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5 Map of the Isle of Tenet, showing St. John the Baptist Church in Margate and St. Mary’s Minster, both parishes of John Lewis. Opposite p. vii in John Lewis, *The History and Antiquities, as well as Ecclesiastical as Civil, of the Isle of Tenet, in Kent*, 2nd edn. (London, 1736). Reproduced by permission of the Kent County Council Arts and Libraries.

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CHAPTER I

The physician of the mind from Zeno to Arbuthnot

Of the many relationships between physicians and patients represented in eighteenth-century British fiction, perhaps the best example is that of Dr. Lewis and the hypochondriacal Matthew Bramble in Tobias Smollett’s epistolary novel, The Expedition of Humphry Clinker. Three weeks into his tour of the British Isles, which his doctor has ordered him to take for his health, Matt Bramble writes a letter of complaint to Dr. Lewis. He apologizes for troubling his physician with a long list of grievances, but he asserts that it is a doctor’s traditional function to treat his patient’s mental, as well as physical, health:

I cannot help thinking, I have some right to discharge the overflowings of my spleen upon you, whose province it is to remove those disorders that occasioned it; and let me tell you, it is no small alleviation of my grievances, that I have a sensible friend, to whom I can communicate my crusty homours, which, by retention, would grow intolerably acrimonious.¹

Always the amateur physician, Bramble adopts what he believes is suitably Hippocratic language to diagnose his disease and prescribe his own cure: his spleen being filled with bile, he must empty the resulting ill humours into the vessel of his doctor’s care in order to avoid further encrustation of his temperament. In asserting that he has a “right” to do so, and that it is the “province” of his “sensible friend” to listen to his complaints, Bramble defines the unique relation between himself and his physician in terms of an ancient tradition, one in which the doctor is not just a medical practitioner, but also a counselor, a philosopher, a friend, and a man of sensibility. This philosopher-physician cures his patient not with hellebore or peruvian bark, but by listening sympathetically to the outpouring of his patient’s disturbed passions – which are often the source of the malady – and providing some “hints” through which the patient may cure himself.

The dialogue between Bramble and his philosopher-physician appears one-sided, in that only letters to Lewis are presented to the reader,
The cure of the passions and the origins of the English novel

but the nature of Lewis’s responses may be inferred from several letters in which Bramble thanks Lewis for the “hints” through which the doctor has set his patient’s mind at ease. In the first letter of the novel, Bramble quarrels with his physician over the remedy for his ailments, which appear to include constipation and related forms of bloating (“The pills are good for nothing . . . I have told you over and over, how hard I am to move”), for which Lewis has recommended laxative pills and generous use of the mineral waters at Bristol Hot-Well and Bath (5). In his answer, Lewis evidently reproves Bramble, reminding him of the dangers of self-diagnosis and self-treatment by lay persons, because Bramble replies, “I understand your hint. There are mysteries in physick, as well as in religion; which we of the profane have no right to investigate.” Despite this admission, Bramble maintains that he has studied medicine as thoroughly in the “hospital” of his own body as if he had been trained in “regular courses of physiology à la cetera et cetera” (21). One of these mysteries, which the doctor seems to understand much better than the patient, is the effect of the passions of the mind in abetting disorders of the body. Bramble’s complaints, the reader infers, are caused not by any organic obstruction, but by his irascible temper and chronic vexation, which Dr. Lewis is endeavoring to allay through the classic remedy of a long and arduous journey.

The irascibility of Matthew Bramble’s temper becomes fully apparent in an incident described in a letter written by his nephew, Jeremy, to his friend at college. Upon the arrival of the Bramble party at their new lodgings at Bath, Bramble’s “irritable nerves” suffer the confusion of Aunt Tabitha’s unpacking, a dogfight, a concert of street musicians, and dancing lessons given by a half-blind, one-legged dancing master in the rooms above. Bramble has just silenced all these irritants to his peace when two black servants of another lodger begin to practice upon French horns in the stairwell:

You may guess what effect they had upon the irritable nerves of uncle; who, with the most admirable expression of splenetic surprize in his countenance, sent his man to silence those dreadful blasts, and desire the musicians to practise in some other place, as they had no right to stand there and disturb all the lodgers in the house. Those sable performers, far from taking the hint, and withdrawing, treated the messenger with great insolence; bidding him carry his compliments to their master, colonel Rigworm, who would give him a proper answer, and a good drubbing into the bargain; in the mean time they continued their noise, and even endeavoured to make it more disagreeable; laughing between whiles, at the thoughts of being able to torment their betters with impunity. Our ‘squire, incensed at the additional insult, immediately dispatched the servant, with his compliments to colonel Rigworm; requesting that he would order his blacks to
be quiet, as the noise they made was altogether intolerable – To this message, the Creole colonel replied, that his horns had a right to sound on a common staircase; that there they should play for his diversion; and that those who did not like the noise, might look for lodgings else-where. Mr. Bramble no sooner received this reply, than his eyes began to glisten, his face grew pale, and his teeth chattered. After a moment’s pause, he slpt on his shoes, without speaking a word, or seeming to feel any further disturbance from the gout in his toes. Then, snatching his cane, he opened the door and proceeded to the place where the black trumpeters were posted. There, without further hesitation, he began to belabour them both; and exerted himself with such astonishing vigour and agility, that both their heads and horns were broken in a twinkling, and they ran howling down stairs to their master’s parlour-door. The ‘squire, following them half way, called aloud, that the colonel might hear him, “Go, rascals, and tell your master what I have done; if he thinks himself injured, he knows where to come for satisfaction. As for you, this is but an earnest of what you shall receive, if ever you presume to blow a horn again here, while I stay in the house.”

Jeremy’s description of his uncle’s angry outburst, resembling as it does a physician’s summary of the presentation of his patient’s symptoms, reveals how heavily Smollett was indebted to his experiences as a physician for the materials of his comic art. Like a doctor recording his patient’s progress through a fever, Jeremy describes the conditions that provoked his uncle’s anger, notes the signs in Bramble’s face that indicated the onset of his passion, and observes his uncle’s extraordinary ability to overcome his physical disabilities while caught up in his rage. The case history concludes with a direct quotation of Bramble’s challenge to the Creole colonel whose incivility provoked the incident, suggesting that his uncle has managed to relieve his constipation by means of an upward, vocal evacuation of his spirits.

Jeremy’s diagnosis of his uncle’s malady is that he is “a hypochondriac...infected with good-humour” (46). In eighteenth-century medicine, the term “hypochondriac” was used in a somewhat different sense from its modern meaning. According to Ilza Veith, hypochondria emerged early in the seventeenth century when physicians recognized symptoms of hysteria in men, which conflicted with the widely held belief that hysteria was particular to women, having its organic basis in the womb. In order to resolve the discrepancy, the term “hypochondriasis” was introduced to explain emotional disturbances in men that were accompanied by physical swellings, headaches, and nervous excitement, sometimes to the point of convulsion. Thomas Sydenham (1624–89) expanded the definition of the disease to include a variety of ailments that had previously been thought to have only organic, rather than emotional, origins, with the result that he came to consider hypochondria
and hysteria the commonest of all chronic diseases, frequently afflicting persons of sound judgment and superior intelligence (Veith, *Hysteria*, 141–42). Because one of its effects was to stimulate the nervous system, Sydenham considered it a disease of the imagination, but by no means an imaginary disease. Sydenham’s theory of hysteria and hypochondria was given wider circulation in the work of Giorgio Baglivi (1668–1706), who argued that nervous diseases were caused by disturbances of the passions, and were to be cured only by restoring emotional tranquility, rather than by physical or chemical remedies. To this end, it was important for the physician to carefully record the emotional conditions of the patient that brought on the attacks, in order to identify their specific causes. If, as it appears, Bramble’s malady is hypochondria, then Jeremy’s (and Smollett’s) task is to identify and record the external stimuli that overly excite his uncle’s passions.

By the end of the eighteenth century, it was conventional to distinguish hypochondria from melancholy, as if they were different diseases with different origins. Thus Benjamin Rush described hypochondria as a “partial derangement” or an “error in opinion” that the patient held toward his “person, affairs, or condition,” while “melancholia” indicated a derangement arising in “objects external to the patient.” This distinction worked to the disadvantage of the hypochondriac, in that it dissolved the connection between the disease and the personal or social conditions over which the patient may have had legitimate grievances. In Matt Bramble’s case, for example, the diagnosis of hypochondria seems to invalidate his complaints about the vices of his times as so much cant, brought on by his degenerate physical condition. But Rush’s distinction between hypochondria and melancholy was not shared by Thomas Sydenham and the physicians who named the disease; for them, “melancholy” was merely a descriptive term for symptoms of the disease of hypochondria, which might well have either emotional or social causes. In this older sense of the word, Bramble’s hypochondria does not invalidate his claim to be a modern-day Jeremiah, the Old Testament prophet whose “lamentations” warn of a disaster about to befall Israel because of its taste for luxuries and its unholiness; indeed, Bramble self-consciously adopts that role when he refers to his letters to Dr. Lewis as “the lamentations of Matthew Bramble” (31).

Even more to the point, Bramble’s one-sided exchanges with Lewis resemble the virulent social criticism in the genre of poetry named after Menippus of Gadara, including the satires of Varro and Lucian of Samosata. According to Northrop Frye, the defining characteristic of
Menippean satire is its sharp attack on “mental attitudes” that underlie some forms of social behavior, including “[p]edants, bigots, cranks, parvenus, virtuosi, enthusiasts, rapacious and incompetent professional men of all kinds” for their “occupational approach to life.” Menippean satire “anatomizes” and classifies these attitudes preparatory to seeking a cure for them. For Frye, the classic eighteenth-century Menippean satires are Gulliver’s Travels and Tristram Shandy, but a strong case might be made that Humphry Clinker, with its letters and their implied answers substituting for classical dialogues, also belongs in that list.

Matt Bramble’s explosions of vitriolic anger are typically directed at certain recurring mental attitudes and their corresponding social behaviors, including incivility, professional pedantry, and the luxury of the modern age. In the incident on the staircase, for example, he is offended by the insolence of the horn-players and the refusal of the Creole colonel to discipline them, in contrast to the civility of Sir Ulic McGillicut, who ceases his dancing lessons upon learning that they are disturbing the peace of the gentleman in the rooms below. Bramble’s most Menippean moment, perhaps, occurs during his controversy with Dr. Linden over the healthful effects of the waters at Hot-well. The doctor, a physician in the rationalist tradition, relies on medical theory at the expense of empirical observation; he is oblivious to the affective qualities of stinks, and all of his learning cannot help him cure the syphilitic wart on his own nose (16–18). What most arouses Bramble’s anger is the doctor’s rigid orthodoxy: “He has read a great deal; but without method or judgment, and digested nothing” (23). Finally, in Bramble’s strictures on the city of Bath, he traces the effects of discord and disorder back to England’s sudden prosperity: “All these absurdities arise from the general tide of luxury, which hath overspread the nation, and swept away all, even the very dregs of the people” (34). Bramble’s verbal eruptions, therefore, are not merely the product of a hypochondriacal temperament, any more than his constipation is caused by a weak constitution; rather, both disorders arise from external causes, and demonstrate the effects of irritation upon the nerves of a man of sensibility.

In one other respect, however, Jery’s diagnosis is accurate: his uncle’s partial derangement contains its own cure in the form of a counter-infection of “good-humour.” This infection of benevolence first appears in the glimpses we get of his secret charities, such as his gift of twenty pounds to a poor widow, witnessed by his nephew Jery through a keyhole (19). Ultimately, Bramble’s sensibility to the pain of the unfortunate cures both his own afflictions and those of his company: his offer of employment
to the unfortunate farrier, Humphry Clinker, whom he considers guilty only of “sickness, hunger, wretchedness, and want” (76), eventually brings concord out of discord and gives the expedition a unity and purpose that it had very much wanted. Bramble’s sensibility enables him to play the same role for the members of his party that is performed by Dr. Lewis for him – that is, the philosopher-physician of the mind. Bramble claims this role for himself in a letter written at the end of the expedition’s first month: after describing his sister Tabitha’s latest flirtation, his niece Lydia’s delicate nerves, and his nephew Jery’s jealous vigilance, Bramble asks Lewis ironically to understand “what an agreeable task it must be, to a man of my kidney, to have the cure of such souls as these” (45).

Bramble’s phrase “have the cure” suggests the offices both of a physician and of a curate, or curator – one whose task it is to heal, preserve, and protect the souls placed in his charge. Of all the souls that Bramble cures, the most distressed is that of his friend Baynard, whom Bramble frees from the thralldom of a domineering wife and then rescues when Baynard threatens suicide over his wife’s death (270, 313). The global irony of the book, of course, is that Bramble’s own soul is very much in need of a cure, which occurs near the end of the journey. The cure is effected through (in Northrop Frye’s term) a “ritual death” in which Bramble is nearly drowned (but is saved by his own son Humphry), and through Bramble’s cognitio, in which he recognizes the consequences of the folly of his youth, which (being repressed) had apparently caused his longstanding constipation.10 The most hopeful sign that the cure may be permanent is Bramble’s declaration, in his last letter, that this erstwhile Menippus intends to write no more letters (322).

SWIFT TO ARBUTHNOT: “YOU ARE A PHILOSOPHER AND A PHYSICIAN”

In this final letter to Dr. Lewis, Bramble pays his physician a high compliment by associating him with the famed John Arbuthnot (1667–1735), physician to Queen Anne, John Gay, Jonathan Swift, David Hume, Alexander Pope and other luminaries in the age prior to Smollett’s. It was Dr. Lewis’s gentle “hints,” Bramble says, that have brought him peace of mind: “You are an excellent genius at hints. – Dr. Arbuthnot was but a type of Dr. Lewis in that respect” (HG, 321). By invoking Arbuthnot’s name as the “type” for Dr. Lewis, Smollett grounds the
fictional relation he describes between Bramble and Lewis in terms of a well-established paradigm in eighteenth-century letters. It was the poet John Gay who first identified Dr. Arbuthnot as the modern incarnation of the philosopher-physician:

\[\text{Arbuthnot there I see in physicks art,}
\text{As Galen learn'd or famed Hippocrate;}
\text{Whose company drives sorrow from the heart,}
\text{As all disease his med'cines dissipate.}\]

Arbuthnot’s ability to cure disease by treating the spirit, rather than merely the body of his patient, is evident from a letter in which Jonathan Swift vented his anger to Arbuthnot during the final weeks of the Tory ministry in 1714:

The fashion of this world passeth away; however, I am angry at those who disperse us sooner than these may need. I have a mind to be very angry, and to let my anger break out in some manner that will not please them at the end of a pen . . . Writing to you much would make me stark mad. Judge his condition who has nothing to keep him from being miserable but endeavouring to forget those for whom he has the greatest value, love, and friendship. But you are a Philosopher and a Physician, and can overcome by your wisdom and your faculty those weaknesses which other men are forced to reduce by not thinking on them. Adieu, and love me half so well as I do you.  

Similarly, in 1734 a melancholy young student named David Hume wrote a letter to a physician, now presumed to have been Dr. Arbuthnot, complaining of symptoms consistent with “the Disease of the Learned,” and asking if there were any possibility of a cure:13 “All the Physicians I have consulted,” wrote Hume, “though very able, cou’d never enter into my Distemper; because not being Persons of great Learning beyond their own Profession, they were unacquainted with these Motions of the Mind.” Hume hinted at the hypochondriacal nature of his disease, and at its cure, in observing “you know ’tis a Symptom of this Distemper to delight in complaining & talking of itself.” And Alexander Pope praised Arbuthnot’s skill at helping patients rid themselves of imaginary diseases, or diseases of the imagination, when Pope wrote of Arbuthnot, “I think him as good a Doctor as any man for one that is ill, and a better Doctor for one that is well.”4 Pope may have been thinking of Arbuthnot’s successful treatment ten years earlier of the philosophical idealist, George Berkeley, who as Arbuthnot confided to his fellow Scriblerians, “has now the idea of health, which was very hard to produce in him, for he had an idea of a strange feaver upon him so strong that it was very hard to destroy it by introducing a contrary one.”5
Pope’s greatest tribute to Arbuthnot, however, is a “Bill of Complaint” about the spiritual ills of mankind, the *Epistle from Mr. Pope, to Dr. Arbuthnot*. This satirical poem is at once an attack on particular persons and a general denunciation of mankind’s vicious nature, revealing in Pope what David Morris has described as “a capacity for Juvenalian indignation that will surprise his readers” — surprising in view of the fact that Pope placed this poem at the head of his imitations of the gentler satirist, Horace. Unlike Horace, the Juvenalian satirist intends to inflict pain — if not to cure the vices depicted in the satire, then at least to deter others from following the same course — and for this purpose a controlled expression of anger is appropriate. In addition to this indignation, however, the poem has a second purpose — that of purgation — for which Arbuthnot is a particularly appropriate audience. As Rebecca Ferguson puts it, “‘Purgung’ as a medicinal concept is . . . central to the *Epistle to Dr. Arbuthnot*.” As if admitting that his anger may neither cure nor deter a single evil, the poet contents himself with emptying his ill humours into his physician’s ear, much as Bramble does with Lewis, in order to lessen the anguish he feels at vice’s universal sway. Finally, his anger spent, the poet draws a comparison between Arbuthnot’s care for him and his own concern for an aged parent, in doing which he “re-enacts the concerned care of Arbuthnot towards himself as a patient.” By thus identifying himself with his physician, he at least cures the passion of anger in himself, if he is unable to cure the passion for vice in others. The role played by Arbuthnot in Pope’s poetic *Epistle* — that of the sympathetic friend endeavoring to moderate the raging anger of the poet — is virtually identical to that of Dr. Lewis in Smollett’s epistolary novel.

It is not always the case, however, that the doctor who restores his patient’s disturbed passions to equanimity in eighteenth-century texts is a doctor of medicine. It is equally likely that this doctor has been trained as a metaphysician — that is, as a clergyman or philosopher — rather than as a physician. Thus the learned Dr. Harrison, who orchestrates the resolution of Henry Fielding’s *Amelia* (1752), is a member of the clergy; his skills as a doctor derive not from a knowledge of the body, but rather from the fact that, as Amelia puts it, “you understand Human Nature to the Bottom, . . . and your Mind is the Treasury of all ancient and modern Learning.” Amelia’s husband, William Booth, explains the unusual gifts of such a doctor as Harrison:

Of all Mankind the Doctor is the best of Comforters. As his excessive Good-nature makes him take vast Delight in the Office; so his great Penetration into the
The physician of the mind from Zeno to Arbuthnot

human Mind, joined to his great Experience, renders him the most wonderful Proficient in it; and he so well knows when to sooth, when to reason, and when to ridicule, that he never applies any of those Arts improperly, which is almost universally the Case with the Physicians of the Mind, and which it requires very great judgment and Dexterity to avoid. (104)

Speaking through Booth, Fielding defines in Dr. Harrison the ideal traits of the physician of the mind. Whether he belongs to the clergy or the medical profession, this doctor’s authority rests in part on the fact that he is effective outside the normal limits of that profession: that is, he is a physician who eases the mind of his patient, or a clergyman who restores the body. He uses sympathy, reason, and ridicule instead of herbal preparations or sermons in his healing art, though few doctors are able to use these tools wisely. In some cases, the “doctor” may be a trusted friend or counselor without any professional qualifications. His task is to bring about a cure of a disturbance of the spirit so severe that it has endangered the physical and mental being of his patient, either through illness or the patient’s self-destructive behavior.

Until the middle of the eighteenth century, the philosopher-physician is assumed to be male, but the question of gender is explicitly raised by the presence of a female counselor in Charlotte Lennox’s *The Female Quixote*. Arabella, the heroine of that novel, suffers from an exaggerated sensibility to her own danger and pain, or (in matters of the heart) her power to inflict pain on others, a sensibility that she acquired from the romance novels on which she was brought up. Under the influence of this passion, she throws herself into the Thames to escape some approaching horsemen, whom she believes are intent on ravishing her. She is rescued, “senseless, and to all Appearances dead,” and put to bed with a fever so high that her physicians give her over.20 A “worthy Divine,” however— a “Pious Learned Doctor” who “had the Cure of Arabella’s Mind greatly at Heart” (368)— comforts Arabella until her fever abates, and then sets about disabusing her of ideas that he considers dangerous. Using a cure composed of equal parts of logic and literary criticism, the doctor tactfully (though modern readers often find his arguments clumsy) leads Arabella to see the dangers to which she has exposed herself and others in preferring stories that are marred by “physical or philosophical Absurdities” to those that describe the ways of the world accurately (378). The danger of such stories, the doctor insists, is not in their presentation of vice as such, but in their effect on the passions, such as revenge and love, to which they “give new Fire,” but which “must be suppressed if we hope to be approved in the Sight of the only Being where Approbation can
make us Happy” (380). In the end, the Doctor’s reasoning, coupled with the near glimpse of mortality that Arabella has had, effects the desired cure.

The incident raises the gender question because, as many readers have noted, another person had already begun Arabella’s cure. This person is the Countess whom Arabella had encountered at Bath, whose “Sense, Learning, and Judgment,” together with her social stature and her knowledge of the language of romance fiction, earned her Arabella’s admiration (322). The Countess is resolved to “rescue” Arabella from the ridicule brought upon herself by her romantic notions, and engages her in a dialogue about the “lovely and afflicted” heroines of romance fiction (323–25). Unlike the Doctor, whose rigorous logic is yet to come, the Countess’s manner is sympathetic, and she adopts rather than contests the language of her patient. By this means, she makes the point that “one cannot help rejoicing that we live in an Age” in which “’tis impossible such Adventures should ever happen” (326). Vice and virtue, says the Countess, are defined by the customs of the times in which we live, not by practices in ages past. By the end of the conversation, the Countess’s discourse “had rais’d a kind of Tumult in [Arabella’s] Thoughts,” though the impression she made “came far short of Conviction” (329). Before completing Arabella’s cure, however, the Countess is unceremoniously hustled out of the book. One commentator has pointed to Lennox’s decision to finish the novel in two volumes, rather than three, for the Countess’s hasty exit; yet there was space enough left to create a new character, the “worthy Divine,” and accommodate his prolix arguments. Whether the decision was Lennox’s or some other person’s, it appears that gender, not length, took the cure out of the Countess’s hands. For the cure to be credible, it had to be accomplished by a “doctor,” and the doctor had to be gendered male.

Despite the failure of The Female Quixote to rise above the gender categories that prevailed in its time, the figure of the Countess is significant. It is her sympathetic manner, built on an understanding of her patient’s semiotic world, that first makes an “impression” on Arabella and prepares her to receive the doctor’s arguments. The use of both the doctor and the countess, in Janet Todd’s view, allowed Lennox to make “a firm statement of patriarchal and sentimental doctrine combined.” A similar strategy is employed in Fielding’s Amelia, in which Amelia employs the same “remedies” as those used by Dr. Harrison, though she applies them in a more sympathetic way. When, for example, Booth
becomes alarmed at the unaccountable coldness of his friend Colonel James toward him,

[Amelia] applied as judicious a Remedy to his disordered Spirits, as either of those great mental Physicians, Tully or Aristotle, could have thought of. She used many Arguments to persuade him that he was in an Error; and had mistaken Forgetfulness and Carelessness for a design'd Neglect. (IV: v)

Through the use of the female “mental Physician,” the mid-century novelist was able to incorporate what G. J. Barker-Benfield has called the “culture of reform,” based upon a “new ideology of femininity,” into the older and primarily male tradition of the cure of the passions by the suppression of their effects.

In sum, then, the rage and eventual gentling of Matthew Bramble and other fictional patients represents a social pathology that the early novel was uniquely suited to address: the cure of a disturbed sensibility in a world in which tradition and rationalism, which had once been the exclusive remedies to the passions, have themselves become aggravating factors. The cure is generally brought about by a doctor, but the defining characteristic of the “physician of the mind” is finally not the person’s training, profession, or sex; rather, it is the ability to calm the passions through a combination of arts that may include the hints of Dr. Lewis, the gentle reproaches of Dr. Harrison, the reasoned arguments of the “worthy Divine,” or the sympathetic sensibilities of Amelia. For Fielding, Lennox, and Smollett alike, the title “Physician of the Mind” is an honorific not to be granted to every physician or clergyman, but to be earned only by those who combine with their learning an essential, unteachable goodness of heart.

THE STOICS AND THE THERAPY OF DESIRE

The therapy of the passions in eighteenth-century fiction originates in an ancient tradition in which “ordinary-belief philosophy” was used to address the problems of everyday life, including the preservation of health. F. H. Sandbach notes that, in aristocratic Roman homes, the philosopher-physician was considered the “doctor of the soul”; his function was that of “the ‘paedagogus’ of the human race, that is the servant who supervised the behaviour of the growing child.” In Hellenistic Athens, as Martha C. Nussbaum has shown, the therapeutic application of the critique of desire to solving the real-world problems of troubled individuals was one of the defining characteristics of the three principal schools of philosophy – Epicureanism, Skepticism, and Stoicism – which
set them apart from Platonism and Aristotelianism. The analogy between medicine and philosophy appears repeatedly in the teachings of the early Stoics, Zeno, Chrysippus, and Posidonius, in the dialogues and moral essays of the later Stoics, Cicero and Seneca, and in the letters and maxims of Epicurus. While Plato and Aristotle also employed analogies with medicine to show how philosophy could cure the mind’s errors, or to show the connection between emotional health and an ethical life, the commitment to action—to healing disturbances of the passions—was not a necessary goal of their teaching. For philosophers whom Nussbaum calls “worthy of the name,” the understanding of how human lives are diseased led inevitably to the attempt to cure them. Epicurus emphasized the connection between philosophy and therapy when he said “[e]mpty is that philosopher’s argument, by which no passion of a human being is therapeutically treated. For just as there is no use in a medical art that does not cast out the sicknesses of bodies, so there is no use in philosophy, if it does not throw out passion from the soul.” The Skeptics sought to remove diseases of reason by opposing healing arguments to dogmatic beliefs, as a doctor seeks to apply remedies appropriate to a patient’s symptoms, while the Stoics, who conceived happiness to lie in the absence of desire for anything other than virtue, sought to extirpate the passions through which humans place their affections on unworthy objects.

The Epicurean and Stoic accounts of the passions, according to Nussbaum, are “indispensable starting points for any future work,” particularly in the theory of narrative. Lucretius’s Epicurean poem, De Rerum Natura, contains “culturally narrated scenarios” through which the emotions of love are “enacted” in his readers’ lives, leading to a cognition of their dimensions, pace, and structure. The Stoics used exempla, brief narratives that engage the reader’s imagination and arouse phantasias about his or her own case. The reason for arousing the passions is to expose the false and non-essential nature of their objects, and thus expose them to the surgeon’s knife. The passions must be not merely suppressed, but extirpated root and branch.

The founder of Stoicism, Zeno of Citium (334–262 B.C.), recognized four generic kinds of passion: fear, lust, mental pain, and mental pleasure. The passions, Zeno said, are not material, as are the humours, but are states of the psyche with both mental and physical manifestations. Neither are passions identical to emotions, which were regarded by the Stoics as natural and proper. The passions are instead exaggerated responses to objects that are “morally indifferent,” things not essential to
one’s moral nature. These morally indifferent things may be powerfully attractive or repellant, but they are not in themselves either good or evil. Death, for example, is common to all and therefore not an indicator of one’s moral being: death comes equally to good and evil persons. We may feel sadness over the death of a loved one, but if we understand death as part of nature’s providential plan, we do not fear it. The fear of death results from an error in judgment about the rightness of things; this error gives rise to a passion, a contraction of the psyche that is reflected in physical symptoms: a contraction of the body, shivering, pounding of the heart. The continuation of a passion over an extended period of time may have a permanent effect on a person’s well-being, manifested as disease. By clarifying nature’s plan and one’s place in it, a philosopher may eliminate these errors of judgment and fits of passion in himself, herself, or others, and so, metaphorically speaking, act the part of the physician of the soul.

Just as fear has a contracting effect on the psyche, thus affecting one’s judgment, so lust, in its various forms, causes a distorting expansion of the psyche. Unlike simple desire, which one may feel for an object of moral worth, lusts send us in pursuit of chimerical goals that are indifferent or harmful to our moral well-being. Covetousness, jealousy, envy, and even anger, which is a desire to obtain revenge for an injury done us by another, are the products of such lusts. Similarly, pains and pleasures of a strictly mental nature are passions when they arise from the apprehension of supposed benefits or misfortunes which are, in fact, non-existent or irrelevant to one’s moral well-being. Excessive joy and grief are frequently twinned as examples of these mental events: for examples in eighteenth-century literature, one might think of the episode in Defoe’s *Colonel Jack* when, as a boy, Jack dropped a sack of stolen booty down a hollow tree. Thinking it was lost forever, he “cry’d, nay, I roar’d out, I was in such a Passion,” until, climbing down the tree and finding his money at the base of it, he “run to it, and snatch’d it up, hug’d and kiss’d the dirty Ragg a hundred Times” in the “Transport of my Joy.” Or one might think of Fielding’s Parson Adams, who is sermonizing Joseph Andrews on the topic, “no Christian ought so to set his Heart on any Person or Thing in this World, but that whenever it shall be required or taken from him in any manner by Divine Providence, he may be able, peaceably, quietly, and contentedly to resign it,” when news is brought that his son has drowned. Adams “began to stamp about the Room and deplore his Loss with the bitterest Agony,” until a second messenger contradicts the news, at which the “Parson’s Joy was now as extravagant as his Grief
had been before; he kissed and embraced his Son a thousand times, and danced about the Room like one frantick.”

In both cases described by Defoe and Fielding, the displays of joy and grief would appear to the Stoic as hasty indulgences that betray a weakness of character in the principals; in the case of Parson Adams, however, we prefer his joy in the recovery of his son to the unfeeling Stoic doctrine he had been teaching just before the incident occurred.

Fielding’s caricature of the Stoic doctrine in the form of Parson Adams’ denial of human feeling may not be entirely fair. Zeno and the two principal early Stoics, Cleanthes and Chrysippus, held that the philosopher who would treat the diseases of the soul must himself be without strong feelings, including pity; only a philosopher who possessed such internal calm and consistency could be of any help to others. Yet they warned that the philosopher must not eliminate compassion, for it is through sympathy with the sufferer that his or her disturbed passions can be calmed. The proper spirit for the Stoic sage was not complete unfeeling, which in the technical language of the Stoics was called apatheia, but rather the replacement of strong feelings by eupatheia, a state of benevolence, tranquility, and equanimity.

This complex doctrine of sympathy is grounded in the Stoic theory of matter, which held that all things and all beings are connected through a divine essence that they share. The world, as Ludwig Edelstein describes the doctrine, “is made up of parts that hang together, cooperate, and are bound to one another by sympathy.” For some Stoics, particularly the Pneumatists, this force took the form of pneuma, or a vital air that gave the soul its life, while others described it as a divine element in nature. Whether through a vital air or divine essence, all elements are interrelated and capable of acting upon one another. Consequently, the Stoic sage who sought to return a disturbed mind to reason did so by recognizing the identity between himself and that other person, the shared burden of duty and suffering that characterizes human life.

Of the Stoics in the middle period, the most influential in developing the cure of the passions is Posidonius of Apamea (c. 135–c. 51 B.C.), who was, according to Ludwig Edelstein, “very famous for his medical skill” (Ancient Medicine, 219). He wrote an extensive analysis of the passions, though only fragments of it now remain (Meaning of Stoicism, 55–56), and much of what we know of his work has been reconstructed through quotations in later writers, notably Galen, Cicero, Seneca, and Strabo. He differed from the early Stoics in some important respects, one of them being his interest in science; from his teacher Panaetius he learned to...
rely on the observation of nature rather than on speculation for the causes of events. Another major difference lies in his description of the psyche: the early Stoics, rejecting Plato’s division of the soul into rational, irascible, and concupiscent faculties, had insisted that the soul is rational in nature, and that irrationality – including passion – results from errors of judgment. Posidonius returned, at least in part, to the Platonic model by acknowledging that irrationality and passion are part of the soul and contend with reason for control of the will. The passions compete with reason “like riders trying to mount the same horse”; the wise man learns to distinguish them and to follow the rational element in the soul, while the unwise man grants supremacy to his passions and puts them in control of his judgment, leading to errors. The irrational element is a quality that man shares with brute animals, who lack the rational capability that man has; the goal of therapy is not to eradicate this brutal element, which is a fundamental part of the psyche, but to tame it, as if it were an animal being trained for service.

There is, therefore, a subtle but significant difference in the metaphors used by the early and middle Stoics to describe the management of the passions. Where the early Stoics spoke of a disease that was to be cured, the middle Stoics figured a brute that was to be tamed; where the first Stoics saw the cure as the return to a natural condition from which the patient had deviated, the later saw it as a permanent reformation. The passions were not to be eradicated in the latter case, but subordinated to man’s will. Posidonius taught that poetry, drama, and music are more effective than reason in taming the passions – that a good daemon, or divine element in the soul, can be used to draw out the bad. The task of taming the passions is not left to reason, for, in Edelstein’s words, it is “only by irrational means that passions can be tamed.” These irrational means – music, poetry, drama – appeal to the affections, stimulate the imagination, and arouse the passions so that they can be tamed. It is therefore not contradictory for a satirist such as Pope to passionately denounce mankind’s passionable nature, since it is the task of the poet – particularly the satirist or dramatist – to raise the passions of the soul, and that of the physician or philosopher to cure them.

Galen and the Cure of the Passions: The Narrative of the Man from Crete

Important as the later Stoics were for transmitting the therapy of desire to the modern age, it was the physician Galen of Pergamum (129–c. 210) who...
formalized the cure of the passions by reconciling it with elements of both Platonism and Aristotelianism, and by emphasizing certain features—such as the providential design of nature, the sympathy of the parts of the body, and the nourishment of the soul through respiration—that happened to resemble points of doctrine in an emerging Christianity. Galen did not belong to any school of philosophy, but neither was he (as he is sometimes called) an “opponent” of Stoicism; the only Stoic he regularly attacked was Chrysippus, whose atomistic view of the universe was unacceptable to him. Of the several hundred treatises that he wrote on anatomy, physiology, and medicine, many were known in the eighteenth century through translations in Latin or Arabic, and a few were available in French or English.

In one of these treatises, “On the Diagnosis and Cure of the Soul’s Passions,” Galen responds to a correspondent’s question about a work on the passions written by Antonius the Epicurean. Antonius’ treatise concerns the necessity of “guarding” the passions, and Galen’s correspondent wants to know the meaning of that term. Galen explains (rather contemptuously) that Antonius has fallen into the common mistake of confusing passions with errors of conduct, against which we may guard ourselves by becoming familiar with our passions. Errors, says Galen, are false opinions, while passions, which arise from “an irrational power within us which refuses to obey reason,” are states of mind that permit us to commit or to persist in an error. Thus a man who is “angry over little things and bites and kicks his servants” is committing an error of conduct to which he has been predisposed by his anger. As a young man, Galen says, he watched a man who was frustrated in his attempt to open a door. “I saw him,” says Galen, “bite the key, kick the door, blaspheme, glare wildly like a madman, and all but foam at the mouth like a wild boar.” If such a man could be made aware of how his behavior appeared to others, he might be able, over time, to “keep in check the unseemly manifestations of his passion.” The objective of Galen’s therapy is not to suppress the passion itself, but to control its manifestations, and “to keep it within.” It is not possible to deny the passions entirely; as a younger man, Galen had thought that the first step in avoiding error “was for a man to free himself from his passions,” but he eventually found that “no one is free from passions and errors.” The best way to avoid errors is to examine one’s passions on a daily basis, so that one remains perfectly in control of them. Even the worst passions, such as anger, wrath, fear, grief, envy, and violent lust, as well as “excessive vehemence in loving or hating,” can be managed by a man
who knows himself; and if he can manage his passions, then his errors will be less numerous and more easily corrected.

Galen outlined his therapeutic method in a treatise, now lost, called “On Moral Character.” This treatise suggested that one might “cultivate obedience” in the soul, implying that the nature of the soul can be shaped by human agency. “That same treatise,” says Galen, “also made it quite clear to you how you might use the irascible power itself to help you fight against the other power, which the philosophers of old called the concupiscible, by which we are carried, without thinking, to the pleasures of the body.”

For Galen, as for Aristotle and Posidonius, the soul exists in three parts, or powers: the rational, seated in the brain; the irascible, in the heart; and the concupiscible, in the liver. The rational power controls reasoning, sensation, and motion; the irascible governs the passions and directs the vital force; the concupiscible is responsible for nutrition. The passions classified as irascible – anger, wrath, fear, grief, envy, lust, even “excessive vehemence in loving or hating,” – are the origin of the soul’s errors, while the concupiscible passions, such as erotic desire, gluttony, drunkenness, and luxuriousness in eating, are the source of the body’s appetites. The irascible power, unlike the concupiscible, can be disciplined. Galen likens the irascible to horses and dogs, which are wild but can be trained, and the concupiscible to “the wild boar and goat and any of the wild beasts which cannot be domesticated.” Though these latter powers cannot be trained, they can be weakened and “chastised” by a person who has strengthened his mind by exercising control over anger. Thus the sequence to be followed in the therary of desire is to discipline the irascible passions, which permits reason to develop in strength and in turn limits the power of the concupiscible passions to do harm.

The working of this therapeutic method is illustrated by a story that Galen tells about a friend of his, a man from Crete who came to him seeking treatment for his “cursed anger.” Some years earlier, Galen and this man had been returning to Athens from Rome together. It happened that some of the man’s luggage was lost en route. When he sent two servants to fetch it and they returned empty-handed, the man “fell into a rage” and struck them several times with a sword. Even though the sword was still in its scabbard, the servants were seriously wounded by the blows, and their master fled to avoid the punishment that he might suffer if one of them died. But after they recovered, the man became penitent for what he had done in the grip of anger, and begged Galen to flog him for it. Galen at first refused, and then relented if he
could have a few words with his friend before administering the punishment. He spoke to the man at some length about the necessity “to train the irascible element within us.” When he had chastised his friend, Galen told him that he had flogged him in that way, rather than as he had asked. His friend reflected at length on what Galen had told him, and Galen assures us that, after a year had passed, his friend “became a much better man.”

This simple narrative, which Galen says he told often as part of his lectures on the management of the passions, may be regarded as a paradigm of all of the case histories – and analogically, the fictional narratives – that are resolved through the intervention of the physician of the mind. The narrative is not original in Galen, nor is he the only one to tell it; it appears in discourses on the passions by Seneca, Descartes, and others. Galen’s version, however, is particularly useful in identifying the narrative elements of Stoic therapy. It is important, first, to note that Galen’s patient is “an estimable person . . . simple, friendly, good, and anything but miserly” (39–40) – in other words, a gentleman, the sort of person Defoe would later describe as being “above the world.” The narrative describes a situation in which an essentially healthy and moral person has temporarily – though perhaps chronically – lost control of his passions. The patient’s loss of self-control has resulted either in an outburst of violence, as in this case, or in a profound illness affecting his physical or mental well-being. Galen does not undertake to change the nature of his patient’s temperament, or to alleviate cases of madness; such cures were rarely even attempted until the mid-eighteenth century. On the other hand, neither is his goal merely to teach his patient how to conceal his anger. For Galen, acquiring self-restraint is not a masquerade, but is part of the process of curing a disease of the soul. “Do you not think that anger is a sickness of the soul?” he asks his correspondent. “Or do you think that men of old were wrong when they spoke of grief, wrath, anger, lust, fear, and all the passions as diseases of the soul?” (43–44).

Besides self-restraint, other narrative elements that are important to the therapy include dialogue, reflection, and delay, which Galen emphasizes repeatedly in his treatise. When angry at a servant, Galen advises his audience, “you must exhort yourself never to strike a slave with your own hands, nor to assign the task to another while you are still angry; put it off until the next day,” when the punishment may be decided without wrath (42). Delaying action allows time for reflection: “go over to your soul and see there, too, the nature of insatiate desire; reflect on each thing
which is the matter for trouble” (61). Delay also provides an opportunity for dialogue with a “guardian” who has observed one’s errors and is willing to reprove them. Such guardians are not necessarily philosophers or doctors; they need only be “men who are old in years but who have given adequate proof throughout their whole lives that they possess the judgment of free men” (68).

In the course of teaching his therapeutic method, Galen advises his auditors that they must “try to cut away something – even if it cannot be a large portion, at least some small part – from the bulk of their passions” (68). The radical “extirpation” of the passions practiced by the early Stoics is not sought in Galen’s therapy, but amputation or cutting away an infected body part still forms the underlying metaphor. When this operation has been performed, the cure is ready to begin, but, warns Galen, it will only take hold gradually. Passions and their appetites cannot be mastered at once; only after a lifetime of practice will the patient achieve some control over his or her passions, and even then, mastery will not be perfect. Anger, for example, will occur repeatedly in varying circumstances until the patient learns to exhibit some restraint. The more often the patient restrains his anger, the less strongly will he feel its influence over him, until finally he will feel only “slight” anger over matters of great importance, and none over unimportant ones (38).

The patient’s progress can be measured only as incremental reductions of anger experienced, or as successively higher tolerances of frustration before anger is manifested.

Because of its emphases on delay, dialogue, reflection, and restraint, the Galenist therapeutic method is a suitable platform on which to structure a narrative. The process of reducing one’s anger over a long period of time virtually requires a narrative in which to recall and order these events. It also requires a narrator, whose voice – soothing, yet mildly scolding; sympathetic, yet admonitory – might resemble the self-conscious, paternalistic, and occasionally condescending philosopher who narrates Henry Fielding’s novels. In Smollett’s *Humphry Clinker*, as we saw at the beginning of this chapter, the narrative takes the form of a dialogue between the patient and his doctor, whose voice is implied but never heard. In Defoe’s fictional autobiographies, in which the physician and the patient often are the same person, the narrative voice is reflective, confessional, and exculpatory by turns, but always aware of the need to reform its passions. Robinson Crusoe’s voice, full of penitent self-recrimination, is that of the patient whom Galen’s therapy was intended to create.
For a dramatic instance of the survival of Galen’s Stoic therapy in the eighteenth century, we may turn to the autobiography of Dr. Alexander Monro, whose career as the first professor of anatomy at the University of Edinburgh will be examined in the next chapter. Writing of himself in the third person, Monro admits that, as a youth, he had been known for his “warm Temper,” and that “he had been an impetuous Rogue when a Boy.” As a youth, he had frightened himself by the appearance of his own bad temper:

before he became a Man he had seen some striking examples of the bad Effects of yielding to the Passion of Anger, which had made him alwaies afterwards endeavour to guard against it . . . & that when he was sensible of a Tumult rising in his Breast, such as he was afraid he could not command[,] he ran away from the Cause of Offence.

As he became a man, however, he learned to control his anger. On one occasion later in life, he was infuriated by the impudence of a servant, much as the master in Galen’s narrative had been:

[Monro] had wrote Directions to a Servant for making some Improvements in his House in the Country after a Manner specified in the Letter. The Servant caused them to be done in a quite different way on a Plan of his Own by which the Masters Intentions were to be altogether disappointed, who therefor upon going to the Country made the Mechanicks destroy this new Work and execute what was to be done according to his former Directions. When about to mount his Horse to return to Town, he desired the same Servant to cause some new Orders which he had given him to be literally observed without pretending to alter any thing without his Leave. The Servant returned a most saucy impertinent provoking Answer, when the Master without making the least return in words immediately returned into the House to write the following Note.

“’I am now too angry to reprove properly your last Answer to me, but recommend it to you to consider your Expressions in it, and I insist on this Article of your Service to me, That tho’ you may give Reasons against what I propose, or may make to me what Proposals you will, yet what I order, after this, must not be changed at your Pleasure, nor must such an Answer be again given me, unless on the Condition of instantly leaving my Service for ever.” After sealing and addressing this Note, he returned to his Horse, which he mounted, then delivered the Note to the Servant and rode away. Humble Remonstrances were made for Forgiveness, which was granted on the Conditions just now mentioned in the Note.

Monro’s narrative of his struggle with anger resembles and also differs from Galen’s narrative of the man from Crete in some interesting ways.
In both narratives, the anger of a wealthy and powerful man is provoked by a servant who has failed to follow instructions. In both, there is an undertone of pride in the philosopher-physicians’ accounts of how they effected a “cure” of the passion of anger. Again in both, the narrator is central to the action, but particularly so in Monro’s, where the physician is his own patient. In Galen’s narrative, the violent outburst of the man from Crete leads him to seek the help of an older and wiser man, who counsels delay and reflection; in Monro’s, the physician delays responding to the servant’s “most saucy impertinent provoking Answer” while he retires to write out his response in a note, which he hands wordlessly to the servant. The delay prevents an incipient outburst, and also permits the angry physician to sublimate his irascible passion by transforming it into a text. One important difference between the classical and modern narratives, then, is that the eighteenth-century version, while employing elements from the classical tradition, adds to it the act of writing as an instrument with which to discipline the passions.

Another difference is that the meaning of the anger changes in the modern version of the narrative. Galen’s philosopher-physician represses the anger in his patient without addressing the issues of class and power that underly it, and may even be said to have given rise to it; there is no change in the social relations that put the master in a position to abuse his servant with impunity. In Monro’s narrative, while the physician is still centered as the locus of authority, he is clearly an employer who has a contractual relationship with his worker; he uses his anger, and particularly the text that results from it, as a means of re-signifying the terms of that relationship, which he thinks have begun to slip from his control. In effect, he uses his anger as the signifier that deconstructs a social relation of which he disapproves and reconstructs one that is acceptable to him.

In writing his autobiography, Monro not only describes an incident in which a passion is transformed into a text, but also creates another text about that process. The techniques that he uses in so doing are not essentially different from those employed by Defoe to describe Robinson Crusoe’s or Colonel Jack’s stuggles to master their passions: Monro’s narrative, like that of a novelist, begins with an incident in childhood that recalls the tumult rising in the breast of the boy, and then chronicles the success of the man in keeping his anger within. Monro’s autobiography, like Defoe’s “spiritual autobiographies,” becomes an opportunity to reflect upon and recommend to others the process of reducing irascible passions to the manageable form of texts. The method Monro employs...
The cure of the passions and the origins of the English novel

for controlling his anger may imitate a classical model in Cicero or Seneca, but the technique of reducing his passion to a text appears to derive from a more recent model. It would, perhaps, be doing the humble genre of the novel too much honor to credit it with having invented the technique of controlling the passions by making them into texts. But by the 1760s, when Monro wrote his autobiography, the novel had fully demonstrated its utility as an instrument for raising, anatomizing, instructing, and re-signifying the passions.