What was the cause of Gertrude Lodge’s hand paralysis?

Thomas Hardy and other 19th century authors: literature, medicine and disabilities

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Abstract

The Withered Arm is a story by Thomas Hardy (1840-1928), who was a famous and important British architect-poet-novelist and a social reformer. The Withered Arm is “a Gothic ghost story”, and Hardy claimed that it was based on a real story. The story illustrates the two trends during Victorian England: the old superstitious beliefs, dreams and visions, versus the modern scientific-based science and medicine, and the remarkable victory of the psyche over the soma. Discussion on the differential diagnosis of that hand paralysis, is given along with disabilities which appear in books of other Victorians and 19th century authors.

Keywords: history of medicine, hand paralyses, disability, Victorian literature

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Introduction

The Withered Arm is a story by Thomas Hardy (1840-1928), who was a famous and important British architect-poet-novelist and a social reformer [1-2]. The story was included in his Wessex Tales, first appeared in 1888 and in a revised edition in 1912. The Withered Arm is a „Gothic ghost story”, and Hardy claimed that it was based on real people. Historical and literary analysis of this story shows the two contradictory elements in Victorian England, the trend of people living in the rural areas to believe in miracles, witchcraft and superstitions, and in contrast the modern society which relies on science and research [3].

Case Report as described by Thomas Hardy [1]:

Gertrude developed a mysterious mark on her arm.

‘I cannot tell,’ replied Mrs Lodge, shaking her head. ‘One night when I was sound asleep, dreaming, I was away in some strange place, a pain suddenly shot into my arm there, and was so keen as to awaken me. I must have struck it in the daytime, I suppose, though I don’t remember doing so.’ She added, laughing, ‘I tell my dear husband that it looks just as if he had flown into a rage and struck me there. O, I daresay it will soon disappear.’…” The summer drew on, and Rhoda Brook almost dreaded to meet Mrs Lodge again, notwithstanding that her feeling for the young wife amounted well-nigh to affection. Something in her own individuality seemed to convict Rhoda of crime. Yet a fatality sometimes would direct the steps of the latter to the outskirts of Holmstoke whenever she left her house for any other purpose than her daily work; and hence it happened that their next encounter was out of doors. Rhoda could not avoid the subject which had so mystified her, and after the first few words she stammered, ‘I hope your – arm is well again, ma’am?’ She had perceived with consternation that Gertrude Lodge carried her left arm stiffly.” The younger one replied that there was not much doubt of her general health being usually good. ‘Though, now you remind me, she added, ‘I have one little ailment which puzzled me. It is nothing serious, but I cannot make it out.”

The situation of the hand got worse and Gertrude’s arm begins to wither.

She tried everything, to no avail.

“And so the milk-woman’s mind was chained anew to the subject by a horrid sort of spell as she returned home. The sense of having been guilty of an act of malignity increased, affect as she might to ridicule her superstition. In her secret heart Rhoda did not altogether object to a
slight diminution of her successor’s beauty, by whatever means it had come about; but she did not wish to inflict upon her physical pain. For though this pretty young woman had rendered impossible any reparation which Lodge might have made Rhoda for his past conduct, everything like resentment at the unconscious usurpation had quite passed away from the elder’s mind. Desperate, she consulted with the Conjuror Trendle, the local wise man. “Ah — he knows the disfigurement is there!” She tried to hide the tears that filled her eyes.

“Half a dozen years passed away and Mr and Mrs Lodge’s married experience sank into prosiness, and worse. The farmer was usually gloomy and silent: the woman whom he had wooed for her grace and beauty was contorted and disfigured in the left limb; moreover, she had brought him no child, which rendered it likely that he would be the last of a family who had occupied that valley for some two hundred years. He thought of Rhoda Brook and her son; and feared this might be a judgement from heaven upon him.” Trendle’s advise was that the only way of curing the progressive upper limb paralysis to touch the neck of a newly hanged man. This “maneuver” will ‘turn’ the blood and cure the withered arm.

‘The place on my arm seems worse, and troubles me!’ the young farmer’s wife went on. ‘It is so mysterious! I do hope it will not be an incurable wound. I have again been thinking of what they said about Conjuror Trendle. I don’t really believe in such men, but I should not mind just visiting him, from curiosity – though on no account must my husband know. Is it far to where he lives?’ She started just before the time of day mentioned between them, and half an hour’s brisk walking brought her to the south-eastern extension of the Egdon tract of country, where the fir plantation was. A slight figure, cloaked and veiled; was already there. Rhoda recognized, almost with a shudder, that Mrs Lodge bore her left arm in a sling. The once blithe-hearted and enlightened Gertrude was changing into an irritable, superstitious woman, whose whole time was given to experimenting upon her ailment with every quack remedy she came across. She was honestly attached to her husband, and was ever secretly hoping against hope to win back his heart again by regaining some at least of her personal beauty. Hence it arose that her closet was lined with bottles, packets, and ointment-pots of every description – nay, bunches of mystic herbs, charms, and books of necromancy, which in her schoolgirl time she would have ridiculed as folly. Her determination received a fillip from learning that two epileptic children had attended from this very village of Holmstoke many years before with beneficial results, though the experiment had been strongly condemned by the neighbouring clergy. April, May, June, passed; and it is no overstatement to say that by the end of the last-named month Gertrude well-nigh longed for the death of a fellow-creature. Instead of her formal prayers each night, her unconscious prayer was, O Lord, hang some guilty or innocent person soon!’ She could feel her antagonist’s arm within her grasp even now — the very flesh and bone of it, as it seemed. She looked on the floor whither she had whirled the spectre, but there was nothing to be seen.

Gertrude visits the local hangman who, after some hesitation, agrees to help her. The experience with the recent hanged boy caused her to collapse. The combination of physical and mental strain finally broke her. Deep in shock, Gertrude dies.

The Differential Diagnosis of the “Withered Arm”

Marinesco’s hand, or, Marinesco’s succulent hand. Georges Marinesco (1863-1938) described the cold blue oedematous hand with lividity of the skin seen in neurological lesions such as syringomyelia.

Monomelic brachial atrophy or Hirayama disease. Usually described as a ‘benign’ condition with a self-limiting course [4]. Hirayama’s disease, or juvenile muscular atrophy of distal upper extremity, is a cervical myelopathy, and is characterized by progressive muscle weakness and atrophy of the distal upper extremities, followed by slow paralysis [5].

Parsonage-Turner syndrome “...is a rare disorder typically characterized by an abrupt onset of upper extremity pain followed by progressive neurologic deficits, including weakness, atrophy, and occasionally sensory abnormalities...” Autoimmune, genetic, infectious, and mechanical processes have all been implicated. No specific treatments have been proven to reduce neurologic impairment or improve the prognosis of PTS. Most patients with PTS are treated with a multidisciplinary approach that includes both physical therapy and pharmacologic treatment,
often with multiple agents. Further research is needed.” [6].

Most unlikely, brachial amyotrophic diplegia [7] which is usually a bilateral progressive amyotrophy that is isolated to the upper limbs. In an adult it often suggests ALS.

Progressive muscular atrophy; a substantial proportion of PMA patients develop upper motor neuron signs indicative of an ALS diagnosis. The findings suggest that PMA should be considered as part of the ALS spectrum rather than as a distinct entity [8].

Conversion-somatoform reaction. There is a remote possibility that Hardy’s character contracted „hysteric” paralysis [9-10].

We will of course never be able to know the exact nature of Gertrude’s hand paralysis. In those days, even a real doctor, not only a quack [11], would miss the exact diagnosis.

Discussion

Thomas Hardy was well acquainted with psychology and neurology [12]. He had close relationship with the neurologist-poet Henry Head [13-14]. His membership at the Athenaeum and Savile Clubs, made many acquaintances, among them Sir James Crichton Browne (Sir James Crichton-Browne MD, FRS, 1840–1938, was a leading British psychiatrist and medical psychologist). Did he actually meet a woman with a ‘withered arm’? Did he consult with his medical friends? He had knowledge of the works of Henry Maudsley, Théodule-Armand Ribot, and Henry Head,…Herbert Spencer, G. H. Lewes,…Spinoza and Comte; he encountered both Alexander Bain and William James… Several studies document Hardy’s magpie gatherings of ideas, with some strands standing out: his agnosticism, his Darwinism and his early interest in the systems of Charles Fourier and Comte’s Positivism. Hardy denied he was a pessimist, preferring the label ‘evolutionary meliorist’…”[15]. In 1883, the Victorian sexologist Havelock Ellis wrote an extensive essay on Thomas Hardy’s work up to that date, defining the novelist as “a psychologist who is also an artist.”[16]. Placing Hardy in a genealogy of writers from Jane Austen to Charlotte Brontë to George Eliot, Ellis argues that the “most serious work in English literature” gives “a foremost place to the elements of art and psychology”. Ellis’s Westminster Review Essay initiates the persistent practice of responding to Hardy with terms drawn from a variety of psychological schools. Often readers persuaded of Hardy’s modernity have seen him presciently foreseeing psychological concepts of later times, even developments fifty years hence. For instance, Rosemary Sumner shows how Hardy anticipates aspects of Freud, Jung, behaviorist operant conditioning, and (in the literary field) the psychological interests of Lawrence and Proust…” [17]. His friend and admirer, Siegfried Sassoon, wrote: “The more I think of Hardy the greater his simplicity seems...what a contrast to arrogant old Bridges with his reactionary war-talk. The one supreme tragic artist, the other a splendid craftsman with a commonplace mind.” [18]. Siegfried Loraine Sassoon, CBE, MC (1886–1967) was an English poet, writer, and soldier, and Robert Seymour Bridges, OM, FRCP (1844–1930) was a British poet and poet laureate from 1913 to 1930. Bridges studied medicine in London at St. Bartholomew’s Hospital, worked as a casualty physician at his teaching hospital, the Great (later Royal) Northern Hospital and at the Hospital for Sick Children. He devoted himself to writing and literary research after contracting lung disease[19–21]. Poets’ or authors’ interactions with physicians, were not a rare phenomenon.

Charles Dickens had many close friends in the medical profession, and he frequently visited hospitals and asylums. His works are full with descriptions of ailments and disabilities [22]. Marcel Proust (1871–1922) met many physicians, through his father (a professor of medicine) or due to his own medical problems [23].

Freud called Arthur Schnitzler the author–physician-dramatist, “my alter ego”. Schnitzler was well acquainted with authors, poets and physicians [24].

John William Polidori (1795–1821) was the Edinburgh-trained physician hired by Lord Byron to accompany him to Switzerland, where he participated in the story-telling event proposed by Byron that led, with Polidori’s help, to Mary Shelley’s Frankenstein” [25]. It is possible that Mary Shelley read about the German doctor Karl August Weinhold (1782-1829) and his experiments [25].

Hardy and his friends

Hardy knew well Henry Maudsley’s ideas. Maudsley (1835–1918 ) wrote that: „...we do not, as physicians, consider sufficiently the influence of the mental state on the production of
diseases and their importance as symptoms” [26], Maudsley mentioned the possibility of the remote influence of one on the other (Mesmerism). Hardy was acquainted with the works of scientists he met: “George John Romanes FRS (1848–1894) was a Canadian-born English evolutionary biologist and physiologist who laid the foundation of what he called comparative psychology, postulating a similarity of cognitive processes and mechanisms between humans and other animals” [27]; Sir E. Ray Lankester KCB, FRS (1847–1929), a British zoologist; Herbert Spencer (1820–1903) was an English philosopher, biologist, anthropologist, sociologist, and prominent classical liberal political theorist of the Victorian era; Sir Thomas Clifford Allbutt (1836–1925) was an English physician and inventor of the clinical thermometer [28,29]; and Sir Frederick Treves [30,31]. A medical interpretation of Thomas Hardy’s life and works was made by an British GP named Dr Tony Fincham [32]: Hardy the Physician uses all available sources to explore his understanding of the human condition, both physical and psychological, in sickness and in health. The book contains a detailed investigation of Hardy and his two wives’ personal experience of illness, focusing particularly on Emma Hardy’s mental health. Parallel to this is an in-depth examination of the medical experiences of Hardy’s fictional characters and the life and loves of his own General Practitioner, Edred Fitzpiers. The text foregrounds Hardy’s keen sensitivity to the psychosomatic – he was indeed ‘a Freudian before Freud’ – but also shows how, as the ‘man who used to notice things’, he displays a shrewd understanding of physical illness, well in advance of his time. Hardy the Physician demonstrates how Hardy’s invariably holistic approach illustrates the limitations of scientific medicine – how medicine, by adopting a wholly scientific route, has in many ways thrown out the baby with the bathwater.”

Other Victorian and 19th century authors and disabilities

Anthony Trollope (1815–82) in Barchester Towers (1857) described the stunningly beautiful “Signora Madeline Stanhope-Vesey Neroni”, who had made a disastrous marriage in Italy to a Paolo Neroni of the Papal Guard, who crippled then abandoned her to return as a single mother to her clerical family. She remained on her “invalid sofa”… [33]. Trollope’s works attract also psychoanalytic approaches in the literature [34,35].

“Phrenology” evolved from the work of Franz Joseph Gall (1758-1828) and Johann Gaspar Spurzheim (1776-1832), becoming a fixture in Victorian culture, arts and letters as well as medicine. Writers such as Thomas Love Peacock (1785-1866) and Thomas Hood (1799-1845) initially satirized phrenology, as did playwright and composer William S. Gilbert (1836-1911). On the other hand, novelists such as Charlotte Brontë (1816-1855), Charles Dickens (1812-1870), George Eliot (1819-1880), and the poet and essayist Ralph Waldo Emerson (1803-1882) not only accepted the principles of this brain-based personality theory but exploited it in their characters. The popularity of phrenology in the Victorian period should in part be attributed to the popularity of physiognomy which, thanks in large part to Johann Christian Lavater (1741-1801), has been thoroughly embedded in Western culture since the end of the eighteenth century [36].

In Villette, written by Charlotte Bronte (Volume One Chapter IV. Miss Marchmont), we read that „Miss Marchmont was a woman of fortune, and lived in a handsome residence; but she was a rheumatic cripple, impotent, foot and hand, and had been so for twenty years. She always sat upstairs: her drawing-room adjoined her bedroom. I had often heard of Miss Marchmont, and of her peculiarities … I found her a furrowed, grey-haired woman, grave with solitude, stern with long affliction, irritable also, …She made the proposal to me after tea, as she and I sat alone by her fireside…’It will not be an easy life’, said she candidly, ‘for I require a good deal of attention, and you will be much confined; yet, perhaps, contrasted with the existence you have lately led, it may appear tolerable.’ [37]. Charlotte Bronte attracts authors concerning her personality, social contributions and psychological aspects of her literature [38-43].

Herman Melville (1819–1891) „…was an American novelist, short story writer, essayist, and poet, whose work is often classified as part of the genre of dark romanticism. Moby Dick, also known as The Whale, is a novel first published in 1851. One of Captain Ahab’s legs is missing from the knee down and has been replaced by a prosthesis fashioned from a sperm whale’s jawbone. Ahab is the tyrannical captain of the Pequod who is driven by a monomaniacal desire to kill Moby Dick, the whale that maimed him on the
previous whaling voyage. Despite the fact that he’s a Quaker, he seeks revenge in defiance of his religion’s well-known pacifism. Ahab’s name comes directly from the Bible (1 Kings 16:28) “[44].

Melville’s works were also analyzed scientifically [45] and psychologically [46-47].

Sir James Matthew Barrie OM (1860–1937) was a Scottish author and dramatist, who created Peter Pan who fought bravely against the evil Captain „Hook“, the hand amputee.

Robert Louis Balfour Stevenson (1850–1894) was a Scottish novelist, poet, essayist, and travel-writer. His most famous works are Treasure Island, Kidnapped, and The Strange Case of Dr Jekyll and Mr Hyde [48].

The famous illustrations of the one-legged Long John Silver leading Jim Hawkins in Treasure Island, were made by N. C. Wyeth in 1911.

In David Herbert Lawrence’s (1885-1930) Lady Chatterley’s Lover (1928) we find Sir Clifford Chatterley as a wheelchair bound paraplegic who was injured during the 1st WW.

“He is a successful writer, and then a powerful businessman. But the gap between him and Connie grows ever wider; obsessed with financial success and fame, he is not truly interested in love, and she feels that he has become passionless and empty. He turns for solace to his nurse and companion, Mrs. Bolton, who worships him as a nobleman even as she despises him for his casual arrogance. Clifford is portrayed as a weak, vain man, displaying a patronizing attitude toward his supposed inferiors.” [49].

In Alexandre Dumas père’s (1802-70) The Count of Monte Cristo (Le Comte de Monte-Cristo) we find the first description of the Locked-in syndrome [50-51].

“M. Noirtier was sitting in an arm-chair, which moved upon casters, in which he was wheeled into the room in the morning, and in the same way drawn out again at night. He was placed before a large glass, which reflected the whole apartment, and so, without any attempt to move, which would have been impossible, he could see all who entered the room and everything which was going on around him. M. Noirtier, although almost as immovable as a corpse, looked at the newcomers with a quick and intelligent expression, perceiving at once, by their ceremonious courtesy, that they were come on business of an unexpected and official character. Sight and hearing were the only senses remaining, and they, like two solitary sparks, remained to animate the miserable body which seemed fit for nothing but the grave; it was only, however, by means of one of these senses that he could reveal the thoughts and feelings that still occupied his mind... In short, his whole appearance produced on the mind the impression of a corpse with living eyes, and nothing could be more startling than to observe the expression of anger or joy suddenly lighting up these organs, while the rest of the rigid and marble-like features were utterly deprived of the power of participation...the helpless invalid, whose body could scarcely be called a living one, but who, nevertheless, possessed a fund of knowledge and penetration, united with a will as powerful as ever although clogged by a body rendered utterly incapable of obeying its impulses.” [52].

In Jules Verne’s (1828-1905) Le tour du monde en quatre-vingts jours chapter 5, we read:

“Lord Albermarle, an elderly paralytic gentleman, was now the only advocate of Phileas Fogg left. This noble lord, who was fastened to his chair, would have given his fortune to be able to make the tour of the world, if it took ten years; and he bet five thousand pounds on Phileas Fogg. When the folly as well as the uselessness of the adventure was pointed out to him, he contented himself with replying, “If the thing is feasible, the first to do it ought to be an Englishman.” [53].

I have published [22] a study on Charles Dickens (1812-70) and disabilities. Mr. Joshua Smallweed appears in Bleak House, Dickens’ ninth novel.

Smallweed is confined to a chair which is pushed by his granddaughter Judy. He orders Judy “to shake him up” very often: it seems that this maneuver aims to relieve pressure and prevent pressure sores. Judy stood behind him, holding his chest with her arms around him, under his armpits, and fiercely jerks him up and down several times as he continues his dialogues. It is possible that Smallweed suffered from some kind of an incomplete spinal cord injury:

„Do you rub your legs to rub life into ’em?’ he asks of Grandfather Smallweed after looking round the room. ‘Why, it’s partly a habit, Mr. George, and—yes—it partly helps the circulation,’ he replies. ‘The cir-cu-la-tion!’ repeats Mr. George, folding his arms upon his chest and seeming to become two sizes larger. ‘Not much of that’, I should think.

‘Truly I’m old, Mr. George,’ says Grandfather Smallweed. “But I can carry my years. I’m older
than HER,’ nodding at his wife, „and see what she
is? You’re a brimstone chatterer!” with a sudden
revival of his late hostility.”

“You’re a brimstone idiot.” [54].

In chapter 21 of Bleak House “Mr. Smallweed’s
grandfather is likewise of the party. He is in a
helpless condition as to his lower, and nearly so as
to his upper, limbs, but his mind is unimpaired.
It holds, as well as it ever held, the first four rules
of arithmetic and a certain small collection of the
hardest facts. In respect of ideality, reverence,
worship, and other such phrenological attributes,
it is no worse off than its used to be. Everything
that Mr. Smallweed’s grandfather ever put away
in his mind was a grub at first, and is a grub
at last. In all his life he has never bred a single
butterfly.”…”The excellent old gentleman being
at these times a mere clothes-bag with a black
skull-cap on the top of it, does not present a very
animated appearance until he has undergone the
two operations at the hands of his granddaughter
of being shaken up like a great bottle and poked
and punched like a great bolster” [55].

Grandfather Smallweed who, like Antonida
Vasilievna Tarasevicheva, “la babulinka” in
Fyodor Mikhailovich Dostoevsky’s The Gambler,
is a paralytic money-owner and carried in a chair.
Both of them are old and both have a grand-
daughter. Both of them moved around with great
noise [56].

The term “Pickwickian syndrome” is derived
from The Posthumous Papers of the Pickwick
Club, Joe – the “fat boy” who constantly falls
asleep in any situation at any time of day due to
obesity, hypoventilation syndrome or obstructive
sleep apnea syndrome.

Tiny Tim and Bob Cratchit were depicted in
the 1870s by Fred Barnard. Tiny Tim (real name
“Timothy Cratchit”) (also known as “Trench Foot
Tim”) is a fictional character in the classic 1843
story A Christmas Carol by Charles Dickens. He
is the son of Bob Cratchit. It is claimed that the
character is based on the invalid son of a friend
of Dickens who owned a cotton mill in Ardwick,
Manchester [57].

Miss Mowcher in David Copperfield proclaimed: “You are a young man, she said nod-
ding. Take a word of advice, even from a three-
foot nothing. Try not to associate bodily defects
with mental, my good friend, except for a solid
reason” [58].

Mrs. Horace Crewler, the mother-in-law of
Tommy Traddles in David Copperfield suffered
what is quite possible, from an hysterical paral-
ysis; Sophy Crewler took care of a large brood
of sisters and ailing parents before marrying
Traddles. Sarah Crewler was one of Sophy’s sis-
ters. She has something wrong with her spine,
which means that she has to stay lying down for
at least a year. When David meets up with Traddles
again in London when they are both starting out
in their respective law offices, Traddles explains
that one reason he can’t marry Sophy quite yet is
because she has to nurse Sarah [59].

Mrs. Clennam of Little Dorrit also suffered
most probably from hysterical paralysis [60-61].

Daniel Quilp from Charles Dickens’ The Old
Curiosity Shop is “a black-eyed dwarf, who con-
stantly revealed the few discoloured fangs that
were yet scattered in his mouth, and gave him the
aspect of a panting dog.” [62].

Victor Hugo (1802 –1885) was a famous roman-
tic French author-poet-novelist-painter, whose
Notre-Dame de Paris, 1831 (known in English as
“The Hunchback of Notre-Dame”) [63], is a
worldwide known historical novel. “The story
begins on Epiphany (6 January), 1482, the day of
the Feast of Fools in Paris, France. Quasimodo,
a deformed hunchback who is the bell-ringer of
Notre Dame, is introduced by his crowning as the
Pope of Fools.” [64].

The Danish author Hans Christian Andersen
(1805–1875) wrote The Red Shoes (1845), which
tells the tale of a girl named Karen, who’s fixa-
tion on her red shoes leads to her being cursed
to dance uncontrollably and ultimately, to the
amputation of her feet. While not pointe-shoes,
the use of red dancing shoes within this moraliz-
ing tale may indicate the presence of some myth
that was circulating at that time. The story seems
to conflate dancing with vanity and lack of con-
trol and all of these hinge on Karen’s shoes” [65].
Medical and psychological aspects in Andersen’s
stories were thoroughly discussed [66–69].

P.S.

“Healing the man with a withered hand” is
one of the Miracles of Jesus in the Gospels (Mark

Resumo

The Withered Arm (La Forvelkita Brako) estas
rakonto de Thomas Hardy (1840-1928), kiu estis
fama kaj grava brita arkitekto-poeto-verkisto kaj
socia reformisto. The Withered Arm estas „goti-
ka fantomrakonto” kaj Hardy deklaris, ke ĝi estas
bazita sur vera okazjo. La rakonto demonstras la du tendencojn dum viktorina britujo: la malno-vajn superstiĉajn konvinkojn, sonĝojn kaj ziojn kompare al la modernaj, sciencbazitaj scienco kaj medicino kaj la rimarkinda venko de la psiko kontraŭ la korpo. La differenciga diagnozo de tiu manparalizo estas pridiskutita kune kun handi-kapoj, kiuj aperas en libroj de aliaj viktorinuloj kaj aŭtoroj el la 19-a jarcento.

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