away from the dominant nineteenth-century neurological readings of mental disturbance, and anticipating the more environmental influences on the mind that came to characterise psychiatric approaches over the next century.⁵⁰ Further evidence of this shift in the perception of addiction is found in the article’s

physiological symptoms of morphine withdrawal (p. 1278). See A. John Camm and Irene Savelieva, ‘The Long and Short of Antiarrhythmic Drug Treatment’, *The Lancet*, 21 July 2012, pp. 198–200, and ‘Nitroglycerin: The First Hundred Years’, *The Lancet*, 29 December 1979, pp. 1340–41.

⁴⁷ Jennings, ‘Relief of the Morphia Craving’, p. 1278.

⁴⁸ ‘The Re-Education of the Will in the Treatment of Drug Habits’, *The Lancet*, 7 August 1909, p. 407.

⁴⁹ *Ibid.*

⁵⁰ As Jill L. Matus notes: ‘well before Freud, Victorian conceptions of consciousness were already capable of supporting a theory of mental injury in which powerful emotion could produce trance-like effects, disrupt memory, and disturb affect regulation.’ See ‘Psychological Trauma Victorian Style: From Perpetrators to Victims’, *The Lancet*, 7 August 2010, pp. 410–11 (p. 410). See also Jill L. Matus, *Shock, Memory and the Unconscious in Victorian Fiction* (Cambridge and New York: Cambridge University Press, 2009) and ‘Victorian Framings of the Mind: Recent Work on Mid-Nineteenth Century Theories of the Unconscious, Memory, and Emotion’, *Literature Compass*, 4.4 (July 2007), 1257–76.

recommendation of an ‘intellectual cooperation’ between patient and doctor, or in other words, psychiatric therapy.⁵¹

‘Trapped’ and ‘The Wrong Prescription’ both emblematised the ways in which literary texts engaged with these changing concepts of addiction treatment. Within ‘The Wrong Prescription’, there is a concentration on pharmaceutical remedy: Halifax administers small doses of morphine in order to alleviate Frances’ withdrawal symptoms and towards the end of the text, strychnine is used as a form of placebo to aid her complete recovery. The use of strychnine in cases of morphine addiction is recorded in *The Lancet*, with a letter by James More MD referring to this drug as a ‘remedy’.⁵² This level of interaction and detail emphasises the story’s relevance to its contemporary audience and their engagement with medical development. Within ‘The Wrong Prescription’, there is a preoccupation with the movement of drugs, the narrative dealing with the complex legislation that surrounded the prescription of medicine and the ways in which this could be abused. Hence, the focus on pharmaceutical treatment is arguably a continuation of this focus on the circulation of drugs through the body and body politic. The transgressive and acceptable modes of obtaining drugs are shown to have corresponding influences on the addict, with the former resulting in addiction and the latter in its cure. When treating his patient with strychnine, Halifax wishes Frances ‘to be under the impression that she is still having morphia injections’ as ‘[h]er nerves will then be less strained than if she thinks she is doing without her accustomed sedative, and the chances of cure will be greater’ (p. 613). This manipulation of the addict’s psychological response to the drug is a form of treatment that seems covertly to reform or correct the individual’s will, arguably reinforcing a gendered construction of addiction in

⁵¹ ‘Re-Education of the Will’, *The Lancet*, p. 407.

⁵² James More, ‘Morphinomania’, *The Lancet*, 16 July 1887, pp. 136–37 (p. 136).

which the female is directed by an authoritarian medical professional, rather than assuming responsibility for her own disease or cure.

In contrast, the portrayal of treatment in 'Trapped' does convey a sense of collaboration between the patient and doctor. In order to overcome his patient's addiction, Halifax instructs Tollemache to get his 'brain into a healthy condition' and 'cultivate' his 'intellectual qualities by really arduous study for a couple of hours daily' (p. 467). The medical advice focuses on self-control and discipline in response to the construction of addiction itself as an excessive and indulgent form of moral weakness earlier in the narrative. This idea of cooperation is complex, however, as Halifax states: 'You must consider yourself my patient [...] and obey me implicitly from this moment', but also acknowledges that Tollemache 'must virtually cure himself', demonstrating the dichotomy inherent in this relationship (pp. 467–68). A 1901 *Lancet* piece by Jennings articulates the contradiction embodied in this form of addiction treatment, stating that 'it requires a considerable exercise of will to renounce one's free will.'⁵³ Here, remedial intervention simultaneously requires an assertion of individual volition and submission to medical authority, generating a complex model of hybrid identity, a paradoxical oscillation between different subject/object positions.

The explorations of addiction and its treatment in both scientific and literary periodicals can be seen as part of the process of forming a discourse that would influence and be informed by figures like Freud in the first half of the twentieth century. The engagement of serialised fiction with this evolving model of medical perspectives about addiction, as well as its adherence to factually rigorous medical processes, demonstrates the valuable cultural work of literary attempts to articulate a discourse of the mind, and how pertinent this exploration was to the contemporary readership. As a disease that had numerous social and

⁵³ Oscar Jennings, 'On the Physiological Cure of the Morphine Habit', *The Lancet*, 10 August 1901, pp. 360–68 (p. 361).

medical configurations addiction in these texts is portrayed in ways that are complex and sometimes contradictory, reflecting the unstable and evolving attitudes that underpinned Victorian normative values themselves.

Advertising cures

This complexity inherent in the exploration of addiction is particularly resonant at the turn of the century, when methods of treatment or remedy were presented as part of the commercial sphere. The *Strand Magazine* contains advertisements for the treatment of both drug and alcohol habits, with the ‘Keeley Treatment’ listed in December 1905 and the ‘Turvey Treatment’ in December 1906 (see Figures 3.7 and 3.8, below). In both advertisements, the enduring influence of ideas of temperance can be seen, with the Turvey Treatment using the testimony of the ‘Church of England Temperance Society’, as well as a ‘famous London Mission Worker’, while the Keeley Treatment mentions both the ‘Rev. James Fleming’ and the ‘National Council of Young Mens Christian Associations’.⁵⁴ The imbrication of addiction treatment with the tradition of temperance suggests that social responses to addiction involved the evolution of existing attitudes, and, therefore, marketing remedial treatment as a product uses these familiar tropes to construct a sense of established knowledge.

Negotiating and manipulating the cultural responses to forms of addiction are techniques fundamental to both advertisements. The Turvey Treatment specifies that there will be ‘no publicity’ surrounding the remedy, and, implicitly, the underlying addiction, as the patient will be ‘cured’ in their ‘own home’, demonstrating a social view of alcoholism as an ignominious condition, where both disease and treatment are connected with private and hidden interactions. In comparison, the Keeley Treatment emphasises the ‘disease’

⁵⁴ ‘Turvey Treatment’, *Strand Magazine*, 32.192 (December 1906), 105 and ‘The Keeley Treatment’, *Strand Magazine*, 30.180 (December 1905), 136.

THE KEELEY TREATMENT

*For the Cure of Alcohol and Drug
Inebriety.*

THE Keeley treatment has been employed in this country for many years under the auspices of a committee of broad-minded men of affairs who have satisfied themselves by personal investigation not only of the efficacy of the Cure, but of its permanency in nearly every case. This committee is composed of the following gentlemen, the Chairman being the Rev. James Fleming, B.D., Canon of York, Chaplain in Ordinary to His Majesty the King; Mr. W. Hind-Smith, National Council of Young Men's Christian Associations, Exeter Hall, London; the Lord Bray; and the Lord Montagu of Beaulieu; who keep in constant touch with the operations of the Keeley Institute. Here are some facts from prominent men regarding the Keeley Cure for the Drink and Drug Habit.

"It really cures. It does what it professes to do." Such is the emphatic testimony of Mr. Eardley-Wilmot, the well-known secretary of the Church of England Temperance Society, who for some years has had the Keeley method under close observation in this country. He tells how case after case that had been considered hopeless has yielded speedily to

the Keeley Cure, the patients returning to their work full of vigour, and happy in the restoration of all that makes life worth living.

Why does the inebriate continue to drink? He drinks because he is a slave of alcohol. He is no more responsible for drinking than a man is for having a chill or fever when he is poisoned by malaria.

It is true that this disease is caused by alcohol, but it is also true that in this disease, when once it is established, alcohol is a necessity. They continue to drink because the disease DEMANDS alcohol.

Here is the secret of the cure of inebriety. The Keeley remedy breaks up this rhythm. It is very like and just as effectual as giving a man who has the ague a quantity of quinine and a change of climate. It breaks up the disease.

The men or women upon whom has fallen the disease of intemperance go to the Keeley Institute of their own free will, or they are not admitted. Even when they consent to come they are left free agents.

The treatment takes four weeks. It consists of hypodermic injections four times a day, and Dr. Keeley's remedies, which are taken every two hours during the day.

At the beginning the patient is provided with a liberal amount of the best whisky if he desires it; or, if for drugs, the accustomed dose is allowed, but after two or three days the old craving for alcohol disappears for good and all; for drugs it takes longer.

Any inquiries should be addressed to the Secretary, 9, West Bolton Gardens, in Old Brompton Road, London, S.W.

This is the only Keeley Institute in the British Isles.

Fig. 3.7. 'The Keeley Treatment', *Strand Magazine*, 30.180 (December 1905), 136

ALCOHOLIC EXCESS

Narcomania and Resultant Nervous Diseases.

Cured at Patient's own Home in 3 to 7 weeks by the now recognised

TURVEY TREATMENT

Entailing no inconvenience or publicity, the Treatment (which can be taken by the most delicate person of either sex) totally eradicates all craving for stimulant, creating a lasting antipathy to Alcohol and Drugs in 3 to 7 weeks.

THE TURVEY TREATMENT CAN BE FORWARDED TO ANY PART OF THE WORLD.

MR. THOMAS HOLMES, the famous London Mission Worker, states:—
"I have tried your Remedy upon the worst cases of Dipsomania I could find in the course of my work. I soon saw the beneficial effects of your Remedy. Their physical condition rapidly improved, their depression of mind soon passed away, they became bright and hopeful—in fact, new men."

The Rev. Canon MACKINTOSH states:—
"In October, 1903, I tried the Turvey Treatment upon a man about 40 years of age. The course of Treatment came to an end in about six weeks, and the patient has never since then had the slightest desire to touch alcohol again, and he has told me that even the smell of spirits is to him quite offensive. He was formerly a martyr to an insatiable craving for alcohol, but now, thanks to this treatment, he is a changed man both temporally and spiritually."

Used with the greatest success by Officials of the Church of England Temperance Society.
All Communications treated as Strictly Confidential.

SPECIAL NOTICE. The constituents used in the Turvey Treatment are prepared by the Company's Qualified Medical Staff, and are certified by them to be absolutely harmless in every way.

THE ONLY SYSTEM IN GREAT BRITAIN UNDER QUALIFIED ENGLISH MEDICAL DIRECTION.
Write for Illustrated Treatise, containing full particulars (post free, or call:—
Med. Supt., **TURVEY TREATMENT CO., Ltd., 1, Amberley House, Norfolk St., Strand, London.**
CONSULTATIONS FREE. Telegrams: "TURVERT, LONDON." Telephone: 5404, GERRARD.
Resident Cases Taken.

Fig. 3.8. 'Turvey Treatment', *Strand Magazine*, 32.192 (December 1906), p. 105

status of addiction, referring to the addict as a ‘slave to alcohol’ and as a residential institution, seems to portray its therapy as a medicinal public body dissociated from the domestic space.⁵⁵ The contrasting advertisements demonstrate the diverse attitudes to and understandings of addiction, as well as a wider instability in the cultural role of medical treatment generally, negotiating as it does the private/public dichotomy. The pivotal issue is whether the sick body should be hidden from view and treated within a domestic setting or whether it should be placed within a public institutional space and made subject to professional control.

Both advertisements provide limited information regarding the treatments themselves. The Turvey Treatment states that the procedure results in a ‘lasting antipathy’ to alcohol and ‘eradicates all craving’, the language demonstrating a combination of cultural and medical understandings of addiction, while stressing the permanency of the remedy rather than explicitly detailing its method. The advertisement does, however, mention the ‘qualified English Medical Direction’ that underpins the treatment, signifying the importance attributed to national structures of supervision of medical and professional care. The Keeley Treatment initially seems to adhere to a similar marketing pattern, mentioning as it does the ‘permanency’ of its results and emphasising that it is a ‘secret cure’, succinctly highlighting the efficacy and exclusivity of the treatment. This advertisement goes on to provide more information about how it combats cases of drug and alcohol dependence, however, revealing that it ‘breaks up this rhythm’ of addiction. It is also revealed that the cure consists of ‘hypodermic injections four times a day, and Dr. Keeley’s remedies, which are taken every two hours’. Here, a material and physical form of medicine acting directly on the body is

⁵⁵ For discussion on the history of private and public sanatoria and asylums see: Rab A. Houston, ‘Asylums: The Historical Perspective Before, During, and After’, *The Lancet: Psychiatry*, 7.4 (April 2020), 354–62; the work of Roy Porter including *A Social History of Madness: Stories of the Insane* (London: Phoenix, 1996), *Bodies Politic: Disease, Death and Doctors in Britain 1650–1900* (London: Reaktion Books, 2001); Andrew Scull, ed., *Madhouses, Mad-Doctors, and Madmen: The Social History of Psychiatry in the Victorian Era* (Philadelphia: University of Pennsylvania Press, 2015).

combined with a system that deconstructs the addict's established domestic routine in order to destabilise and eradicate habitual drug or alcohol consumption. This idea of imposing a structure on the addicted body reaffirms a sense of the authoritarian medical/social corrective influence, suggesting that the addict is perceived as being drawn back within specific parameters through this form of treatment. The use of hypodermic injections also signals the perceived efficacy of this method of administration, while simultaneously highlighting the distinction between regulated use and irregular abuse. Within the advertisements, contemporary medical knowledge is deployed in order to construct addiction treatment as a marketable product: just as drugs themselves could be viewed as commodities, treatment is portrayed as an accessible and efficient product within the medical marketplace.

While the work of Oscar Jennings published in journals such as *The Lancet* provides an insight into his influential theories of addiction, it is in his 1890 volume *On the Cure of the Morphia Habit* that he discusses his work at length. Jennings describes the book as 'a guide for the use of my own patients: so as to give them an idea of what is required to escape from the thralldom of morphia.'⁵⁶ By directing this text specifically at those suffering from addiction, rather than a generalised public or specialised medical audience, Jennings generates an alternative readership made up of patients and identifies a widening marketplace of medical commodification in which knowledge is shared rather than reserved for professionals. Just as many of the articles and fictions discussed earlier attribute addiction to the abuse or misuse of powerful substances, Jennings' attempts to educate and instruct prospective patients seem to follow a similar trend, which identified a dangerous lack of knowledge surrounding the use of opiates as the origins of addiction. Jennings does recognise the wider appeal of his work, however, admonishing that

⁵⁶ Oscar Jennings, *On the Cure of the Morphia Habit* (London: Bailliere, Tindall and Cox, 1890), p. vii. Subsequent quotations are taken from this edition and will be given parenthetically in the main text.

it would be impossible to allude to certain facts and episodes – without referring to persons too well known in society – for such allusions [...] not to be more or less transparent, and to a certain degree, therefore, a violation of professional secrecy [...] (*Cure*, p. xi)

The acknowledgement of public curiosity about both addiction and its well-known victims demonstrates the enduring social preoccupation with the disease and its association with scandal, which influenced both professional and popular responses. The trope of confidentiality also demonstrates an established professional medical structure, which is here applied to the condition of addiction, suggesting that the disease itself is included within a medical, rather than simply moral, paradigm. Thus, Jennings' work attempts to connect the public with the private, an uneasy link that directs cultural constructions of addiction as well as medicine more widely.

Contemporary scientific developments are utilised within Jennings' work, demonstrating both the engagement of the reading public with these new techniques and that addiction treatment was encompassed by wider medical developments, rather than existing outside regular practice. Jennings uses a sphygmograph and sphygmographic tracings to demonstrate both the cardiovascular symptoms of abstinence and the effectiveness of different remedial stimulants in achieving a normal heart rate (see Figure 3.9 below).⁵⁷ Tracings are included within the text to show that both sparteine and trinitrine have the same effect as morphia itself, which 're-establishes the normal state of the circulation' after privation causes 'a want of cardiac impulsion' and 'a resistance to the passage of the blood in the vessels' (*Cure*, p. 2). The presence of these illustrations suggests that the reader would be familiar enough with contemporary medical discourse to recognise and interpret this form of evidence (See Figure 3.10 below).

⁵⁷ A sphygmograph was a device used to measure the heart rate of patients, invented by Dr Karl von Vierdordt in 1854. See Michael Martin and Heiner Fangerau, 'Listening to the Heart's Power: Designing Blood Pressure Measurement', *Icon*, 13 (2007), 86–104.

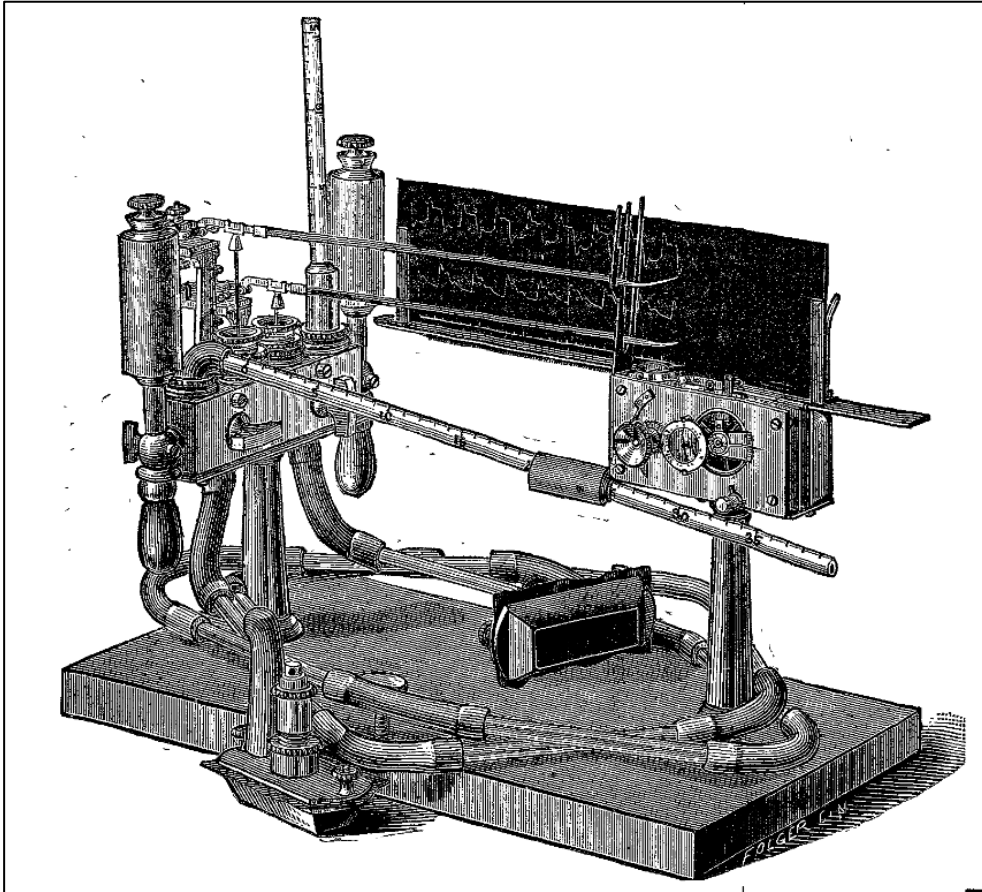


Fig. 3.9. 'The Compound Sphygmograph, by A. T. Keyt, M. D.',
The Lancet, 10 July 1880, p. 50.

taken from the same patient as the first, at the interval of a few minutes:

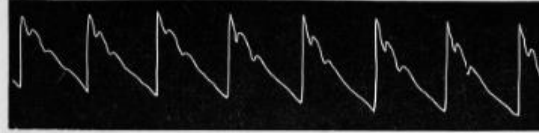


Fig. 2.—Pulse restored by morphia.

The study of these tracings suggested the use of cardiac tonics and stimulants as substitutes for the morphia during the progressive reduction, and we tried different agents of the kind, deciding finally upon sparteine, on account of the facilities it offers for hypodermic injection, and consequently of producing a rapid and evident effect; upon trinitrine, because of its congestive effect upon the head, and its calorific influence upon the body generally. The following tracings show the restoration of the pulse by these medicines:



Fig. 3.—Pulse restored by sparteine.

Fig. 3.10. Oscar Jennings, *On the Cure of the Morphia Habit* (London: Bailliere, Tindall and Cox, 1890), p. 3. Wellcome Collection.

The demonstration of the physiological impact of various substances through the sphygmographic images establishes addiction as a disease fundamentally based in physiological processes rather than moral disorder. Nevertheless, its use is also symptomatic of the desire within nineteenth-century scientific research to gain more comprehensive knowledge of bodily responses to widely used medical substances, rather than signalling a move to consider a holistic view of the patient's experience. Jennings goes on to explain how these findings can be used in addiction treatment, when 'a gradual tapering-down of the morphia hypodermically, and the administration, after a certain point has been reached, of increasing compensatory doses' can be implemented to help the patient overcome the difficulties of abstinence. The text does emphasise that '[s]parteine and trinitrine are not

substitutes for morphia, and will not take its place as long as a vital necessity for it remains’, but can, however, ‘relieve the morbid craving’ (p. 5). Thus, although the text demonstrates that scientific advancements during the nineteenth century allowed the physiological aspects of addiction to be better understood and its treatment to be advanced, the importance of a fundamental psychological root of substance abuse was still acknowledged.

There remains, however, an enduring preoccupation, even in this sympathetic medical text, with the ‘realm of moral darkness’ associated with addiction (p. ix). During treatment, Jennings suggests that ‘[n]o dependence whatever can be placed upon the statements of morphia patients’, as ‘the affirmation that a substitute for morphia procures them no relief is most often a mere excuse for returning to the old drug’ (p. 6). This assertion of moral laxity, and specifically associating the habit with falsehoods, corresponds with other accounts, both medical and fictional, that have been previously discussed and clearly represents a central cultural construct of drug abuse. Meade and Beaumont’s ‘The Wrong Prescription’ explicitly states that ‘the morphia-maniac thinks nothing of telling lies’ (p. 604), which can be seen as a sensationalised portrayal of Jennings’ caution regarding his patients’ attitudes towards treatment. While alcohol addiction is also classified as an ‘indulgence’ or ‘vice’ in *Diary of a Doctor*, there does not seem to be the same emphasis on deceit, suggesting a distinction with regard to morphine abuse that identifies it as a unique moral and medical anomaly (‘Trapped’, p. 465).

Jennings also remarks on the motive for patients’ relapses into the use of morphine, stating that ‘it has been no imperious craving, but a mere morbid impulse’ which results in the failure of treatment (*Cure*, p. 6). This ‘morbid impulse’ would seem to be a psychological – rather than a physiological – compulsion that manifests itself in spite of medicinal substitutes, necessitating not only a supplementary form of treatment but contributing to cultural stereotypes of the duplicitous morphine addict. While not comparable

with the psychological research of the early twentieth century, studies such as Jennings' reveal a growing focus on this mental aspect of medical treatment. These new professional concentrations and specialisations reflected a burgeoning cultural shift in the perception of the psyche and self.

As well as identifying this psychological draw to morphine use, Jennings also discusses the physiological processes that form the craving for the drug. He suggests that this impulse is, at a central level, 'the requirement of a peculiar mode of molecular motion' or 'the want of molecular change in certain cerebral centres' (p. 15). This theory clearly identifies the vital bodily processes that are associated with substances such as morphine, but in its physiological focus also implies a crucial biological process that constructs drug use as a predetermined or hereditary habit. Jennings goes on to postulate that '[e]ach recurrence of the sensation is probably heightened by auto-suggestion of the means of satisfaction, and by the abeyance of the controlling power of the will over the morbid automatism of the lower centres' (p. 15). The concept of discord between opposing forces within the human body was one which fascinated British culture during the last decades of the nineteenth century. As previously discussed, while Stevenson's *Jekyll and Hyde* is perhaps the most well-known literary exploration of this idea, it is also present in the addiction narratives of Meade and Beaumont's 'The Wrong Prescription' and 'Trapped', demonstrating the permeable boundary between medicine and wider culture. Jennings goes on to suggest that while '[e]nergy resulting from the accustomed pharmacodynamic stimulus is required to give full satisfaction to the morphia *habitué* [...] motion in all its modes is a sedative to the craving' (*Cure*, p. 16). Within 'Trapped', treatment for alcohol addiction is also associated with bodily movement, as Tollemache is instructed by Halifax to 'brace the system' through activities such as 'walking' and 'tobogganing', as it is the addict's 'duty to get [his] body into training condition' (p. 467). The connection between a healthy masculine body and overcoming

addiction is perhaps a cultural appropriation of the medical theories regarding physiological processes.

Sherlock Holmes and the ‘novelty’ of cocaine

The response to drug use and abuse within fiction of the late nineteenth century was not limited to an exploration of opiates, but encompassed other substances isolated and introduced more recently. Arthur Conan Doyle’s Sherlock Holmes narratives dealt frequently with drug culture, including Holmes’s own use of cocaine. Louise Foxcroft notes that ‘[i]t has been suggested that cocaine was chosen as Sherlock Holmes’s favoured drug because of its novelty’ at a time when opium use was considered ‘quotidian’.⁵⁸ Cocaine had been used both within professional and patent medicine for a number of years before the publication of Doyle’s work, its psychoactive properties utilised as an anaesthetic and in an effort to combat morphine addiction. Despite this use within public and specialised forums, the drug retained a sense of innovation associated with its isolation and the experimentation that surrounded its introduction to the medical world. Within *The Lancet*, discussion of cocaine illustrates its pertinence to the evolving drug culture of Victorian medical society. In an issue published in December 1884, *The Lancet* includes correspondence received on the subject of cocaine and its medical use, including a letter from A. Hughes Bennett, which notes how the drug is ‘attracting the attention of the profession’.⁵⁹ Bennett goes on to discuss that his own experiments with cocaine led him to conclude that it ‘was a powerful poison, inducing a varied series of symptoms affecting the nervous, respiratory, circulatory, vaso-motor, and glandular systems’.⁶⁰ While the powerful nature of cocaine is acknowledged, the majority of

⁵⁸ Foxcroft, p. 57.

⁵⁹ A. Hughes Bennett, ‘Correspondence: Cocaine’, *The Lancet*, 6 December 1884, pp. 1022–23 (p. 1022).

⁶⁰ *Ibid.*, p. 1022.

the correspondence focuses on the ‘use of this drug in operations’ and the ‘marked benefit’ it will provide.⁶¹ It is, therefore, not initially part of an addiction discourse.

Doyle’s fictional exploration of cocaine use in *The Sign of Four* (1890) delineates a complex pharmacological dependency that correlates with the language of addiction narratives and subverts the clinical discourse of *The Lancet*. Christopher Keep and Don Randall argue that *The Sign of Four* is ‘about the act of puncturing, about what it means to break the skin of culture that protects the addict from alterity’. Moreover, the novel stresses an ‘implicit homology between the punctured body of the great English detective and the body politic of England itself.’⁶² This evocation of the concerns that surrounded both the national and individual consequences of drug use throughout the nineteenth century also reveals the way in which Holmes is submerged within a complex and international culture of pharmaceutical dependence which distorted the medical visions of progress within Europe. The first paragraphs of *The Sign of the Four* describe, in detail, Holmes’s use of cocaine, including how ‘his eyes rested thoughtfully upon the sinewy forearm and wrist, all dotted and scarred with innumerable puncture-marks’, while Watson, as the narrator, states that he has ‘become more irritable at the sight’ but ‘lacked the courage to protest.’⁶³ While this physical deformity is arguably a bodily symbol of the misappropriation of medicinal substances, it perhaps more pertinently demonstrates Holmes’s own visual appraisal and recognition of the addicted body and Watson’s powerless response to it, despite his professional status. There is a paradoxical physicality to Holmes, as the ‘puncture-marks’ which might suggest a body vulnerable to invasive force appear on an arm which is ‘sinewy’, which can be read as tough, lean or even muscular. The addicted body can, therefore, be viewed as simultaneously

⁶¹ C. S. Jeafferson, ‘Correspondence: Cocaine’, *The Lancet*, 6 December 1884, p. 1023.

⁶² Christopher Keep and Don Randall, ‘Addiction, Empire, and Narrative in Arthur Conan Doyle’s “The Sign of Four”’, *NOVEL: A Forum on Fiction*, 32.2 (Spring 1999), 207–21 (p. 208).

⁶³ Arthur Conan Doyle, *The Sign of Four*, ed. by Shafquat Towheed (Peterborough, ON and London: Broadview, 2010), p. 49. Subsequent quotations are from this edition of the novel and will be supplied parenthetically in the main body of the chapter.

compromised and forceful. The word 'sinew' does, however, also suggest an anatomical or medical appraisal of the human figure, perhaps isolating the cocaine habit from associations with mental or psychological faculties, and instead emphasising a problematical physical presence.

The focus on physicality found in the depiction of the addict extends to the accoutrements associated with the drug itself. The text describes how 'Sherlock Holmes took his bottle from the corner of the mantelpiece, and his hypodermic syringe from its neat morocco case' before '[w]ith his long, white, nervous fingers he adjusted the delicate needle' (p. 49). The placement of the hypodermic syringe and cocaine within a pseudo-domestic setting undermines the purely medical distinction suggested by Hughes Bennett's work in the *Lancet*, part of a wider manipulation of established forms of authority that the Holmes narratives arguably portray. The focus on Holmes's 'neat morocco case' in *The Sign of Four* illustrates his submersion within an expanding pharmacological marketplace that, as already noted earlier in the chapter, was explicitly associated with female consumers.⁶⁴ The 'alterity' identified by Keep and Randall as threatening the addict is, therefore, an emasculatory presence on an individual scale as well as a national one, positioning Holmes as a participant within a feminised environment of consumption. While the morocco case is distinct from its jewelled equivalents, it demonstrates a similar fetishisation of the apparatus of drug addiction, which is continued in the description of the 'delicate needle' and 'piston' of the hypodermic syringe itself (p. 49). *The Sign of Four's* portrayal of cocaine use embodies a juxtaposition between a sense of Holmes's physiological control and his association with

⁶⁴ This description of Holmes's case arguably echoes the observations of Sharkey in 'Morphinomania', discussed earlier in this chapter. Quotations in Sharkey's article from Daudet, describing a 'little silver case with the needle and poison', and from Zambaco, mentioning that '[l]adies even [...] go so far as to show their good taste in the jewels which they order to conceal a little syringe and artistically made bottles' emphasise the perceived connection between the market and femininity. See Sharkey, pp. 336 and 337; see also p. 205, above of this chapter.

habits of excess, revealing a paradoxical focus on both the individual and cultural manifestations of addiction.

The prominence given to the meticulous description of the drug habit within Conan Doyle's narrative stresses its problematised status, while also articulating a particular cultural preoccupation. A parallel can be found between the detail of the 'delicate needle' and 'piston' and the description of Holmes's own body, namely his 'sinewy forearm and wrist' and 'long, white, nervous fingers' (p. 49). The focus on these parts of the hypodermic syringe and the body generates a lexis of dislocation, as the text reveals disparate fragments rather than a stable whole. Not only is the arm identified as the location of addiction and, therefore, of concern, but it is further broken down into sinews, wrist and fingers, suggesting a collapse of bodily coherency explicitly linked to the drug itself. In the same way, the syringe is reduced to needle and piston, a metonymic process which identifies and accentuates the fundamental and active components of Holmes's addiction. This emphasis on the minute precision of representation arguably reveals a clinical preoccupation with the intricacy of both scientific and physiological mechanisms that is indicative of a wider cultural concern surrounding familiarity with scientific knowledge.

The use of cocaine was a common topic of discussion within publications such as the *British Medical Journal (BMJ)*. In an article published in January 1897, the drug is identified as the 'third scourge of humanity, alcohol and morphine being the first and second.'⁶⁵ Although the article considers cocaine use from an American perspective, its inclusion within the *BMJ* suggests a shared discourse on both sides of the Atlantic regarding drug habits. Suggesting that the 'greatest number of victims is to be found amongst society women and amongst women who have adopted literature as a profession', the article applies a gendered

⁶⁵ 'The Cocaine Habit', *British Medical Journal*, 23 January 1897, pp. 219–20 (p. 219). Subsequent quotations from the article will be given parenthetically in the main body of the chapter.

view of cocaine use that would seem to adhere to the association of popular morphine use with female addicts found in Sharkey's text and arguably in Meade and Beaumont's 'The Wrong Prescription' (p. 219). Again, an explicit connection is made between drug use and 'society women', identifying a class distinction centring upon women who have the means to be active consumers within the medical marketplace. The suggestion that there is also a link between women who have 'literature as a profession' and drug use arguably connects behaviour viewed as unfeminine and, therefore, subversive.⁶⁶ Through their use of cocaine, these female addicts are transgressing into the traditionally male professional spheres of literature and medicine. The article goes on to suggest that 'a considerable proportion' of addicts use the drug from 'a desire to stimulate their powers of imagination', articulating not only a motive for the habit but also a cultural belief in its psychological impact (p. 219). The link between drug use and artistic creativity is taken further through the mention of literary professionals, as it forges associations with ideas of commerciality that underscore a problematic bond between the medical and mercantile.

The *BMJ* article on cocaine use can also be read revealingly alongside Doyle's portrayal of the drug within *The Sign of Four*. The article suggests that cocaine is popularly used to 'stimulate [...] imagination' in connection with professional literary demands, while Holmes explains his use of 'artificial stimulants' through his need for 'mental exaltation' to counter the 'dull routine of existence' (p. 50). Both the article and *The Sign of Four* imbricate the use of cocaine with professional identity, as the article draws attention to those whose habit seems to aid in the production of a marketable product in the form of literature, and Holmes takes the drug in order to replicate the psychological conditions produced by his detecting work. Indeed, Holmes states that if Watson were to assess his observational and

⁶⁶ These ideas of subversive femininity can be associated with the concept of the New Woman: 'largely a discursive phenomenon', the New Woman was associated with 'such cultural phenomena of the 1880s and 1890s as decadence, socialism, imperialism and emergent homosexual identities.' See Sally Ledger, *The New Woman: Fiction and Feminism at the Fin de Siècle* (Manchester: Manchester University Press, 1997), p. 4.

deductive capabilities in a manner similar to the demands placed on them during his detective work, it would ‘prevent me from taking a second dose of cocaine’ (*Sign of Four*, p. 54).

While in some ways this places the drug and Holmes’s profession on an oppositional scale, they are nevertheless inextricably connected through their psychological influence. Thus, while Holmes enacts his cocaine habit within his domestic setting, it is nevertheless explicitly connected with his public and professional identity. The public/private dichotomy is further challenged by Watson’s account of Holmes’s drug use, which describes it as a ‘performance’ that is ‘witnessed’, while the emphasis on intricate detail in the portrayal of the hypodermic syringe and the injection itself reinforces this sense of an observed and deliberate act, staged for the viewer or reader (p. 49).

The *BMJ* piece also discloses anxieties associated with the drug and public response to it. The text states that a mixture of cocaine and menthol, sold by a local druggist as a ‘popular remedy for catarrh’, was ‘taken to such an extent that many of the victims had to be accommodated in the public lunatic asylum’ (*Cocaine Habit*, p. 219). In this description, the consumers of cocaine are not identified as addicts: instead, their status as unwitting ‘victims’ assigns the blame to the producer of the mixture rather than the consumer of that mixture.⁶⁷ Nevertheless, the fact that some of the patients are housed in the ‘public lunatic asylum’ reveals a concern regarding the public management of bodies which have consumed the drug, as well as raising the issue of the psychotropic impact of such stimulants. It is arguably demonstrative of a wider societal desire to monitor the use of drugs and drug users themselves, corresponding with a similar move within Britain, mentioned in the article, where greater emphasis on the professionalisation of medicine led to restrictions on the sale of drugs, including refusing to supply those ‘without a prescription’. The article notes: ‘One

⁶⁷ This could be interpreted as an indictment of the commercial systems that abused the circulation of cocaine without professional management, but also operates as a way of distancing the medical profession from its own responsibilities with regard to the drug.

drug habit rapidly engenders another, and the victim of chronic cocaineism is usually addicted to overindulgence in alcohol, besides being a confirmed cigarette smoker' (p. 220). The association made between different addictive habits identifies a psychopathology intrinsic to the victim, rather than locating the cause of the practices solely within the chemical substances themselves. The suggestion of this inherent predisposition towards addiction is, however, not explicitly identified as a medical condition, but rather as an individual predilection for indulgence or habits of excess. While the article identifies self-destructive behavioural traits associated with addiction, these remain based within the public and social apparatus, and the advice given is that the sale of drugs to the public should be further restricted. Thus, medical issues are shown to be inextricably linked not only to the public access to substances such as cocaine, but to how the addicted body is controlled and exhibited in public spaces.

The complexities of the evolving public conception of drug use continued to fuel discussion within the specialist periodicals. Published in the *BMJ*, an 1888 article entitled 'Cocaine Poisoning' is located in the 'Special Correspondence' section of the publication and is followed by further reports on diverse medical and scientific developments, including 'Variations of Microbes under Cultivation'.⁶⁸ Positioning the account of cocaine abuse within the larger sphere of contemporaneous medical practice emphasises the drug's pertinence to the professional field and to continuing attempts to establish the regulation of medicine. The article notes that the arms and legs of the patient were covered in 'pustules' that 'resembled the scabs of syphilitic ruin', associating the recreational use of cocaine with concerns that had been traditionally connected with sexually transmitted diseases. Also linked to ideas of degenerative masculinity, syphilis was an established referent within popular culture, the afflicted body being subjected to a combination of social condemnation and medical

⁶⁸ 'Special Correspondence: Cocaine Poisoning', *British Medical Journal*, 25 February 1888, p. 438.

treatment. By drawing attention to the similarities between the symptoms of syphilis and cocaine use, the *BMJ* article ascribes comparable models of observation and categorisation to the addict, as well as associating him with bodily deviancy and personal incontinence. The article continues, stating that the patient's use of cocaine 'produced agreeable sensations and sexual desire', again explicitly linking potential sexual transgression with recreational drug use. A further result of the hypodermic injections is seen in the 'white patches insensible to the touch' that occur in the skin where the drug has been administered. This insensibility not only reveals damage to the nervous system but suggests an estrangement of the body: the 'patches' of skin become dissociated from the rest of the body, creating a disjointed and dislocated site. The addicted body, therefore, not only visibly reveals itself but is reduced to an uncanny and fragmentary state through the physicality of drug use.

These fears surrounding the use of cocaine continued to inflect the professional sphere over the last years of the nineteenth century. A further case of 'Cocaine-Poisoning' is discussed in the *BMJ* in early 1889, emphasising an enduring sense of risk associated with its use. Calling cocaine a 'useful but powerful drug', the article suggests that it is 'either too extensively or too recklessly employed'.⁶⁹ The article also lists the most common medical uses for cocaine, including 'its local anaesthetic effect' and 'anaesthetic prior to [...] minor operations', emphasising the benefits of its controlled and professional applications, as well as the increasingly specialised understanding of chemical substances that characterised the advancing medical sciences. Despite its wide use, the article notes that there is 'great idiosyncrasy in the action of cocaine', and goes on to summarise 'trials' which have been 'made with cocaine', with the aim of establishing a standardised amount safe to administer in medical cases (p. 311).

⁶⁹ 'Cocaine-Poisoning', *British Medical Journal*, 9 February 1889, pp. 311–13 (p. 311). Further references are given parenthetically in the text.

The emphasis on the unreliable nature of cocaine suggests a subversion of medical control and the experiments, or ‘trials’, suggest an individual and communal desire to achieve a sense of procedural routine when using this drug. The language used in the text articulates this oppositional relationship between chemical power and medical control, the specialised terminology attempting to minimise the potentially sensational physiological effects of cocaine use. The descriptions given of cocaine poisoning relate such symptoms as ‘spasms of short duration’, a ‘weak and very frequent’ pulse, as well as ‘great uneasiness and excitement’ (p. 312). Nevertheless, the evident focus on the physiological impact of cocaine mitigates the attempt at containment, with the symptoms effectively portraying excessive responses that suggest a lack of bodily control. The belief that both drugs and bodies lie beyond medical control is implicitly expressed within this article, undermining not only perceived professional power but ideological systems of restriction and supervision. Once again, specialist medical texts reveal a wider cultural dissonance surrounding the surveillance of bodies and the substances consumed by them within both public and professional spaces.

This sense of conflict is also evident in the exploration of the complex relationship between addictive substances and the medical treatments used to combat their abuse. ‘The Use of Cocaine in the Morphine Habit: A Warning’ (1907), a correspondence article written by J. Henry Chaldecott and published in the *BMJ*, discusses several case studies of ‘persons addicted to morphine who, on the advice of medical men, have taken cocaine with a view to curing themselves of the morphine habit’.⁷⁰ While the letter from Chaldecott emphasises that this medical advice is ‘useless’ and ‘dangerous’, it is nevertheless symptomatic of a professional anxiety surrounding recently developed chemical substances, whose physiological effects were misunderstood and, therefore, open to misuse.⁷¹ The application of

⁷⁰ J. Henry Chaldecott, ‘The Use of Cocaine in the Morphine Habit: A Warning’, *British Medical Journal*, 31 August 1907, pp. 555–56 (p. 555).

⁷¹ *Ibid.*, p. 555.

cocaine to treat morphine addiction demonstrates medical practitioners' recognition of the central nervous system as fundamental to the bodily symptoms of substance use. However, it also delineates an enduring reliance on chemical-based remedial therapy, grounded once again in the pervasive medical marketplace that characterised the Victorian period. The correspondence reveals an environment of multiple addiction treatments, the focus on cocaine contrasting with the Keeley and Turvey treatments discussed previously, which emphasised the residential aspect of their cures rather than the accompanying systematic drug treatment.

The continuing reliance on pharmaceutical techniques highlights the enduring duality at the heart of medical conceptions of addiction treatment, as well as an emerging call for professional regulation of substances such as cocaine. Chaldecott concludes his letter with the warning that attempting to cure morphine addiction with cocaine can result in 'the cocaine habit, by the side of which the morphine habit is comparatively insignificant', and which includes symptoms such as 'delusions and hallucinations'.⁷² The suggestion of a continued addiction problem, associated with cocaine rather than morphine, seems to identify or acknowledge an underlying psychological and chemical issue fundamental to the disease itself. Drug-based treatment, therefore, is established as inadequate to combat drug abuse. The mismanagement or misappropriation of ostensibly medical resources is a recurring concern within both professional and literary explorations of addiction, as these texts show, well into the twentieth century.

Jennings' *Cure* also explores the use of cocaine in the treatment of morphine addiction. Stating that the 'morbid pleasure of injecting something under the skin is as great a fascination as the effects of the morphia', he identifies a psychological and deviant compulsion which privileges the act of hypodermic injection over the substance being used (p. 74). This echoes the excessively descriptive tone used in *The Sign of Four* to portray

⁷² Ibid., p. 556.

Holmes's use of cocaine and the minute mechanics of his syringe. The penetrative aspect of this form of drug administration thus reveals both a medical preoccupation with obsessive disorders and cultural concerns surrounding the boundaries of the body and body politic. Acknowledging this fascination for the process of subcutaneous injection, Jennings notes that one must 'invariably refuse to countenance the smallest addition of cocaine' in an attempt to counter morphine addiction, as 'the invariable result of the hypodermic injection of cocaine is to develop the mania of injecting to an incomprehensible degree' (p.74). The use of the word 'mania' again conveys a sense of excess, associated with popular ideas of degeneracy and psychopathology. This is exacerbated by Jennings' observation that one administration of cocaine is followed by 'an irresistible impulse to further injections', demonstrating both the perceived potency of the drug and the unstable physiological and psychological influences present in cases of addiction (p. 75). The tone of Jennings' study is arguably somewhat sensationalistic, articulating the subversive potential of drugs such as cocaine through a discourse shared with Gothic writing of the period, from Poe to Stoker.

There is, however, evidence of an alternative cultural attitude towards cocaine. In 'The Ladies Column' of the *Illustrated London News* published on 22 August 1891, it is mentioned that cocaine can be used as effective relief from sea-sickness. Discussing her own experience, the writer states that 'this new specific exercised a decidedly useful effect', even mentioning that the drug was so effective that a fellow female sufferer 'walked about the deck and ate sandwiches'.⁷³ Here, cocaine is presented as an instrument within a functioning and leisured lifestyle and the sensational language seen elsewhere is replaced with words such as 'useful', portraying the drug as an accessible substance associated with convenience and utility. Discussing the drug in more detail, the writer suggests that the effect would have been more successful if she had 'used the cocaine in fluid form', rather than the lozenges

⁷³ 'The Ladies Column', *Illustrated London News*, 22 August 1891, p. 260.

which are, however, ‘portable and easy to put in the mouth’. The knowledge displayed by the writer regarding the various forms in which cocaine can be administered discloses the contemporary public awareness of medical resources, but also suggests a marketplace in which these drugs are rendered freely accessible in order to meet the consumer’s desire rather than medical needs. The ‘portable’ cocaine lozenges also add to this model of a consumer-driven lifestyle, in which even powerful pharmacological substances are subject to the market’s demands for convenience. The article goes on to state that the author ‘consumed six, one-tenth of a grain in each’, demonstrating a discourse of drug use common to both medical case histories and popular texts.⁷⁴ Again, this detail assumes a wide public knowledge surrounding the use of drugs such as cocaine and a shared assumption of reliable and safe dosages. In contrast to the subversive sense of excess found in previous explorations of the use of cocaine, here a woman’s use of the drug is normalised and no undesirable effects are reported. This may be attributed to the fact that the cocaine takes the form of lozenges rather than being administered by hypodermic injection, necessarily limiting the physiological response and potential for transgressive invasion of bodily wholeness. Nevertheless, this portrayal clearly demonstrates the essential duality within Victorian attitudes towards cocaine and drug use in general.

The contradictory attitudes surrounding the use of cocaine found in specialist and cultural texts reflect the inherently unstable nature of the *pharmakon*, and this is explicitly discussed by J. B. Mattison in his lecture on ‘Cocaine Dosage and Cocaine Addiction’, published in *The Lancet* (1887). Mattison acknowledges that ‘No advent in the therapeutic arena during the last decade has been attended with such varied and extensive claims for favour as cocaine’. However, he then cautions that

a potency for good implies a potency for harm, and the risk impends of its ardent advocates being carried by over-enthusiasm beyond the limit of a safe regard for the

⁷⁴ Ibid., p. 260.

welfare of their patients or themselves, that may imperil an otherwise well-founded success.⁷⁵

This sense of intricate balance between the remedial and the ‘toxic’ effects of cocaine is identified by Mattison as having the potential to create ‘distrust with and without the profession’ which will ‘damage its good repute’.⁷⁶ The article employs a cautionary discourse to counter the one of excess that it identifies as surrounding professional enthusiasm for the drug’s potential applications. The mention of ‘distrust’ arising ‘with and without the profession’ acknowledges the ways in which wider public opinion continued to influence or shape medical practice, with interactions between the practitioner and patient being informed by these apprehensions. Mattison himself evokes a sense of excess in order to emphasise the dangers of cocaine misuse, detailing how ‘*habitués* have been known to take it ten, twenty, or more times daily’, and that it is ‘for many, notably the large and enlarging number of opium and alcohol *habitués*, the most fascinating, seductive, dangerous, and destructive drug extant’.⁷⁷ The immoderation suggested here reflects both a localised medical anxiety about the individual addicted body and a broader concern about the perceived decadence of habits of the body politic. The dichotomous description of cocaine itself articulates the contradictory nature of the *pharmakon*, while the language used demonstrates the ways in which medical discourse was permeated by the sense of excess it sought to caution against. Mattison’s lecture, and its publication within *The Lancet*, suggest an effort to exert professional regulation, the semantics of excess both emphasising and undermining this desire for control.

Throughout the nineteenth century, legislative and medical developments altered cultural perceptions of both drug use and addiction. In her discussion of opium use towards the end of the nineteenth century, Virginia Berridge notes that consideration of drug habits in these years must be informed by an awareness of the ‘[r]estriction under the legitimizing

⁷⁵ J. B. Mattison, ‘Cocaine Dosage and Cocaine Addiction’, *The Lancet*, 21 May 1887, pp. 1024–26 (p. 1024).

⁷⁶ *Ibid.*, p. 1024.

⁷⁷ *Ibid.*, p. 1025.

“expert” control of the medical and pharmaceutical professions’ that had become ‘central’ to the medical marketplace.⁷⁸ This idea of growing restrictive medical and governmental control over the movement of drugs, including opiates, can be seen within the fiction discussed previously where, in Meade and Beaumont’s ‘The Wrong Prescription’, Dr Halifax repeatedly states that ‘[t]he law forbids chemists to give certain drugs without prescriptions’ (p. 602). In ‘The Cocaine Habit’, published in the *BMJ* and discussed previously, it is noted that in England chemists ‘decline to supply preparations of cocaine without a prescription’, emphasising both cocaine’s uncertain status and the attempts to control its circulation and use.⁷⁹ Berridge suggests that this evolving connection between attitudes towards drug control in the latter stages of the century ‘foreshadowed the collaboration between the medical profession and the civil service, between government and doctors’ and influenced how addiction was both perceived and treated.⁸⁰

Conclusion: Masculinity and monomania in Arthur Machen’s ‘Novel of the White Powder’

Published as part of the episodic novel *The Three Impostors* (1895), Arthur Machen’s weird tale ‘Novel of the White Powder’ examines drug use within a domestic and bourgeois environment. The narrative follows Francis Leicester, who after an ‘exceptionally brilliant career at the University’ returns home with ‘the resolution of a hermit to master [...] the great legend of the law.’⁸¹ Leicester’s academic habits include ‘[t]en hours a day of hard reading’ and ‘relentless application’, conveying a life of intense and ‘unnatural’ excess, which results

⁷⁸ Virginia Berridge, *Opium and the People: Opiate Use and Drug Control Policy in Nineteenth and Early Twentieth Century England* (London and New York: Free Association Books, 1999), p. 228.

⁷⁹ ‘Cocaine Habit’, p. 220.

⁸⁰ Berridge, *Opium and the People*, p. 229.

⁸¹ Arthur Machen, ‘Novel of the White Powder’, in the *White People and Other Weird Stories*, ed. by S. T. Joshi (London and New York: Penguin, 2011), pp. 67–82 (p. 67). Subsequent quotations will be taken from this edition of the text and given in the main body of the chapter.

in ill health and necessitates the use of the eponymous white powder (p. 67). This contrasts with Meade and Beaumont's 'Trapped', in which studious habits are recommended as a means of overcoming a reliance on alcoholic consumption.

The distinction suggests a complex understanding of *fin de siècle* masculinity, in which an active sense of productivity is opposed by a destructive and obsessive monomania. The latter manifests itself in the character of Leicester as a physical malaise, the narrator describing how '[a] look of anxiety began to lurk about his eyes, and he seemed languid' in addition to suffering from 'a sensation of dizziness' and 'fearful dreams' (p. 67). The narrator also mentions that her brother exhibits a 'nervous irritation of his movements', these symptoms encompassing both psychological and physiological processes and the centrality of the nervous system within medical discourse (p. 68). Initially then, the character associated with drug use later in the narrative is already shown to possess qualities that might mark him out as somehow deviant: he is portrayed as being distinct from a normative and communal form of masculine activity and a problematic physicality is established through the description of his symptoms. The isolation of Leicester could also suggest associations with the *fin de siècle* scientist figure, such as Henry Jekyll, as his inaccessibility renders him a problematic figure who subverts the stability of the domestic sphere.

The tale also describes Leicester's process of obtaining prescriptions and interactions with medical professionals, including a chemist. He has his prescription made in 'an odd, old-fashioned shop, devoid of the studied coquetry and calculated glitter that make so gay a show on the counters, and shelves of the modern apothecary' (p. 68). The use of the word 'show' emphasises how the medical world was perceived as a public spectacle inextricably linked to the popular press and commercial marketplace but also synecdochically in the performance of both patient and practitioner. This is continued in the description of Leicester's ingestion of the drug: 'he quaffed off his medicine with a parade of carousal' (p. 69). The social

implications of the phrase ‘parade of carousal’ present the act of taking medicine as a public rather than private activity, the sense of performance juxtaposed with the domestic setting of the narrative. The suggestion of ‘studied coquetry’ and ‘calculated glitter’ in the ‘modern apothecary’ also draws attention to the increasing association of commerce with medicine, the drugs seen as products for a consumer rather than a remedy for a patient. The fact that this apothecary does not seem to participate in the commercial performance suggests that it is distinct from a modern medical practice and instead represents an archaic space associated with correspondingly antiquated ideas of medicine. Despite the old-fashioned description of the apothecary, Leicester is convinced of the ‘scrupulous purity’ of the drugs, and is given ‘an innocent-looking white powder’ (p. 68). While these descriptors arguably hint at the inevitable revelation of the subversive nature of the drug, they also introduce a pertinent fear regarding adulteration that permeated nineteenth-century consumer culture and which is found in Stevenson’s *Jekyll and Hyde*, where Jekyll’s supply of drugs is described as ‘impure’ (*J&H*, p. 70). The importation and circulation of contaminated medicine, as well as food and drink, undermined the welfare of the body and body politic, compromising the integrity of the commercial sphere. Thus Machen’s narrative effectively demonstrates how popular and literary culture perceived drugs as potentially dangerous due to this infectious nature of commerce as well as their own chemical influence.

The initial positive physical and psychological influence of the white powder is undermined within the text. The narrator remarks of her brother that there was ‘something in his gaiety that indefinitely displeased me, though I could not have defined my feeling’ (‘White Powder’, p. 70), a description that again has parallels with Stevenson’s *Dr Jekyll and Mr Hyde*, where it is noted that Hyde has ‘something wrong with his appearance’ although characters ‘can’t describe him’ (*J&H*, p. 10). This sense of an indefinable yet unpleasant quality within the character associated with drug use articulates a suggestion that the

ingestion of drugs has a discernible influence on their physical appearance. This association continues within 'White Powder', as Leicester develops further physical marks that distinguish his association with the drug, the narrator observing on his hand 'a small patch [...] somewhat the colour of a bruise. Yet [...] I knew that what I saw was no bruise at all; oh! if human flesh could burn with flame, and if flame could be black as pitch, such was that before me' (pp. 70–71). This mark emphasises the supernatural associations of the white powder and transforms Leicester from a domestic bourgeois character into a creature of Gothic horror, and the powder from a reassuring medicine to regressive and dangerous substance. The visible mark on Leicester's skin reveals a sense of physical corruption, associated not only with Foucauldian ideas of monitoring medical and moral deviance, but with the sense of individual degeneration explored in the *fin de siècle* Gothic. Within *Jekyll and Hyde*, the hand of the drug user is also significant: as previously discussed,⁸² it is through close observation of his own hand that Jekyll realises that he has unexpectedly turned into Hyde, and that his body has effectively been reconfigured and become uncontrollable through his drug use. Here, too, it is Leicester's hand that first reveals a sense of the greater change that overwhelms his body. It perhaps suggests a problematic anatomisation of the body, akin to that found in the Sherlock Holmes narratives, where Holmes's body is broken down by his drug use.

The transformative powers of drugs are revealed in *Jekyll and Hyde* through Jekyll's observation of his own body turning into Hyde in a laboratory context: Jekyll records and monitors the changes of his body, giving an account of his experiments that engages with contemporary scientific and medical discourses. In 'White Powder', the changes that occur to Leicester's body are furtively hidden within a domestic environment. Leicester's hand is 'all bandaged', masking the initial physical signs of his corruption, and he 'remained in his

⁸² See p. 201 above.

room', the narrator only obtaining glimpses of her brother through his window (pp. 73–74). Within the two narratives, drug use is therefore comparatively seen as a scientific form of experimentation and a clandestine domestic occurrence. While Jekyll's body is scrutinised by himself and the reader, Leicester's is kept from the view of both narrator and reader: the body of the drug user is therefore both subjected to and hidden from the public gaze. This is complicated, however, through both texts' insistence on the overlap between the domestic and medical worlds. While Jekyll's experiments are ostensibly professional or scientific, the resulting unpredictability of his body and relative isolation of his laboratory problematically present his drug use as a private and covert action. Conversely, the home and bedroom of Leicester are visited by medical professionals, drawing his individual body into the professional and public gaze. Thus, the body of the drug user exists liminally between the public and the private, symbolising both a hidden disease and a wider social disorder. This sense of a hybrid connection can be seen in earlier texts, such as those by Davy and De Quincey, where personal substance use is subjected to scientific and public scrutiny – suggesting a pervasive uncertainty about the status of drugs and their relationship with the body, which is remade and exaggerated within this Gothic context.

The supernatural tone of 'White Powder' reaches its climax in the description of Leicester's transformed appearance. After a brief glimpse of Francis, the narrator reports seeing 'something [...] formless' that suggested 'hideous corruption', and approaching his room she hears: 'feet shuffling slowly and awkwardly, and a choking, gurgling sound' (p. 75). This firmly emphasises not only a problematic disintegration of the body linked to drug use but a more fundamental social preoccupation with a sense of corruption associated with the private and domestic world. Leicester's exaggerated formlessness and his isolation within the domestic environment arguably function as an expression of the psychological disorder of substance abuse in a Gothic language that overwhelms that of developing medical

discourses. This gross distortion of the body that haunts the bourgeois home can therefore be seen to symbolise a deviant or abnormal mental state, reflecting an increasing public, as well as scientific, awareness of psychological imbalance. The medical interactions with Leicester during his drug use reflect a questionable or unstable professional response to mental disorders. After visiting Leicester, Dr Haberden is left with ‘an unutterable horror shining in his eyes’ and states that he ‘can do nothing in this house’ (p. 74). This sense of medical inadequacy or powerlessness highlights the assumed inability of the profession to articulate or explain psychological processes and their incongruities, while the ‘horror’ of the doctor’s reaction suggests a condition that transcends the rationality of nineteenth-century medicine. The final confrontation between doctor and patient is characterised by violence, as the doctor ‘raised the iron bar and struck at the burning points; he drove in the weapon, and struck again and again in a fury of loathing’ (p. 78). The destruction of Leicester by the doctor could suggest a triumph of Victorian science over pagan mysticism; however, the fact that Dr Haberden subsequently gives up his practice and dies indicates a profound failure within this interaction. The eventual Gothic horror of the form of Leicester’s body arguably engages with public concerns regarding the addicted individual. The narrator relates how Leicester is reduced to a ‘dark and putrid mass, seething with corruption and hideous rottenness, neither liquid nor solid, but melting and changing before our eyes, and bubbling with unctuous oily bubbles like boiling pitch’ (p. 78). The explicit associations with degenerative or perverse physicality are evident in the words ‘corruption’, ‘putrid’ and ‘rottenness’; however, the description also draws attention to the mutability of the body and its resistance to professional or medical definition: the reference to boiling pitch also suggests a sense of violence or destruction. Hence, Leicester’s body becomes a deeply problematical form, serving as a locus for multiple concerns regarding the dichotomy of chemical and social progression and regression.

* * *

The sense of contradictory duality that characterised the *fin de siècle* accentuated pre-existing anxieties about addiction and the addicted body within periodical culture. Drugs and their use were associated with both individual excess and broader ideas of social and cultural decadence, revealing how the body and body politic were perceived as existing in a problematic state of vulnerability. Specialised medical publications, such as *The Lancet* and *British Medical Journal*, also revealed a field of discourse typified by inconsistency, as the capabilities and dangers of medicinal substances were discussed, debated and rewritten. These journals articulated a desire for professional control that acknowledged a wider sense of dissipation or, at least, perceived irregularities in individual habits of drug use. Within both medical and fictive texts, addiction and the addict were problematically enmeshed with evolving nuances of gender, criminality and enduring racial tensions. The overarching anxieties of degeneration or regression brought to the fore the inherent dichotomy of the *pharmakon*, the remedy/poison contradiction re-enforcing the ambiguity of the last decades of the long nineteenth century.

Conclusion

Is it after all by chance or by harmonics that [...] the connection between *biblia* and *pharmaka* should already be mentioned in a malevolent or suspicious vein? As opposed to the true practice of medicine, founded on science, we find indeed, listed in a single stroke, empirical practice, treatments based on recipes learned by heart, mere bookish knowledge, and the blind usage of drugs. All that, we are told, springs out of *mania*: ‘I expect they would say, “that man is mad; he thinks he has made himself a doctor by picking up something out of a book (*ek bibliou*), or coming across a couple of ordinary drugs (*pharmakiois*), without any real knowledge of medicine”’ (268c) [...] one and the same suspicion envelops in a single embrace the book and the drug, writing and whatever works in an occult, ambiguous manner open to empiricism and chance, governed by the ways of magic and not the laws of necessity. Books, the dead and rigid knowledge shut up in *biblia*, piles of histories, nomenclatures, recipes and formulas learned by heart, all this is as foreign to living knowledge and dialectics as the *pharmakon* is to medical science. And myth to true knowledge.¹

Over the nineteenth century, the vast scope of social, economic and medical developments resulted in seismic changes in the ways that medicine, health and the body itself were conceptualised within public and private domains, as well as in professional or specialist circles. Periodical fiction engaged with and explored these fluctuations, reflecting and manipulating the complexities of the relationship between body and drug, reader and text, and scrutinising the ways in which concepts of addiction were re/formed. These fictional depictions of drug use and abuse demonstrated a preoccupation with the uncertainty of medicinal progress, as well as with issues of consumption more widely across the body politic. Nationally and internationally, the movement and use of drugs came to have greater significance as the stability of imperial power was increasingly subject to scrutiny, the complexities of its trade emphasising the problematic state of foreign interactions and relationships. The fiction, articles and texts considered by this dissertation also articulate and explore the intrinsic pertinence of the *pharmakon*'s duality to the evolving framework of

¹ Jacques Derrida, ‘Plato’s Pharmacy’ (1981), in *Dissemination*, trans. by Barbara Johnson (London and New York: Bloomsbury, 2013), pp. 71–186 (p. 78).

public beliefs, professional diagnoses and private habits surrounding the drug and the figure of the drug user. The complex and contradictory nature of the medicine/poison dichotomy is fundamental to the subversive instability that recurs in texts throughout the nineteenth century, as the significance and implications of addiction and the addict are increasingly discernible.

The body

Quoting the German physician Robert Volz (1806–82), Roy Porter notes that over the course of the nineteenth century, the ‘sick person has become a thing’, with scientific and medical developments having a reductive impact on the active role of the patient, both diminishing the significance of their account of their illness, and removing the function of interaction or personal impetus from dealings with professional figures.² Within the fictions and articles discussed in the preceding chapters, tension occurs between the addict as a body and the addict as an individual, an opposition that results from and reflects the complex nature of nineteenth-century medical enquiry, which was characterised by physiological and psychological discovery. The dichotomy of patient, or addict, as a ‘thing’/individual also carried connotations for how the relationship between the body and the drug was perceived and explored, with texts expressing anxiety about the power of chemical influence, as well as potentially flawed human nature. While this suggestion of a chronological evolution in how the patient was comprehended implies a gradual dehumanisation, the texts examined in this thesis reveal that the figure of the addict arguably embodied a sense of the inhuman or abnormal from early in the nineteenth century, emphasising the complex and uncertain status of drug abuse, or addiction, within both public and professional spheres. This sense of

² Robert Volz, quoted by Roy Porter, in *The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present* (London: HarperCollins, 1997), p. 311.

Otherness implies a distinction between patient and addict, at least in popular culture, and detachment from ideas of structured medical classification. The figures associated with unregulated substance use are frequently shown to exist problematically beyond or outside normative socio-economic frameworks, their bodies functioning as visual signs of difference or corruption, rather than solely reflecting medical irregularity. This enduring sense of the addict's body being somehow deviant reflects the way in which addiction itself was characterised by its inclusion in discussions and investigations across multiple disciplines, existing as a mutable concept that evaded simple categorisation.

This view of the addict as being somehow less than human is articulated and explored in multiple ways in the texts discussed in the previous chapters. In Charles Dickens' *Hard Times* (1854), the character of Mrs Blackpool, an alcoholic, is '[a] creature so foul to look at, in her tatters, stains, and splashes, but so much the fouler than that in her moral infamy, that it was a shameful thing even to see her.'³ This description effectively imbricates Mrs Blackpool's abuse of alcohol with a framework of social expectations and assumptions in a way that illustrates the importance of moral context in constructions of the addict. The novel demonstrates a preoccupation with morbid physicality that precludes any sense of Mrs Blackpool as an individual, her significance in the novel associated instead with the struggles of Stephen Blackpool. This account of Mrs Blackpool can be compared with those of Edward Hyde in Robert Louis Stevenson's *Strange Case of Dr Jekyll and Mr Hyde* (1886), where the text similarly emphasises the physical, noting that there was 'something wrong with his appearance; something displeasing [...] He must be deformed somewhere; he gives a strong feeling of deformity.'⁴ While Hyde's sense of deformity denotes his embodiment of the baser side of human nature, his implicit and fundamental association with the experimental use of

³ Charles Dickens, *Hard Times* (London and New York: Penguin, 2012), pp. 76–77. All further references are to this edition and are given parenthetically in the text.

⁴ Robert Louis Stevenson, *Strange Case of Dr Jekyll and Mr Hyde*, ed. by Robert Mighall (London and New York: Penguin, 2003), p. 10.

chemical substances also suggests that the body associated with this practice is perceived as abnormal. The tension between the addict as a body and an individual is also emphasised in Stevenson's text through Jekyll's 'Full Statement' of his experimentation (p. 55). While this account does afford to the figure associated with unregulated drug use a voice in the narrative, by limiting its presence to the confines of a pre-written 'Statement' the novella frames it within a professional, rather than a personal, sphere. The sense of legality or medical validity implied by the Statement reinforces the idea of the drug user as a case to be examined, rather than an individual with whom we can empathise.

Henry Jekyll also subjects his own body to intense scrutiny within the narrative, his accounts of transformation blurring the boundary between the scientific and personal gaze, and revealing a supernatural sense of the drug user's body. The focus on the body is most intense when Jekyll realises that he is no longer in control of the physical change produced by the drug, this awareness arising from comparing and identifying 'the hand of Henry Jekyll' and 'the hand of Edward Hyde' (p. 61). Subjecting the body to the gaze of both character and reader in this way signals an attempt to bring under control that which is evasive or ambiguous. This tendency towards mutability permeates characterisations of the drug user, as seen in my earlier discussion of Lydia Gwilt in Wilkie Collins' *Armadale* (1864–66).⁵ The text emphasises that Lydia's body is most problematic in its ability to escape other characters' attempts to catalogue it, disclosing a duplicity or unreliability that exposes the weaknesses of both private and public structures of control. It is this changeable or undependable quality that defines the drug user, and that singles the body of the addict out as abnormal. This is most dramatically evident in Dickens' *Bleak House* (1852–53) with the character of Krook, whose excessive alcohol consumption corresponds with the wider institutional corruption operating within the body politic. While Krook is also described as

⁵ See Chapter Two, p. 157 above.

having an abnormal appearance ('short, cadaverous, and withered; with his head sunk sideways between his shoulders'), it is his death that illustrates the fundamental alterity of the addict's body.⁶ The novel suggests that Krook's death by spontaneous combustion is caused by drinking more and more potent gin, with his manner of death reversing this excessive ingestion as his body is consumed. The consumption of the addict's body in this way articulates a fundamental dichotomy and duality that is present in other depictions of drug use, but, as with Krook's drinking, is taken to excess.

Within medical journals, the body of the patient operates as a site of complexity, embodying socio-economic concerns, as well as professional and personal ones. The multifaceted nature of the discussion and depiction of the patient's body reflects how 'experiences of sickness and treatment were shaped by a range of factors from class, gender and race to social, political, economic, familial and psychological'.⁷ The notion, then, of one particular conceptualised body of the addict or patient is fallacious and overlooks the nuanced interactions and discrete expectations that resulted in multifarious theories and models. Discussion of the addict's body published within specialised journals, such as *The Lancet* and the *British Medical Journal*, reflected the complexity of contemporary medical discourse, which, as I have observed, was influenced by cultural referents as well as professional developments. This amalgamated or hybridised language that was used to portray the body of the addict contributes to the idea of multiple potentialities, with the drug user's body representing the imbrication of the medical and cultural worlds. The assertion that 'it is no more "possible to reform a person who has been long addicted to the practice of taking opium," than it is to reform a patient who is paralyzed', made by Dr Isaac Pidduck in *The Lancet* in 1851, not only illustrates the continuing debate surrounding drug use found within

⁶ Charles Dickens, *Bleak House*, ed. by Nicola Bradbury (London and New York: Penguin, 2003), p. 68.

⁷ Keir Waddington, *An Introduction to the Social History of Medicine: Europe since 1500* (Basingstoke and New York: Palgrave Macmillan, 2011), p. 10.

periodicals, but demonstrates the complexity that characterised constructions of the addict's body.⁸ The comparison of addiction with paralysis emphasises the perceived physicality of the disease, rather than framing it as a moral or behavioural disorder, while also denoting a sense of powerlessness. The implication is one of a body that evades the control of the patient: one that must be brought under the jurisdiction of professional care, with the evolving medical language of the publications reflecting this attempt to draw the body away from the ascendancy of the drug.

Throughout the nineteenth century, the body of the addict is a site of problematic alterity. This inconsistency is evident in a form of physicality that marks the body of the drug user as deviant, reflecting a more fundamental ability to disrupt and unsettle the structures of public and private culture. Distinct from the more generalised concept of the 'patient', the addict arguably existed both within and beyond the developing medical sphere, challenging the emerging distinctions forming between the concept of the private individual body and the medicalised understanding of physiology. While in some of the fictional texts considered, the only resolution to this dislocation seems to be the death of the addict, the removal of the body from the world it disrupts, some, including L. T. Meade and Edgar Beaumont's 'The Wrong Prescription' (1893) and 'Trapped' (1894), are able to reconcile the body and body politic.⁹ The fundamental tension between the resolution of death, the final evasion of external control, and the perceived capacity of the medical professional to rehabilitate the abnormal or deviant body suggests an ongoing inability to arbitrate the multitudinous significations of the addicted body.

⁸ Isaac Pidduck, 'Opium-Taking', *The Lancet*, 5 July 1851, p. 21.

⁹ See Chapter Three, from p. 208, for a discussion of Meade and Beaumont's stories, which appeared as part of the serial anthology *Stories from the Diary of a Doctor*, published in the *Strand Magazine* between 1893 and 1895.

The drug

Advances in chemical and pharmaceutical science during the nineteenth century fundamentally altered both private and public attitudes towards medication. The abuse of alcohol was identified as both a social issue and an individual vice, encompassed within popular understandings of problematic consumption as well as a medical framework. While the medical marketplace continued to be marked by its pluralism, there was a growing movement within professional and governmental spheres to restrict and control public access to substances such as opiates. The century witnessed the formulation of more powerful forms of opiate, such as morphine (1804) and heroin (1874), as well as that of cocaine (1860), and substances such as laudanum retained their prominence in both a practical sense and as a cultural signifier. These new and more powerful drugs represented an uncertain and untrustworthy scientific potential, while laudanum and opium themselves retained connotations of Romantic isolation, such that both apprehensions combined to create a dichotomous *fin de siècle* impression that at once conveyed both advancement and degeneration. The enduring significance of opium within the public consciousness was also owing to its prominence within ongoing international tensions, as growing anxiety over corrupt trade undermined the perceived stability of the body politic. This awareness of an unethical market did not preclude negative racial stereotypes of Chinese communities and individuals associated with opium use in locations such as London, as the sensationalised image of the opium den retained its relevance and authority within narratives in the later stages of the nineteenth century. The texts considered in this thesis demonstrate how the drug's connections to such notions of nationality and race could destabilise the conception of a reliable medical marketplace and introduce problematic ideas of corrupt consumption. The drug existed as a focal point where fears surrounding the dichotomies of self/other and

control/disorder were sited, questioning the efficacy of professional regulation and revealing the precarious state of the body politic's illusion of well-being.

The connection between the drug and international tensions is prominent within Wilkie Collins' *The Moonstone* (1868). Here, the theft of the diamond from India and its illicit circulation within England refracts the problematic trade and movement of opiates, internationally and domestically. Possession of the diamond is shown to have a corrupting influence, disrupting social relationships and introducing troubling ideas of criminality and foreign Otherness to the English domestic interior. Opiate use within the novel mirrors this unsettling pattern, associated as it is with covert use, characters of mixed race and instances of illicit behaviour. While *The Moonstone* emphasises how the drug brings to the fore concerns about transnational trade, depictions of substance abuse were also framed as an inherent form of disease afflicting the body politic. The concern surrounding gin consumption in working-class society, articulated in the fictions, articles and images discussed in Chapter One, demonstrates an apprehension of domestic habits and a preoccupation with documenting and categorising these undesirable patterns of behaviour. Just as Krook's alcohol consumption was indicative of wider corruption within systems of law and governance, the fascination with gin revealed a sense of extensive socio-economic instability and unpredictability. Such volatility is still evident at the *fin de siècle* in texts such as Robert Louis Stevenson's *Strange Case of Dr Jekyll and Mr Hyde* (1886), where not only does the drug's effect become erratic but the very efficacy of the drug itself is, ultimately, owing to its contaminated nature. The drug is portrayed as untrustworthy and unreliable, possessed of obscure qualities that have an unknowable impact on the body, and threaten the stability of the professional and social structures that sustain the body politic. The introduction, circulation and consumption of the drug, whether opiate or alcohol, is perceived

to disrupt both body and body politic, causing and revealing problematic physiological and social processes, and increasingly suggesting the potential for uncertain consequences.

This unknowable element of the drug was reflected by a preoccupation with its practicalities and physicality. Many of the texts discussed demonstrate this fixation with the drug as an object or thing, as well as with the articles associated with its use or consumption. In *No Name* (1862), when Magdalen Vanstone purchases laudanum, the reader's attention is specifically drawn to the 'bottle [...] in the palm of her hand', and the description of the 'faint clink of the bottle, as it fell harmlessly from her loosened grasp, and rolled against some porcelain object on the table' again stresses the materiality of drug use.¹⁰ Similarly, in Collins' *Armadale*, Lydia Gwilt addresses her 'little bottle of drops', directly addressing it to say "'Drops," you are a darling!"¹¹ The personification of the drug is an exaggerated instance of this propensity to focus on the tangible product, and emphasises the relationship between the addicted body and the drug. This fixation with the physical, in terms of the drug itself and with its interaction with the body, is also seen in Meade and Beaumont's 'The Wrong Prescription', where one of the accompanying illustrations depicts a hypodermic needle (see Figure. 3. 2, Chapter Three, p. 206, above). The image emphatically draws the reader's gaze to this object, underscoring the physical act of drug use as well as the scientific innovation that was altering the ways in which drugs could be consumed. In these three texts, the drug user is female, exploring a gendered connection to the physical objects associated with drugs, suggestive of a perceived acquisitive disposition, as well as of concern regarding the potential corruption of women through their transactions within the marketplace.

While 'disease was [...] used as a language of social description and was employed in discussions about the state of society or particular issues', discourse surrounding the drug was

¹⁰ Wilkie Collins, *No Name*, ed. by Virginia Blain (Oxford and New York: Oxford University Press, 1998), p. 491.

¹¹ Wilkie Collins, *Armadale*, ed. by Catherine Peters (Oxford and New York: Oxford University Press, 2008), p. 514.

also necessarily characterised by a sense of tangibility and physicality.¹² Specialised medical journals, in their reports of cases and treatments, as well as in professional discussion of the use of medicinal drugs, inevitably documented the specific amounts of substances that had been given, prescribed or consumed. As new drugs became available for medical use, and as more was learned about bodily responses to existing treatments, it became increasingly important to establish safe parameters for dosage. This resulted in intense scrutiny of a drug, its movement within trade and society more widely, and the intricacies and detail of individual usage. While within fictive texts this could function as a sensationalised or voyeuristic element, within medical periodicals this form of detail and focus can be seen as a Foucauldian observational regulation, with the preoccupation with the drug as an object representing attempts to control it. If this emphasis on the drug was part of a wider evolution of the medical sphere over the long nineteenth century (encompassing growing professionalisation, as well as changes in the societal perception of and negotiation with medical care), it was also a continuing acknowledgment of the unstable potentiality of chemical substances in both habitual and experimental usage. Porter observes that, by the middle of the nineteenth century, ‘chemical form, purity, strength and dosage could at last be regulated’, and that a ‘pharmacological transformation’ was possible because of these ‘potent medicaments’, articulating a trajectory of progression and advancement.¹³ This atmosphere of innovation was nevertheless tempered within medical journals by an awareness of the complexities inherent in practical medical care and individual drug use.

The texts discussed in the thesis explore how developments within the medical and pharmaceutical spheres over the course of the nineteenth century meant that attitudes towards drugs were intrinsically unstable and constantly shifting. The traditional reliance on opiates

¹² Waddington, p. 33.

¹³ Porter, *Greatest Benefit to Mankind*, p. 334.

within the common practice of self-medication resulted in a sense of familiarity with substances such as laudanum. However, this was subverted by events such as the Opium Wars and the growing cultural awareness of the complexity of medical trade and the marketplace. The isolation and development of more powerful drugs also added to the sense of defamiliarisation, meaning that unregulated drug use was reconfigured within both popular and specialist consideration. The dichotomy inherent in conceptions of the drug reflects the duality of the *pharmakon*, and the fundamental remedy/poison opposition effectively produces the sense of uncertainty or unpredictability that characterises depictions of its use and abuse. While the drug could be associated with a climate of scientific progress and increased knowledge, more commonly the texts discussed reveal how it constantly draws attention to the vulnerability of the body and body politic, as well as the subversive potential of corrupt consumption.

The text

Is it after all by chance or by harmonics that [...] the connection between *biblia* and *pharmaka* should already be mentioned in a malevolent or suspicious vein? As opposed to the true practice of medicine, founded on science, we find indeed, listed in a single stroke, empirical practice, treatments based on recipes learned by heart, mere bookish knowledge, and the blind usage of drugs.¹⁴

Here, Derrida articulates the fundamental sense of unreliability that can be found within books that explore the drug and drug use – during the nineteenth century, this uncertainty permeated the different forms of text that were used to explore issues of addiction. Works produced by figures such as Thomas De Quincey and Humphry Davy demonstrate an ability to combine scientific discourse with poetic or personal sensibility, creating a language and textuality that seemed to exist both within and beyond both specialised and popular spheres. This ability to imbricate multiple fields became a feature that could be manipulated, as

¹⁴ Derrida, p. 78.

authors shaped and presented works of fiction that explored drug use as medical case notes, legal documents, as well as private diaries and letters. Experimenting with the form of the novel or short story in this manner reveals how drug use was increasingly perceived as an issue of relevance to specialised professions, but also emphasises how the text itself was repeatedly presented as something other than the work of fiction it was. The dramatic rise in popularity of the periodical over the nineteenth century necessarily altered the ways in which the reader accessed and consumed fictive texts, specialised articles and other forms of printed material including advertisements. During the 1860s and 1870s in particular, serialised fiction found within periodicals was configured as a dangerous mode of consumption, particularly for female readers, owing to the typically sensational narratives that were perceived as being capable of having a physical impact on the body. Both the portrayal of drug use and the text itself were potentially threatening, and undermined the threshold between the public and the domestic, as well as exposing the vulnerability of the body.

It is the unreliability or duplicity of the text which is its most subversive quality and which reveals its innate similarity to the *pharmakon*. In *Bleak House*, this duality is evident in the link between Krook and the copy of the Jarndyce will, which is, unknowingly, in his possession. There is an opposition between the potential socio-economic authority offered through possession of the will and the sense of base corruption that characterises Krook's lifestyle, as well as his interactions with others. His illiteracy, his inability to decipher the true meaning and significance of the will, demonstrate the elusive nature of the text, as well as the possibility of a destructive relationship between the individual and text. The will emphasises the dangerous intangibility of the text as *pharmakon*, as it evades efforts of interpretation or ownership. The preoccupation of characters within the novel to gain access to and control the will reflects a growing social fixation with both materiality and authenticity, seen in the growing popularity of the habit of book collecting over the nineteenth century.

David C. Hanson explores the ‘delicate *fin de siècle* concept of possession’, noting how ‘toward the end of the century [...] book collectors grew obsessed with first editions of (largely secular) modern authors’ works in the editions’ original condition’.¹⁵ Hanson discusses how ‘this narrative about Victorian collecting’ emphasised both the prevalence of trade in fraudulent texts and a ‘tendency to treat the physical book as a correlation of the author’s biography’, rather than illustrating the ‘complexity of the *fin de siècle* collector’s sentiment in grappling with materiality’.¹⁶ The intricacies of this growing habit and fascination with the ‘material’ text reveal an enduring intensity and instability in both the cultural and individual connections with it. While suggestions of fraudulent editions reaffirm a sense of the untrustworthy or duplicitous text, the emphasis on desire to possess echoes Plato’s *Phaedrus*, in which Socrates compares the text to a ‘charm’ which he will follow ‘all over Attica, and anywhere else you fancy’.¹⁷ The desire to access the ‘true’ copy of Jarndyce’s will is comparable with this idea of almost fanatical pursuit of early and authentic editions of works or texts.

The perceived danger of the text during the nineteenth century has been explored, as previously discussed in Chapter Two, by figures such as Pamela K. Gilbert. In her 2005 study *Disease, Desire and the Body in Victorian Women’s Popular Novels*, Gilbert notes that reading could be ‘figured’ as ‘the ingestion of drugs [...] presented alternately as food and poison, medicine and illicit drugs, and finally the erotic body and the contaminated body’.¹⁸ As we have seen, Margaret Oliphant’s *Blackwood’s* article of 1862 makes explicit the concerns surrounding, in particular female, reading habits and the texts that prompted these perceived excessive responses. Culturally, then, the text was framed by pseudo-medical ideas

¹⁵ David C. Hanson, ‘Sentiment and Materiality in Late Victorian Book Collecting’, *Victorian Literature and Culture*, 43.4 (December 2015), 785–820 (p. 787).

¹⁶ *Ibid.*, pp. 785 and 786.

¹⁷ Plato, *Phaedrus*, trans. by Robin Waterfield (Oxford and New York: Oxford University Press, 2009), p. 7.

¹⁸ Pamela K. Gilbert, *Disease, Desire and the Body in Victorian Women’s Popular Novels* (Cambridge and New York: Cambridge University Press, 2005), pp. 18–19.

associated with consumption; however, there is a lack of a corresponding sense of this within specialised or professional publications themselves. An article published in the *British Medical Journal* in 1864 discusses sensation novels, and in particular the influence of Charles Dickens as author and editor of *All the Year Round*, a periodical strongly associated with the serialised publication of the genre. The article describes Dickens as ‘one of our great moral instructors’ who

has long had the credit of improving the intellect of the million; of elevating their sentiments, of teaching us all to tell the truth, to be honest in our dealings, to love our neighbours, and above all to keep our tongues and pens from evil speaking, telling stories, and slandering. In a word, Mr. Dickens is universally regarded by civilised spinsters of all classes, by nursery-maids, and sentimental young ladies, as a sort of literary Spurgeon.¹⁹

The author and the text are attributed with a powerful form of moral custodianship, and the article’s focus on female figures emphasises similarly gendered assumptions about readership and reading habits to the ones that existed within the wider cultural sphere. The article continues to state that it is ‘not well that Mr. Dickens should indulge the people in mesmeric novels; in true and authentic ghost stories; that he should puff up spontaneous combustion and other such remnants of deplorable ignorance’. While the tone of the article suggests that the sensation genre is associated with indulgence and excess, it does not portray it, or reading habits, as a medical issue or concern, nor does it connect the text with physiological disturbance. While there was a propensity to frame the text and the reader in a medical discourse within cultural and literary spheres, this does not appear to correspond with a similar discussion within specialised medical publications.

Over the course of the nineteenth century, technological developments altered the ways in which the public accessed and consumed texts, necessarily changing, but not diminishing, the significance they held as both tangible objects and abstract signifiers. The

¹⁹ ‘Sensation Novelists’, *British Medical Journal*, 9 January 1864, pp. 45–46 (p. 46).

imbrication of language and discourse between medical and cultural spheres influenced the ways in which the text was conceived within the public imaginary, and allowed concerns surrounding the text to be articulated in ways that resonated with contemporary society and its perceived notions of economic and personal consumption. Consideration of the text's significance as an object reveals its complex and contradictory nature: it is easily duplicated, easily accessible and easily circulated, while simultaneously possessing a sense of elusiveness that prompts instincts of jealous proprietorship. While this duality and the association between text and *pharmakon* are, therefore, articulated through cultural and literary explorations of the text, the medical periodical discourse does not reflect a similar framework. The text does not seem to be encapsulated within professional medical ideas of problematic or unhealthy consumption, perhaps echoing Derrida's distinction between the *biblia* and the *pharmaka*, between 'bookish knowledge' and 'the true practice of medicine'.²⁰

Beyond the *fin de siècle*

The first half of the twentieth century witnessed unprecedented international conflict, significant advances in scientific and pharmacological research and continuing shifts in the social and cultural perceptions of body and body politic. Concepts of addiction were necessarily shaped and reshaped as a result of these changes, as well as by the legislative and professional measures which were introduced to alter and monitor how opiates were circulated. Virginia Berridge articulates the difficulties inherent in establishing how widespread the use of opiates continued to be within society in the new century as habits of consumption altered, noting that while 'there is some evidence that [...] opium use was less a part of everyday culture' it is also significant that 'standard pharmaceutical reference books

²⁰ Derrida, p. 78.

incorporated opium preparations until well into the second half of the nineteenth century.’²¹ While this inclusion within professional texts suggests an enduring perception of opiates’ medicinal utility, as Berridge notes, it does not necessarily reflect the reality of public use. This uncertainty surrounding drug habits was typified by forms of consumption that problematically fused the illicit and scientific, as ‘one of the distinguishing characteristics of the turn of the century experimentation was the blurred boundary between literary recreational and medical research experimentation.’²² This echoes the early nineteenth-century milieu, where figures such as Humphry Davy and Thomas De Quincey created a similarly indefinite discourse of consumption, and suggests that, moving into the twentieth century, patterns of drug use continued to be perceived as inherently inconsistent. While indicators of change may have been perceptible in public habits of medication or consumption, addiction and the addict were still framed by a complex imbrication of the medical and literary or intellectual that privileged a regressive archetype even as it encompassed newer forms of chemical stimulants.

This dichotomy was also present in specialist discussion and discourse during the first decades of the twentieth century. In their examination of evolving theories of addiction Terry M. Parssinen and Karen Kerner suggest that ‘by 1910, a fully mature disease model of drug addiction had been developed’ which ‘had an enormous influence on both the popular understanding and national policies toward drug addiction in the period between 1910 and 1930.’²³ While a sense of confluence is implicit in this model, there remained fundamental instability in the discourse used to articulate its nature and characteristics, combining as it did psychological, physiological and moral language. Parssinen and Kerner note that these

²¹ Virginia Berridge, *Opium and the People: Opiate Use and Drug Control Policy in Nineteenth and Early Twentieth-Century England* (London and New York: Free Association Books, 1999), pp. 236 and 237.

²² *Ibid.*, p. 238.

²³ Terry M. Parssinen and Karen Kerner, ‘Development of the disease model of drug addiction in Britain, 1870–1926’, *Medical History*, 24.3 (July 1980), 275–96 (p. 275). See also Terry M. Parssinen, *Secret Passions, Secret Remedies: Narcotic Drugs in British Society, 1820–1930* (Manchester: Manchester University Press, 1983).

variances ‘did not reflect fundamental disagreements [...] but rather differing emphases on parts of the same problem [...] how to describe a disease in which some persons, at least, wilfully adopted a course of self-destruction, with full knowledge of its probable consequences.’²⁴ The central lack or absence that characterised the discourse of addiction during the nineteenth century, and necessitated a reliance on an amalgamation of the literary and medical, is here identified but not resolved. The fundamental complexity of addiction continued to demand multiplicity of discourse into the twentieth century, even as a greater sense of medical concordance surrounded the condition and its proposed methods of treatment. Thus, while the figure of the addict was increasingly beginning to be perceived as a patient within a medical system of understanding, the significance of literary and moral language remained, and continued to identify the drug user as a site of potential alterity. Despite the establishment of a disease model, addiction still problematically emphasised existing patterns of disordered consumption that threatened body and body politic.

As the twentieth century progressed, addiction was, however, reframed by increasingly strict legislation that insisted on greater professional control over the drug. In 1924 ‘in the wake of sensational journalistic allegations of widespread drug-taking in London and other large cities, the Minister of Health [...] appointed a committee to investigate the extent of narcotic drug addiction in the kingdom.’ This committee was ‘composed entirely of medical men’ and emphasised that ‘British politicians and bureaucrats accepted that policy recommendations on drug addiction should be made solely by recognized *medical* experts.’²⁵ Although advances towards the formal medicalisation of the circulation and use of drugs had occurred during the nineteenth century, the formation of this committee represented a fundamental and official assertion of medical and professional power over the drug and,

²⁴ Parssinen and Kerner, pp. 283–84.

²⁵ *Ibid.*, p. 289.

consequently, the drug user. The sense of acquired authority surrounding drug habits that had been both popularly and professionally attributed to the (male) addict culturally during the nineteenth century was undermined by this explicit privileging of official medical knowledge, altering both the dynamic between doctor and addict and the wider public perception of the addict in society. The ‘sensational’ accounts of urban drug use suggest a parallel cultural movement within popular texts that emphasised both the perceived danger of these habits and the vulnerability of wider society, the body/politic revealed as unstable and susceptible to subversive patterns of behaviour. While sensationalised depictions of addiction were an established literary and journalistic convention, the governmental response to them in 1924 suggests an increased anxiety over their implications for public welfare. These shifts of influence and power reveal the complexity of social nuances in the early twentieth century, as a sense of introspection emerged post-war that brought the body/body politic into a new phase of scrutiny.

The First World War (1914–18) had numerous overt and implicit implications for public perceptions of addiction. The conflict brought into focus the deficiencies of the international drug trade and the widespread illicit movement of drugs, as well as the fear that ‘army efficiency was at risk’ due to the habits of soldiers and those they associated with.²⁶ British legislation introduced to mitigate these anxieties included ‘a system of import/export certification designed to ensure that all shipments out of the country had a legitimate destination’ and, in 1916, ‘emergency restrictions [...] made non-medical possession an offence and required a doctor’s prescription for cocaine. Germany, Canada, and other countries brought in similar controls during the war.’²⁷ These demonstrations of desire for control over the circulation and possession of drugs reveal a common international

²⁶ Virginia Berridge, ‘Drugs, alcohol, and the First World War’, *The Lancet*, 22 November 2014, pp. 1840–41 (p. 1840).

²⁷ *Ibid.*

advancement of medical authority and suggest a shared reconsideration of how the addict, and addiction, was conceptualised. Designating ‘non-medical possession’ as an ‘offence’ definitively criminalises the addict, re-enforcing the established sense of social discordance associated with the disease and forming firm boundaries around individuals and their behaviour. The construction and shifting of margins permeated post-war culture, simultaneously establishing and destabilising ideas of the self and society. Due to ‘the widespread experience of fear among frontline soldiers during the war and the post-war filtering into popular consciousness of psychology and other sciences of the self’, an examination of existing ideas of masculinity and identity occurred during the first half of the twentieth century, influencing how the relationship between the body and the drug was viewed.²⁸ While the increasing awareness of the significance of psychological experience arguably enabled the process of developing a meaningful discourse with which to explore conditions such as addiction, it also emphasised to new extents the vulnerability of the mind and body to external threat. The addict remained dichotomously a site of threatening alterity and a symbol of physiological and psychological vulnerability.

* * *

In their article exploring the contemporary twenty-first century treatment of opiate addiction, Walter Ling and Peggy Compton address the amalgamation of cultural dynamics that have shaped developing understandings of drug abuse: ‘Advances in opiate addiction treatment must [...] be viewed in the context of changes in societal attitudes as well as gains in medical research, and physicians, both as members of society and of the medical community, must utilize these advances in a manner that reflects both roles responsibly.’²⁹ The figure of the contemporary physician is urged, therefore, to occupy these dual spheres, in a way that

²⁸ Michael Roper, ‘Between manliness and masculinity: The “War Generation” and the psychology of fear in Britain, 1914–1950’, *Journal of British Studies*, 44.2 (April 2005), 342–62 (p. 345).

²⁹ Walter Ling and Peggy Compton, ‘Recent advances in the treatment of opiate addiction’, *Clinical Neuroscience Research*, 5.2–4 (November 2005), 161–67 (p. 161).

recalls the fundamental dichotomy of the addict and the drug itself. Emphasising the significance of the social understandings of and attitudes towards addiction and the addict is an acknowledgement of how the disease continues to be constructed through these seemingly disparate fields of influence, with this complex imbrication reaffirming nineteenth-century explorations of drug use and abuse. The inherent dichotomy of the *pharmakon*, the addict and addiction itself, simultaneously emphasises and deconstructs socio-cultural boundaries, revealing the fundamental vulnerability of both body and body politic.

Bibliography

Primary Texts

Fiction and Sketches

Collins, Wilkie, *No Name*, ed. by Virginia Blain (Oxford and New York: Oxford University Press, 1998)

—————, *The Moonstone*, ed. by Sandra Kemp (London and New York: Penguin, 1998)

—————, *Armadale*, ed. by Catherine Peters (Oxford and New York: Oxford University Press, 2008)

Dickens, Charles, ‘Gin-Shops’, in *Sketches by Boz*, ed. by Dennis Walder (London and New York: Penguin, 1995), pp. 214–20

—————, *Bleak House*, ed. by Nicola Bradbury (London and New York: Penguin, 2003)

—————, *Hard Times* (London and New York: Penguin, 2012)

—————, ‘Bill-Sticking’, *Household Words*, 22 March 1851, pp. 601–06

—————, *The Mystery of Edwin Drood*, ed. by Margaret Cardwell (Oxford and New York: Oxford University Press, 2009)

Doyle, Arthur Conan, *The Sign of Four*, ed. by Shafquat Towheed (Peterborough, ON and London: Broadview, 2010)

—————, ‘Adventures of Sherlock Holmes: Adventure VI. The Man with the Twisted Lip’, *Strand Magazine*, 2.7 (July 1891), 623–37

Henty, George Alfred, ‘A Pipe of Opium’, *Dark Blue*, 3.13 (March 1872), 27–42

Machen, Arthur, ‘Novel of the White Powder’, in *The White People and Other Weird Stories*, ed. by S. T. Joshi (London and New York: Penguin, 2011), pp. 67–82

Meade, Louisa Thomasina and ‘Clifford Halifax’ [i.e. Edgar Beaumont], ‘Trapped’, in *Stories from the Diary of a Doctor*, *Strand Magazine*, 7.41 (May 1894), 465–80

—————, ‘The Wrong Prescription’, in *Stories from the Diary of a Doctor*, *Strand Magazine*, 6.36 (December 1893), 600–13

‘Mr Volt, The Alchemist’, *All the Year Round*, 9 January 1869, pp. 127–32

Sandford, Daniel Keyte, ‘A Night in the Catacombs’, *Blackwood’s Edinburgh Magazine*, 4.19 (October 1818), 19–23

Stevenson, Robert Louis, *Strange Case of Dr Jekyll and Mr Hyde*, ed. by Robert Mighall (London and New York: Penguin, 2003)

‘The Strange Experience of Mr Luke Venables’, *All the Year Round*, 12 September 1891, pp. 254–60

Non-Fiction – Biographies and Correspondence

De Quincey, Thomas, *Confessions of an English Opium-Eater*, ed. by Grevel Lindop (Oxford and New York: Oxford University Press, 2008)

Dexter, Walter, ed., *The Letters of Charles Dickens*, vol. 2 (London: Nonesuch Press, 1938)

Non-Fiction – Periodicals and Newspapers

‘Acton Bell’s Tenant of Wildfell Hall’, *The Spectator*, 8 July 1848, pp. 18–19

‘The Adulteration of Food and Drugs’, *Fraser’s Magazine*, 1.6 (June 1870), 718–30

‘Anodynes in the Workhouse’, *Punch*, 13 July 1867, p. 17

‘Consumption of Food &c, in London’, *Bell’s Life in London and Sporting Chronicle*, 12 October 1834, p. 1

‘Crime and its Causes’, *Illustrated London News*, 11 May 1844, p. 297

‘Dr. J. Collis Browne’s Chlorodyne’, *All the Year Round*, 29 December 1866, p. 4

‘Dr. Locock’s Pulmonic Wafers’, *Illustrated London News*, 29 October 1870, p. 23

‘Ethereal Experiences’, *Punch*, 26 June 1847, p. 259

- ‘Inhalation of Ether’, *Illustrated London News*, 6 February 1847, p. 91
- ‘The Keeley Treatment’, *Strand Magazine*, 30.180, December 1905, p. 136
- Kingsley, Charles, ‘Recent Novels’, *Fraser’s Magazine*, 39.232 (April 1849), 417–32
- ‘The Ladies Column’, *Illustrated London News*, 22 August 1891, p. 260
- ‘Literary Review: *Pictures of the Chinese, Drawn by Themselves* (Rev. R. H. Cobbold)’,
John Bull, 7 January 1860, p. 11
- Mansel, Henry, ‘Sensation Novels’, *Quarterly Review*, 113.226 (April 1863), 482–514
- ‘Medicine and Morality’, *Punch*, 6 August 1859, p. 61
- Miller, Thomas, ‘Characters about Town: The Dram-Drinker’, *Illustrated London News*,
6 May 1848, p. 298
- ‘Not a New “Sensation”’, *All the Year Round*, 25 July 1863, pp. 517–20
- ‘A Night in an Opium Den’, *Strand Magazine*, 1.6 (June 1891), 624–27
- Oliphant, Margaret, ‘Sensation Novels’, *Blackwood’s Edinburgh Magazine*, 91.559 (May
1862), 564–84
- ‘An Opium Den in East London’, *Illustrated London News*, 6 December 1890, p. 711
- ‘Pantomimes and Christmas Pieces’, *Illustrated London News*, 28 December 1844, p. 40
- ‘The Scandalous State of our Medical System Has Been Strongly Exemplified this Week’,
Illustrated London News, 15 November 1845, p. 311
- ‘Sleep’, *Cornhill Magazine*, 14.80 (August 1866), 226–37
- ‘Tobacco: Its Use and Abuse’, *Cornhill Magazine*, 6.35 (November 1862), 605–15
- ‘Turvey Treatment’, *Strand*, 32.192 (December 1906), 105
- ‘The Vice of Reading’, *Temple Bar*, 42 (September 1874), 251–57
- ‘Who is the Murderer and How May He be Caught?’, *Pall Mall Gazette*, 2 October 1888, p. 7
- ‘The Works of Thomas De Quincey’, *British Quarterly Review*, 38.75 (July 1863), 1–29

Medical

- ‘Abuse of Morphine’, *The Lancet*, 8 November 1890, pp. 986–87
- ‘An Act to Regulate the Qualifications of Practitioners in Medicine and Surgery’, *British Medical Journal*, 14 August 1858, pp. 684–89
- Beaumont, T., ‘Remarks Made in Opposition to the Views of Dr Clutterbuck on Abstinence from Spirituous Liquors’, *The Lancet*, 4 June 1842, pp. 340–43
- Bennett, A. Hughes, ‘Correspondence: Cocaine’, *The Lancet*, 6 December 1884, pp. 1022–23
- ‘Chemists and Druggists and the Pharmacy Acts’, *British Medical Journal*, 6 January 1894, pp. 31–32
- ‘The Cocaine Habit’, *British Medical Journal*, 23 January 1897, pp. 219–20
- ‘Cocaine-Poisoning’, *British Medical Journal*, 9 February 1889, pp. 311–13
- Davy, Humphry, *Researches, Chemical and Philosophical; Chiefly concerning Nitrous Oxide; or Dephlogisticated Nitrous Air, and its Respiration* (London: J. Johnson, 1800)
- ‘Dr Clutterbuck on Total Abstinence and Temperance’, *The Lancet*, 16 April 1842, pp. 96–97
- ‘Dr Garrod’s Lectures on the British Pharmacopoeia’, *British Medical Journal*, 27 February 1864, pp. 237–40
- ‘The Effects of Small Doses of Opium’, *The Lancet*, 21 March 1863, p. 341
- Fleming, Alexander, ‘Clinical Lecture on the Treatment of the Habit of Opium-Eating’, *British Medical Journal*, 15 February 1868, pp. 137–39
- Gardner, John ‘On Ether-Vapour: Its Medical and Surgical Uses’, *The Lancet*, 3 April 1847, pp. 349–54
- ‘The Growth of Sensationalism’, *The Lancet*, 27 October 1888, pp. 827–88
- Hooper, Daniel, ‘The Alcohol Question’, *The Lancet*, 25 May 1861, pp. 507–09
- Jeafferson, C. S., ‘Correspondence: Cocaine’, *The Lancet*, 6 December 1884, p. 1023

- Jennings, Oscar, *On the Cure of the Morphia Habit* (London: Bailliere, Tindall and Cox, 1890)
- , ‘On the Physiological Cure of the Morphine Habit’, *The Lancet*, 10 August 1901, pp. 360–68
- , ‘The Relief of the Morphia Craving by Sparteine and Nitro-Glycerine’, *The Lancet*, 25 June 1887, pp. 1278–80
- Mattison, J. B., ‘Cocaine Dosage and Cocaine Addiction’, *The Lancet*, 21 May 1887, pp. 1024–26
- ‘Medicinal Use of Elderberry Wine’, *The Lancet*, 29 July 1843, p. 625
- More, James, ‘Morphinomania’, *The Lancet*, 16 July 1887, pp. 136–37
- Pearson, Richard, *A Short Account of the Nature and Properties of Different Kinds of Airs, so far as Relates to their Medicinal Use; Intended as an Introduction to the Pneumatic Method of Treating Diseases, with Miscellaneous Observations on Certain Remedies Used in Consumptions* (Birmingham: Baldwin, 1794)
- Pidduck, Isaac, ‘Opium-Taking’, *The Lancet*, 5 July 1851, p. 21
- ‘The Point of *The Lancet*’, *British Medical Journal*, 29 September 1973, pp. 649–50
- ‘Poisoning by Dr Locock’s Wafers’, *The Lancet*, 27 October 1860, p. 420
- ‘Poisoning by Opium’, *The Lancet*, 5 September 1863, p. 292
- ‘The Re-Education of the Will in the Treatment of Drug Habits’, *The Lancet*, 7 August 1909, p. 407
- S. S., ‘The Effects of Small Doses of Opium’, *The Lancet*, 21 March 1863, p. 341
- Sharkey, Seymour J., ‘Morphinomania’, *Nineteenth Century*, 22.127 (September 1887), 335–42
- ‘Special Correspondence’, *British Medical Journal*, 25 February 1888, p. 438
- ‘Teetotalism and Opium-Taking’, *The Lancet*, 21 June 1851, p. 694

‘The Use of Cocaine in the Morphine Habit: A Warning’, *British Medical Journal*, 31 August 1907, pp. 555–56

Key Critical Material

Derrida, Jacques, ‘Plato’s Pharmacy’ (1981), in *Dissemination*, trans. by Barbara Johnson (London and New York: Bloomsbury Academic, 2013), pp. 71–186

Mayhew, Henry, *London Labour and the London Poor* (Oxford and New York: Oxford University Press, 2012)

Plato, *Phaedrus*, trans. by Robin Waterfield (Oxford and New York: Oxford University Press, 2009)

Secondary Material

Critical Works

Alexander, Doris, ‘Solving the Mysteries of the Mind in “Edwin Drood”’, *Dickens Quarterly*, 9.3 (September 1992), 125–31

Arata, Stephen D., ‘The Occidental Tourist: “Dracula” and the Anxiety of Reverse Colonization’, *Victorian Studies*, 33.4 (Summer 1990), 621–45

Armstrong, Isobel, *Victorian Glassworlds: Glass Culture and the Imagination 1830–1880* (Oxford and New York: Oxford University Press, 2008)

Bailin, Miriam, *The Sickroom in Victorian Fiction: The Art of Being Ill* (Cambridge and New York: Cambridge University Press, 1995)

Barickman, Richard, ‘The Comedy of Survival in Dickens’ Novels’, *NOVEL: A Forum on Fiction*, 11.2 (1978), 128–43

Berridge, Virginia, *Opium and the People: Opiate Use and Drug Control Policy in Nineteenth and Early Twentieth-Century England* (London and New York: Free Association Books, 1999)

- , *Demons: Our Changing Attitudes to Alcohol, Tobacco, and Drugs* (Oxford and New York: Oxford University Press, 2013)
- , ‘Drugs, Alcohol, and the First World War’, *The Lancet*, 22 November 2014, pp. 1840–41
- Botting, Fred, *Gothic*, 2nd edn (London and New York: Routledge, 2014)
- Brewer, John and Roy Porter, eds, ‘Introduction’, in *Consumption and the World of Goods* (London and New York: Routledge, 1994), pp. 1–15
- Buscemi, Nicki, “‘The Disease, which had hitherto been Nameless’: M. E. Braddon’s Challenge to Medical Authority in *Birds of Prey* and *Charlotte’s Inheritance*”, *Victorian Literature and Culture*, 38.1 (March 2010), 151–63
- Caquet, P. E., ‘France, Germany, and the Origins of Drug Prohibition’, *International History Review*, 43.2 (2021), 207–25
- Clark, Peter, *The English Alehouse: A Social History 1200–1830* (Oxford and New York: Longman, 1983)
- Claybaugh, Amanda, ‘Dickensian Intemperance: Charity and Reform’, *NOVEL: A Forum on Fiction*, 37.1–2 (Fall/Spring 2004), 45–63
- Coyer, Megan, *Literature and Medicine in the Nineteenth-Century Periodical Press: Blackwood’s Edinburgh Magazine, 1817–1858* (Edinburgh: Edinburgh University Press, 2017)
- Dollar, Gerard, ‘Addiction and the “Other Self”’, in *Beyond the Pleasure Dome: Writing and Addiction from the Romantics*, ed. by Sue Vice, Matthew Campbell and Tim Armstrong (Sheffield: Sheffield Academy, 1994), pp. 268–74
- Douglas-Fairhurst, Robert ‘Introduction’ in Henry Mayhew, *London Labour and the London Poor* (Oxford and New York: Oxford University Press, 2012), pp. xiii–xliii

- Dunn, Richard J., 'Dickens and Mayhew Once More', *Nineteenth-Century Fiction*, 25.3 (December 1970), 348–53
- Eliot, Simon 'The business of Victorian publishing', *The Cambridge Companion to the Victorian Novel* ed. Deirdre David (Cambridge and New York: Cambridge University Press, 2001), pp. 37–60
- Ferguson, Christine, *Language, Science and Popular Fiction in the Victorian Fin de Siècle: The Brutal Tongue* (Abingdon and New York: Routledge, 2016)
- Finn, Margot, 'Women, Consumption, and Coverture in England, c. 1760–1860', *Historical Journal*, 39.3 (September 1996), 703–22
- Foucault, Michel, *The Birth of the Clinic: An Archaeology of Medical Perception*, trans. by Alan Sheridan (London and New York: Routledge, 2010)
- , 'Des espaces autres' (Of other spaces), trans. by Jay Miskowiec, in *Diacritics*, 16.1 (Spring 1986), 22–27
- Foxcroft, Louise, *The Making of Addiction: The 'Use and Abuse' of Opium in Nineteenth-Century Britain* (Aldershot and Burlington: Ashgate, 2007)
- Free, Melissa, "'Dirty Linen': Legacies of Empire in Wilkie Collins's *The Moonstone*", *Texas Studies in Literature and Language*, 48.4 (Winter 2006), 340–71
- Fullmer, J. Z., 'The Poetry of Sir Humphry Davy', *Chymia*, 6 (1960), 102–26
- Gabriele, Alberto, *Reading Popular Culture in Victorian Print: Belgravia and Sensationalism* (New York: Palgrave Macmillan, 2009)
- Gilbert, Pamela K., *Disease, Desire and the Body in Victorian Women's Popular Novels* (Cambridge and New York: Cambridge University Press, 2005)
- Golinski, Jan, 'Humphry Davy: The Experimental Self', *Eighteenth-Century Studies*, 45.1 (Fall 2011), 15–28

- Hanks, W. F, 'Text and Textuality', *Annual Review of Anthropology*, 18 (October 1989), 95–127
- Hanson, David C., 'Sentiment and Materiality in Late Victorian Book Collecting', *Victorian Literature and Culture*, 43.4 (December 2015), 785– 820
- Harrison, Debbie, 'Doctors, Drugs, and Addiction: Professional Integrity in Peril at the Fin de Siècle', *Gothic Studies*, 11.2 (November 2009), 52–62
- Hartnell, Jack, *Medieval Bodies: Life, Death and Art in the Middle Ages* (London: Wellcome Collection, 2019)
- Herbert, Christopher, 'Filthy Lucre: Victorian Ideas of Money', *Victorian Studies*, 44.2 (Winter 2002), 185–213
- Hewitt, Martin, ed., 'Introduction', in *The Victorian World* (London and New York: Routledge, 2012), pp. 1–53
- Hornback, Bert, 'The Book of Jasper', *Dickens Quarterly*, 24.2 (June 2007), 78–85
- Kahl, William, 'Five Centuries of Printing in London', *Business History Review*, 35.3 (Autumn 1961), 445–56
- Keep, Christopher and Don Randall, 'Addiction, Empire, and Narrative in Arthur Conan Doyle's "The Sign of Four"', *NOVEL: A Forum on Fiction*, 32.2 (Spring 1999), 207–21
- Kristeva, Julia, *Powers of Horror: An Essay on Abjection* (New York: Columbia University Press, 1982)
- Ledger, Sally, *The New Woman: Fiction and Feminism at the Fin de Siècle* (Manchester: Manchester University Press, 1997)
- Lobban, Michael, 'Preparing for Fusion: Reforming the Nineteenth-Century Court of Chancery, Part One', *Law and History Review*, 22.2 (Summer 2004), 389–427
- Logan, John Frederick, 'The Age of Intoxication', *Yale French Studies*, 50 (1974), 81–94

- Marshall, Gail, ed., *The Cambridge Companion to the Fin de Siècle* (Cambridge and New York: Cambridge University Press, 2007)
- Matus, Jill L., 'Psychological Trauma Victorian Style: From Perpetrators to Victims', *The Lancet*, 7 August 2010, pp. 410–11
- , *Shock, Memory and the Unconscious in Victorian Fiction* (Cambridge and New York: Cambridge University Press, 2009)
- , 'Victorian Framings of the Mind: Recent Work on Mid-Nineteenth Century Theories of the Unconscious, Memory, and Emotion', *Literature Compass*, 4.4 (July 2007), 1257–76
- Maxwell, Richard C., 'G. W. M. Reynolds, Dickens, and the Mysteries of London', *Nineteenth-Century Fiction*, 322 (September 1977), 188–213
- Mighall, Robert, *A Geography of Victorian Gothic Fiction: Mapping History's Nightmares* (Oxford: Oxford University Press, 1999)
- Miller, Elizabeth Carolyn, "'Shrewd Women of Business": Madam Rachel, Victorian Consumerism, and L.T. Meade's "The Sorceress of the Strand"', *Victorian Literature and Culture*, 34.1 (March 2006), 311–32
- Milligan, Barry, *Opium and the Orient in Nineteenth-Century British Culture* (Charlottesville and London: University Press of Virginia, 1995)
- Mossman, Mark, 'Representations of the Abnormal Body in *The Moonstone*', *Victorian Literature and Culture*, 37.2 (September 2009), 483–500
- Niles, Lisa, 'Owning "the dreadful truth"; or, Is Thirty-Five Too Old? Age and the Marriageable Body in Wilkie Collins's *Armada*', *Nineteenth-Century Literature*, 65.1 (June 2010), 65–92
- Parssinen, Terry M., and Karen Kerner, 'Development of the Disease Model of Drug Addiction in Britain, 1870–1926', *Medical History*, 24.3 (July 1980), 275–96

- Pladek, Brittany, “‘A Variety of Tastes’: *The Lancet* in the Early-Nineteenth-Century Periodical Press’, *Bulletin of the History of Medicine*, 85.4 (Winter 2011), 560–86
- Poovey, Mary, “‘Scenes of an Indelicate Character’: The Medical ‘Treatment’ of Victorian Women’ *Representations*, 14 (Spring, 1986), 137–68
- Porter, Roy, *The Greatest Benefit to Mankind: A Medical History of Humanity from Antiquity to the Present* (London: HarperCollins, 1997)
- , ‘The Drinking Man’s Disease: The “Pre-History” of Alcoholism in Georgian Britain’, *British Journal of Addiction*, 80.4 (December 1985), 385–96
- , ‘Consumption: Disease of the Consumer Society?’, in *Consumption and the World of Goods*, ed. by Brewer and Porter, pp. 58–81
- , *Health For Sale: Quackery in England 1660–1850* (Manchester and New York: Manchester University Press, 1989)
- , *A Social History of Madness: Stories of the Insane* (Phoenix: London, 1996)
- , *Bodies Politic: Disease, Death and Doctors in Britain 1650–1900* (Reaktion Books: London, 2001)
- Pykett, Lyn, ‘Sensation and the Fantastic in the Victorian Novel’, in *The Cambridge Companion to the Victorian Novel*, ed. by Deirdre David (Cambridge and New York: Cambridge University Press, 2001), pp. 192–211
- Rabin, Dana, ‘Drunkenness and Responsibility for Crime in the Eighteenth-Century’, *Journal of British Studies*, 44.3 (July 2005), 457–77
- Richards, Thomas, *The Commodity Culture of Victorian England: Advertising and Spectacle 1851–1914* (London and New York: Verso, 1990)
- Roth, Marty, ‘Victorian Highs: Detection, Drugs, and Empire’, in *High Anxieties: Cultural Studies in Addiction*, ed. by Janet Farrell Brodie and Marc Redfield (Berkeley, Los Angeles and London: University of California Press, 2002), pp. 85–93

- Roper, Michael, 'Between Manliness and Masculinity: The "War Generation" and the Psychology of Fear in Britain, 1914–1950', *Journal of British Studies*, 44.2 (April 2005), 342–62
- Ruston, Sharon, 'The Art of Medicine: When Respiring Gas Inspired Poetry', *The Lancet*, 2 February 2013, pp. 366–67
- Said, Edward W., *Orientalism* (London and New York: Penguin, 2003)
- Scull, Andrew, ed., *Madhouses, Mad-Doctors, and Madmen: The Social History of Psychiatry in the Victorian Era* (Philadelphia: University of Pennsylvania Press, 2015)
- Searle, G. R., *Morality and the Market in Victorian Britain* (Oxford: Clarendon Press, 1998)
- Snow, Stephanie J., *Blessed Days of Anaesthesia: How Anaesthetics Changed the World* (Oxford and New York: Oxford University Press, 2008)
- Stanley, Joachim, 'Opium and Edwin Drood: Fantasy, Reality, and What the Doctors Ordered', *Dickens Quarterly*, 21.1 (March 2004), 12–27
- Stern, Rebecca F., "'Adulterations Detected': Food and Fraud in Christina Rossetti's "Goblin Market"", *Nineteenth-Century Literature*, 57.4 (March 2003), 477–511
- Talairach-Vielmas, Laurence, *Moulding the Female Body in Victorian Fairy Tales and Sensation Novels* (London and New York: Routledge, 2016)
- Taylor, Brooke D., 'Spontaneous Combustion: When "Fact" Confirms Feeling in *Bleak House*', *Dickens Quarterly*, 27.3 (September 2010), 171–84
- Thornton, Sara, *Advertising, Subjectivity and the Nineteenth-Century Novel: Dickens, Balzac and the Language of the Walls* (Basingstoke: Palgrave Macmillan, 2010)
- Tracey, Robert, "'Opium is the True Hero of the Tale": De Quincey, Dickens, and "The Mystery of Edwin Drood"', *Dickens Studies Annual*, 40 (2009), 199–214
- Vasari, Giorgio, *The Lives of the Artists* (Oxford: Oxford University Press, 2008)

- Waddington, Keir, *An Introduction to the Social History of Medicine: Europe since 1500* (Basingstoke: Palgrave Macmillan, 2011)
- Wagner, Tamara S., 'Clinical Gothic: Sensationalising Substance Abuse in the Victorian Home', *Gothic Studies*, 11.2 (November 2009), 30–40
- Warhol, Robyn R., 'The Rhetoric of Addiction: From Victorian Novels to AA', in *High Anxieties: Cultural Studies in Addiction*, ed. by Janet Farrell Brodie and Marc Redfield (Los Angeles and London: University of California Press, 2002), pp. 97–108
- Warner, Jessica and Frank Ivis, 'Gin and Gender in Early Eighteenth-Century London', *Eighteenth-Century Life*, 24.2 (Spring 2000), 85–105
- Whitlock, Tammy, 'Gender, Medicine, and Consumer Culture in Victorian England: Creating the Kleptomaniac', *Albion*, 31.3 (Autumn 1999), 413–37
- , 'A "Taint Upon Them": The Madame Rachel Case, Fraud, and Retail Trade in Nineteenth-Century Trade', *Victorian Review*, 24.1 (Summer 1998), 29–52
- Wohl, Anthony S., *Endangered Lives: Public Health in Victorian Britain* (Cambridge, MA: Harvard University Press, 1983)
- Zieger, Susan, *Inventing the Addict: Drugs, Race, and Sexuality in Nineteenth-Century British and American Literature* (Amherst: University of Massachusetts Press, 2008)
- , "'How far am I responsible?": Women and Morphinomania in Late Nineteenth-Century Britain', *Victorian Studies*, 48.1 (Autumn 2005), 59–81

Secondary Medical

- Camm, A. John and Irene Savelieva, 'The Long and Short of Antiarrhythmic Drug Treatment', *The Lancet*, 21 July 2012, pp. 198–200
- Diagnostic and Statistical Manual of Medical Disorders*, 5th edn (Washington and London: American Psychiatric Publishing, 2013)

- Doweiko, Harold E., *Concepts of Chemical Dependency*, 7th edn (Belmont, CA: Brooks/Cengage Learning, 2009)
- Halpin, Michael, 'The DSM and Professional Practice: Research, Clinical, and Institutional Perspectives', *Journal of Health and Social Behaviour*, 57.2 (June 2016), 153–67
- Houston, Rab A., 'Asylums: The Historical Perspective before, during, and after', *The Lancet: Psychiatry*, 7.4 (April 2020), 354–62
- James, William, 'Principles of Psychology' (1890), in *Literature and Science in the Nineteenth Century*, ed. by Laura Otis (Oxford University Press: Oxford and New York, 2009), pp. 373–77
- Levere, Trevor H., 'Dr Thomas Beddoes and the Establishment of his Pneumatic Institution: A Tale of Three Presidents', *Notes and Records of the Royal Society of London*, 32.1 (July 1977), 41–49
- Ling, Walter and Peggy Compton, 'Recent Advances in the Treatment of Opiate Addiction', *Clinical Neuroscience Research*, 5.2–4 (November 2005), 161–67
- Lombroso, Cesare, *Criminal Man* (Durham, NC and London: Duke University Press, 2006)
- Makari, George, *Revolution in Mind: The Creation of Psychoanalysis* (London: Duckworth Overlook, 2008)
- Martin, Michael and Heiner Fangerau, 'Listening to the Heart's Power: Designing Blood Pressure Measurement', *Icon*, 13 (2007), 86–104
- Meima, Abraham, Lorentz M. Irgens, Gerrit J. van Oortmarssen, Jan H. Richardusa and J. Dik F. Habbem, 'Disappearance of Leprosy from Norway: An Exploration of Critical Factors using an Epidemiological Modelling Approach', *International Journal of Epidemiology*, 31.5 (October 2002), 991–1000
- Meyers, Todd, 'Promise and Deceit: *Pharmakos*, Drug Replacement Therapy, and the Perils of Experience', *Culture, Medicine and Psychiatry*, 38.2 (June 2014), 182–96

- Miller, Norman S., and John N. Chappel, 'History of the Disease Concept', *Psychiatric Annals*, 21.4 (April 1991), 196–205
- Miskel, James F., 'Religion and Medicine: The Chinese Opium Problem', *Journal of the History of Medicine and Allied Sciences*, 28.1 (January 1973), 3–14
- 'Nitroglycerin – the First Hundred Years', *The Lancet*, 29 December 1979, pp. 1340–41
- Nordau, Max, *Degeneration* (Lincoln and London: University of Nebraska Press, 1993)
- 'Obituary', *The Lancet*, 12 December 1914, pp. 1383–84
- 'Records of the Results of Microscopical and Chemical Analyses of the Solids and Fluids Consumed by all Classes of the Public: Drugs and Pharmaceutical Preparations. Opium. Laudanum – Poison', *The Lancet*, 29 January 1853, pp. 116–17
- Reith, Gerda, 'Consumption and its Discontents: Addiction, Identity and the Problems of Freedom', *British Journal of Sociology*, 55.2 (June 2004), 283–300
- Shaw, Robert and Lily Shaw, 'The Pre-*Anschluss* Vienna School of Medicine – the Physicians: Sigmund Freud (1856–1939), Julius Wagner-Jauregg (1857–1940) and Karel Wenckebach (1864–1940)', *Journal of Medical Biography*, 24.2 (22 July 2014), 158–68

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